Objectives

1. Describe the general blue print content for CCRN exam
2. Describe the general blue print content for PCCN exam
3. Identify key strategies in how to study & prepare for the exam
4. Identify key features in selection of best answer in the Multiple-choice questions

CCRN Test Plan--Part I

- Clinical Judgment (80%)
  - Cardiovascular (20%)
  - Pulmonary (18%)
  - Endocrine (5%)
  - Hematology & Immunology (2%)
  - Neurology (12%)
  - GI (6%)
  - Renal (6%)
  - Multisystem (8%)
  - Behavioral & Psychosocial (4%)

- Professional Caring and Ethical Practice (20%)
  - Clinical Judgment (80%)
  - Advocacy/Moral Agency (3%)
  - Caring Practices (4%)
  - Collaboration (4%)
  - Systems Thinking (2%)
  - Response to Diversity (2%)
  - Clinical Inquiry (2%)
  - Facilitation of Learning (3%)

PCCN Test Plan--Part I

- Clinical Judgment (80%)
  - Cardiovascular (36%)
  - Pulmonary (14%)
  - Endocrine (4%)
  - Hematology & Immunology (2%)
  - Neurology (5%)
  - GI (5%)
  - Renal (5%)
  - Multisystem (5%)
  - Behavioral & Psychosocial (4%)

Disclosure

- No planner, presenter, or speaker has any vested interest in the content to be discussed in this presentation.
- Your participation in this PCCN & CCRN Exam review session does not guarantee that you will pass the exam.
- To receive CE credits:
  - Sign the attendance sheet
  - Attend 80% of the course
  - Complete course evaluation
PCCN Test Plan--Part II

- Professional Caring and Ethical Practice (20%)
  - Clinical Judgment (80%)
  - Advocacy/Moral Agency (3%)
  - Caring Practices (4%)
  - Collaboration (4%)
  - Systems Thinking (2%)
  - Response to Diversity (2%)
  - Clinical Inquiry (2%)
  - Facilitation of Learning (3%)
  - EXACTLY the same as CCRN

How to prepare for the Exam

- Exam = Game
- Know the rules of the Game
  - What type of questions ask (M/C or essay)?
  - How much time?
  - What is the “winning score”?
  - Content of the exam?
- Know how to prepare for the Game
  - What are my areas of strengths?
  - What are my areas that needs reviews?
  - How do I process information?
  - How do I best learn?
- Know how to handle the pressure
  - What do I need to do to calm my nerves?
- Practice makes perfect
  - Do I need practice? If so, how much? And How?

How to get the most out of this review class

- Use other resources in addition to the class
- Bibliography list in AACN Certification Handbook
- Self Assessment Evaluation Test
- Practice Exam
- Use Exam Test Plan as your guide
- We do not know all the exam questions
- Review blueprint content before the class
- Write down questions during class & get them clarified
- Find your own strategies to remember & recall facts
- Reflective thinking after class (clinical situations)
- Study together
- Share resources

Strategies in Taking Multiple-Choice Test

Exam--Angoff Method

- Criterion-referenced Process = Expert judges estimate the passing probability of each item on the test
- Standard error of measurement for each exam (how much deviate from the average score)
- Statistical equating procedures (ensure each exam form has consistent level of difficulty)
- Passing score is generally 70%, but depends on the level of difficulty
- PCCN—125 questions/2.5 hours
- CCRN—150 questions/3.0 hours

Exam Questions

“The questions are designed to test both your ability to remember specific facts or points of knowledge and your ability to apply that knowledge in performing specific skills, and abilities required of acute or critical care nurses”

AACN Corporation Certification Handbook. www.aacn.org
Read and consider all the facts given

- **Introductory Statement** — set up the clinical situation
- **Stem** — poses the question

Read the question carefully = **PROBLEM**

Determine what **type of answer** the question is asking for?

- Identification of Signs & Symptoms
- Anticipation of lab values relevant to clinical condition
- Pharmacology
- Diagnostic Procedures relevant to clinical conditions
- Nursing Interventions

Determine what body system is referred to?

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**Focus of the Question**

What the question is telling you? Vs.

What the question is asking you?

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**Restate the question**

“What are the S/S’s of pneumonia?”

“What is the first intervention for increased ICP?”

“What lab values are indicative of HITT?”

- Have the answer before reading the choices...
- Do not rely on anecdotal data from your own practice !!!!!

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**Understand all the choices**

- Read all the choices given in sequence
- Understand each choice
- Eliminate the choice that does not fit the what the question is asking
  - Signs & Symptoms
  - Lab values
  - Pharmacology
  - Diagnostic Procedures
  - Nursing Interventions
- If you are confused by the choice, re-read the question again

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**If there are opposing choices**

- One of the opposing answers must be the correct one
- If other choices are in alignment with the incorrect one, they must be incorrect
- The wrong choices usually represent the most commonly occurring errors in practice
What is the best (evidenced-based) method of confirming correct placement of the NGT?
A. Listening for “bubbling sound” after giving air bolus through the tube
B. Abdominal X-ray after insertion of NGT
C. Abdominal auscultation for “gurgling sound” after giving air bolus through the tube
D. Abdominal MRI after insertion of NGT

Don’t spend too much time on one question
Statements that include “always” or “never” are rarely correct
Eliminate incorrect statement (1/4 → 1/3 → 1/2)
Select the most global response option
If options say essentially the same thing, neither can be correct
Stay with the first response, if you decide to change, be ABSOLUTELY sure of the change
If you have No Clue, choose one answer

True statement may not be the best answer
Inaccurate statement cannot be the best answer
Must address the question
- Signs & Symptoms → cough vs. hemiparesis
- Lab values → PTT not Pulmonary edema
- Pharmacology → Argatroban drip vs. Oral contrast
- Diagnostic Procedures → Stress test vs. CABG procedure
- Nursing Interventions → ICP monitoring vs. interviewing patient

There is only one correct answer for each question
If 2 choices are close, must find distinguishing feature that results in one best answer
If more than one option is correct, pick the best, first, or most therapeutically sound answer to the question
The longer answer “may be” a better one
The position of the right answer should be scattered

Submit completed application with fee
CCRN→pp 41, 59 & 60 of the handbook
PCCN→pp 57, 59 & 60 of the handbook
Wait about 1-2 weeks to get an approval for the exam (sooner by e-mail)
Schedule exam within 90 days of approval
Check with your institution about reimbursement
Reimbursement check
Pay increase
Recognition
**PCCN & CCRN Exam Fee**

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<th>Certification Type</th>
<th>AACN Member</th>
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<th>Fee to be AACN Member</th>
<th>Membership Renewal Fee (3 year)</th>
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May apply to take the test online through AACN.org
Approval notice by e-mail
Schedule exam within 90 days of approval

**Bulk Application Process:**
- 10 or more applicants
- $205 for CCRN (AACN members)
- $155 for PCCN (AACN members)
- $69 for 1 year membership

**Certification**
- Certification status is renewed every 3 years
- Audit process is done randomly by AACN
- Renew by Examination Process
- 100 of CERP credits must be maintained:
  - 60 CERPs in Category A
  - 10 CERPs in Category B
  - 10 CERPs in Category C
  - 20 CERPs in Any Category
- Please refer to AACN website for details—Renewal Handbook

**The Exam Day**
- Schedule exam date with testing center
- Identification Verification
- No resources can be used during the test
- Scratch paper & pencils
- Practice using computer
- Mark the test question
- Provide comment
- Know the results on the same day

**First Sample Question**

A 45-year-old patient who is 1 week post MI suddenly becomes agitated, restless, and diaphoretic. Systolic pressure drops while diastolic pressure rises, resulting in a pulse pressure of 20 mm Hg. Assessment also reveals faint radial and apical pulses that weaken significantly on inspiration. This patient is most likely experiencing

1. pulmonary embolus
2. mitral valve rupture
3. pulmonary edema
4. cardiac tamponade

**Cardiac Signs & Symptoms**

Pulmonary
Which of the following may predispose an individual to ventricular fibrillation?

1. hypernatremia and hypomagnesemia
2. hypophosphatemia and hyperchloremia
3. hypermagnesemia and hyponatremia
4. hyperkalemia and hypocalcemia

Chest auscultation of a patient in status asthmaticus commonly reveals

1. expiratory wheezes
2. inspiratory crackles (rales)
3. coarse rhonchi
4. a pleural friction rub

A patient in the ICU is confused about time and place, despite frequent reorientation. For the patient's safety the nurse would initially?

1. Put a vest restraint on the patient
2. Ask a family member to stay with the patient
3. Administer a mild sedative
4. Increase the frequency of observation

A family member expresses anxiety regarding the meaning of numbers on the patient's monitor and asks for clarification. The nurse's most appropriate response would be:

1. “The numbers indicate when the patient is having problems”
2. “The numbers help us determine the best treatment”
3. “Which numbers on the monitor concern you?”
4. “What don't you understand about the monitor?”
A patient has been waiting in the ICU for 2 months for a heart transplant. The family member angrily tells the nurse “This is hopeless!” The nurse’s actions should be based on the knowledge that:

1. Expressions of frustration are normal and usually require no nursing interventions
2. The family member should be encouraged to keep their feelings of hopelessness to themselves
3. The integrity of the family system is critical in the transplant process
4. Encouraging discussion of negative emotions can impede their resolution

Providing culture-specific care includes understanding:

1. That identifying the changes that need to occur and who will be involved is part of developing a therapeutic plan
2. Health beliefs among members of a culture group are the same
3. Delineating standard goals of therapy will help enhance patient adherence to a therapeutic regimen
4. Use of non-specific methods will enhance patient problem solving

Sample Question # 3

10/3/2013

Sample Question # 4

10/3/2013

A patient who does not speak or understand English is admitted to the ICU. Guidelines for using a translator may include:

1. Having the translator ask questions that you don’t feel comfortable asking
2. Standing next to the translator and as close to the patient as possible
3. Providing all of the information; then allowing for translation and asking of questions
4. Allowing time for the translator to decode the medical jargon used in the teaching

Sample Question # 5

10/3/2013

A patient tells a nurse “I don’t know how to pay for this”. The nurse should:

1. Arrange a meeting with hospital social service staff
2. Redirect the conversation to address physiologic needs
3. Give the patient application for public assistance and medical services
4. Notify the business office so the payment can be designed

Sample Question # 6

10/3/2013

A pediatric patient with a CVC line has blood drawn at least 3 times daily. A nurse finds that a colleague gives 5 cc of first blood draw back to the patient to minimize blood loss, which is against hospital policy. The most appropriate thing to do is:

1. Report the colleague to the charge nurse or manager.
2. Note the change in practice on the patient’s chart
3. Ask the attending physician to change the hospital policy.
4. Collaborate with the colleague to research the standard of care and request a policy revision

Sample Question # 7

10/3/2013

A child presents with a temperature of 105.6 and nuchal rigidity. A nurse submits cultures for analysis and administers antibiotics. The patient remains febrile and the parents question the adequacy of the interventions. The nurse’s best response would be to:

1. Arrange for a social services consult
2. Assure the parents that everything will be explained later
3. Suggest that the parents discuss their concerns with the physician
4. Acknowledge the parents’ concerns and explain the rationale for the intervention.

Sample Question # 8

10/3/2013
Tania's Prediction

Summary
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