THE AMERICAN BOARD OF NEUROSCIENCE NURSING



Stroke Certified Registered Nurse (SCRN®)

2016 Candidate Handbook

Applications for each exam window **must be <u>submitted</u>** by the ABNN Office no later than 5:00pm (Central time). Late applications will not be accepted.

February Exam Window: *Monday, February 1–Monday, February 29, 2016*Application Deadline: Friday, December 18, 2015.

May Exam Window: **Sunday, May 1–Tuesday, May 31, 2016**Application Deadline: Friday, March 25, 2016.

September Exam Window: *Thursday, September 1–Friday, September 30, 2016*Application Deadline: Friday, July 22, 2016.

The American Board of Neuroscience Nursing 8735 W. Higgins Rd. Suite 300 Chicago, IL 60631

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www.abnncertification.org

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American Board of Neuroscience Nursing Certification Examination

The American Board of Neuroscience Nursing (ABNN) is the independent, not-for-profit corporation established to design, implement and evaluate a certification program for professional nurses involved in the specialty practice of Neuroscience Nursing and its subspecialties. ABNN is solely responsible for the development, administration and evaluation of the certification programs. Neuroscience Nursing is the diagnosis and treatment of actual or potential patient and family responses to nervous system function and dysfunction across the healthcare continuum. The ABNN advances neuroscience nurses' practice and contributions to neurological health through certification of registered nurses.

Certification in Stroke Nursing is the formal recognition of the attainment and demonstration of a unique body of knowledge necessary for the practice of stroke nursing. In awarding the Stroke Certified Registered Nurse (SCRN) credential, ABNN recognizes nurses who demonstrate the attainment of this knowledge through successful completion of the certification examination or renewal recertification through the accumulation of continuing education credits consistent with established policies. The SCRN certification program was developed to formally recognize the professional achievement and to promote excellence in Stroke Nursing.

I. ABNN Purposes

- Encourage the study of Neuroscience Nursing and its subspecialties
- Promote and advance the practice of Neuroscience Nursing through specialty certifications
- Determine minimum requirements for individuals who seek certification in Neuroscience Nursing and its subspecialties
- Conduct an examination for certification of qualified candidates
- Provide a mechanism for recertification in Neuroscience Nursing and its subspecialties

II. SCRN Eligibility Requirements

- The candidate must have current, unrestricted licensure as a Registered Nurse in the United States, Canada or in any of the U.S.
 Territories that grant licensure utilizing the U.S. State Board Test Pool Exam or National Council for Licensure Exam. Candidates from other countries will be considered if they meet a comparable licensure requirement and can read and understand the English Language. All candidates for the SCRN exam will be subject to an audit to validate their current licensure.
- 2. The candidate must be a professional nurse engaged in aspects of stroke care, including but not limited to stroke nursing clinical practice or employed as an administrator, consultant, educator or researcher clinical practice. The exam is **designed** for those who have had at least 2 years of direct or indirect Stroke Nursing practice as a Registered Nurse in the last five (5) years at the time of application. The examination does **not** test at the entry level. **Potential candidates should take into consideration that this specialty certification may not be appropriate for an individual just entering this specialty.** ABNN cautions that you may not be ready to attempt the examination if you have worked in the field for less than 2 years; however you are still eligible to sit.
 - a. Direct Stroke Nursing practice is defined as involvement in the nursing process in a clinical setting where the nursing actions and judgments are focused on a particular individual, family or group of individuals where there is continuing professional responsibility and accountability for the outcomes of these actions.
 - b. Indirect Stroke Nursing practice is defined as involvement that includes time spent in clinical supervision of students and/or staff, research or consultation.
- 3. The candidate must complete the online SCRN certification application and submit it with the appropriate fee, all of which must be received by the ABNN Office prior to the application deadline.
- 4. The ABNN does not discriminate against candidates for certification on the basis of age, race, religion, sex, national origin, marital status, sexual orientation, disability, or gender identity.

If you have any questions regarding eligibility, please email info@abnncertification.org

III. Application Deadlines

Applications for each exam administration and the applicable fee **must be <u>submitted</u>** online by no later than 5:00pm (central time) by the deadlines listed below:

Exam Window:	February 1-29, 2016	May 1-31, 2016	September 1-30, 2016
Deadline:	Friday, December 18, 2015	Friday, March 25, 2016	Friday, July 22, 2016

Candidates are encouraged to submit the application and fee online well in advance of the deadline to allow time to supply any additional required information noted during the application review process. ABNN reserves the right to request additional documentation to verify experience eligibility. Deficiencies cannot be corrected after the deadline. If paying by check, complete the application online, hit "Save & Print" and mail to: ABNN, 8735 W. Higgins Rd. Suite 300, Chicago, IL 60631. **Faxed applications will not be accepted under any circumstances**. Candidates should keep a copy of the application for their records. If you need assistance completing the forms, or have questions about the status of your application, contact ABNN toll-free at 888/557-2266.

IV. Examination Application Fees

If paying by credit card:

AANN Member:	\$285
Non-member:	\$380
If noving by about	
If paying by check:	0040
AANN Member: (check payable to ABNN)	\$310
Non-member: (check payable to ABNN)	\$405

V. Refund of Application Fees

A candidate who wishes to cancel their examination application must contact the ABNN office **14 days prior to the examination window**. Exam withdrawals <u>received</u> by the ABNN office at least 14 days prior to the exam window will receive a refund of their application fee minus a **\$100** administrative fee. **Please note:** If a candidate has already scheduled their examination date and location with the testing company, the candidate will forfeit examination fees if attempting to cancel the examination. An applicant that does not complete the audit process will not receive a refund.

VI. Application Audits

ABNN randomly audits 5% of certification applications. Applications may be audited to verify employment/work hour information, and the state board of nursing may be asked to verify current licensure. Other applications may be audited at the discretion of the ABNN Board. Failure to provide requested documentation for an audit will result in the denial of the candidate's application. No refunds will be given for a candidate that does not complete the audit.

VII. Requests for Testing Accommodations

AMP complies with the Americans with Disabilities Act and strives to ensure that no individual with a disability— as defined by the ADA as a person who has a physical or mental impairment that substantially limits one or more major life activities, a person who has a history or record of such an impairment, or a person who is perceived by others as having such an impairment—is deprived of the opportunity to take the examination solely by reason of that disability. AMP will provide reasonable accommodations for candidates with disabilities. Candidates requesting special accommodations must call AMP at 888-519-9901 to schedule their examination once completing online exam application.

If approved, candidates requesting special accommodations must call AMP at 888-519-9901 to schedule their examination.

- 1. Wheelchair access is available at all established assessment centers. Candidates must advise AMP at the time of scheduling that wheelchair access is necessary.
- 2. Candidates with visual, sensory, physical or learning disabilities that would prevent them from taking the examination under standard conditions may request special accommodations and arrangements and will be reviewed by AMP.

Verification of the disability and a statement of the specific type of assistance needed must be made in writing to AMP at least 45 calendar days prior to your desired examination date by completing the Request for Special Examination Accommodations and Documentation of Disability-Related Needs forms. AMP will review the submitted forms and will contact you regarding the decision for accommodations.

AMP is equipped with Telecommunication Devices for the Deaf (TDD) to assist deaf and hearing-impaired candidates. TDD calling is available 8:30 am–5 pm (CST), Monday–Friday at 913-895-4637. This TDD phone option is for individuals equipped with compatible TDD machinery.

VIII. Examination Administration

ABNN contracts with Applied Measurement Professionals, Inc. (AMP) to provide examination services. AMP carefully adheres to industry standards for development of practice-related, criterion-references examinations to assess competency and is responsible for administering the SCRN exam and scoring and reporting examination results.

The SCRN exam is offered three times during the year in computer-based testing (CBT) format. Examinations are delivered by computer at more than 190 AMP assessment centers located throughout the United States and internationally. For a current list of sites visit: http://online.goamp.com/CandidateHome/assessmentCenterNetworkLocations.aspx. Please note that you will be unable to register for a testing site until you have submitted and received confirmation of your completed online exam application by ABNN.

The CBT exam will be offered during the following windows:

- February 1-29
- May 1–31
- September 1–30

The examination is administered by appointment only Monday through Friday at 9 am and 1:30 pm. Evening and Saturday appointments may be scheduled based on availability. Available dates will be indicated when scheduling your examination. Candidates are scheduled on a first-come, first-served basis.

Examinations will not be offered on the following U.S. holidays:

- New Year's Day
- Martin Luther King Day
- Presidents' Day
- Good Friday
- Memorial Day
- Independence Day
- Labor Day
- Columbus Day
- Veterans' Day
- Thanksgiving Day (and the following Friday)
- Christmas Eve
- Christmas Day
- New Year's Eve

IX. Scheduling an Examination Appointment

After you have registered for the examination and received notification of your eligibility by email and/or letter, you may schedule the examination by one of the following methods:

Schedule online: Schedule a testing appointment online at any time by using AMP's Online Application/Scheduling service at www.goAMP.com. To use this service follow these steps: Go to www.goAMP.com and select "Schedule/Apply for an Exam".

Follow the simple step-by-step instructions to choose your examination program and register for the examination.

Schedule by phone: Call AMP toll-free at 888-519-9901 to schedule an examination appointment from 7 a.m. – 9 p.m. (Central Time) Monday through Thursday, 7 a.m. to 7 p.m. on Fridays, and 8:30 a.m. to 5 p.m. on Saturdays.

When you contact AMP to schedule an appointment, please be prepared to confirm a date and location for testing and to provide your name and CD candidate number (from AMP's email scheduling notice). Note: Your Social Security number is required for unique identification. All individuals are scheduled on a first-come, first-served basis. Refer to the following chart.

If you call AMP by 3:00 p.m. Central time on	Depending on availability, your examination may be scheduled beginning
Monday	Wednesday
Tuesday	Thursday
Wednesday	Friday/Saturday
Thursday	Monday
Friday	Tuesday

X. Rescheduling an Exam Date

If you have already scheduled your date and time for the exam, you may reschedule your appointment ONCE at no charge by calling AMP at 888-519-9901 at least 2 business days prior to your scheduled appointment. The following schedule applies:

If your examination is scheduled on	You must call AMP by 3pm CT to reschedule the examination by the previous
Monday	Wednesday
Tuesday	Thursday
Wednesday	Friday
Thursday	Monday
Friday	Tuesday

XI. Exam Window Postponement

If you have not yet scheduled your exam date and wish to postpone to the next exam window, you will need to contact ABNN to process this request. You are only allowed to change your exam window one time. If you have an extenuating circumstance and are requesting to postpone your exam window more than once, please contact info@abnncertification.org. ABNN will need to review your request. Requests to postpone must be received at least 14 days prior to your selected examination window. If you do not postpone by the timeframe above, your original valid test window will not change. If you do not complete the exam by your valid test window you will be required to submit a new application and pay all associated fees.

XII. Exam Application Cancellation

If you have applied to take the SCRN examination and have not scheduled the exam date and location, and you need to cancel the application, please contact ABNN at info@abnncertification.org.

Withdrawal requests that received by the ABNN office **at least 7 days** prior to the scheduled examination window will receive a refund of their application fee minus a \$100 administrative fee. Examination withdrawals received by the office fewer than 7 days prior to the examination **receive no refund.**

If your examination is scheduled on	You must call AMP by 3pm CT to reschedule the examination by the previous
Monday	Monday
Tuesday	Tuesday
Wednesday	Wednesday
Thursday	Thursday
Friday	Friday

Missed Appointments and Cancellations

You will forfeit your examination registration and all fees paid to take the examination under the following circumstances:

- You do no complete the audit, if selected.
- You wish to reschedule an examination but fail to contact AMP at least 2 business days prior to the scheduled testing session.
- You wish to reschedule a second time.
- You wish to postpone to a different exam window for a second time.
- You appear more than 15 minutes late for an examination.
- You fail to report for an examination appointment.

A new, complete application and examination fee are required to reapply for examination. Fees are non-refundable.

XIII. Inclement Weather, Power Failure, or Emergency

In the event of inclement weather or unforeseen emergencies on the day of an examination, AMP will determine whether circumstances warrant the cancellations and subsequent rescheduling of an examination. The examination will usually not be scheduled if the assessment center personnel are able to open the assessment center.

Visit AMP's website at www.goAMP.com prior to the examination to determine if AMP has been advised that any assessment centers are closed. Every attempt is made to administer the examination as scheduled; however, should an examination be canceled at an assessment center, all scheduled candidates will receive notification following the examination regarding rescheduling or reapplication procedures.

If power to an assessment center is temporarily interrupted during an administration, your examination will be restarted. The responses provided up to the point of interruption will be intact, but for security reasons, the questions will be scrambled.

XIV. Computer-Based Testing (CBT) Examination Procedures

Taking the Examination

Your examination will be given by computer at an AMP assessment center. You do not need any computer experience or typing skills to take your examination. On the day of your examination appointment, report to the assessment center no later than your scheduled testing time. Look for signs indicating AMP assessment center check-in. If you arrive more than 15 minutes after the scheduled testing time, you will not be admitted.

Identification

To gain admission to the assessment center, you must present two forms of identification one with a current photograph. Both forms of identification must be valid and include your current name and signature. You will also be required to sign a roster for verification of identity. You MUST bring one of the following:

- driver's license with photograph
- state identification card with photograph
- passport
- military identification card with photograph.

The second form of identification must display your name and signature for signature verification (e.g., credit card with signature, social security card with signature, employment or student ID card with signature). If your name on these documents is different than it appears on your identification, you must bring proof of your name change (e.g., marriage license, divorce decree, or court order).

Assessment Center Security

AMP administration and security standards are designed to ensure all candidates are provided the same opportunity to demonstrate their abilities. The assessment center is continuously monitored by audio and video surveillance equipment for security purposes.

The following security procedures apply during the examination:

- Examinations are proprietary. No cameras, notes, tape recorders, pagers, or cellular/smart phones are allowed in the testing
 room. Possession of a cellular/smart phone or other electronic devices is strictly prohibited and will result in dismissal from
 the examination.
- Calculators are not necessary as all calculations found on the examination can be performed without the aid of a calculator. However, if you wish to do so you are permitted to bring a personal calculator and use it during the examination. The only type of calculator permitted is a simple battery-powered pocket calculator that does not have an alphanumeric keypad, and does not have the capability to print or to store or retrieve data. You MUST present your calculator to the examination proctor for inspection PRIOR to the start of the examination. Using a calculator during the examination that has NOT been inspected may result in dismissal from the examination.
- No guests, visitors, or family members are allowed in the testing room or reception areas.
- Candidates may be subjected to a metal detection scan upon entering the examination room.

Personal Belongings

No personal items, valuables, or weapons should be brought to the assessment center. Only wallets and keys are permitted. Coats must be left outside the testing room. You will be provided a soft locker to store your wallet and/or keys with you in the testing room. You will not have access to these items until after the examination is completed. Please note the following items will not be allowed in the testing room except securely locked in the soft locker:

- watches
- hats.

Once you have placed everything into the soft locker, you will be asked to pull out your pockets to ensure they are empty. If all personal items will not fit in the soft locker you will not be able to test. The site will not store any personal belongings. If any personal items are observed in the testing room after the examination is started, the administration will be forfeited.

Examination Restrictions

- Pencils will be provided during check-in.
- You will be provided with one piece of scratch paper at a time to use during the examination, unless noted on the sign-in roster for a particular candidate. You must return the scratch paper to the supervisor at the completion of testing, or you will not receive your score report.

- No documents or notes of any kind may be removed from the assessment center.
- No questions concerning the content of the examination may be asked during the examination.
- Eating, drinking, or smoking will not be permitted in the assessment center.
- You may take a break whenever you wish, but you will not be allowed additional time to make up for time lost during breaks.

Misconduct

If you engage in any of the following conduct during the examination you may be dismissed, your scores will not be reported, and examination fees will not be refunded. Examples of misconduct are when you:

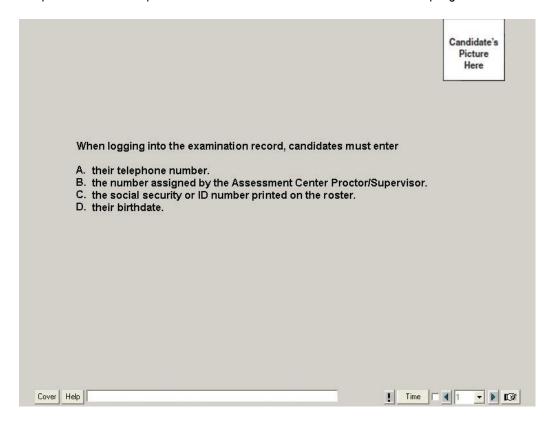
- create a disturbance, are abusive, or otherwise uncooperative
- display or use electronic communications equipment such as pagers, cellular/smart phones
- talk or participate in conversation with other examination candidates
- give or receive help or are suspected of doing so
- leave the assessment center during the administration
- attempt to record examination questions or make notes
- attempt to take the examination for someone else
- are observed with personal belongings
- are observed with notes, books, or other aids without it being noted on the roster.

Practice Examination

Prior to attempting the timed examination, you will be given the opportunity to practice taking an examination on computer. The time you use for this practice examination is not counted as part of your examination time. When you are comfortable with the computer testing process, you may quit the practice session and begin the timed examination.

Timed Examination

Following the practice examination, you will begin the timed examination. Before beginning, instructions for taking the examination are provided on-screen. The examination contains 220 questions. Four hours are allotted to complete the examination. The following is a sample of what the computer screen will look like when candidates are attempting the examination:



The computer monitors the time you spend on the examination. The examination will terminate if you exceed the time limit. You may click on the "Time" button in the lower right portion of the screen to monitor your time. A digital clock indicates the time remaining for you to complete the examination. The time feature may also be turned off during the examination.

Only one examination question is presented at a time. The question number appears in the lower right portion of the screen. The entire examination question appears onscreen (i.e., stem and four options labeled: A, B, C, and D). **Indicate your choice by either entering the letter of the option you think is correct (A, B, C, or D) or clicking on the option using the mouse.** To change your answer, enter a different option by pressing the A, B, C, or D key or clicking on the option using the mouse. You may change your answer as many times as you wish during the examination time limit.

To move to the next question, click on the forward arrow (>) in the lower right portion of the screen. This action will move you forward through the examination question by question. If you wish to review any questions, click the backward arrow (<) or use the left arrow key to move backward through the examination.

A question may be left unanswered for return later in the examination session. Questions may also be bookmarked for later review by clicking in the blank square to the right of the Time button. Click on the hand icon to advance to the next unanswered or bookmarked question on the examination. To identify all unanswered and bookmarked questions, repeatedly click on the hand icon or press the NEXT key. When the examination is completed, the number of questions answered is reported.

If not all questions have been answered and there is time remaining, return to the examination and answer those questions. Be sure to answer each question before ending the examination. **There is no penalty for guessing.**

Online comments may be entered for any question by clicking on the button displaying an exclamation point (!) to the left of the Time button. This opens a dialog box where comments may be entered. Comments will be reviewed, but individual responses will not be provided.

XV. Notification of Examination Results

- 1. All exam candidates will be notified of their pass/fail status once the exam is completed.
 - Each successful candidate will receive a frameable certificate and wallet card approximately 6–8 weeks after completing the examination. If a candidate does not receive your initial certificate, contact info@abnncertification.org within 6 months of passing the exam. After 6 months, a replacement certificate will be issued for \$25.
- 2. It is the candidate's responsibility to notify the ABNN office of any errors or changes in contact information prior to the examination. A \$25 fee will be assessed to correct certificates with misspelled names if the candidate does not follow the above instructions. CBT candidates are prompted to verify name and address information when scheduling their exam online.
- 3. Any requests for rescoring of test scores must be submitted using the form in this handbook along with \$25 within 90 days of the postmark date on the formal letter of notification of test results. Upon receipt of such a request, the answer sheet will be rescored and the results sent to the candidate within six (6) weeks. The candidate must assume the cost of rescoring.
- 4. Candidates who fail the certification examination may reapply to retake it as often as desired, provided they continue to meet the eligibility requirements, and submit a new application and fee for each attempt.

XVI. Confidentiality of Examination Results

Examination results are released only to the candidate at the close of the exam and in writing. In response to specific inquiries, and with permission of the individual SCRN, verification of current SCRN status will be provided. Group data without individual identifying information may be used for research and study purposes, and may be released to other groups with a specific interest in nursing certification.

XVII. Duration of Certification

SCRN certification is effective for a period of five (5) years. The actual expiration date of a SCRN certificate is December 31, of the 5th year after certification (i.e., certification of SCRNs certified in February, May, or September 2016 expires on December 31, 2021). To renew certification prior to the expiration date, the certificant may either retake the certification exam or submit documentation of the required continuing education contact hours and work hours in stroke nursing during the 5th year of the certification cycle. Continuing education credits begin to be eligible toward recertification effective immediately following the date of successful examination. A total of fifty (50) continuing education hours related to stroke care is required to recertify the SCRN. ABNN will provide reminder information in the middle of the year that the candidate is due to recertify. However, it is ultimately the responsibility of the SCRN to initiate the recertification process. Applications for recertification will not be accepted prior to the 5th year of the certification cycle.

XVIII. The SCRN Credential

Each passing candidate will receive a certificate indicating attainment of certification. Successful completion of the examination entitles the candidate to use the credential SCRN. Please note, however, that the SCRN does not replace use of the designation, RN.

XIX. Revocation of Certification

Causes for revocation of certification include:

- The SCRN did not possess the required qualification and requirements for the examination, whether or not such deficiency
 was known to ABNN prior to the examination or at the time of issuance of the certificate;
- The SCRN made a material misstatement or withheld information on the application or in any representation to ABNN, whether intentional or unintentional:
- The SCRN engaged in irregular practices in connection with an examination, whether or not such practices had an effect on the performance of the SCRN on an examination;
- There has been a limitation or termination of any right of the SCRN associated with the practice of stroke nursing in any state, province or country, including the imposition of any requirement of surveillance, supervision or review by reason of violation of a statute or governmental regulation, disciplinary action by any nursing licensing authority, entry into a consent order, or voluntary surrender of license.

No certification shall be revoked unless the SCRN concerned is notified of the intent of ABNN and has an opportunity for a hearing before a select committee of ABNN. Such notification shall be sent by certified mail no less than 30 days prior to the hearing.

XX. Irregularities in Testing

In addition to Revocation of Certification applicants should also understand that ABNN may or may not require a candidate to retake the examination, or a portion of the examination, if presented with sufficient evidence that the security of the examination has been compromised, notwithstanding the absence of any evidence of a candidate's personal involvement in such activities.

XXI. Denial of Application and Appeal

Application to take the examination will be denied if the applicant is deemed ineligible for certification, or if documentation does not meet the requirements listed. Falsification of the application, including failure to provide material information, is grounds for denial of the application or for denial of certification. In such cases, the applicant will be notified in writing of the specific reason. There can be no appeal for failure to achieve a passing score on the examination, lack of current RN license, or failure to apply by the deadline. Any applicant whose application for certification is denied approval will automatically be sent information about how to appeal the decision, including steps in the appeal process and additional information required. Applicants denied application approval will receive a refund of the application fee, minus a \$100 administrative fee. *Note: There is no refund if an applicant fails to complete an audit.*

XXII. Copyrighted Examination Questions

All examination questions are the copyrighted property of ABNN. It is forbidden under federal copyright law to copy, reproduce, record, distribute or display these examination questions by any means, in whole or in part. Doing so may subject the candidate to severe civil and criminal penalties.

XXIII. The Examination

The SCRN examination is a generalist exam, and is not intended to emphasize any particular level of care nor any particular developmental level. The exam consists of approximately 170 multiple-choice items with a total testing time of **three (3) hours**. Twenty out of the 170 items are pre- test items, which are not scored. (Note: the examination may include additional items that are being tested for future use.) Three levels of knowledge are tested: knowledge; interpretation; and problem solving and evaluation. The following lists include some of the actions associated with each of the knowledge levels.

Knowledge	Interpretation	Problem Solving and Evaluation
Define	Interpret	Compose
Repeat	Apply	Plan
Record	Use	Propose
List	Distinguish	Formulate
Describe	Analyze	Judge
Recognize	Compare	Rate
Explain	Solve	Value
Report	Inspect	Select
Review	Examine	Organize
Relate	Categorize	Evaluate

Commonly Asked Questions about the SCRN Examination

How is the passing score determined?

The passing score is established by a systematic procedure that employs the judgment of stroke nursing experts from around the country as well as the assistance of professional psychometricians from Applied Measurement Professionals, Inc. (AMP). The final determination of the passing score is made by the ABNN Board of Trustees.

What is a scaled score?

Candidate scores are not calculated as a raw score (the number of questions answered correctly) but rather as a scaled or weighted score. Although much care is taken to assure that all forms of the examination are similar, new forms may vary somewhat in level of difficulty from earlier ones. A raw score on one may not be comparable, therefore, to a raw score on a different version. Rather, scores are calculated as scaled or weighted scores that take into account the difficulty of the question. The degree of difficulty is determined by the stroke nursing experts referred to above. To prevent candidates who took a less difficult form of the examination from having an unwarranted advantage over those who took a slightly more difficult form, raw scores are converted to scaled scores that represent comparable levels of achievement.

The test consists of 170 questions; members of the Test Development Committee meet with the psychometricians to select 20 questions that do not meet the standards of the test. This may be through ambiguous stems or distractors, or through statistical analysis. The test is then scored once a total of 150 questions have been achieved. Each test will contain newly- appointed test questions; they may remain in the test, or they may be discarded, depending whether or not they meet the standards.

What is the best way to study for the exam?

There is no best way. Some suggested preparation materials include, but are not limited to:

AANN Comprehensive Review for Stroke Nursing Core Curriculum for Neuroscience Nursing, Fifth Edition SCRN Self-Assessment Examination Pearls of Stroke Education Webcast AANN Clinical Practice Guidelines

Please visit www.AANN.org to purchase these programs.

XXIV. Scope of the Examination

Attainment of SCRN certification includes successful completion of a general stroke nursing exam that is intended to determine if the candidate possesses the basic knowledge needed to care for both stroke patient populations competently. Stroke nursing includes caring for patients across the lifespan and in a variety of settings. While questions may vary in their level of difficulty, the exam tests the candidate's knowledge of core stroke nursing principles.

XXV. Examination Construction

ABNN conducted a role delineation survey during 2011-2012. The survey examined stroke health problems, human responses in stroke related health problems and specific nursing interventions used to describe Stroke Nursing practice. Based on the responses, the ABNN Role Delineation Task Force defined a framework for construction of the examination. Following are a detailed content outline of the exam, by categories of disorders, and the exam matrix showing the relative weights of the exam by disorder and type of nursing intervention. Although not all content or human responses are part of the SCRN Examination Matrix, the core of Stroke Nursing knowledge required for specialty practice is clearly represented.

XXVI. ABNN SCRN EXAM

(Based on 2011-2012 Role Delineation Study) Disorders - Detailed Content Outline

I. Anatomy and Physiology – 12%

- A. Correlate deficits or expected complications to site of injury.
- B. Understand physiology at cellular level (penumbra).
- C. Understand basic vascular anatomy.
- D. Understand basic brain structures.
- E. Understand stroke syndromes.
- F. Understand stroke mimics.
- G. Define stroke types.
- H. Understand neuroplasticity and stroke recovery.

II. Preventive Care – 10%

- A. Provide individualized preventive care through health education.
 - 1. Provide information about stroke, risk factors, lifestyle changes, and regular medical exams.
 - 2. Identify learning needs.
 - 3. Use appropriate teaching materials.
 - 4. Understand the role of the nurse in health education for stroke prevention.
 - 5. Provide education on the recognition of stroke symptoms and immediate access to care.
 - 6. Establish goals for medication management.
- B. Identify patients with risk factors
 - 1. Assess modifiable and non-modifiable risk factors.
 - Identify individuals and populations who are at risk for developing stroke.
 - Refer patients identified as high risk for stroke to a medical provider.
- C. Establish nursing diagnosis and develop plan of care.
- D. Individualize care and education.
 - 1. Identify patients' limitations to care treatments.
 - 2. Assess patients' financial and social resources.
 - 3. Refer to multidisciplinary teams
- E. Participate in community health education regarding lifestyle changes.
 - Identify, promote, and participate in health education regarding lifestyle changes (e.g., diet, exercise, tobacco cessation).
 - 2. Identify resources in community that have programs for lifestyle changes related to stroke prevention.
 - 3. Refer patients to appropriate community or healthcare agency regarding lifestyle changes.

III. Hyperacute Care – 20%

- Perform initial triage.
 - 1. Communicate effectively with pre-hospital personnel.
 - 2. Establish ABCs.
 - 3. Differentiate between anterior and posterior circulation signs and symptoms.
 - 4. Differentiate between hemorrhagic and ischemic signs

and symptoms.

- B. Facilitate urgent diagnostics (e.g., telemedicine)
- C. Perform baseline neuro assessment (e.g., NIHSS, physical exam).
- D. Understand implications of various stroke scores (i.e., NIHSS, Hunt and Hess, GCS, ABCD 2, ICH, Fischer-Miller).
- E. Take basic medical and symptom history.
- F. Establish nursing diagnosis and develop plan of care.
- G. Identify door to treatment times.
- H. Administer thrombolytics.
 - 1. Calculate dosing.
 - 2. Identify inclusion and exclusion criteria.
 - 3. Know delivery method.
 - 4. Provide post-administration care.
 - 5. Identify post-administration complications.
- I. Assess oxygenation.
- J. Assess hydration.
- K. Assess oral intake and swallow ability.
- L. Manage blood pressure.
- M. Manage blood glucose.
- N. Stabilize patients for transfer to appropriate level of care.
- O. Describe and facilitate advanced interventions for ischemic strokes (i.e., mechanical embolectomy, intra-arterial thrombolysis, hemicraniectomy).
- P. Describe and facilitate interventions for hemorrhagic strokes.
 - 1. Correct coagulopathy.
 - 2. Understand need for ventriculostomy.
 - 3. Manage ICP.
 - 4. Understand surgical decompression.

IV. Stroke Diagnostics - 10%

- A. Understand indication for the following diagnostic tests:
 - 1. CT scan
 - 2. CT angiogram
 - 3. CT perfusion
 - 4. MRI
 - 5. MR venogram
 - 6. MR angiogram
 - 7. MR perfusion
 - 8. Cerebral angiography
 - 9. Lumbar puncture
 - 10. Transcranial doppler
 - 11. Transthoracic echocardiogram
 - 12. Transesophageal echocardiogram
 - 13. EEG
 - 14. EKG/ECG
 - 15. Carotid duplex
 - 16. Chest x-ray
 - 17. Lab work (e.g., metabolic panel, coags, CBC)
- B. Understand the risks and benefits of the above-listed diagnostic tests.
- C. Understand the pre- and post-care of the above-listed diagnostic tests.

V. Acute Care – 25%

- A. Implement generalized stroke care.
 - Perform proper health assessment to identify patient's needs.
 - Identify and prioritize patient's needs.
 - ii. Use proper neurological assessment techniques (e.g., NIHSS, GCS, Cincinnati stroke scale).
 - iii. Conduct comprehensive assessment.
 - iv. Correlate patient's history with signs and symptoms.
 - v. Prioritize patient's needs based on assessment (e.g., seizure prophylaxis, communication abilities, mobility).
 - vi. Facilitate diagnostic tests according to stroke guidelines (e.g., echo, swallow study, MRI, Carotid studies, lab work).
 - vii. Monitor patient safety before, during, and after procedures.
 - 2. Establish nursing diagnosis and develop plan of care.
 - Collaborate with other healthcare teams to use holistic approach in providing quality nursing care based on patient's identified needs.
 - i. Implement emergency nursing measures if needed.
 - ii. Monitor, report, and document:
 - Neuro assessments and vital signs
 - b. Cardiac rate and rhythm
 - c. Proper oxygenation and ventilation
 - d. Readiness for activity
 - e. Pain assessment and management
 - iii. Manage blood glucose.
 - iv. Manage body temperature.
 - v. Provide safety measures:
 - a. Aspiration precautions
 - b. Fall precautions
 - c. Seizure precautions
 - d. Skin precautions
 - e. Infection prevention protocols
 - f. VTE prophylaxis
 - g. Stress ulcer prophylaxis
 - vi. Provide personal care measures:
 - a. Patient positioning (e.g., affected extremities, splinting, turning)
 - b. Early mobilization
 - c. Range of motion
 - d. Elimination (i.e., bowel and bladder management)
 - vii. Provide a therapeutic environment.
 - a. Establish appropriate levels of stimulation.
 - b. Orient to time, place, and person.
 - c. Establish alternative means of communication if necessary.
 - d. Adapt environment according to

- patient's deficit.
- e. Promote sleep hygiene.
- viii. Provide spiritual and psychosocial care.
 - a. Encourage verbalization of feelings.
 - b. Identify positive coping mechanisms.
 - c. Respect patient's culture.
 - d. Assess patient's healthcare beliefs.
 - e. Facilitate patient's spiritual needs.
 - f. Assess and manage depression, anxiety, and fatigue.
- ix. Facilitate care goals and decision making:
 - a. Palliative care
 - b. Organ donation
- x. Provide individualized education:
 - a. Patient
 - b. Family
- Assess patient's capabilities to perform ADLs and provide alternative means if necessary.
- xii. Manage nutrition (i.e., specialty diets, consistency of diet, alternate forms of feeding).
- B. Implement care specific to ischemic stroke.
 - 1. Manage blood pressure:
 - i. Permissive hypertension
 - ii. Orthostatic hypotension
 - Manage and assess patient post-thrombolytic administration:
 - i. Frequency of monitoring
 - ii. Angioedema
 - iii. Hemorrhagic conversion
 - iv. Other bleeding
 - 3. Manage patient post-interventional procedures and assess for complications:
 - i. Site and distal extremity assessment
 - ii. Arterial sheath management
 - iii. Hematoma
 - iv. Arterial dissection
 - v. Arterial thrombosis
 - vi. Pseudo-aneurysms
 - 4. Recognize signs of reperfusion syndrome.
 - Manage hydration (e.g., euvolemia).
 - i. Select proper IV solutions.
 - ii. Monitor oral fluid intake.
 - 6. Understand treatment options:
 - i. Carotid endarterectomy
 - ii. Carotid stenting
 - iii. PFO management
 - iv. Atrial fibrillation management
 - v. Medical management
- C. Implement care specific to hemorrhagic stroke.
 - 1. Monitor and maintain blood pressure within identified parameters:
 - i. Aneurysmal subarachnoid pre- and posttreatment
 - ii. Arterio-venous malformation rupture

- iii. Intracerebral hemorrhage
- iv. Intraventricular hemorrhage
- 2. Understand treatment options:
 - i. Coiling
 - ii. Embolization
 - iii. Clipping
 - iv. Radiosurgery
 - v. Craniotomy and craniectomy
 - vi. Intraventricular thrombolysis
 - vii. CSF diversion
 - a. Ventriculostomy
 - b. Shunt
 - viii. Medical management
- 3. Monitor and prevent increased ICP.
- 4. Monitor and mitigate vasospasm:
 - i. Transcranial doppler
 - ii. Endovascular management
- 5. Manage fluid and electrolyte balance (e.g., sodium, magnesium, osmolarity).
- D. Identify associated stroke disorders:
 - 1. Transient ischemic attack
 - 2. Cerebral venous thrombosis
 - 3. Dissection
 - i. Carotid
 - ii. Vertebral
 - 4. Moya Moya disease
 - 5. Hypercoaguable states
 - 6. Vasculitis
 - 7. Arterio-venous fistula
 - 8. Cavernous angioma
 - 9. Intracranial and extracranial stenosis
 - 10. Dural arterio-venous fistula

VI. Medications - 10%

- Understand the indications for the following classes of medications:
 - 1. Antiplatelets
 - 2. Anticoagulants
 - 3. Antithrombotics
 - 4. Antihypertensive
 - 5. Vasopressor agents
 - 6. Lipid lowering agents
 - 7. Nimodipine
 - 8. Diuretics
 - 9. Anticonvulsives
 - 10. Glycemic control
 - 11. Antispasmotics
 - 12. Antidepressants
 - 13. Neurostimulants
 - 14. Atypical neuroleptics
 - 15. Analgesia
- B. Understand the contraindications of the above-listed classes of medications.
- Understand the interactions of the above-listed classes of medications.

- Understand the side effects of the above-listed classes of medications.
- E. Understand the timing of the above-listed classes of medications.
- F. Understand the dosage of specific medications.

VII. Post-acute Care – 8%

- A. Understand roles within the multidisciplinary team.
- B. Understand levels of rehabilitative care (e.g., acute rehab, subacute rehab, home health, outpatient rehab)
- C. Establish nursing diagnoses and develop plan of care.
- D. Coordinate early rehabilitation and discharge planning.
 - 1. Assist patient toward maximum functional capacity.
 - 2. Involve patient's family and significant others in decision making and care plan.
 - 3. Initiate rehabilitation upon admission.
 - 4. Assist patient in performing ADLs along with other healthcare team members.
 - 5. Encourage adherence to medications.
 - 6. Demonstrate transfer techniques and assistive devices.
 - 7. Provide options for adherence to outpatient follow-up.
 - 8. Assess caregiver dynamics.
 - 9. Utilize appropriate assessment scales (e.g., modified Rankin, Barthel, Rancho Los Amigos).
 - 10. Assess psychosocial impact of stroke.
- Assist in sustaining and maintaining patient's healthy, productive lifestyle.
 - 1. Provide guidelines for home care.
 - 2. Establish goals and provide discharge plan:
 - i. Activity and exercise
 - ii. Medication regimen
 - iii. Symptoms needing referral
 - iv. Nutrition
 - v. Medical follow-up
 - vi. Sexual function
 - 3. Facilitate referrals to resources and community support groups.
 - 4. Involve patient in activities that will enhance self-esteem.
 - Guide patient in adaptation to lifestyle changes based on identified risk factors.
- F. Understand specialized rehab treatments

VIII. Systems and Quality Care - 5%

- A. Understand rationale for use of the following:
 - 1. Protocols or pathways
 - 2. Stroke units
 - 3. Acute stroke team
 - 4. Chain of survival
- B. Apply quality improvement techniques to improve stroke outcomes.
- C. Understand criteria for stroke center certification.



REQUEST FOR SPECIAL EXAMINATION ACCOMMODATIONS

If you have a disability covered by the Americans with Disabilities Act, please complete this form and the Documentation of Disability-Related Needs on the reverse side and submit it with your application at least 45 days prior to your requested examination date. The information you provide and any documentation regarding your disability and your need for accommodation in testing will be treated with strict confidentiality.

Landidate Information		
Candidate ID #	Requested Assessment Center:	
Name (Last, First, Middle Initial, Former Name)		
Mailing Address		
City	State	Zip Code
Daytime Telephone Number	Email Address	
Special Accommodations		
I request special accommodations for the		examination.
	n environment w if other special accommodations are needed.	
Comments:		
PLEASE READ AND SIGN: I give my permission for my diagnosing prof requested accommodation.	fessional to discuss with AMP staff my records and	history as they relate to the
Signature:	Date:	

Return this form with your examination application and fee to: Examination Services, AMP, 18000 W. 105th St., Olathe, KS 66061-7543 If you have questions, call the Candidate Support Center at 888-519-9901.



DOCUMENTATION OF DISABILITY-RELATED NEEDS

Please have this section completed by an appropriate professional (education professional, physician, psychologist, psychiatrist) to ensure that AMP is able to provide the required accommodations.

Professional Documentation	
I have knownCandidate Name	since / in my capacity as a
My Professional Title	·
	to be administered. It is my opinion that, because of this candidate's odated by providing the special arrangements listed on the reverse
Description of Disability:	
Signed:	Title:
Printed Name:	
Address:	
	Fancil Address.
	Email Address:
Date.	License # (if applicable):

Return this form with your examination application and fee to: Examination Services, AMP, 18000 W. 105th St., Olathe, KS 66061-7543 If you have questions, call the Candidate Support Center at 888-519-9901.

REQUEST FOR DUPLICATE SCRN EXAMINATION SCORE REPORT

Directions: You may use this form to ask AMP, the testing agency, to send you a duplicate copy of your score report. This request must be postmarked no later than 90 days after the examination administration. Proper fees and information must be included with the request. Please print or type all information in the form below. Be sure to provide all information and include the correct fee or the request will be returned.

Fees: \$25 U.S. Dollars per copy. Please enclose a check or money order payable in U.S. Dollars to AMP. Do not send cash. Write your test identification number on the face of your payment.

Amount enclosed: \$

Mail to: AMP/SCRN Exam Services

40000 M 405th Otra- 1	Amount cholosed. ψ
18000 W. 105 th Street Olathe, KS 66061-7543, USA	Examination Date:
Print your current name and address:	
Name	Candidate ID
Street	City
State/Prov Zip/Posta	I Code Country
Daytime Telephone ()	Fax ()
E-Mail	
If the above information was different a	at the time you tested, please write the original information below:
Name	Candidate ID
Street	City
State/Prov Zip/Posta	I Code Country
Daytime Telephone ()	Fax ()
E-Mail	
	Test Site
I hereby request AMP to send a dup	licate copy of my score report to the first address shown above.
Candidate's Signature	Date