# THE AMERICAN BOARD OF NEUROSCIENCE NURSING 



## Certified Neuroscience Registered Nurse (CNRN®)

## 2023 Recertification Handbook

# Application Deadline for Recertify by Exam: September 7, 2023* Early-Bird Application Deadline for Recertify by CE: October 1, 2023* 

*Applications received at the national office after 5:00pm Central Time October 1, 2023 will pay the standard recertification fee.
Final Recertification by CE Deadline: January 31, 2024
No applications will be accepted after 5:00 PM (Central), January 31, 2024
Application forms must be completed on the web and printed if submitting by check.

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

## Duration of Certification

CNRN certification is recognized for a period of five (5) years. The actual expiration date of a CNRN certificate is December 31 st of the $5^{\text {th }}$ complete year after certification (i.e., certification of CNRNs initially certified in 2018 or recertified effective January 1, 2019, expires on December 31, 2023). To renew certification, the certificant may either apply to retake the certification exam or submit documentation of the required continuing education hours and work hours in neuroscience nursing. Early in the year that an individual's certification is due to expire, ABNN will notify candidates that their recertification application is due. However, it is ultimately the responsibility of the CNRN to initiate the recertification process as well as to provide ABNN with current contact information.

## ABNN's Statement on Continued Competency

The Accreditation Board for Specialty Nursing Certification (ABSNC) defines continuing competency as "the ongoing commitment of a registered nurse to integrate and apply the knowledge, skills, and judgment with the attitudes, values, and beliefs required to practice safely, effectively, and ethically in a designated role, patient population, and/or setting." ABNN adopts this definition and believes that all ABNN Certificants should continue to expand on their knowledge through practice, continuing education, and/or professional development throughout their 5 -year certification cycle. With the advancements of science and technology related to neuroscience changing over the years, the goal of ABNN's recertification program is for certificants to demonstrate continued competency by meeting the one of three different recertification pathways as stated below. Recertification demonstrates an ABNN certified nurse's commitment to patient care and dedication to life-long learning.

## Eligibility for Recertification

- Current, unrestricted licensure as a registered nurse in the United States or Canada.

| OPTION 1 | OPTION 2 | OPTION 3 |
| :---: | :---: | :---: |
| 4,160 direct or indirect neuroscience <br> nursing practice hours in the past 5 years <br> (equivalent to 2 years full-time work) | 4,160 direct or indirect neuroscience <br> nursing practice hours in the past 5 years <br> (equivalent to 2 years full-time work) | 2,500 direct or indirect neuroscience <br> nursing practice hours in the past 5 years <br> (part-time) |
| and | and | and |
| Retaking of the certification exam | 75 continuing education hours (see <br> following pages for specific categories) | 100 continuing education hours (see <br> following pages for specific categories) |

- Neuroscience nursing practice includes both direct (bedside/clinical practice) and indirect (consultation, research, administration, or education) in the neuroscience field.
- An approved CE offering or program is one approved by a state or national organization authorized to grant continuing education credit such as the American Nurses Association, the National League for Nursing, the American Association of Neuroscience Nurses, a state nurses association, a state board of nursing, or a hospital or other institution accredited as a provider by a national or state nursing organization, such as the American Nurses Credentialing Center (ANCC). In the event the application lists attendance at a seminar not meeting this definition, additional documentation is required.
- Candidates for recertification who select Option 1 and fail the examination cannot opt to recertify with continuing education hours after taking the exam.


## Eligibility for Recertification Rationale

- 5-year recertification period - The 5-year recertification period was chosen as advancements in science and technology related to neuroscience are generally stable over this period of time. The recertification requirements direct specifically to the neuroscience population and coincide with the knowledge statements of the Job Analysis.
- Option 1-4,160 neuroscience nursing practice hours in the past 5 years (equivalent to 2 years full-time work) AND retaking/passing the certification exam.
- The practice requirement of direct or indirect neuroscience nursing facilitates the maintenance of current skills, and also promotes the acquisition of new skills through their exposure to the practice setting. The practice requirement of 2 -years full time within the 5 -year cycle takes into account the amount of time it will take a nurse to see a sufficient number and range of neuroscience patients as needed to remain competent as a CNRN. The work experience, study/preparation, and passing the exam will prove that the CNRN has maintained current knowledge and competence to be a CNRN.
- Option 2-4,160 neuroscience nursing practice hours in the past 5 years (equivalent to 2 years full-time work) AND 75 continuing education hours.
- CNRN recertification with continuing education in the different categories is based on a belief that practice in the neuroscience field, in conjunction with continuing education (CE) activities, contributes to the continued competency of RNs working in the neuroscience field. Recertification by CE is available to meet the needs of a diverse population of certificants so those that prefer to keep updated via educational programs (Category 1) may do so. This allows the nurse to stay current through evidence-based practice in the medicine and healthcare of their specialty area. The additional categories recognize that professional development and maintenance of leadership competencies may be accomplished in a variety of professional activities.
- Option 3-2,500 neuroscience nursing practice hours in the past 5 years (equivalent to 2 years part-time work) AND 100 continuing education hours.
- Candidates who are working part-time are required to earn additional CE to ensure that they are gaining additional training/education for experience and skills that they may not have received during their practice hours.


## Options 2 \& 3: Recertification by Continuing Education (CE) Hours Credit

The activities documented must pertain to the application or dissemination of knowledge that the certified neuroscience nurse is required to know to stay current in practice. All items submitted for CE credit, regardless of category, must be neuroscience-related. Any item that is not neuroscience-related will not be accepted. There are six categories of CE eligible for recertification credit:

Category 1: Neuroscience Nursing Education
Category 2: Program or Project Activities
Category 3: Research
Category 4: Teaching
Category 5: Publication
Category 6: Involvement in Professional Organizations
Of the required CE hours, a minimum of thirty (30) under Option 2 or forty (40) under Option 3 must be in Category 1 . All 75 (100) CE hours may be obtained in Category 1. Or, once the required CE for Category 1 is obtained, the remaining CE can be earned in any and all of the other five categories. Examples of acceptable CE activities broken down by category are listed below.

Category 1: Neuroscience Nursing Education. A minimum of thirty (30) CE hours under Option 2 or forty (40) CE hours under Option 3 must be attended in neuroscience nursing courses approved by state or national organizations authorized to grant nursing continuing education credit, a state board of nursing, or an institution accredited to grant approval by a national or state nursing organization.

The following examples can be submitted for CE under Category 1: Neuroscience Nursing Education
a. Courses attended with DOCUMENTED neuroscience nursing content approved or accredited by ANCC (e.g., the AANN annual meeting), state boards of nursing, AACN, Association of Rehabilitation Nurses, or other nursing CE approvers
b. Neuroscience nursing home study courses approved by similar accrediting bodies.
c. Internet or on-line neuroscience nursing courses approved as above (e.g., AANN's on-line JNN articles).
d. Courses taken for academic credit from an accredited college or university and specific to neuroscience. One quarter credit hour equals ten (10) CE hours. One semester credit hour equals fifteen (15) CE hours.
e. Neuroscience CMEs. One CME equals one (1) CE hour.

If you attended a course that was only partially or not clearly neuroscience-related, or the title of the course does not explicitly indicate neuroscience content, submission of a course outline is required to enable the determination of the appropriate amount of neuroscience nursing credit. For example, a course titled "2006 Critical Care Update" may contain some neuroscience content, but based on the title alone the content is not clear to the reviewer unless a course syllabus or outline is submitted.

Please see the exam content outline on page 8-12.
For all attendance or home study activities, each of the following equals one (1) CE hour:
60 minutes of lecture
0.1 continuing education unit (CEU)

1 continuing education recognition point (CERP)
Applicants wishing to count programs/courses that do not carry accredited nursing CE or medical CME credit must include the full name and description of the program, including its specific neuroscience content (e.g., "grand rounds" does not qualify).

Category 2: Program or Project Activities. This category does not have an overall minimum or maximum for the recertification cycle, although some activities have yearly maximums. Please review the following for a list of acceptable activities and the corresponding CE amounts that can be submitted. All activities must be neuroscience-related. Activities that are not neurosciencerelated will not be accepted.
a. Service on a neuroscience-related committee for 1 year $=5$ CE

- includes committees that are institutional or employer-based
b. Development of a neuroscience teaching tool for patients or staff $=5$ CE
c. Development of a QI project = 5 CE (maximum 15 per year)
d. Development of an original policy/procedure or competency-based tool $=5 \mathrm{CE}$
e. Facilitation of a neuroscience-related support group for 1 hour $=1 \mathrm{CE}$ (maximum of 10 per year)

Category 3: Research. This category does not have an overall minimum or maximum for the recertification cycle, although some activities have yearly maximums. Please review the following for a list of acceptable activities and the corresponding CE amounts that can be submitted. All activities must be neuroscience-related. Activities that are not neuroscience-related will not be accepted.
a. PhD dissertation $=25 \mathrm{CE}$

- Committee letter documenting completion and approval required.
b. Master's thesis $=15 \mathrm{CE}$
- Committee letter documenting completion and approval required.
c. Grant proposal submission $=10 \mathrm{CE}$ (maximum of 10 per year)
d. Research project implementation (including data collection and recruitment) for 1 year $=5 \mathrm{CE}$

Category 4: Teaching. This category does not have an overall minimum or maximum for the recertification cycle, although some activities have yearly maximums. Please review the following for a list of acceptable activities and the corresponding CE amounts that can be submitted. All activities must be neuroscience-related. Activities that are not neuroscience-related will not be accepted.
a. Presentation of neuroscience content at a conference or class for 60 minutes $=3 \mathrm{CE}$ (maximum of 15 per year)
b. Poster presentation of neuroscience content at conference $=3 \mathrm{CE}$
c. Development and teaching of an academic course for 1 semester credit hour $=20 \mathrm{CE}$
d. Development and teaching of an academic course for 1 quarter credit hour $=15 \mathrm{CE}$
e. Precepting a new neuroscience nurse for 80 hours $=10$ CE

Category 5: Publication. Some items in this category have maximums for the recertification cycle. Please review the following for a list of acceptable activities and the corresponding CE amounts that can be submitted. All activities must be neuroscience-related. Activities that are not neuroscience-related will not be accepted.
a. Writing or editing a chapter in a text $=15 \mathrm{CE}$ (maximum of 60 per recertification cycle)

- The chapter submitted for CE credit must be neuroscience-related, although the text it is included in does not need to be exclusively made up of neuroscience content.
b. Publication of a neuroscience article in a peer reviewed journal $=10 \mathrm{CE}$ (maximum of 30 per recertification cycle)
c. Manuscript review of one neuroscience-related article for publication in the Journal of Neuroscience Nursing or other peer-reviewed journal $=5 \mathrm{CE}$ (maximum of 30 per recertification cycle)
d. Publication of an article written for a local journal or newsletter $=5 \mathrm{CE}$

Category 6: Involvement in Professional Organizations. Some items in this category have maximums for the recertification cycle. Please review the following for a list of acceptable activities and the corresponding CE amounts that can be submitted. All activities must be neuroscience-related. Activities that are not neuroscience-related will not be accepted.
a. Service on the board of ABNN, the American Association of Neuroscience Nurses (AANN), or the Agnes Marshall Walker Foundation (AMWF) for one (1) year $=10$ CE (maximum of 30 per recertification cycle)
b. Development of five (5) CNRN items $=3$ CE hours (maximum of 15 per recertification cycle)
c. Serving on ABNN's Test Development Committee (TDC) for one (1) term (3 years) $=30 \mathrm{CE}$
d. Serving on ABNN's Re-referencing Committee for one (1) year $=10$ CE Note: Assignment must be completed. No CE will be given for partial work.
e. Volunteer/medical work for patient support organizations and/or missions for one year $=10 \mathrm{CE}$ (maximum of 30 per recertification cycle)
f. Committee member at the national or local level for one year $=10 \mathrm{CE}$ (maximum of 30 per recertification cycle)

If CE hours are not specifically listed in any of the categories above, you may be asked to submit supporting documentation.

Applications submitted on or before the early-bird deadline of October 1, 2023 must pay the following fee:

|  | AANN Member | Non-Member |
| :---: | :---: | :---: |
| Online - Credit Card | $\$ 275$ | $\$ 385$ |
| Online - Check | $\$ 300$ | $\$ 410$ |

Applications received between October 2, 2023 and January 31, 2024 must pay the standard recertification fee below:

|  | AANN Member | Non-Member |
| :---: | :---: | :---: |
| Online - Credit Card | $\$ 360$ | $\$ 470$ |
| Online - Check | $\$ 385$ | $\$ 495$ |

If you are unable to pay be credit card, the check or money order in U.S. dollars payable to the American Board of Neuroscience Nursing (ABNN) must be submitted with the reference number received with the online application. Applications will not be processed without the accompanying fee. The application fee is not refundable. Early-bird applications must be submitted at the national office by $5: 00 \mathrm{pm}$ Central Time on Saturday, October 1, 2023. Applications received at the national office after 5:00pm Central Time October 2, 2023 will be charged the standard recertification fee. Applications will be accepted at the national office only through 5:00pm Central Time, January 31, 2024. No applications will be accepted after this date.

## Application Instructions

Please follow the instructions below to complete your recertification application.

1. Visit www.abnncertification.org and click 'Certification Center'.
2. Log-in to your certification center:

- IMPORTANT: Do NOT create a new account. Since you are due to renew, you already have an account in our system. If you click create a new account, it will prevent you from being able to complete your recertification application. If you do not remember your username and/or password, please click on the links provided and an email will be sent to you to reset. If you need assistance with your username or password, please contact Customer Service at 847-375-4733.

3. Click on "Apply" for CNRN Recertification in your Current Applications (opens June 1, 2023)
4. Follow each step to complete your recertification application.
5. You have the ability to save your work before moving on to the next tab and are able to come back to your previously started application.

If submitting a check, please fill out the online application, hit "Pay by check" and mail your check along with reference number to:

ABNN Recertification Program<br>PO Box 3781<br>Oakbrook, IL 60522-3781

For applications received by the October $1^{\text {st }}$ deadline, notification of your recertification status will be sent to you by the first week in December 2023. If are audited and it is found that you do not have the required number of CEs to recertify, you will be notified in time to earn more prior to December 31, 2023. Applicants submitting their application after the October $1^{\text {st }}$ deadline cannot be guaranteed notification of additional CE needed to be earned prior to December 31, 2023. Late applicants will be notified of their recertification status no later than February 28, 2024. A new certificate and wallet card will be issued to applicants who meet all criteria and requirements specified herein.

If you need assistance completing the application or have questions about the status of your application, contact ABNN at the address above or call 888/557-2266 or 847/375-4733.

## Application Audits

Each year the ABNN randomly selects $10 \%$ of applications to be audited. Candidates will be notified by email within 30 days of submission if their application has been selected for audit. If your application is selected for audit you will be required to send the documentation for all CE activities, within 21 days of notice of your audit. Be prepared to submit/upload a photocopy of your RN licensure, have your supervisor attest to your work experience, and enter each of your CE/upload certificates and written documentation of other activities (e.g., table of contents of journal showing you as author of an article; school transcript, etc.). If a CE program you attended does not meet the definition of an approved program, submit a copy of the behavioral objectives and an outline of the content (e.g., a program brochure) in addition to a copy of the CE certificate. If you do not complete the audit, you will forfeit all fees and will no longer be considered certified.

## Denial of Application and Appeal

Approval of recertification will be denied if the applicant is deemed ineligible for continued certification, or if documentation does not meet the requirements listed. Falsification of the application is grounds for denial of recertification. Applicants denied recertification will be notified in writing of the specific reason.

In the event an application for recertification is denied, the decision can be appealed to the ABNN Appeals Committee. Should you wish to appeal the decision you must notify ABNN in writing at 8735 W. Higgins Rd., Suite 300, Chicago, IL 60631, within 21 days of the postmarked date on the letter informing you of the denial.

Any applicant whose application for recertification is denied approval will automatically be sent information about how to appeal the decision, including the steps in the appeal process and additional information required.

Candidates with insufficient CE hours to recertify will not receive a refund. Candidates who are unsuccessful in recertifying by exam are not eligible for any fee refund.

## Additional Recertification Statuses

ABNN developed alternative statuses for candidates when it is time for their renewal below. Download a certification status comparison chart to determine which option is best for you.

## Inactive Status

ABNN developed the Inactive CNRN status to recognize CNRNs who temporarily do not meet eligibility requirements for recertification (whether it be practice hours or CE hours) and do not want to forfeit their credential. Inactive status is appropriate for those planning to meet the renewal eligibility requirements within a 3 -year timeframe from their expiration date. Candidates may reactivate their certification anytime during the 3 -year Inactive status period, once the established renewal eligibility requirements are met. At the time of renewal, continuing education credits and other requirements must meet the time frame as defined at the time of renewal (i.e. within 5 years of submitting the renewal application). Read more about eligibility and download an application on the ABNN Website.

## Alumnus Status

ABNN developed the Alumnus CNRN status to recognize CNRNs who no longer meet eligibility for active certification (i.e. no longer working directly or indirectly in neuroscience nursing), but are still in the nursing profession (in some capacity) and wish to remain connected with the credential. Read more about eligibility and download an application on the ABNN Website.

## Retired Status

ABNN developed the CNRN-Retired status to recognize CNRNs who have retired from their professional nursing career but wish to maintain their credentials. Read more about eligibility and download an application on the ABNN Website.

# ABNN CNRN Exam Content Outline 

(Based on 2019 Job Analysis Study)
Disorders - Detailed Content Outline
I. Trauma ( 30 items)
A. Traumatic Brain Injury

1. Blast, blunt, penetrating
2. Diffuse Axonal Injury
3. Contusions/Concussions
4. Fractures (e.g., skull, spinal column)
B. Hematoma/Hemorrhage
5. Acute and Chronic Subdural
6. Epidural
7. Intracerebral
8. Traumatic subarachnoid
C. Spinal Cord Injury
II. Cerebrovascular (50 items)
A. Ischemic Stroke
9. Thrombotic
10. Embolic
11. Lacunar
B. Hemorrhagic Stroke
12. Intracerebral hemorrhage
13. Subarachnoid hemorrhage
14. Intraventricular hemorrhage
15. Hemorrhagic conversion
C. Transient Ischemic Attack
D. Cerebral Venous Sinus Thrombosis
E. Vascular Anomalies
16. Aneurysm (Cerebral vasospasm)
17. Arteriovenous malformation
18. Arteriovenous fistula
19. Carotid stenosis
20. Cavernous angiomas
21. Carotid dissection
22. Vertebral dissection
23. Moya Moya
F. Anoxic Injury
III. Tumors (26 items)
A. Brain Tumors
24. Neuroepithelial Tissue (e.g., glioblastoma, astrocytoma, oligodendroglioma, embryonal tumors)
25. Cranial and Spinal Nerves (e.g., schwannoma, acoustic neuroma, neurofibroma)
26. Meningioma (e.g., spinal cord, intracranial)
27. Hematopoietic (e.g., lymphomas, hemangioblastomas)
28. Endocrine (e.g., craniopharyngioma, pineal, pituitary)
29. Metastatic (e.g., Leptomeningeal spread)
B. Spinal Cord Tumors
30. Primary (e.g., ependymoma, glioma)
31. Metastatic
IV. Infection and Immune Complications (22 items)
I. Abscesses
II. Meningitis
III. Encephalitis
IV. Amyotrophic Lateral Sclerosis
V. Bell's Palsy
VI. Demyelinating Polyneuropathy
32. Guillain-Barré
33. Acute Disseminating Encephalomyelitis (ADEM)
34. Chronic Inflammatory Demyelinating Polyneuropathy (CIDP)
VII. Multiple Sclerosis
VIII. Myasthenia Gravis
IX. Encephalopathies (e.g., toxic, metabolic, PRES)
V. Neurodevelopmental Conditions ( 10 items)
A. Cranial/Cerebral Defects (e.g., craniosynostosis, plagiocephaly, microcephaly, anencephaly)
B. Chiari Malformation
C. Hydrocephalus (e.g., congenital)
D. Congenital Brain and Spinal Cord Anomalies
VI. Neurological Disorders ( 62 items)
A. Partial, Generalized, Status Epilepticus, Non-epileptic Seizures
35. Idiopathic
36. Symptomatic
37. Provoked
38. Cryptogenic
B. Headaches
39. Acute
40. Chronic
C. Hydrocephalus (e.g., communicating, non-communicating, normal pressure)
D. Pseudotumor Cerebri
E. Pain
41. Acute
42. Chronic
43. Neuropathic pain (e.g., trigeminal neuralgia, peripheral neuropathy)
F. Dementia
44. Alzheimer's disease
45. Vascular
46. Lewy body
47. Age related memory loss
48. Sundown syndrome
G. Delirium
H. Movement Disorders
49. Parkinson's Disease
50. Dystonia
51. Benign essential tremor
I. Chemical Dependency
J. Degenerative Spine Disease
52. Degenerative disc disease
53. Vertebral compression fractures
54. Lumbar spondylolisthesis
55. Spinal stenosis
56. Herniated nucleus pulposus
K. Peripheral Nerve Injury

## I. Physiological (54\%)

A. Activity and Self-care

1. Rehabilitation (e.g., physical therapy, occupational therapy, speech therapy)
2. Neurological positioning for optimal, appropriate body alignment
3. Stabilize and immobilize (e.g., halo devices, TLSO brace, splints, cervical collars)
4. Skin care for complication prevention and wound healing
B. Bowel and Bladder Management
C. Nutrition
5. Dysphagia screening
6. Nutritional monitoring
7. Nausea and vomiting management
D. Comfort Promotion
8. Environmental management
9. Pain management modalities
E. Metabolic Management
10. Acid base
11. Fluid
12. Electrolytes
13. Glycemic management
F. Pharmacological Management
G. Neurological Management
14. Neurological assessments and monitoring
15. Diagnostic testing
16. Cerebral perfusion promotion
17. Cerebral edema management
18. Cerebral Spinal Fluid (CSF) drainage management (e.g., ventriculostomy, lumbar drain, shunts, Endoscopic Third Ventriculostomy)
19. Intracranial Pressure (ICP) monitoring and management
20. Device management (e.g., epilepsy monitoring, Vagal Nerve Stimulator, Deep Brain Stimulator, implantable pumps)
21. Dysreflexia management
22. Seizure precautions and management
23. Subarachnoid hemorrhage management
24. Tumor treating fields
H. Surgical Treatment and Management
25. Surgical indications and preparation
26. Postoperative care and prevention of complications
27. Procedural management (e.g., conscious sedation, interventional and bedside procedures)
I. Respiratory Monitoring and Airway Management
J. Thermoregulation
K. Cardiovascular Management
28. Bleeding precautions
29. Venous Thromboembolism (VTE) prophylaxis
30. Hemodynamic monitoring and management (e.g., dysrhythmia, blood pressure, shock)

## II. Behavioral (21\%)

A. Cognitive Behavioral Therapy

1. Overactivity/inattention/neglect modification
2. Self-harm prevention
3. Anxiety reduction
4. Sleep hygiene and promotion
5. Substance abuse treatment (e.g., alcohol/drug withdrawal, smoking cessation)
6. Cognitive stimulation (e.g., memory training, speech therapy)
B. B. Health Education
7. Disease process
8. Procedure/treatment
9. Individual risk factors (e.g., activity/exercise, diet, medication, substance abuse)
10. Community resources (e.g., support group)
11. Psychomotor skills
12. Patient specific discharge education
III. Quality of Life (12\%)
A. Coping Assistance
B. Family
13. Caregiver support
14. Patient/family-centered care
C. Culture (e.g., cultural competence, spiritual and religious support)
D. Ethics
E. Organ Donation
F. Palliative Care
G. End of Life

## IV. Patient Safety (8\%)

A. Identification of Neurological Decline
B. Abuse Protection and Support
C. Environment Safety Management (e.g., fall prevention, suicidal precaution)
D. Infection Prevention
E. Physical and Chemical Restraint

## VI. Health System Management (5\%)

A. Collaboration

1. Transfer of care (e.g., bedside handoff, intrafacility, temporary transfer)
2. Multidisciplinary collaboration
B. Professional Competence
3. Evidence-Based Practice
4. Research
5. Quality Improvement
6. Continuing Education
