PNCB is serious about upholding test security. DON'T RISK THE CONSEQUENCES—for yourself or other nurses. Learn about PNCB's Ethics in Testing.

Certified Pediatric Nurse Practitioner – Acute Care (CPNP-AC) Certification Exam

Detailed Content Outline

Description of the Exam

The CPNP-AC exam is for the pediatric nurse practitioner (PNP) who has graduated from a master's degree or DNP degree program or postgraduate certificate program for acute care pediatric nurse practitioners. The Acute Care CPNP® (CPNP-AC) uses pediatric-specific knowledge, skills, and expertise to provide family-centered care for patients with acute, critical, and complex chronic illness or injury across various care settings. The CPNP-AC works closely with interprofessional and multidisciplinary teams to provide the highest level of evidence-based care from birth to young adulthood. Additionally, patients with unique pediatric health care needs who are outside the traditionally defined pediatric age parameters are best served by the CPNP-AC. The nurse practitioner in this role is responsible for independent, comprehensive, and collaborative decision-making with direct accountability for clinical judgment. The CPNP-AC monitors and ensures the quality of healthcare practice, advocates for the patient and family in navigating healthcare delivery systems, and promotes professional practice.
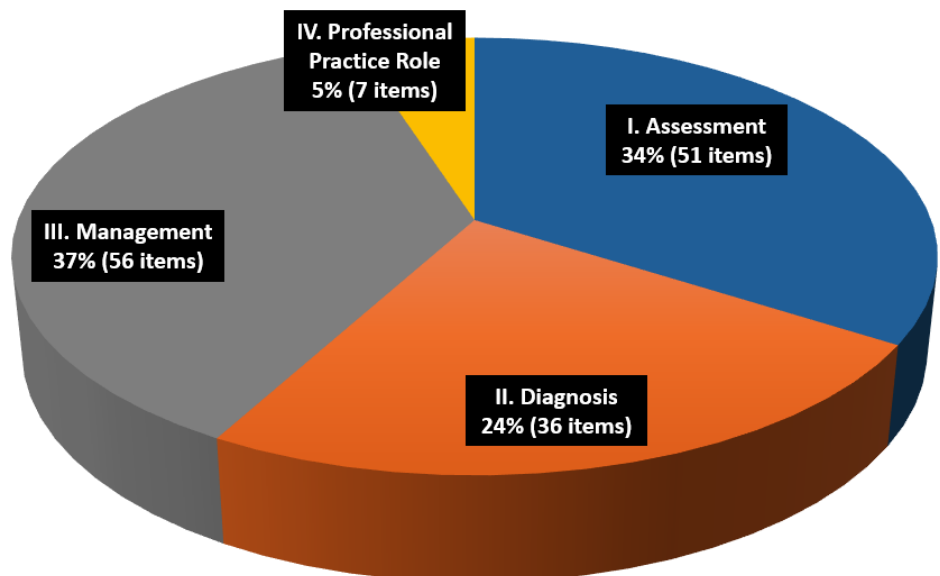
Credential

A PNP who passes this exam is called an **Acute Care Certified Pediatric Nurse Practitioner and earns the CPNP-AC credential**. CPNP-ACs are entitled to use this credential if they actively maintain their certification. Acute care CPNPs may choose to use the credential CPNP-AC. Employers or state boards may have a global acronym that is used in a state or setting.

Exam Details

This exam is based on US standards of practice. See http://www.pncb.org for eligibility requirements. The exam has 150 scored and 25 unscored items (included to determine statistical performance). The 150 scored items are distributed among four (4) content areas. See chart.

How to use this Content Outline

The CPNP-AC exam content outline (also known as a test blueprint) is an essential tool to study for the exam. It describes all subject areas covered by the exam and the number of questions per category. PNCB certification exams are comprehensive, so be sure to study all areas of the content outline, including areas with which you may not be as familiar in daily practice. This exam tests your ability to apply knowledge and use critical thinking skills to determine **one best answer** among answer choices.

Pie chart:
- IV. Professional Practice Role 5% (7 items)
- I. Assessment 34% (51 items)
- III. Management 37% (56 items)
- II. Diagnosis 24% (36 items)

Certified Pediatric Nurse Practitioner – Acute Care (CPNP-AC)
Detailed Content Outline

I. Assessment   **34% (51 ITEMS)**

A. Obtain a health history for a pediatric patient with acute, complex, critical, and/or chronic conditions
B. Evaluate health risks relevant to patients and caregivers (for example, physiologic, psychosocial, environmental)
C. Complete a physical examination, including age- and situation-specific screening, to identify:
1. emergent and life-threatening conditions
2. acute, complex, critical, and chronic conditions
3. normal and abnormal findings
D. Identify and order diagnostic studies (for example, blood and body fluids, EKG, imaging)

II. Diagnosis   **24% (36 ITEMS)**

A. Synthesize and analyze assessment findings (for example, history, health risks, physical exam) to formulate differential diagnoses
B. Establish primary diagnosis(es) based on interpretation of all available patient data, including laboratory and diagnostic studies

III. Management   **37% (56 ITEMS)**

A. Therapeutic Interventions
1. Initiate and manage the resuscitation and stabilization of emergent and life-threatening conditions
2. Recognize indications for interventions
3. Prescribe pharmacologic and non-pharmacologic therapies
4. Prescribe, use, and monitor technological devices (for example, mechanical ventilation, continuous blood glucose monitor, non-invasive and invasive monitoring)
5. Perform procedures as indicated
6. Monitor for and respond to potential and actual complications
7. Evaluate therapeutic interventions and modify them based on patient response or outcomes on an ongoing basis
B. Collaboration, Referral, and Care Coordination
1. Collaborate with interprofessional and multidisciplinary teams to meet patient care needs, including seeking and providing consultation
2. Refer patients to subspecialists, other healthcare disciplines, or different levels of care
3. Identify barriers and coordinate care for pediatric patients and caregivers
4. Facilitate patient transitions across the continuum of care
C. Education
1. Identify and address barriers to learning
2. Educate the patient and caregiver regarding specific diagnosis, treatment options (including benefits of and potential adverse reactions), and ongoing plan of care
3. Provide pertinent anticipatory guidance to promote health and safety
4. Discuss return precautions and parameters for seeking follow-up care

IV.   **Professional Practice Role Management**   **5%   (7 ITEMS)**

   A.   Leadership and Evidence-based Practice
      1.   Critically appraise and synthesize research and integrate findings into clinical practice
      2.   Engage in the development, implementation, evaluation, and/or modification of quality improvement initiatives
      3.   Develop and promote professional and collaborative relationships (for example, mentoring, educating other professionals, role acquisition)
      4.   Advocate for policies that enhance the delivery of healthcare to pediatric populations and families
   B.   Legal and Ethical
      1.   Promote a culture of patient safety
      2.   Incorporate cultural sensitivity and inclusiveness into practice
      3.   Foster ethical practices and decision-making
      4.   Maintain professional accountability by practicing in accordance with regulatory and employer guidelines (for example, licensing, credentialing, privileging, competency)

Exam Content: CLINICAL PROBLEMS

Items that address a specific condition are represented within the exam, by volume, according to the following *prioritized list:*

1	Respiratory
2	Infectious Disease
3	Gastrointestinal/Nutrition
4	Neurologic
5	Cardiac
6	Analgesia/Sedation/Delirium
7	Renal
8	Oncologic
9	Hematologic
10	Trauma/Burns
11	Palliative Care/Hospice/End of Life
12	Behavioral/Mental Health
13	Endocrine
14	Genetic
15	Child Maltreatment
16	Otolaryngologic/Cranio-facial
17	Musculoskeletal
18	Toxicologic
19	Allergic/Immunologic/Rheumatologic
20	Genitourinary
21	Metabolic
22	Dermatologic

Exam Content: PROCEDURES

Exam content will include a focus on general knowledge about the indications for, risks, benefits, and potential complications of the following procedures (*listed alphabetically*):

−	Airway adjunct (e.g., oral airway, LMA, nasopharyngeal)	−	Lumbar puncture
−	Arterial line: insertion	−	Needle decompression
−	Central line insertion	−	PICC: insertion
−	Chest tube insertion	−	Point of care ultrasound
−	Chest tube removal	−	Procedural sedation
−	Extubation	−	Skin closure
−	Foreign body removal	−	Surgical drain removal
−	Incision and drainage	−	Suturing
−	Intubation	−	Wound debridement

Exam Content: MEDICATION NAMES

Many medication brand names, while still discussed commonly in practice, are no longer available in brand name form. PNCB strives to only include brand names of medications that are fully available. When medication names are needed or cited in an examination question, PNCB will typically list both generic and brand names when appropriate.

All brand and generic names referenced are correct and available to the best of our knowledge at the time of the publication of the examination form. Each question included in PNCB examinations is reviewed multiple times, with different subject matter expert groups, who assess and validate content (including medication names) for accuracy. This process precedes, and is in addition to, rigorous, routine statistical analysis on every scored item.

Exam-takers should know common, generic medication names applicable to the acute care pediatric nurse practitioner role. Depending on several factors, some exam questions will only list the generic name of medications.

Exam Content: KNOWLEDGE AREAS

These overarching knowledge areas (below) represent foundational information, or "themes" upon which any item appearing on the exam form can be based. Be familiar with these knowledge areas as you develop and implement your study plan.

Clinical Reasoning and Decision-Making

- Anatomy and physiology
- Pathophysiology
- Epidemiology and etiology
- Microbiology
- Advanced health assessment
- Components of a health history
- Growth and development
- Pharmacology (including pharmacodynamic, pharmacokinetic, and pharmacogenomic factors)
- Triage and prioritization criteria
- Resuscitation and stabilization
- Diagnostic testing and screening (e.g., POC testing, lab tests, imaging)
- Technology (e.g., monitoring, interventional, apps, durable medical equipment)
- Informatics (e.g., patient portals, EMR/EHR)
- Complementary and integrative health
- Care coordination approaches
- Inter- and intra-professional and multidisciplinary collaboration

Family-Centered Care and Engagement

- Models of care (e.g., team-based care, trauma-informed care)
- Education techniques (e.g., adult learning theory, health literacy)
- Advanced communication strategies (e.g., motivational interviewing, therapeutic communication, crucial conversations)
- Special considerations for at-risk populations (e.g., non-speaking, foster care, developmentally delayed, neurologically impaired)
- Diversity, equity, inclusion, and belonging
- Cultural sensitivity
- Pediatric safety (e.g., psychological, physical, environmental)

Global, Public, and Community Health

- Social determinants of health (SDOH)
- Health disparities
- Human trafficking
- Environmental impacts on health
- Immigrant, refugee, and migrant health
- Infection prevention and control
- Disaster preparedness

Professional Role

- Evidence-based practice and quality improvement
- Ethics
- Leadership principles and approaches
- Professional accountability and autonomy
- Scope of practice
- Licensure, credentialing, and privileging
- Advocacy strategies
- Federal, state, and local rules, regulations, and laws

As an exam candidate, you agree not to share information about test questions and answers in any way.

Learn about PNCB's Ethics in Testing

Below are examples of acceptable and prohibited (unethical) discussions/behaviors. Because PNCB offers multiple certification exam types (CPN, CPNP-AC, CPNP-PC, PMHS), the content topic areas below may not represent your exam.

Acceptable	Unethical
"Make sure you brush up on growth and development since you work in a hospital now."	*"Make sure you remember when a baby starts pointing at objects."*
"Expect a lot of respiratory content. It's the number 1 clinical problem on the exam content outline."	*"What kinds of respiratory issues were on your exam?"*
"Renal issues are a clinical problem listed on the content outline. Be prepared for those since we don't see that on our unit."	*"I had a question about acute renal failure, potassium levels, and arrhythmias. Make sure you look that up."*
"I forgot skin, wounds, and/or burns would be on the exam."	*"I didn't expect a burn question asking about fluid replacement. I think the right answer had to do with capillary refill."*

IF IN DOUBT, DON'T DISCUSS.

Discussing exam questions can lead to serious consequences such as:

- Prohibiting future exam attempts for the people involved
- Stopping an in-progress exam
- Suspending an exam for all testers
- Delaying release of score results beyond advertised timeframe
- Invalidating exam scores
- Suspending or revoking certification
- Taking legal action against individuals

Learn more from PNCB's Ethics in Testing: A Personal Responsibility Toolkit.