



Examination Handbook

- Certified Wound Ostomy Continence Nurse (CWOCN®)
- Certified Wound Ostomy Nurse (CWON®)
- Certified Wound Care Nurse (CWCN®)
- Certified Ostomy Care Nurse (COCN®)
- Certified Continence Care Nurse (CCCN®)
- Certified Foot Care Nurse (FCN®)
- Wound Treatment Associate-Certified (WTA-C®)

Advanced Practice:

- CWOCN-AP®
- CWON-AP®
- CWCN-AP®
- COCN-AP^(SM)
- CCCN-AP^(SM)



WOCNCB®

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Advanced Practice:

CWOCN-AP®
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 CWCN-AP®
 COCN-APSM
 CCCN-APSM

A publication of the Wound, Ostomy, and Continence Nursing Certification Board (WOCNCB®)

Revised April 2024

Note: The examination handbook may also be downloaded
 and printed from the www.WOCNCB.org website.

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Introduction

Congratulations! You have taken your first step to becoming a Wound, Ostomy, and Continence Nursing Certification Board (WOCNCB®) certified nurse. We thank you for choosing the Wound, Ostomy, and Continence Nursing Certification Board (WOCNCB®) as your certifying agency. There are thousands of WOCNCB® certified nurses worldwide. We welcome you to join this select group of healthcare professionals.

About The WOCNCB®

WOCNCB® was established in 1978 by the International Association of Enterostomal Therapy (IAET), now known as the Wound, Ostomy, and Continence Nurses Society (WOCN®). It is incorporated as a separate, distinct and financially independent entity. The WOCNCB® is a national, non-governmental certifying agency organized to grant certification credentials to qualified nurses who are involved in providing care or education to individuals with wounds, ostomies, continence, or foot care issues. The organization is dedicated to promoting excellence in the profession of wound, ostomy, continence, and foot care nursing through development, maintenance and protection of the certification process. This process consists of fulfilling rigorous eligibility requirements that allow an individual to take the WOCNCB® certification exam.

Upon passing wound, ostomy, continence, or foot care exams, individuals receive these credentials:

- CWOCN®** - Certified Wound Ostomy Continence Nurse
- CWCN®** - Certified Wound Care Nurse
- COCN®** - Certified Ostomy Care Nurse
- CWON®** - Certified Wound Ostomy Nurse
- CCCN®** - Certified Continence Care Nurse
- CFCN®** - Certified Foot Care Nurse

Upon passing the wound treatment associate exam, individuals receive the credential:

Wound Treatment Associate – Certified (WTA-C®)

Advanced Practice:

- CWOCN-AP®**
- CWCN-AP®**
- COCN-APSM**
- CWON-AP®**
- CCCN-APSM**

The CWOCN®, CWCN®, COCN®, CWON®, CCCN® and CFCN® certification programs are accredited by the Accreditation Board for Specialty Nursing Certification (ABSNC) and CWOCN, CWON, CWCN, COCN, and CCCN are accredited

by the National Commission for Certifying Agencies (NCCA). Accreditation by the prestigious ABSNC and NCCA assures that the WOCNCB® has met the most stringent and rigorous of standards in issuing its credentials. By meeting these standards, the WOCNCB® helps to ensure safe and expert practice of wound, ostomy, continence, and foot care nursing.

Additionally, the WOCNCB® believes that ABSNC and NCCA accreditation assures that:

- The validity and integrity of credentials issued by the WOCNCB® are unquestionable and of the highest caliber.
- Fair and equitable standards have been met for each certificant who is certifying or recertifying.
- WOCNCB® certified nurses have earned credentials that are esteemed and valued among their peers, other medical professionals and employers.

The WOCNCB® is proud of the hard-earned ABSNC and NCCA accreditation, and we hope our certificants share our pride.

Statement of Nondiscrimination Policy

The WOCNCB® does not discriminate among certificants on any basis that would violate any applicable laws.

(Re)Certification Philosophy

The WOCNCB® endorses the concept of voluntary, periodic certification. WOCNCB® certification focuses specifically on the individual and is an indication of current knowledge in a specialized area of nursing practice. Certification provides formal recognition of nursing knowledge in:

- wound
- ostomy
- continence
- foot care

The objectives of the WOCNCB® certification programs are to promote excellence in wound, ostomy, continence, or foot care nursing by:

1. Recognizing formally those individuals who meet all the requirements of the WOCNCB®.
2. Encouraging continued professional growth in the practice of wound, ostomy, continence, and foot care nursing.
3. Establishing and measuring the level of knowledge required for certification in wound, ostomy, continence, and foot care nursing.
4. Providing a standard of knowledge required for certification, thereby assisting the employer, public and members of health professions in the assessment of wound, ostomy, continence, and foot care nursing.

Recertification via examination is an indication that nurses in the specialty demonstrate continual learning and professional growth using current evidence-based practices in the area of wound, ostomy, continence, or foot patient care. The WOCNCB® also established the Professional Growth Program (PGP) to recognize activities which go beyond routine WOC practice, or which represent progression of practice along the novice-to-expert continuum.

WOCNCB® defines the Continuing Competence required for recertification as continual learning and professional growth using current evidence-based practices in the area of wound, ostomy, continence, or foot patient care as a means to ensure effective job performance and patient safety.

Testing Agency

Meazure Learning is the professional testing agency secured by contract to assist the WOCNCB® in the development, administration, scoring and analysis of the certification examinations. Meazure Learning services also include the processing of applications and the reporting of examination results to candidates. Meazure Learning conducts professional competency assessment, job analysis survey and reporting and provides test administration for the credentialing programs.

Meazure Learning
4309 Emperor Boulevard Suite 225
Durham, NC 27703
919-572-6880
email: candidatesupport@meazurelearning.com

About The Examinations

The WOCNCB® offers examinations in these specialty areas of nursing practice: Wound Care, Ostomy Care, Continence Care, Foot Care and Advanced Practice. Meazure Learning, our testing agency, provides the WOCNCB® with computerized multiple-choice examinations developed by our Wound, Ostomy, and Continence (WOC), Foot Care and Advanced Practice Committees. These committees include certified nurses with expertise in wound, ostomy, continence, foot care or advanced practice nursing. All questions are reviewed for relevancy, consistency, accuracy and appropriateness by the examination committee as well as by a special committee dedicated to item review.

There are 110 scored questions on the WOC, AP level, WTA-C, and Foot Care exams. All exams have 10 non-scored pretest questions which are not identified as scored or non-scored. Pretesting items is an accepted psychometric practice that allows the WOCNCB® to continually evaluate new examination

questions so that we maintain high quality examinations and facilitates the process for candidates receiving instant scores. The statistical performance of the pretest questions is evaluated, and questions that perform well can then be included on future examinations as scored questions. To keep the credentialing examinations secure and reflective of current practice, new questions are continuously developed and introduced in versions of the examinations. Examination scores are based upon only previously used examination questions.

Candidates are allowed 120 minutes to complete the examinations. Examinations are administered individually and can be scheduled to be taken sequentially or on separate days.

Please note that the passing score can change from one examination to the next due to slight differences in content / difficulty on varying exams administered. Therefore, WOCNCB does not publicly publish the number of questions needed for a passing score.

Credentials

All WOCNCB® credentials are registered trademarks and can only be used after successfully completing the necessary examinations. Candidates passing the wound, ostomy, and continence examinations within 12 months from the time of application will be awarded the Certified Wound Ostomy Continence Nurse (CWOCN®) or Advanced Practice (CWOCN-AP®) tri-specialty credential. Those passing the wound and ostomy exams within 12 months of exam application will be awarded the Certified Wound Ostomy Nurse (CWON®) or Advanced Practice (CWON-AP®) credential. Those passing two, three or four examinations outside 12 months will receive individual credentials as Certified Wound Care Nurse (CWCN®), Certified Ostomy Care Nurse (COCN®), Certified Continence Care Nurse (CCCN®), Certified Foot Care Nurse (CFCN®), or the Advanced Practice (COCN-AP®) (CCCN-APsm) (CWCN-AP®). Candidates passing the wound treatment associate examination will be awarded the Wound Treatment Associate – Certified (WTA-C®) credential.

The above eleven credentials are the only valid/trademarked credentials issued by the WOCNCB®, and use of any other combination is prohibited.

CREDENTIALS ARE VALID FOR A PERIOD OF FIVE YEARS.



Eligibility



Eligibility Requirements for Wound, Ostomy, or Continence Exams

Candidates that do not currently hold the desired certification are considered an initial candidate, including candidates whose certification has lapsed. All candidates must take a certification exam to earn credentials initially.

DO NOT submit an application before satisfying all eligibility requirements listed below. Documentation of eligibility must be provided with the candidate's application.

NOTE: Applications incomplete after 90 days from the date of submission will be closed, and the examination fee will be forfeited.

Initial (first-time) candidates must:

1. Have a current RN License.
2. Hold a bachelor's (or higher) degree.
3. Have completed ONE of the following pathways of education or practice:
 - A. TRADITIONAL PATHWAY
 - Graduate from an accredited WOC (or WCET international) Nursing Education Program. See page 20 for the program codes. For the most current list of programs, visit <https://www.wocn.org/become-a-woc-nurse/accredited-programs/>
 - The WOC(ET) Nursing Education Program must have been completed within the past 5 years (from date of exam application), or otherwise you must prove eligibility via the Experiential Pathway.
 - The WOC/ET Nursing Education Program must be accredited by the WOCN® Society /WCET International at the time of graduation.
 - B. EXPERIENTIAL PATHWAY
 - The accumulation of practice hours and continuing education credits (contact hours) must be earned post-bachelor's degree while practicing as an RN.
 - For each specialty for which certification is sought, 50 CE/CME credits (contact hours) or an equivalent in college course work must be completed over the five years previous to the date of application. All CE/CME credits (contact hours) or college course work must directly apply to the specialty area for which applied. Multi-day conferences may include professional practice topics or may be focused on a specific type of treatment i.e. hyperbaric oxygen (HBO). Professional practice topics do not relate directly to any clinical focus and are not accepted. HBO education programs receive partial credit but are usually not accepted in their entirety.

- For each certification specialty, 1500 practice hours specialty-specific in your WOC, or AP-WOC role. The role can be in any work setting (Acute Care, Ambulatory Care, Long Term Care, Home Care, Academics, Administrative, Industry and Independent Practice) and hours must be completed within the previous five years. If you are applying for wound, ostomy, and continence, a total of 4500 practice hours are needed. Further, 375 hours must have occurred within the year prior to application, or a total of 1125 if you are applying for wound, ostomy, and continence.

4. Submit exam application with applicable fee and support materials (see checklist on page 13).

Retake Candidates must:

1. Be currently licensed as a Registered Nurse.
 - A copy of current RN license must accompany a completed application, if it has expired since your last exam.
2. There is a 30-day waiting period before retesting after an unsuccessful exam.
3. Submit exam application with applicable fee.

Recertifying Candidates must:

1. Be currently certified by the WOCNCB® with the credential in which recertification is being sought. If not, see Lapsed Credentials below.
2. Be currently licensed as a Registered Nurse.
 - A copy of current RN license must accompany a completed application.
3. Submit renewal application with applicable fee.

Another Option for recertification

Professional Growth Program (PGP)

As an alternative to testing for recertification, eligible candidates may choose to submit a professional portfolio online via the WOCNCB®'s Professional Growth Program. If you have attempted and failed exams, you are eligible to utilize the PGP portfolio program for recertification — as long as you remain currently certified. Visit the WOCNCB® website at www.WOCNCB.org/pgp/ for more information about application and portfolio submission requirements.

Eligibility Requirements for Advanced Practice Wound, Ostomy, or Continence Exams

Do Not submit an application before satisfying all eligibility requirements listed below. Documentation of eligibility must be provided with the candidate's application.

NOTE: Applications incomplete after 90 days from the date of submission will be closed, and the examination fee will be forfeited.

To be eligible for the Advanced Practice certification exam(s) by the WOCNCB®, a certificant must fulfill the following requirements:

1. Hold a current RN or APN license. (A copy of the current license must be submitted with your application.)
2. Have completed a MSN or higher nursing degree program to become an APRN (Nurse Practitioner (NP), Clinical Nurse Specialist (CNS), Nurse-Mid Wife (NMW), Certified Registered Nurse Anesthetists (CRNA)). Candidates must document advanced licensure/education by submitting a copy of at least one of the following:
 - Transcript showing Nurse Practitioner or Clinical Nurse Specialist education at the Masters Level
 - Diploma showing Nurse Practitioner or Clinical Nurse Specialist education at the Masters Level
 - Current licensure as a Nurse Practitioner or Clinical Nurse Specialist
 - Current certification, by a nationally recognized body, as a Nurse Practitioner or Clinical Nurse Specialist
 - Letter from school of nursing stating MSN program prepared graduate as a CNS or NP.
3. Fulfill ONE of the following requirements to document basic Wound, Ostomy, and/or Continence knowledge:
 - a. Hold current entry-level WOCNCB® certification in the specialty or specialties for which Advanced Practice certification is sought.
 - b. Accredited Education Program Pathway (Fulfill ALL of the following requirements)
 - i. Complete a WOC Nursing Education Program that is accredited by WOCN®.
 - ii. Candidates are required to successfully complete exam(s) within five years of graduation from a Wound, Ostomy, Continence Education Program. Beyond five years, candidates are required to prove eligibility via the Experiential Pathway in order to take exams.
 - iii. The WOC Nursing Education Program must be accredited at the time of graduation.
 - iv. A copy of your certificate of completion/graduation must be submitted with your application. Please contact an accredited program for more information.
 - c. Experiential Pathway (Fulfill ALL of the following requirements)
 - i. Within each specialty for which certification is sought, 50 contact hours or an equivalent in college course work post-Bachelor's, must be completed over the previous five years. All contact hours or college course work must directly apply to the specialty

area for which you apply. Multi-day conferences may include professional practice topics or may be focused on a specific type of treatment i.e. hyperbaric oxygen (HBO). Professional practice topics do not relate directly to any clinical focus and are not accepted. HBO education programs receive partial credit but are usually not accepted in their entirety.

- ii. For each certification specialty, 1500 practice hours must be completed over the previous five years. Further, 375 of those hours must have occurred within a year prior to application. The role can be in any work setting (Acute Care, Ambulatory Care, Long Term Care, Home Care, Academics, Administrative, Industry and Independent Practice.)
- iii. Accumulation of contact and practice hours must be earned post-Bachelor's and while functioning as an RN. Practice hours must be specialty-specific in your AP-WOC role.

Please read the complete instructions regarding documentation required in the Experiential Pathway section of this Handbook.

Please note: *These AP examinations DO NOT provide the individual with certification within an Advanced Practice role and population. These examinations provide specialty certification.*

Retake Candidates Must:

1. Be currently licensed as a Registered Nurse.
 - A copy of current RN license must accompany a completed application, if it has expired since your last exam.
2. There is a 30-day waiting period before retesting after an unsuccessful exam.
3. Submit retake exam application with applicable fee.

Recertifying Candidates Must:

1. Be currently certified by the WOCNCB® with the credential in which recertification is being sought.
2. Be currently licensed as a Registered Nurse.
 - A copy of current RN license must accompany a completed application, if it has expired since your last exam.
3. Submit fees with exam application or AP portfolio using AP Handbook requirements.

Another Option for recertification AP Portfolio program

As an alternative to testing for recertification, eligible candidates may choose to submit a professional AP Portfolio. If you have attempted and failed exams, you are eligible to utilize the AP Portfolio program for recertification — as long as you remain currently certified. Visit the WOCNCB® web site at <http://www.wocncb.org/recertification/advance-practice-recertification> for the AP Handbook, and download the forms to develop your portfolio.

Eligibility Requirements for Foot Care Exam

Candidates that do not currently hold the desired certification are considered an initial candidate, including candidates whose certification has lapsed. All candidates must take a certification exam to earn credentials initially.

DO NOT submit an application before satisfying all eligibility requirements listed below. Documentation of eligibility must be provided with the candidate's application.

NOTE: Applications incomplete after 90 days from the date of submission will be closed and the examination fee will be forfeited.

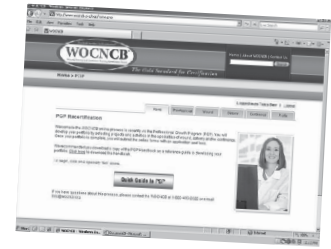
Eligibility Requirements for Foot Care Exam

Initial (first-time) candidates must:

1. Have a current RN License.
2. Hold a Bachelor's Degree (or higher)
3. Complete BOTH of the following:
 - a. Accumulate a minimum of 24 CE/CME credits (contact hours) specific to foot care. Please note: 8 of 24 CE/CME may be in basic skin and wound care.
FAST TRACK for the CWCN, CWON, CWO CN – your CWCN will replace the 8 CE in basic skin/wound care, leaving 16 CE specific to foot care. and
 - b. Accumulate a minimum of 40 clinical hours under the direct supervision of an expert in foot care, for example: Physician, Podiatrist, Nurse Practitioner, Physician Assistant, or a CFCN®. The expert MUST HAVE experience relevant to foot care. Please note: 12 of 40 clinical hours may be in basic skin and wound care, under the direct supervision of a wound care expert. FAST TRACK FOR THE CWCN, CWON, CWO CN – your CWCN will replace the 12 clinical hours in basic skin/wound care, leaving 28 clinical hours in foot care.
 - Both the CE/CME credits (contact hours) and clinical hours must be specific to foot care and must be completed within the previous 5 years from the date of the application while functioning as an RN.
 - Note: Candidates that do not currently hold the desired certification are considered an initial candidate, including candidates whose certification has lapsed. All candidates must take a certification exam to earn credentials initially. All who currently hold the certification at that time will maintain and be able to recertify their CFCN® credential as long as there is no lapse in certification. If credentials lapse, a Bachelor's degree will be required for establishing certification.

Retake Candidates must:

1. Be currently licensed as a Registered Nurse.
 - A copy of current RN license must accompany a completed application, if it has expired since your last exam
2. There is a 30-day waiting period before retesting after an unsuccessful exam.
3. Submit exam application with applicable fee.



Recertifying Candidates must:

1. Be currently certified by the WOCNCB® as a Certified Foot Care Nurse (CFCN®).
2. Be currently licensed as a Registered Nurse.
 - A copy of current RN license must accompany a completed application.
3. Submit renewal application with applicable fee.

Another Option for recertification

Professional growth program (PGP)

As an alternative to testing for recertification, eligible candidates may choose to submit a professional portfolio via the WOCNCB®'s Professional Growth Program. If you have attempted and failed exams, you are eligible to utilize the PGP portfolio program for recertification — as long as you remain currently certified. Visit the WOCNCB® web site at www.WOCNCB.org/recertification/foot-and-nail/pgp.php for the Foot Care Nursing PGP Handbook, and visit www.WOCNCB.org/pgp to complete your portfolio online.

Eligibility Requirements: Wound Treatment Associate – Certified (WTA-C®)

To earn the WTA-C® credential, a candidate must meet all WTA-C eligibility requirements listed below and pass the WTA-C certification examination. All candidates must take a certification exam to earn credentials initially.

Do not submit an application before satisfying all eligibility requirements listed below. Documentation of eligibility must be provided with the candidate's application.

Note: Applications incomplete after 90 days from the date of submission will be closed and the examination fee will be forfeited.

A. TRADITIONAL PATHWAY

You must complete all of the following:

1. Hold a current LPN/LVN or RN license.
2. Complete the WOCN Society's WTA Program, or the WEB WOC "SWA" program, within the past five (5) years, under the direction of an approved WOCNCB nurse and hold a current WTA Program or SWA Program certificate of completion.
3. Accumulate 16 clinical hours under the direct supervision of an expert in wound care, for example: Physician, Nurse Practitioner, Physician Assistant, or an RN or APRN certified in wounds through WOCNCB®. The expert MUST HAVE experience relevant to wound care. Click here to download the Verification Form for clinical hours.
4. Submit all of the above within the online exam application, at: <https://www.measurelearning.com/Connect/wocncb-wta>

B. EXPERIENTIAL PATHWAY

You must complete all of the following:

1. Hold a current, active LVN, LPN or RN license
2. Complete 24 Continuing Education hours (CEs) specific to wound care within the past 12 months meeting the WTA-C® Detailed Content Outline (link below). <https://www.wocncb.org/UserFiles/WoundTreatmentAssociateCertifiedExamContentOutline.pdf>

3. Complete 160 hours of clinical preceptorship within the past 12 months
 - a. Acceptable preceptors to meet WTA-C® clinical requirements:
 - Any RN holding an active wound care certification through the WOCNCB, i.e. CWCN® or CWCN-AP®. An active WTA-C® is not an acceptable clinical preceptor.
 - MD, NP or PA holding an active certification through the American Board of Wound Management, i.e. CWS®, CWSP®. An active CWCA® is not an acceptable clinical preceptor
 - The expert MUST HAVE experience relevant to wound care. A Verification Form signed by the expert is required for clinical hours. Multiple forms may be submitted to meet the 160 hour requirement. Download the form at https://www.wocncb.org/UserFiles/file/ClinicalHourForm.2023_v1.doc
4. Complete a clinical skills checklist with the preceptor to include:
 - Monofilament testing
 - Ankle Brachial Index (ABI)
 - Compression wrap
 - Negative pressure wound therapy
5. Submit all of the above within the online exam application, at: <https://www.measurelearning.com/Connect/wocncb-wta>



Lapsed Credentials (Recertification WOC and -AP/WOC Candidates)

If credentials lapse, candidates must:

1. Be currently licensed as RN (or NP for -AP/WOC candidates),
2. Hold a Bachelor's (or higher) degree (or MSN for -AP candidates),
3. If lapsed less than 6 months, see "Grace Period" below,
4. If lapsed more than 6 months, follow Eligibility via the Experiential Pathway, or, complete an Accredited WOC Nursing Education Program within the past 5 years (from the date of exam application),
5. Successfully complete exams.
6. Candidates who are actively testing and their credentials lapse due to unsuccessful testing, are allowed to take the exam within ninety (90) days of the last exam attempt. Note: click on "retake" link within your current exam application. If you have tested unsuccessfully beyond 90 days, you must apply as an initial candidate and adhere to the Experiential Pathway requirements. You may not utilize the 6-month grace period below.

Lapsed Credentials Foot Care

If your CFCN credentials lapse, see the eligibility information on "Eligibility Requirements for Foot Care Exam" on page 8. You will submit an exam application and document the eligibility.

Grace period for lapsed credentials less than 6 months (Recertification candidates)

If you have a lapsed credential of six (6) months or less and wish to recertify, you may utilize a one-time grace period to recertify via examination. The following rules apply:

- A one-time \$100 grace period fee must be paid upon application for each single specialty (not bundled per application for multi-specialties).
- You are not certified during the grace period.
- You must document current RN licensure in the exam application and WOCNCB will verify your lapsed credentials date for your eligibility to utilize the grace period.
- Do NOT use the Experiential Pathway because the 6 month grace period is Exempt from this criteria.
- The 180 day grace period request must occur within 180 days of credentials expiration.
- Candidates must test within the 180 day grace period. Please allow for sufficient amount of time for application processing and exam scheduling – we recommend at least two weeks.
- The 180 day grace period starts with your credential expiration date, and only allows for one 180 day grace period.
- The 180 day grace period may not be combined with the 90 day grace period.
- Once you pass exam(s) during the 180-day grace period, credentials revert to your original credentials expiration plus 5 years.
- You are allowed four exam attempts within the 180-day grace period (initial exam plus 3 retakes) and the policy of a 30-day wait period between exam attempts applies.

- If exam(s) are not passed during the 180-day grace period, candidates must submit a new application and follow published Eligibility Requirements as a new candidate.

Instructions For Experiential Pathway

VERIFICATION OF CONTINUING EDUCATION

Please upload or submit the following with your application:

1. Complete the online submission of Continuing Education.
2. If using college credits, upload or submit a copy of the college transcript and a course syllabus that includes specific content areas and evidence of course hours.
3. If using CE/CME credits upload or submit a copy of all official CE/CME (contact hours) certificates.

Guidelines for submitting CE/CME Credits:

1. Accumulation of CE/CME credits are to be earned while practicing as an RN (and for wound, ostomy, continence specialties, post-bachelor's degree).
2. CE/CME credits (contact hours) required for each specialty must directly relate to the clinical focus and be completed over the last 5 years from the date of application. Accumulation of CE/CME credits are to be earned while practicing as an RN (and for wound, ostomy, continence specialties, post-bachelor's degree). You must identify the program date, course title, course provider and approved accrediting organization. If a submitted educational program covers multiple topics, the program brochure or topic outline with times listed must also be included with the application. Multi-day conferences may include professional practice topics or may be focused on a specific type of treatment i.e. hyperbaric oxygen (HBO). Professional practice topics do not relate directly to any clinical focus and are not accepted. HBO education programs receive partial credit but are usually not accepted in their entirety. A copy of all CE/CME certificates must be uploaded or submitted with the application. CE/CME credits (contact hours) required for each specialty must directly relate to the clinical focus and be completed over the last 5 years from the date of application.
3. CE/CME credits (contact hours) may only be used once; duplicate courses will not be accepted.
4. Certificates that are incomplete will not be accepted. Complete certificates must contain the name of the provider of the credits, an official signature, full course name and date, name of attendee, number of hours/credits, etc.
5. A list of tips is found on the www.WOCNCB.org website. Programs must be provided by an accredited provider or approver of nursing continuing education (i.e. American Nurses Credentialing Center (ANCC) or state board of nursing) or sponsored by organizations, agencies, or educational institutions accredited or approved by the ANCC or state board of nursing (i.e. WOCN® Society).

VERIFICATION OF EXPERIENCE

Candidates applying for certification through the Experiential Pathway must complete the online verification of experience. The WOCNCB® will contact

your current supervisor to verify that in the past 5 years, you performed the required practice hours for the specialty area in which certification is being sought.

NOTE: For foot care verification, practice hours must be completed under the supervision of a foot care expert (i.e. podiatrist, nurse practitioner or CFCN®).

TRACK YOUR PROGRESS

For new candidates, you may track your progress on our website prior to applying for exams. Please use this link:

<https://path.wocncb.org/> Please note, this tracking is not uploaded to an exam application, and is for calculation purposes only.

Eligibility Period

Applications are processed on a rolling basis.

INITIAL CANDIDATES:

Once an application is approved, a Notice to Schedule (NTS) will be sent to you via email. At this time you will be able to schedule your exam session(s) during the next 12 months. You can only retake an exam 3 times within each 12 month period and must wait a minimum of 30 days between each testing attempt. At the end of 12 months if unsuccessful, you must reapply as an initial candidate to sit for future exams.

RECERTIFYING CANDIDATES:

Candidates will receive periodic email reminders about recertification beginning 18 months prior to the credential expiration date. To find your expiration date, either reference your official credential certificate or login to your account at: <https://assessments.meazurelearning.com/WOCNCB/public/Welcome.aspx?AppSystemID=4> . Candidates may submit a Recertification Application up to 18 months prior to the credential expiration date and once the application is approved, a Notice to Schedule (NTS) will be sent. Testing eligibility begins the day the NTS is received for the next 365 days. Exams must be completed prior to credentials expiration. An exam can only be retaken 3 times within each 12 month period and Candidates must wait a minimum of 30 days between each testing attempt. If any attempts are unsuccessful or the credentials lapse, reapplication as an initial candidate must be completed. (For WTA-C® candidates, the application login is found at: <https://assessments.meazurelearning.com/connect/wocncb-wta/Account/Login>).

Status of Your Application

Allow 30 days for application review. Candidates are encouraged to submit applications and supplemental materials as early as possible to allow for any unanticipated delays.

Application status can be checked online at any time by logging in to your account at <https://assessments.meazurelearning.com/WOCNCB/public/Welcome.aspx?AppSystemID=4>, or by calling Meazure Learning at 919-572-6880.



Examination and PGP Fees

Examination fees may be paid online with a credit card or by mail via credit card, check or money order payable to Meazure Learning in USD. **DO NOT SUBMIT CASH.**

All fees must be submitted with the application.

1 Specialty	\$395 USD
2 Specialties	\$510 USD
3 Specialties	\$610 USD
4 Specialties	\$670 USD
WTA-C® Specialty Exam	\$250 USD

This fee schedule applies to all certification and recertification pathways.

Returned checks and credit card transactions that are declined will be subject to a \$50 handling fee. You must then send a certified check or money order for the amount due PLUS the \$50 USD handling fee to Meazure Learning.

First Retake Exam Fees

Candidates failing their first exam attempt may submit a retake application for their next attempt with a \$100.00 discount. This discount is limited to one (1) use and subsequent retake applications will use the full exam fee schedule listed above.

Examination Surcharge Fees

Candidates who have applied for more than one specialty examination can choose to schedule exams in a single testing period or multiple testing periods (see below).

- One examination (single 2-hour testing period)
- Two examinations (single 4-hour testing period)
- Three examinations (single 6-hour testing period)
- Four examinations (single 8-hour testing period)

Candidates who choose to schedule multiple testing periods will be charged a one-time surcharge fee of \$75.00.

A notification of the surcharge fee will occur during the scheduling process when a candidate selects multiple testing periods for more than one specialty exam in which they are eligible. The payment of the fee must be made at that time. The candidate will have the opportunity to change scheduling prior to payment submission and the surcharge will not occur.

EXAMPLE			
Eligible For	Single testing periods	Multiple testing periods	Surcharge
W, O, C	Three exam period (6 hour)		\$ 0
W, O, C		One exam period (2 hour) One exam period (2 hour) One exam period (2 hour)	\$75
W, O, C		Two exam period (4 hour) One exam period (2 hour)	\$75
W, O	Two exam period (4 hour)		\$ 0
W, O		One exam period (2 hour) One exam period (2 hour)	\$75



Application Process

Review the Examination Handbook prior to completing the application. Failure to follow the instructions can lead to the denial of an application. For questions regarding the application process, please contact Meazure Learning at 919-572-6880 or candidatesupport@meazurelearning.com

APPLICATION CHECKLIST

- 1. **Complete the online application (<https://assessments.meazurelearning.com/WOCNCB/public/Welcome.aspx?AppSystemID=4>). Only online applications will be accepted.**
You must apply under the name that appears on your government-issued photo identification card. Please include maiden name if it is needed to confirm experience or training requirements. Provide complete information including all ZIP/postal codes, telephone numbers, and email addresses in order to expedite processing. (For WTA-C® candidates, the application is found at: <https://www.meazurelearning.com/Connect/wocncb-wta>). In order to receive important electronic correspondence regarding certification, please ensure that your email program will accept emails from candidatesupport@meazurelearning.com.
- 2. **Proof of appropriate nursing license**
Upload or submit a copy of the license, showing expiration date and state(s).
- 3. **Proof of Education applicable to eligibility requirements**
Upload or submit a copy of the required diploma or transcripts for the specialty level exam, according to the eligibility outlined on page 6.
- 4. **If applying via Traditional Pathway, proof of successful completion of a WOC (ET) or WTA Program**
Enter the education program codes that are outlined in the handbook on page 20 (WOC Codes).
Upload or submit a copy of the certificate of completion or diploma.
- 5. **If applying via Experiential Pathway, proof of continuing education credits for each specialty exam.**
Complete the Continuing Education Verification Form (online). For each specialty exam, upload or submit copies of CME/CE certificates, all earned in the past 5 years and **post-bachelor's degree**.
- 6. **If applying via Experiential Pathway, verification from your supervisor of practice hours for each specialty exam.**
Complete Specialty Experience online (Step 8).
Agree to the electronic attestation of practice hours worked.
- 7. **Include documentation of special disability if requesting special testing accommodations.**
- 8. **Include examination fee.**
Submit examination fee by secure online payment or make check payable to Meazure Learning in USD.

Examination Process

Scheduling a Testing Session

Upon approval of your application, Meazure Learning will send notification of eligibility to sit for the examination(s) and will provide a username, password, and directions on how to schedule a testing session. If you are eligible for more than one examination, you may schedule a single testing session for all examinations for which you are eligible, or you may schedule a separate testing session for each examination. Testing sessions are filled on a first-come, first-served basis, based on test center availability. At most computer-based testing locations, morning examinations begin at 9:00 a.m., and afternoon examinations begin at 1:00 p.m.

1. Schedule online. Visit Meazure Learning's website at <https://assessments.meazurelearning.com/WOCNCB/public/Welcome.aspx?AppSystemID=4>.
—OR—
2. Call Meazure Learning at 919-572-6880 to schedule a testing session.

When scheduling your examination, you will be asked the date, time and location you prefer. Allow ample time prior to credential expiration to schedule your exam(s) for preferred dates and test centers and to ensure date and site availability. We recommend applying at least 90 days prior to credentials expiration.

IMPORTANT: Be sure your scheduled exam is a date you can commit to. There is a \$50 re-scheduling fee if you must change this exam date. See "Rescheduling a Testing Session" on page 15 for more information.

Testing Centers

Meazure Learning's computer-based testing network consists of more than 450 domestic (U.S. and Canada) test centers and over 200 international testing centers. For a list of testing centers visit: <https://www.assessments.meazurelearning.com/test-site-cities/>.

You may schedule up to four exams in one day or on separate days, as long as all days are within the eligibility period for which you applied.

Scheduling outside of the US and Canada for Internet Based Testing (IBT)

When you receive your Notice to Schedule (NTS) via email from Meazure Learning, you will have the option of taking the IBT examination outside of the U.S. and Canada. Please note that there is an additional fee of \$150 per testing session (up to two examinations per session) for international test sites. This additional fee will be collected by secure e-commerce when you submit your scheduling request. This additional \$150 test site fee is not applicable if you test via Live Remote Proctor.

Please note: *Meazure Learning cannot guarantee the availability of testing sessions at specific international locations, and the international testing locations are subject to change. Meazure Learning will make every effort to accommodate your request wherever possible.*

REMOTE PROCTORED EXAM OPTION

Live remote proctoring allows you to take WOCNCB® exams on a desktop or laptop computer in your home or other location while a proctor watches you live online via your computer and records audio and video of the exam session.

To take an exam via live remote proctoring, your computer must meet certain technical requirements including having a webcam and microphone to record the exam session and Internet access. You will be required to download the software program "Guardian" to take your exam. This will be provided in your scheduling email notice. Prior to the start of the exam, the proctor will require candidates to move the webcam or laptop around to show there is no one else in the room and no unauthorized books, papers, or other materials that could compromise the integrity of the exam. You may select the remote proctored exam option when scheduling exams, which are available to schedule on a 24/7 basis. Please see the www.wocncb.org website for additional details.

Special ADA Accommodation Request

Reasonable accommodations provide candidates with disabilities a fair and equal opportunity to demonstrate their knowledge and skill in the essential functions being measured by the examination. Reasonable accommodations are decided based upon the individual's specific request, disability, documentation submitted and appropriateness of the request. Reasonable accommodations do not include steps that fundamentally alter the purpose or nature of the examination.

Reasonable accommodations generally are provided for candidates who have a physical or mental impairment that substantially limits that person in one or more major life activities (e.g., walking, talking, hearing and performing manual tasks); have a record of such physical or mental impairment; or are regarded as having a physical or mental impairment.

To apply for reasonable accommodations, the candidate must submit documentation provided by an appropriate licensed professional on the professional's letterhead. The documentation must include a diagnosis of the disability and specific recommendations for accommodations and must be submitted with your exam application.

It is our expectation ADA special requests can be accommodated in a remote environment since the candidate would likely test in their own home and use their own special equipment such as special seating, reading or medical device. If there are other requests that fall within ADA guidelines that cannot be accommodated, the candidate will be notified we will make every attempt to come to mutual agreement on providing reasonable accommodations.

Rescheduling a Testing Session

If a candidate needs to cancel or reschedule the testing session, the request must be submitted through Meazure Learning's online scheduling system **at least two (2) business days** prior to the test date. A \$50 rescheduling fee will apply.

Day of Testing Appointment:	Must reschedule/cancel by:
Monday	Tuesday (of the previous week)
Tuesday	Wednesday (of the previous week)
Wednesday	Thursday (of the previous week)
Thursday	Friday (of the previous week)
Friday	Monday (of the current week)
Saturday	Tuesday (of the current week)

If the candidate does not appear for the testing session and has not cancelled or rescheduled at least two (2) business days prior to the scheduled test date, the testing fee will be forfeited. Candidates will be required to complete a Retake Application and pay an additional testing fee.

Exceptions to this policy will be made only for substantiated emergencies. Emergencies should be directed to candidatesupport@meazurelearning.com. If a computer is not accessible, please call Meazure Learning directly at 919-572-6880.

Examination Rules

Meazure Learning follows industry standard testing rules as outlined below:

- Candidates will be notified of the exact test location, date, and time. Please plan to arrive at least 15 minutes prior to the start of the testing session. Those who arrive late will not be permitted to test.
- Candidates must bring photo identification with signature to the examination site or show it to a remote proctor. Acceptable forms of identification are driver's licenses, passports and government-issued identification cards **only**.
- Remote proctored exams require the proctor to ask the candidate to perform a room scan with your laptop camera to assure there are no security issues. The room environment must also be quiet/private with no other individuals in camera view.
- Each examination consists of 120 multiple-choice questions. Candidates will be permitted 120 minutes to complete each examination.
- Prohibited Items: Candidates are expressly prohibited from bringing the following items to the test site:
 - cameras, cell phones, optical readers or other electronic devices that include the ability to photograph, photocopy or otherwise copy test materials
 - notes, books, dictionaries or language dictionaries
 - book bags, purses, handbags or luggage
 - Ipods, MP3 players, headphones or pagers
 - calculators (except as expressly permitted by the test sponsor), computers, PDAs or other electronic devices with one or more memories
 - personal writing utensils (i.e., pencils, pens and highlighters)

- watches
- food and beverage
- hats, hoods or other headgear (except for religious headwear)
- coats and jackets

Please note that sweaters and sweatshirts without pockets or hoods are permitted.

If it is determined that a candidate has brought any such items to the test site, they may be requested and held by Meazure Learning testing staff. Meazure Learning reserves the right to review the memory of any electronic device to determine whether any test materials have been photographed or otherwise copied. If the review determines that any test materials are in the memory of any such device, Meazure Learning reserves the right to delete such materials or retain them for subsequent disciplinary action. Upon completion of the review and any applicable deletions, Meazure Learning will return the device, but will not be responsible for the deletion of any materials that may result from the review, whether or not such materials are test materials. By bringing any such device into the test site in violation of Meazure Learning policies, the candidate expressly waives any confidentiality or other similar rights with respect to the device, the review of the memory of the device and/or the deletion of any materials. Meazure Learning, the examination site, and the test administration staff are not liable for lost or damaged items brought to the examination site.

ENVIRONMENTAL DISTRACTIONS: Every attempt, within reason, is made to ensure a quiet and comfortable testing environment for all candidates. However, last minute needs and emergencies by building operators cannot be anticipated. It is suggested that candidates wear appropriate clothing to help adapt to a cooler or warmer climate in the examination room. Examination room temperature can be unpredictable. Bring ear plugs to muffle noise distractions.

Examination Results

Score Reports

WOCNCB uses a scaled scoring method for reporting your examination results. Results are printed and given to you immediately after taking the exam, or are displayed on screen for a remote proctored exam which can be printed. In addition, candidates may view their score results by logging in through the online credentialing system at <https://assessments.meazurelearning.com/WOCNCB/public/Welcome.aspx?AppSystemID=4>. Scores will not be released by telephone or fax. Please contact Meazure Learning immediately if you do not receive the printed results after your exam (1-919-572-6880).

PASSING POINT

Passing point studies are conducted for each of the examinations, based on performance standards. Performance standards refer to the minimum level of competency that must be met to receive a credential or license to practice. In certification testing, the goal is to identify a passing point, or cut score, that distinguishes candidates who meet this minimum level of competency from those who do not. The techniques used for a performance standard typically are referred to as standard-setting methods. Most standard-setting methods start with an assembled examination that is presented to a panel of

subject matter experts (SME's). Data are collected from the SME panelists to try to identify the score that a candidate on the border between acceptable and unacceptable (or between competent and incompetent) would achieve on the examination. WOCNCB follows this standard setting process for all examination forms to determine a passing point which is then converted to a scaled score as explained below.

What are scaled scores?

Scaled scores are raw scores transformed by a numerical procedure. By using scaled scores, certification agencies make sure that they can provide reports to candidates that are consistent and without concern for test security or confusion about the scores.

For every possible raw score on a test form, there is a corresponding scaled score. When multiple forms of a test are used, or when results are compared from year to year, scaled scores are needed to adjust for possible differences in test form length or difficulty.

This transformation is similar to converting from pounds to kilograms. The weight of the object has not changed; only the units being reported have changed.

Why are scaled scores used?

Scaled scores provide a consistent scale of measurement so that the same scaled score represents the same level of knowledge from one test administration to the next. Testing programs often use multiple test forms to limit exposure of test questions. While the different forms are built to the same test specifications and are designed to be similar in difficulty, rarely are they exactly equal in the level of difficulty. If two candidates take different forms of different levels of difficulty but get the same number of questions correct, the candidate with the more difficult form demonstrated a higher level of knowledge. A scaled score ensures comparability in reporting across test forms.

Do scaled scores change who passes or fails?

Scaled scores do NOT affect individual candidate pass or fail decisions. The decision is always made by comparing the number of items answered correctly to the number of items required to pass the test form that was established using the criterion-referenced process.

Certificates / Wallet Cards

After passing the examination(s), candidates will receive a personalized certificate suitable for framing and a wallet card. Certificates are automatically issued the month following your last completed exam, once you have taken all the specialties you applied for.

Examination Retakes

If a candidate does not pass the examination, he or she may apply to retake the examination following a 30-day waiting period from his or her last testing attempt. Candidates must complete a Retake Application and pay applicable fees. Your retake application is accessed from your initial application, by logging into the online account and selecting "Retake." You do not need to re-establish eligibility or begin a new application. The application may be accessed at <https://assessments.meazurelearning.com/WOCNCB/public/Welcome.aspx?AppSystemID=4>. If a candidate has not successfully completed the examination after three attempts, the candidate will be required to submit a new application and supporting documentation following a six-month waiting period, during which additional study and training are recommended.

Preparation for the Examination

Demo Test

Meazure Learning offers a free online tutorial and demo test to familiarize candidates with the computer-based testing environment. The online demo and tutorial are accessible at any time through any computer with Internet access. Candidates may access the tutorial and demo on Meazure Learning's web site www.meazurelearning.com.

Practice Test

The WOCNCB's Self Assessment Exam (SAE), which simulates the actual testing experience, is available on Meazure Learning's web site linked from <http://www.wocncb.org/certification/exam-preparation/practice-exam-sae>. The SAE includes multiple-choice questions that reflect the content areas, level of difficulty and format of the actual certification examination. The SAE is accessible at any time through any computer with Internet access. There is a nominal fee for the practice test, which must be paid by credit card (MasterCard or Visa) through secure e-commerce. Usage of the SAE's is intended as a resource and will not guarantee your passing the exam.

WOCNCB has many other resources found on the www.wocncb.org website, under "Certification / Exam Preparation".



Policies

Confidentiality

Information about candidates and their examination results are considered confidential. Studies and reports concerning candidates will contain no information identifiable with any candidate, unless authorized by the candidate.

Privacy Policy

The Wound, Ostomy, and Continence Nursing Certification Board (WOCNCB) has created this privacy statement ("Policy") in order to demonstrate its firm commitment to the privacy and the confidentiality of its certificants. It explains how we collect, use, and share the information you provide to us or we gather from you.

Collecting Personal Information

Certification records shall be retained by the WOCNCB via electronic database. Records are password protected by many layers on the computer network: Windows sign-in id and password, database sign-in id and password, as well as firewall and virus protections on the network. These passwords are further protected by requiring periodic changes by the user.

WOCNCB contracts with a professional testing company to process exam applications, create and administer exams, and maintain data on candidate certification status. WOCNCB will maintain records of all passing candidates to reflect their certification data (e.g. contact information, demographics, credential type(s), certification issue dates and expiration dates, certification ID number, candidate testing ID number).

WOCNCB certification data is downloaded from the testing company on a monthly basis via a secured server operating system and then transferred into the secured database. The database has a pre-determined outline of the data fields, so that data is placed in the appropriate field.

Example of a database record:

Jane Doe, RN BSN CWOCN

350 Main Street

Anytown, WI 53000

E-mail: jane.doe@gmail.net

Phone: (414) 123-4567

Certified Wound, Ostomy, Continence Nurse (CWOCN)

Earned: 7/15/2005 valid through September 30, 2010

Certification Number: 2005000000

Updates are made to mailing address, email address, credentials, and certification and recertification dates on a monthly basis when the data is transferred into WOCNCB's secured database. Old information is stored in each activity record for historical purposes showing date changed and previous data. If a certificant contacts WOCNCB by mail, email, fax, or phone, staff may access the database to make immediate updates.

Candidates' personal information shall be protected by all parties involved. At the conclusion of the review of any documents containing personal identifying information, the materials will be permanently destroyed (i.e. shredded or deleted). WOCNCB staff, reviewers, committee and Board members must further sign and adhere to the confidentiality policies stated in the WOCNCB Policy Manual.

Verification of certification credentials and expiration dates is available online to the public at www.WOCNCB.org with all other information being held private (such as contact and demographic information). Each certificant gives permission to allow the public viewing of their records via signature on the exam application.

Our website uses forms for customers to order products and make donations. We collect user's contact information (e.g. name, mailing address, and email address) and financial information (e.g. credit card numbers). Financial information is used to bill the user for products/donations. Contact information is used to send orders and contact the user regarding any problems with the order. Individuals who are not WOCNCB certificants will not receive promotional emails from WOCNCB.

Credit card information obtained for purposes of application processing, ordering products, or making donations is not stored with the certificant record. WOCNCB staff retain this information separately for internal processing only. WOCNCB is compliant with the Payment Card Industry Data Security Standard (PCI-DSS) and does not store the entire credit card number for any period of time. The following information shows in plain (unencrypted) format (which is PCI-DSS compliant):

- The card type (AMEX, MC, VISA)
- The last four digits of the card number
- The expiration date

The rest of the credit card number, as well as the credit card validation code, are never stored in any form.

Use of Personal Information

The specific responsibilities of the WOCNCB and staff are listed below.

WOCNCB

The WOCNCB has access to your contact information as a part of its oversight responsibilities. These duties include:

- Oversight of activities of the WOCNCB staff
- Communicating with certificants and committees on issues and coming events
- Reporting on WOCNCB activities, goals and achievements
- Developing strategic and tactical direction for the WOCNCB

As part of its reporting, WOCNCB aggregates and de-identifies certain information about our certificants, for example, to calculate the number of applications submitted or the number of active certifications during a specific time period.

WOCNCB Staff

The WOCNCB's staff uses this information to maintain records on certificant status, and to provide all current certificants with standard Board communications. These include:

- WOCNCB e-mail notices (i.e., e-Newsletters, updates)
- WOCNCB recertification notices and information
- WOCNCB elections ballot notices
- Online web site access support

Certificants may unsubscribe from these emails by emailing info@wocncb.org. WOCNCB does not share or sell its mailing or email lists of certificants.

Web Site Access

Certificant-only use of the WOCNCB website, if applicable, will be accessed with an email address and a password created by the certificant. WOCNCB staff do not have access to that password.

Security

This website has security measures in place to protect against the loss, misuse and alteration of the information under our control. The site is audited on a periodic basis to attempt to keep it up to date with security best practices, and protective measures are implemented on the site hosts. Certificant information is not stored on the web server.

Corrections & Updates

Individuals may contact us at any time to:

- Request access to information that we have about you.
- Correct any information that we have about you.
- Delete information we have about you.

These requests may be sent:

1. via email to: info@wocncb.org
2. via mail to:
WOCNCB
555 E. Wells Street, Suite 1100
Milwaukee, WI 53202
3. via fax to: 414-276-2146
4. via phone: 888-496-2622 or 414-289-8721

Changes to this Policy

The WOCNCB may amend this Policy from time to time. If we make any substantial changes to the way we use certificants' Personal Information we will notify them by e-mail and a prominent notification on our website.

Enforcement

If you have any questions about this privacy statement, the practices of this website, or your dealings with it, or have a concern that these privacy provisions are being violated in some way, please contact the WOCNCB.

Lapsed Credentials

Refer to Eligibility Requirements on page 10 for those with lapsed credentials.

Refunds

A written explanation of extenuating circumstances must be submitted for refund consideration by the WOCNCB®. All refund requests must be submitted to the WOCNCB® office via email at info@WOCNCB.org.

The following rules apply:

eligible Refund Requests for consideration (Must be in Writing)

- Applicants who do not meet eligibility requirements
- Applications not completed within 90 days of submission
- Applicants who do not schedule an examination within the designated eligibility period
- Applicants withdrawing from an examination

If a refund is granted, the refund amount will be the original fee paid.

If a refund is granted, a complete application, examination fee and documentation of eligibility are required to reapply for examination.

ineligible Refund Requests

- Applicants who are more than 15 minutes late to the scheduled examination
- Applicants who fail to appear for an examination on the scheduled date and did not cancel or reschedule at least 5 days in advance
- Applicants who fail to have proper identification at the examination site
- Applicants who violate examination rules and are dismissed from the Examination Center by the proctor

Credential Extensions

Applicants currently certified by the WOCNCB® may request an extension of their credentials for the following reasons only.

The following rules apply:

- Must request the extension prior to expiration of current certification
- Must be seriously ill (or member of immediate family seriously ill), suffer from personal illness or injury, experience unavoidable natural disaster, or be in active military duty outside the United States. Documentation may be requested
- Must request the extension in writing to the WOCNCB® office submitting an online request, found on our website, at: <http://www.wocncb.org/recertification/credential-extension-policy>
- It is recommended you submit requests at least 2 weeks prior to credentials expiration to allow time for an approval.

Once the extension request is received, it will be reviewed by the Credentialing and Review Committee and if necessary, a vote will take place to determine if the applicant's credentials will be approved for extension.

If the extension is granted, it is for a **maximum of six months** only. No more than one extension request will be granted per candidate per five years. You may fill out the online application on the www.wocncb.org website, on the "Recertification / Credential Extension Policy" page.

Revocation of Certification

The WOCNCB® will revoke certification for any reason deemed appropriate including, but not limited to, the following:

- Falsification of the certification application or application materials.
- Falsification of any information requested by the WOCNCB®.
- Knowingly assisting another person or persons in obtaining or attempting to obtain certification or recertification by fraud.
- Misrepresentation of certification status.
- Illegal use of the certification certificate or falsification of credentials. This would include any lapse in professional license during the five-year period and any appearance of revocation, including those due to any misdemeanor or felony charges.
- Cheating (or reasonable evidence of intent to cheat) on the examination.
- Unauthorized possession or distribution of official WOCNCB® testing or examination materials.

The WOCNCB® provides an appeal mechanism for challenging revocation of certification. It is the responsibility of the former certificant to initiate this process. The complete process may be found on the WOCNCB® website at www.WOCNCB.org by searching "Credentialing Review and Appeals." Written appeals should be forwarded to the WOCNCB® at the address listed on the website.

Appeals Policy and Procedure

An appeal policy and procedure is available to any Applicant or Certificant who has applied for WOCNCB® certification/recertification and wishes to contest any adverse decision affecting the individual's certification/recertification status or eligibility. Any individual who does not file a request for an appeal within the required time limit shall waive the right to appeal.

1. Review of Eligibility Decisions. In the event of a determination that an individual has been denied certification or recertification, based on a failure to satisfy application or eligibility requirements, pay fees required by WOCNCB®, a change in certification status, or failure of the examination, the individual shall have thirty (30) days to file a written request for review.
2. Appeals process. The individual may file a written appeal request to the WOCNCB® office within thirty (30) days of the date of their receipt of the determination in the above instances. Once the request is received, it will be reviewed by the Credentialing and Review and Appeals Committee whereby, a vote will take place to determine if the eligibility decision will be upheld or reversed. If the eligibility decision is reversed, the Credentialing and Review and Appeals Committee will determine the terms and issue a decision in writing, on the request.

Copyrighted Exam Questions

All examination questions are the copyrighted property of the WOCNCB®. 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, without written permission. Doing so will subject you to severe civil and criminal penalties.



Wound, Ostomy, or Continence Examinations

Codes For WOC(ET) Nursing Education Programs

Below is a listing of the WOC(ET) Nursing Education Programs currently accredited by WOCN® Society. If you are applying through the Traditional Pathway, you must specify on your application the appropriate code for the WOCN® accredited school from which you graduated.

Education Program	Code
Cleveland Clinic WOC(ET) Education – Cleveland, OH Distance Learning	319
Emory University – Atlanta, GA Distance Learning	321
International Wound, Ostomy, Continence Nursing Education Program (WOCNEP) - Ho Chi Minh City, Vietnam	401
La Salle University Wound, Ostomy, and Continence Nursing Education Program	222
Rutgers University, Camden, NJ Traditional	157
The Valley Foundation School of Nursing, Wound and Ostomy Education Program, San Jose State University	172
WCET Accredited International Program	200
WEB WOC Nursing Education Program Distance Learning	324
Winona State University Wound, Ostomy, and Continence Nursing Education Program	360
Discontinued Programs	199

If you have graduated from a recently accredited school, please call the WOCNCB® for the code.

WOC Examination Content

To begin your preparation in an informed and organized manner, each candidate should know what to expect from the actual examination in terms of the content. Information regarding the content of the examination is presented in this Examination Handbook. The content outline will give you a general impression of the examination, and with closer inspection, can give specific study direction by revealing the relative importance given to each category on the examination.

The content for the examination is directly linked to a job analysis, a research study that involved sending surveys to practicing wound, ostomy, and continence nurses. An advisory committee of subject matter experts appointed by WOCNCB® reviewed a summary of the responses of hundreds of nurses. The committee determined the content of the examination by evaluating the practice activities judged by the respondents to be a part of practice and significant enough to warrant inclusion in the examination. The Content Outline indicates the content categories relevant to each of the performance areas and the number of questions for each category. Complexity levels for questions are also assigned as recall, application and analysis:

Recall: The ability to recall or recognize specific information is required.

Application: The ability to comprehend, relate or apply knowledge to new or changing situations is required.

Analysis: The ability to analyze and synthesize information, determine solutions or to evaluate the usefulness of a solution is required. The entire examination consists of approximately 25 percent *recall* questions, 61 percent *application* questions and 14 percent *analysis* questions.

Disclaimer: WOCNCB® embraces the latest evidence based practices in our specialty areas, incorporating such evidence into our testing. Exams are updated on a regular schedule. Exam development is a lengthy process, which ensures a quality product and adherence to best practices in testing. Candidates should be aware it is possible to see prior content while tests are updated.

Exam content purpose: The CWCN/COCN/CCCN certification examinations aim to ensure specialized competence and professionalism for nurses who provide wound (ostomy, continence) care assessment, intervention, and education in all settings across the healthcare continuum. The purpose of the credentialing exam is to establish and measure the level of knowledge required for certification. This exam outline summarizes the list of performance domains, tasks, knowledge, and skills needed for assessing specialized competence. The content outline contains categories relevant to each of the performance areas and specifies the number of questions for each category. Complexity levels for questions are also assigned as recall, application and analysis.

CWCN Detailed Content Outline

	<i>Classification</i>	<i>Test Specifications (Items)</i>
Domain I: ASSESSMENT AND CARE PLANNING (35.5% of exam; 39 items)	010000	39
Task 1: Obtain patient health history through interviews, established medical records, and questionnaires to determine the patient's current health and risk status. (9.1%; 10 items)	010100	10
Knowledge of:		
a. Interview processes	010101	
b. Psychosocial factors affecting care (e.g., patient and caregiver ability to learn and perform care, economic implications, education, mental status)	010102	
c. Factors affecting wound healing (e.g., nutrition, comorbidities, medications, age, pain)	010103	
d. Etiologic and causative factors (e.g., circulation, pressure, sensation, moisture, trauma, medical devices, immobility, nutrition)	010104	
e. Basic diagnostic test results (e.g., lab values, imaging studies, vascular studies)	010105	
Skill in:		
f. Identifying and supporting patient and caregiver goals (e.g., preventive, palliative, maintenance, curative)	010106	
g. Evaluating pain by using verbal and nonverbal tools	010107	
h. Utilizing risk assessment tools (e.g., Braden Scale, Braden Q Scale, Norton Plus Scale)	010108	
Task 2: Perform focused assessments to determine current skin and wound status. (10.0%; 11 items)	010200	11
Knowledge of:		
a. Wound characteristics (e.g., tissue type, dimensions, location, exudate, odor, stage, wound edges, color)	010201	
b. Periwound characteristics (e.g., induration, warmth, fluctuance, denudation, maceration, cellulitis)	010202	
c. Phases of wound healing (e.g., hemostasis, inflammation, proliferation, maturation)	010203	
d. Adjunctive modalities for wound cleansing and treatment (e.g., hydrotherapy, biologic therapy, negative-pressure wound therapy, hyperbaric oxygen therapy, ultrasound)	010204	
e. Skin and wound classification systems (e.g., pressure injury stages, medical adhesive-related skin injury [MARS], moisture-associated skin damage [MASD], skin tears)	010205	
f. Wound etiology (e.g., pressure, friction, trauma, surgery, autoimmune disease, malignancy, thermal injury, infection)	010206	
g. Lower extremity assessment (e.g., arterial insufficiency, vasculitis, mixed disease, venous insufficiency, lymphatic disease, neuropathy)	010207	
h. Wound cultures (e.g., aspirate, Levine, punch biopsy)	010208	
i. Dermatological etiology (e.g., contact dermatitis, fungal infection, herpetic lesions)	010209	
Skill in:		
j. Identifying need for diagnostic studies (e.g., biopsy, blood values, imaging, vascular, toe-brachial index [TBI], ankle-brachial index [ABI], duplex scanning)	010210	

Task 3: Develop a patient-centered plan of care by using health history and assessments to establish skin and wound management goals. (8.2%; 9 items)	010300	9
Knowledge of:		
a. Principles of patient-centered care (e.g., psychosocial issues, access to care, cultural beliefs)	010301	
Skill in:		
b. Evaluating the effectiveness of the current treatment plan	010302	
c. Setting patient-focused goals (e.g., preventive, palliative, maintenance, curative)	010303	
d. Interpreting physical assessment results	010304	
Task 4: Evaluate the patient-centered plan of care by using periodic assessments to promote optimal skin and wound management. (8.2%; 9 items)	010400	9
Knowledge of:		
a. Characteristics of healing wounds (e.g., granulation, decreased dimensions, resurfacing)	010401	
b. Characteristics of non-healing wounds (e.g., infection, biofilm, closed edge)	010402	
Skill in:		
c. Interpreting patient responses to interventions	010403	
d. Modifying interventions based on revised patient needs and goals	010404	
Domain II: INTERVENTION AND TREATMENT (40.0% of exam; 44 items)	020000	44
Task 1: Implement prevention measures to promote optimal skin health and prevent injury. (13.6%; 15 items)	020100	15
Knowledge of:		
a. Preventive measures based on risk assessment (e.g., moisture management, pressure redistribution, offloading, friction and shear management, nutrition)	020101	
b. Risk assessment tools (e.g., Braden Scale, Braden Q Scale, Norton Plus Scale)	020102	
Skill in:		
c. Utilizing appropriate skin care products	020103	
d. Selecting support surfaces	020104	
Task 2: Recommend and/or provide appropriate interventions to promote optimal wound management. (14.5%; 16 items)	020200	16
Knowledge of:		
a. Wound bed preparation (e.g., debridement, infection management, moisture management, wound edge optimization)	020201	
b. Principles of wound care (e.g., filling of dead space, moisture balance, periwound skin protection)	020202	
c. Indications and contraindications for compression therapy	020203	
d. Topical therapies (e.g., absorbent dressing, antimicrobials, hydrating dressing)	020204	
e. Factors affecting wound healing (e.g., nutrition, comorbidities, medications, age, pain)	020205	
Skill in:		
f. Implementing interventions to manage wounds (e.g., adjunctive modalities, offloading, protective footwear, callus reduction, total contact casting, hyperbaric oxygen therapy, chemical cauterization)	020206	
g. Applying compression therapy (e.g., dynamic and static compression therapy)	020207	
h. Selecting and applying topical therapies	020208	
Task 3: Recommend and/or perform debridement to promote wound healing. (11.8%; 13 items)	020300	13
Knowledge of:		
a. Types of debridement (e.g., biologic, autolytic, chemical, mechanical, surgical, conservative sharp, excisional)	020301	
b. Indications and contraindications for debridement	020302	
Skill in:		
c. Selecting appropriate debridement modalities	020303	

Domain III: EDUCATION AND REFERRAL (24.5% of exam; 27 items)	030000	27
Task 1: Instruct patients and caregivers by using the individualized skin and wound care plan to prevent complications, maintain optimal skin and wound health, and encourage patient autonomy. (8.2%; 9 items)	030100	9
Knowledge of:		
a. Health literacy	030101	
b. Patient and caregiver goals	030102	
c. Factors supporting wound management (e.g., infection control, lifestyle changes, treatment goals, skin care, nutrition, moisture management, repositioning, tobacco cessation, glycemic control, trauma avoidance)	030103	
d. Transitions of care	030104	
Skill in:		
e. Educating the patient and caregivers on wound care procedures and preventive skin care strategies	030105	
f. Developing plans of care	030106	
Task 2: Instruct other health care clinicians and providers on skin and wound care principles and techniques to promote optimal management and prevent complications. (8.2%; 9 items)	030200	9
Knowledge of:		
a. Factors impeding wound healing (e.g., infection, nonadherence to care plans, edema, malnutrition, excess moisture, immobility, tobacco use, poor glucose control, repetitive trauma, pressure from medical devices)	030201	
b. Patient and caregiver goals	030202	
c. Transitions of care	030203	
Skill in:		
d. Educating health care clinicians and providers on wound care principles, procedures, and preventive skin care strategies	030204	
e. Developing plans of care	030205	
Task 3: Collaborate with other health care professionals and make referrals to support patient-centered care. (8.2%; 9 items)	030300	9
Knowledge of:		
a. Plans of care	030301	
b. Available resources (e.g., support and advocacy, supply access, post-acute care)	030302	
Skill in:		
c. Recommending referrals for other services (e.g., rehabilitation services, nutritionist, diabetic education, podiatry, surgical services, case managers, dermatologist)	030303	

COCN Detailed Content Outline

	Classification	Test Specifications (Items)
Domain I: ASSESSMENT AND CARE PLANNING (32.7% of exam; 36 items)	010000	36
Task 1: Obtain patient health history through interviews, established medical records, and questionnaires to determine the patient's current health and risk status. (6.4%; 7 items)	010100	7
Knowledge of:		
a. Informed consent	010101	
b. Interview processes	010102	
c. Psychosocial factors affecting care (e.g., patient and caregiver ability to learn and perform care, economic implications, education, coping skills)	010103	
d. Surgical procedures (e.g., ileal pouch-anal anastomosis [IPAA], continent reservoir, low anterior resection [LAR], total proctocolectomy, abdominal perineal resection [APR])	010104	
e. Surgical indications (e.g., cancer, inflammatory bowel disease [IBD], necrotizing enterocolitis, trauma, perforation, ischemia)	010105	
f. Specialty population considerations (e.g., neonatal, obstetric, pediatric, bariatric, differently abled)	010106	
Skill in:		
g. Identifying and supporting patient and caregiver goals	010107	
h. Evaluating ability to provide self-care (e.g., manual dexterity, vision, cognition)	010108	
i. Marking and selecting stoma sites (e.g., abdominal contours, clothing choices, pouching options, lifestyle, surgical procedures)	010109	
Task 2: Perform focused assessments to determine current status of ostomies, fistulae, or percutaneous tubes. (7.3%; 8 items)	010200	8
Knowledge of:		
a. Fecal diversion (e.g., colostomy, ileostomy, continent pouch)	010201	
b. Urinary diversion (e.g., urostomy, continent pouch, orthotopic neobladder)	010202	
c. Stomal complications (e.g., prolapse, retraction, necrosis, hernia)	010203	
d. Peristomal complications (e.g., mucocutaneous separation, dermatitis, pyoderma gangrenosum)	010204	
e. Surgical complications (e.g., dehiscence, infection, ileus)	010205	
f. Percutaneous tubes (e.g., nephrostomy, gastrostomy, surgical drain)	010206	
g. Fistulae (e.g., enterocutaneous, colcutaneous, vesicocutaneous)	010207	
Task 3: Develop a patient-centered plan of care by using health history and assessments to establish goals for the management of ostomies, fistulae, or percutaneous tubes. (6.4%; 7 items)	010300	7
Knowledge of:		
a. Principles of patient-centered care (e.g., psychosocial issues, access to care and supplies, cultural beliefs)	010301	
Skill in:		
b. Evaluating the effectiveness of the current treatment plan	010302	
c. Setting patient-focused goals	010303	

Task 4: Evaluate the patient-centered plan of care by using periodic assessments to promote optimal ostomy, fistula, or percutaneous tube management. (7.3%; 8 items)	010400	8
Knowledge of:		
a. Containment modalities (e.g., pouches, absorptive dressings)	010401	
b. Skin health and protection (e.g., crusting, skin barrier)	010402	
c. Fluid and electrolyte balance	010403	
d. Medication management	010404	
e. Dietary management	010405	
Skill in:		
f. Interpreting patient responses to interventions	010406	
g. Modifying interventions based on revised patient needs and goals	010407	
h. Interpreting lab values	010408	
i. Utilizing securement techniques	010409	
Task 5: Assess health-related quality of life of patients with ostomies, fistulae, or percutaneous tubes. (5.5%; 6 items)	010500	6
Knowledge of:		
a. Coping mechanisms	010501	
b. Changes in body image	010502	
c. Intimacy issues	010503	
d. Available health care resources (e.g., support and advocacy, supply access, post-acute care)	010504	
Skill in:		
e. Engaging in active listening	010505	
f. Assessing verbal and nonverbal cues	010506	
Domain II: INTERVENTION AND TREATMENT (40.0% of exam; 44 items)	020000	44
Task 1: Recommend and provide interventions to promote optimal management of ostomies. (16.4%; 18 items)	020100	18
Knowledge of:		
a. Colostomy management (e.g., irrigation, closed-end pouches, odor)	020101	
b. Ileostomy management (e.g., fluid and electrolyte management, food blockage, medications)	020102	
c. Urostomy management (e.g., mucus, stents, bedside drainage)	020103	
d. Continent diversion management (e.g., intermittent catheterization, irrigation)	020104	
e. Effluent quality, type, frequency, and volume	020105	
f. Complication management (e.g., crusting, cauterization, accessories, convexity)	020106	
g. Stoma types (e.g., end, loop, temporary, permanent)	020107	
h. Bridging systems (e.g., rod, loop)	020108	
Skill in:		
i. Selecting pouching systems and accessories (e.g., evaluation of body contours, stoma construction, patient preference)	020109	
j. Applying pouching systems and accessories	020110	
k. Collecting urine specimens from ileal conduits	020111	
l. Managing stomal and peristomal complications (e.g., crusting, cauterization, accessories, convexity)	020112	

Task 2: Recommend and provide interventions to promote optimal management of fistulae. (13.6%; 15 items)	020200	15
Knowledge of:		
a. Fistulae management	020201	
b. Etiologic factors (e.g., surgery, infection, obstruction, Crohn's disease)	020202	
c. Medications	020203	
d. Nutrition	020204	
Skill in:		
e. Monitoring fluid and electrolyte balance	020205	
f. Applying containment devices (e.g., pouches, absorptive dressings)	020206	
g. Protecting peristomal skin (e.g., crusting, skin barrier)	020207	
Task 3: Recommend and provide interventions to promote optimal management of percutaneous tubes or drains. (10.0%; 11 items)	020300	11
Knowledge of:		
a. Percutaneous tube management	020301	
b. Securement techniques	020302	
Skill in:		
c. Managing complications (e.g., dislodgement, hypertrophic tissue, blockage, leakage)	020303	
Domain III: EDUCATION AND REFERRAL (27.3% of exam; 30 items)	030000	30
Task 1: Instruct patients and caregivers on management techniques to prevent complications and encourage patient autonomy. (10.9%; 12 items)	030100	12
Knowledge of:		
a. Preoperative education (e.g., surgical procedures, lifestyle changes, stoma management, stoma site marking)	030101	
b. Postoperative education (e.g., pouching, activity, intimacy, nutrition, peristomal skin health)	030102	
c. Health literacy	030103	
d. Patient and caregiver goals (e.g., self-care, reliable pouch wear time, activity)	030104	
e. Transitions of care	030105	
f. Supply and information resources	030106	
g. Specialty population considerations (e.g., neonatal, obstetric, pediatric, bariatric, differently abled)	030107	
Skill in:		
h. Educating the patient and caregivers on ostomy, fistula, and tube management	030108	
i. Developing plans of care	030109	
Task 2: Instruct other health care clinicians and providers on care principles and techniques to promote optimal management and prevent complications. (9.1%; 10 items)	030200	10
Knowledge of:		
a. Factors affecting optimal ostomy management (e.g., high output, ineffective pouching, peristomal skin injury)	030201	
b. Patient and caregiver goals (e.g., self-care, reliable pouch wear time, activity)	030202	
c. Transitions of care	030203	
Skill in:		
d. Educating health care clinicians and providers on ostomy, fistula, and tube management principles and procedures (e.g., fluid and electrolyte management, medications, nutrition)	030204	
e. Developing plans of care (e.g., supplies, pouching)	030205	

Task 3: Collaborate with other health care professionals and make referrals to support patient-centered care. (7.3%; 8 items)	030300	8
Knowledge of:		
a. Plans of care	030301	
b. Available health care resources (e.g., support and advocacy, supply access, post-acute care)	030302	
Skill in:		
c. Recommending referrals for other services (e.g., rehabilitation services, nutritionist, social services, mental health professional)	030303	

CCCN Detailed Content Outline

	<i>Classification</i>	<i>Test Specifications</i>
Domain I: ASSESSMENT AND CARE PLANNING (35.5% of exam; 39 items)	010000	39
Task 1: Obtain patient health history through interviews, established medical records, and questionnaires to determine the patient's current health and risk status. (7.3%; 8 items)	010100	8
Knowledge of:		
a. Normal micturition and defecation	010101	
b. Interview processes	010102	
c. Urinary incontinence (e.g., stress, urge, reversible, mixed, reflex, functional)	010103	
d. Causes of voiding dysfunction (e.g., medication, pelvic floor changes, hydration status, intake of irritants, infection)	010104	
e. Causes of bowel dysfunction (e.g., motility disorders, trauma, malignancy)	010105	
f. Psychosocial factors affecting care (e.g., patient and caregiver ability to learn and perform care, economic implications, education, coping skills)	010106	
g. Reversible causes of incontinence (e.g., delirium, infection, stool impaction)	010107	
h. Pediatric voiding and bowel dysfunction (e.g., enuresis, encopresis, congenital anomalies)	010108	
Skill in:		
i. Identifying and supporting patient and caregiver goals	010109	
j. Evaluating ability to provide self-care (e.g., manual dexterity, cognition, mobility, environmental factors)	010110	
Task 2: Perform focused assessments to determine continence status. (7.3%; 8 items)	010200	8
Knowledge of:		
a. Urinary incontinence (e.g., stress, urge, reversible, mixed, reflex, functional)	010201	
b. Bowel dysfunction (e.g., constipation, diarrhea, fecal impaction and incontinence, motility disorders)	010202	
c. Etiologies and contributing factors (e.g., diet, fluid intake, obstruction, functional impairment, neurological factors, retention)	010203	
d. Moisture-associated skin damage (MASD) (e.g., incontinence-associated dermatitis [IAD], intertriginous dermatitis [ITD])	010204	
Skill in:		
e. Interpreting voiding/bowel diaries	010205	
f. Interpreting diagnostic test results (e.g., urodynamics, postvoid residual, anorectal manometry and defecography)	010206	
g. Conducting physical assessments (e.g., digital exam, sensory awareness, pelvic exam)	010207	
h. Identifying continence complications (e.g., fungal skin infection, MASD, urinary tract infection)	010208	
Task 3: Develop a patient-centered plan of care by using health history and assessments to establish goals for the management of voiding and bowel dysfunction. (6.4%; 7 items)	010300	7
Knowledge of:		
a. Principles of patient-centered care (e.g., psychosocial issues, access to care and supplies, cultural beliefs)	010301	
b. Management techniques (e.g., continence devices, fluid management, digital stimulation, biofeedback, medication)	010302	
Skill in:		
c. Evaluating the effectiveness of the current treatment plan	010303	
d. Setting patient-focused goals	010304	

Task 4: Evaluate the patient-centered plan of care by using periodic assessments to promote continence and prevention of complications. (8.2%; 9 items)	010400	9
Knowledge of:		
a. Containment modalities (e.g., absorbent pads, fecal diversion systems, urethral inserts)	010401	
b. Skin health and protection (e.g., skin barriers, cleansers)	010402	
c. Medication management	010403	
d. Dietary management (e.g., foods that affect motility, absorption, and bulking)	010404	
e. Catheter management (e.g., external, indwelling, straight)	010405	
Skill in:		
f. Interpreting patient responses to interventions	010406	
g. Modifying interventions based on revised patient needs and goals	010407	
h. Interpreting lab values and diagnostic test results	010408	
Task 5: Assess health-related quality of life of patients with continence issues. (6.4%; 7 items)	010500	7
Knowledge of:		
a. Coping mechanisms	010501	
b. Changes in body image	010502	
c. Intimacy issues	010503	
d. Available health care resources (e.g., support and advocacy, supply access, post-acute care)	010504	
Skill in:		
e. Engaging in active listening	010505	
f. Assessing verbal and nonverbal cues	010506	
Domain II: INTERVENTION AND TREATMENT (37.3% of exam; 41 items)	020000	41
Task 1: Recommend and provide interventions to manage voiding dysfunction and urinary incontinence. (19.1%; 21 items)	020100	21
Knowledge of:		
a. Urinary incontinence (e.g., stress, urge, reversible, mixed, reflex, functional)	020101	
b. Causative factors (e.g., urethral hypermobility, obstruction, bladder irritants, infection)	020102	
c. Device management (e.g., catheters, pessary)	020103	
d. Containment strategies (e.g., absorptive products)	020104	
e. Behavioral strategies (e.g., biofeedback, bladder training, pelvic floor muscle exercise)	020105	
f. Medications	020106	
g. Surgical interventions (e.g., bladder sling, diversion)	020107	
h. Skin care (e.g., cleansers, skin barriers)	020108	
Skill in:		
i. Teaching intermittent catheterization	020109	
j. Applying containment devices	020110	
k. Treating continence complications (e.g., fungal skin infection, MASD)	020111	

Task 2: Recommend and provide interventions to manage bowel dysfunction and fecal incontinence. (18.2%; 20 items)	020200	20
Knowledge of:		
a. Bowel dysfunction (e.g., constipation, diarrhea, fecal impaction and incontinence, motility disorders)	020201	
b. Causative factors (e.g., dietary fluid, obstruction, muscle damage, neurogenic factors)	020202	
c. Device management (e.g., indwelling fecal diversion system)	020203	
d. Containment strategies (e.g., absorptive products, rectal pouch)	020204	
e. Behavioral strategies (e.g., biofeedback, bowel training, pelvic floor muscle exercise)	020205	
f. Medications	020206	
g. Surgical interventions (e.g., sphincter repair, fecal diversion)	020207	
h. Skin care (e.g., cleansers, skin barriers)	020208	
i. Dietary management (e.g., foods that affect motility, absorption, bulking, and flatulence)	020209	
Skill in:		
j. Selecting interventions for dysfunction	020210	
k. Treating continence complications (e.g., fungal skin infection, MASD)	020211	
Domain III: EDUCATION AND REFERRAL (27.3% of exam; 30 items)	030000	30
Task 1: Instruct patients and caregivers on strategies that promote optimal management and prevent complications. (10.0%; 11 items)	030100	11
Knowledge of:		
a. Health literacy	030101	
b. Patient and caregiver goals (e.g., self-care, activity)	030102	
c. Supply and information resources	030103	
Skill in:		
d. Educating the patient and caregivers on voiding and fecal dysfunction management (e.g., emptying maneuvers, bowel and bladder training, skin care, diet modification, management techniques, tobacco cessation)	030104	
e. Developing plans of care	030105	
Task 2: Instruct other health care clinicians and providers on care principles and techniques to promote optimal management and prevent complications. (9.1%; 10 items)	030200	10
Knowledge of:		
a. Patient and caregiver goals (e.g., self-care, activity)	030201	
b. Supply and information resources	030202	
c. Reversible causes of incontinence (e.g., delirium, infection, stool impaction)	030203	
Skill in:		
d. Educating the patient and caregivers on voiding and fecal dysfunction management (e.g., emptying maneuvers, bowel and bladder training, skin care, diet modification, management techniques, tobacco cessation)	030204	
e. Developing plans of care	030205	
Task 3: Collaborate with other health care professionals and make referrals to support patient-centered care. (8.2%; 9 items)	030300	9
Knowledge of:		
a. Plans of care	030301	
b. Available resources (e.g., support and advocacy, supply access, post-acute care)	030302	
Skill in:		
c. Recommending referrals for other services (e.g., rehabilitation services, nutritionist, mental health professional, urology provider, gastrointestinal provider)	030303	

Sample Questions – Wound, Ostomy, and Continence Exams

These sample questions are representative of actual examination questions. Additional study questions are available in the WOCNCB® Self-Assessment Examinations (SAE) at www.WOCNCB.org/become-certified/test-preparation/self-assessment.php. The SAE provides self assessment (or practice) to measure your professional knowledge and prepare you for the actual credentialing examination. The web-based SAEs give you instantaneous scoring and results, along with feedback and references on your answers.

- The normal appearance of a wound on a patient with leukopenia 5 days following traumatic injury would most likely be
 - absence of inflammation.
 - hypertrophic scar formation.
 - intense erythema at the wound edges.
 - excessive granulation tissue in the wound bed.
- The most important intervention in the management of chronic venous insufficiency is
 - compression.
 - revascularization.
 - antibiotic therapy.
 - wound debridement.
- If a patient has full-thickness breakdown on both trochanters and partial-thickness breakdown on the sacrum, which of the following would be MOST appropriate for pressure relief?
 - water mattress
 - low air-loss bed
 - static air mattress
 - high density convoluted foam mattress
- What is the usual frequency of intubation 6 months following continent ileostomy surgery?
 - once daily
 - every 2 hours
 - 3 to 4 times in 24 hours
 - 8 to 10 times in 24 hours
- Which of the following is an appropriate behavioral objective for a patient with a new ileal conduit prior to discharge from the hospital?
 - empty pouch.
 - increase intake of orange juice.
 - change appliance without assistance.
 - rinse pouch once a week with vinegar and water.
- Which of the following patients requires immediate referral for further work-up?
 - a patient with stress incontinence, no residual volume, and no evidence of urinary tract infection
 - a patient with reflex incontinence, 50% residual volume, and symptoms of urinary tract infection
 - a patient with urge incontinence, low residual volumes, negative urinalysis, and frequency and urgency
 - a patient with constant incontinence related to vesicovaginal fistula
- The treatment of choice for reflex incontinence and bladder-sphincter dyssynergia is
 - bladder retraining.
 - indwelling catheter.
 - sympathomimetic drugs.
 - intermittent catheterization with anticholinergics.

ANSWER KEY

Question	Correct Answer	Complexity Level
1.	A	Application
2.	A	Recall
3.	B	Analysis
4.	C	Recall
5.	A	Recall
6.	B	Application
7.	D	Application

CFCN® Examination Content

To begin your preparation in an informed and organized manner, you should know what to expect from the actual examination in terms of the content. Information regarding the content of the examination is presented in this examination handbook. The Content Outline will give you a general impression of the examination, and with closer inspection, can give you specific study direction by revealing the relative importance given to each category on the examination.

The content for the examination is directly linked to a job analysis completed in 2019. The job analysis involved development of a survey, distribution of that survey to practitioners and an analysis of the responses. Test specifications for the Certified Foot Care Nurse were developed on the basis of these data.

The Content Outline indicates the content categories relevant to each of the performance areas and the number of questions for each category. Complexity levels for questions are also assigned as recall, application and analysis:

Recall: The ability to recall or recognize specific information is required.

Application: The ability to comprehend, relate or apply knowledge to new or changing situations is required.

Analysis: The ability to analyze and synthesize information, determine solutions or to evaluate the usefulness of a solution is required.

The entire examination consists of approximately 24 percent *recall* questions, 57 percent *application* questions and 19 percent *analysis* questions. Note: Only generic drug names will be used in the examination.

Disclaimer: WOCNCB embraces the latest evidence based practices in our specialty areas, incorporating such evidence into our testing. Exams are updated on a regular schedule. Exam development is a lengthy process, which ensures a quality product and adherence to best practices in testing. Candidates should be aware it is possible to see prior content while tests are updated.

Exam content purpose: The CFCN® certification examination aims to ensure specialized competence and professionalism for nurses who provide foot care assessment, intervention, and education in all settings across the healthcare continuum. The purpose of the credentialing exam is to establish and measure the level of knowledge required for certification. This exam outline summarizes the list of performance domains, tasks, knowledge, and skills needed for assessing specialized competence. The examination is directly linked to a job analysis, a research study that involved sending surveys to practicing foot care nurses. The content outline contains categories relevant to each of the performance areas and specifies the number of questions for each category. Complexity levels for questions are also assigned as recall, application and analysis.

CFCN Detailed Content Outline – Foot Care Exam

<i>Domain I: Assessment and Care Planning (32.5% of exam)</i>	<i>Classification 010000</i>	<i>Test Specifications # of Items 36</i>
Task 1: Obtain comprehensive patient health history (e.g., current medications, comorbidities, health habits) through interviews, established medical records, and questionnaires to determine the patient's risk factors and current health status (e.g., mental, psychosocial, socioeconomic, cultural). (8.5% of exam; 9 items)	010100	9
Knowledge of:		
a. Medications and alternative therapies (e.g., blood thinners, diabetes, steroids, autoimmune, neuropathic, homeopathy)	010101	
b. Comorbidities and conditions affecting the feet and lower extremities (e.g., vascular disease, neurological disease, diabetes, autoimmune disease, arthritis, trauma)	010102	
c. Factors affecting lower extremity health (e.g., smoking, diet, obesity, activity level, cognitive, socioeconomic, cultural)	010103	
d. Methods for mental health assessment	010104	
e. Functional disabilities (e.g., gait, mobility, balance, visual, cognitive)	010105	
Skill in:		
f. Collecting health history components	010106	
g. Evaluating health history components	010107	
Task 2: Perform focused lower extremity physical assessments (e.g., pain, integumentary, vascular, musculoskeletal, neurological) to determine current physical status. (9.1% of exam; 10 items)	010200	10
Knowledge of:		
a. Anatomy and physiology of the lower extremities	010201	
b. Methods of pain assessment	010202	
c. Types of pain (e.g., neuropathic, musculoskeletal, vascular)	010203	
d. Compromised skin integrity (e.g., fissures, ulcers, corns, calluses, dermatitis)	010204	
e. Vascular status (e.g., temperature, hair growth patterns, pulses, blanching, capillary refill, rubor, pallor, edema, altered pigment)	010205	
f. Musculoskeletal function of the foot (e.g., range of motion, deformities, strength)	010206	
g. Neurological status (e.g., sensory, motor, autonomic)	010207	
h. Charcot arthropathy	010208	
Skill in:		
i. Performing pain assessment	010209	
j. Differentiating pain types	010210	
k. Palpating pulses (i.e., dorsalis pedis, posterior tibialis, popliteal)	010211	
l. Using a Doppler	010212	
m. Performing ankle-brachial index (ABI)	010213	
n. Interpreting ankle-brachial index (ABI)	010214	
o. Performing monofilament, vibratory, and proprioception tests	010215	

Task 3: Develop an initial patient-centered plan of care using health history and physical assessment information to establish foot care goals. (7.6% of exam; 9 items)	010300	9
Knowledge of:		
a. Patient-centered care	010301	
b. History and physical assessment findings	010302	
c. Appropriate interventions (e.g., treatments, education, referrals)	010303	
Skill in:		
d. Reviewing complete health history and physical assessment	010304	
e. Setting appropriate goals based on identified patient needs	010305	
f. Planning interventions based on patient-centered needs and goals (e.g., cultural, socioeconomic, physical)	010306	
Task 4: Perform ongoing evaluation and modification of the patient-centered plan of care to optimize patient outcomes and promote care goals. (7.3% of exam; 8 items)	010400	8
Knowledge of:		
a. Patient-centered care	010401	
b. Anticipated responses to current interventions	010402	
c. Appropriate modifications based on responses to interventions	010403	
Skill in:		
d. Evaluating patient responses to interventions	010404	
e. Modifying goals based on patient response	010405	
f. Modifying interventions based on revised patient needs and goals	010406	
Domain II: Prevention, Intervention, and Treatment (41.7% of exam; 46 items)	Classification Code 020000	# of Items 46
Task 1: Perform preventative care on feet and lower extremities to promote foot health and reduce the risk of complications. (7.1% of exam; 8 items)	020100	8
Knowledge of:		
a. Integumentary system	020101	
b. Skin cleansing guidelines	020102	
c. Skin moisturizers (e.g., humectants, emollients)	020103	
Skill in:		
d. Selecting and applying appropriate skin care products (e.g., cleansers, moisturizers)	020104	
Task 2: Recommend treatment and provide care for dermatological conditions affecting the feet and lower extremities to promote optimal skin health and integrity. (7.9% of exam; 9 items)	020200	9
Knowledge of:		
a. Integumentary system	020201	
b. Signs and symptoms of skin impairments (e.g., blisters, hyperkeratotic lesions, stasis dermatitis, fissures, verucca vulgaris, trauma, tinea pedis, paronychia, maceration)	020202	
c. Skin cleansing guidelines	020203	
d. Skin moisturizers (e.g., humectants, urea, emollients, anti-itch)	020204	
e. Barrier products (e.g., dimethicone, petrolatum, zinc-based product)	020205	
f. Topical treatments (e.g., antiperspirant, antifungal)	020206	
Skill in:		
g. Managing skin impairments	020207	
h. Applying skin care products (e.g., cleansers, moisturizers, medications)	020208	

Task 3: Recommend treatment and provide care for wounds affecting the feet and lower extremities to promote optimal wound management. (9.2% of exam; 10 items)	020300	10
Knowledge of:		
a. Characteristics of wound types (e.g., vascular, neuropathic, traumatic, pressure injuries)	020301	
b. National Pressure Ulcer Advisory Panel (NPUAP) pressure injury staging system	020302	
c. Wagner grading system for diabetic foot ulcers	020303	
d. Appropriate topical treatment to maintain periwound integrity	020304	
e. Wound management (e.g., containment of drainage, eliminating dead space, reducing bioburden, controlling odor, debridement)	020305	
f. Compression therapy (indications and contraindications)	020306	
g. Advanced wound therapy (e.g., electrical stimulation, bioengineered tissue, negative pressure wound therapy, hyperbaric oxygen therapy)	020307	
Skill in:		
h. Selecting dressings and appropriate therapies for wounds	020308	
i. Applying dressings and appropriate therapies to wounds	020309	
Task 4: Perform nail care and debridement to reduce the risk of injury and promote comfort. (9.1% of exam; 10 items)	020400	10
Knowledge of:		
a. Nail anatomy	020401	
b. Onychopathology (e.g., onychomycosis, onychocryptosis, onychogryphosis, paronychia)	020402	
c. Personal protective equipment (PPE) guidelines	020403	
d. Appropriate nail care debridement tools and equipment	020404	
e. Nail debridement techniques	020405	
f. Instrument disinfectant and sterilization guidelines (e.g., cold sterilization, autoclave)	020406	
Skill in:		
g. Identifying free nail border	020407	
h. Selecting nail care debridement tools and equipment	020408	
i. Using nail care debridement tools and equipment	020409	
Task 5: Implement offloading interventions to prevent or manage injury (e.g., Charcot, ulceration, callus, trauma) and promote foot health. (8.3% of exam; 9 items)	020500	9
Knowledge of:		
a. Appropriate footwear and garments (e.g., shoes, socks, hosiery, inserts)	020501	
b. Offloading modalities to reduce friction and shear and redistribute pressure	020502	
c. Offloading products and devices (e.g., lamb's wool, moleskin, silicone, padding, inserts, shoes, boots, total contact casts)	020503	
d. Wear patterns (e.g., pressure mapping)	020504	
Skill in:		
e. Identifying areas of pressure, friction, and shear	020505	
f. Selecting offloading products and devices	020506	
g. Applying offloading products and devices	020507	

Domain III: Education and Referral (25.9% of exam; 28 items)	030000	28
Task 1: Instruct patients and caregivers on risk factors and foot care guidelines (e.g., hygiene, footwear, daily foot inspections) to prevent complications, maintain optimal lower extremity health, and facilitate patient autonomy. (12.9% of exam; 14 items)	030100	14
Knowledge of:		
a. Comorbidities and conditions affecting the feet and lower extremities (e.g., vascular disease, neurological disease, diabetes, autoimmune disease, arthritis, trauma)	030101	
b. Age-related processes affecting the feet and lower extremities	030102	
c. Health habits affecting the feet and lower extremities (e.g., activity level, exercise, diet, smoking)	030103	
d. Preventive skin care strategies	030104	
e. Appropriate health care-related educational resources (e.g., websites, printed materials)	030105	
Skill in:		
f. Assessing the health literacy of patients and caregivers (e.g., learning style, readiness to learn, barriers to learning, cultural diversity, current understanding)	030106	
g. Educating patients and caregivers regarding important foot and nail care guidelines (e.g., prevention, dermatological conditions, wound management, offloading, managing underlying comorbidities, continued follow-up)	030107	
Task 2: Collaborate with interdisciplinary health care professionals and make appropriate referrals to optimize patient outcomes and promote care goals. (13.0% of exam; 14 items)	030200	14
Knowledge of:		
a. Roles and responsibilities of specialized health care providers (e.g., vascular specialist, podiatrist, orthopedist, dermatologist, podiatrist, orthotist, pain management specialist, diabetes educator, wound specialist, dietitian)	030201	
Skill in:		
b. Communicating with members of the interdisciplinary team	030202	
c. Identifying and accessing programs for specific lower extremity disease processes	030203	
d. Referring patients to appropriate health care providers	030204	

Sample Questions – Foot Care Exam

These sample questions are representative of actual examination questions.

- A patient with heel spurs would MOST likely complain of
 - severe pain in the bottom of the foot.
 - itching on the heels.
 - swelling in the heels.
 - moderate pain throughout the foot.
- Assessment of a patient's toenails reveals brittle and massive thickening. These are MOST likely symptoms of
 - decreased circulation.
 - fungal infection.
 - dorsal nail plate trauma.
 - tinea pedis.
- Which of the following skin conditions can be prevented by community education in the proper use of communal washing facilities?
 - tinea pedis
 - skin maceration
 - scabies
 - plantar warts

ANSWER KEY

Question	Correct Answer	Complexity Level
1.	A	Recall
2.	B	Application
3.	A	Application

WTA-C Detailed Content Outline

Exam content purpose: The WTA-C certification examination aims to ensure specialized competence and professionalism for nurses who provide wound treatment care, intervention, and education in all settings across the healthcare continuum. The purpose of the credentialing exam is to establish and measure the level of knowledge required for certification. This exam outline summarizes the list of performance domains, tasks, knowledge, and skills needed for assessing specialized competence.

The examination is directly linked to a job analysis, a research study that involved sending surveys to practicing wound treatment nurses. The content outline contains categories relevant to each of the performance areas and specifies the number of questions for each category.

<i>Wound Treatment Associate – Certified (WTA–C) Detailed Content Outline</i>		
	<i>Exam Percentage</i>	<i>Number of Questions (110)</i>
Domain 1: Data Collection and Documentation	30.76%	34
Task 1: Identify wound and skin injury risk factors using medical records and patient/family interview to guide the development of the plan of care.	7.33%	8
Task 2: Collect objective skin-related and wound-related data to guide the development of the plan of care.	7.82%	9
Task 3: Document skin-related and wound-related data and interventions to contribute to the development or modification of the plan of care.	7.41%	8
Task 4: Perform ongoing evaluation of patient, skin, and wound using direct observation and other assessment tools in order to ensure an appropriate and effective plan of care.	8.20%	9
Domain 2: Skin and Wound Care	54.88%	60
Task 1: Implement preventive measures based on patient-specific information to promote optimal skin health.	8.10%	9
Task 2: Provide wound care for partial-thickness and full-thickness wounds (e.g., surgical wounds, traumatic skin tears, thermal wounds) by following evidence-based practice guidelines to improve patient outcomes.	8.33%	9
Task 3: Provide wound care for pressure-related injuries by following evidence-based practice guidelines to improve patient outcomes.	8.28%	9
Task 4: Provide wound care for lower extremity wounds (e.g., lower extremity arterial disease (LEAD), lower extremity venous disease (LEVD), lower extremity neuropathic disease (LEND)) by following evidence-based practice guidelines to improve patient outcomes.	7.77%	8
Task 5: Provide care for moisture-associated skin damage (MASD) (e.g., incontinence-associated dermatitis (IAD), intertriginous dermatitis (ITD)) by following evidence-based practice guidelines to improve patient outcomes.	7.93%	9
Task 6: Provide wound care for medical adhesive-related skin injury (MARS) by following evidence-based practice guidelines to improve patient outcomes.	7.24%	8
Task 7: Provide appropriate nonpharmaceutical and pharmaceutical pain management interventions to optimize patient comfort.	7.22%	8
Domain 3: WTA-C Professional Practice	14.37%	16
Task 1: Educate patients, caregivers, and other health care professionals on wound care principles in order to promote consistent delivery of care.	7.15%	8
Task 2: Collaborate with certified wound care nurse (CWCN)/licensed independent practitioner (LIP) when patient care needs exceed WTA-C scope of practice or established protocols.	7.22%	8

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Sample Questions - WTA-C

These sample questions are representative of actual examination questions. It is recommended you review the Exam Content Outline for subject matter contained on the examination. The examination is based upon this outline and each question will have a cited reference in current evidence-based publications as in the examples below.

1. An oxygen-dependent patient presents with an ulcer to the back of the ear that measures 0.5 cm x 0.2 cm x 0.1 cm with less than 20% slough noted in the wound bed. The remainder is viable tissue. How should this pressure injury be staged?
 - A. Mucosal pressure injury
 - B. Stage II pressure injury
 - C. Stage III pressure injury
 - D. Unstageable pressure injury

2. An ankle brachial index of 0.8 is indicative of which of the following?
 - A. Lower extremity arterial disease
 - B. A normal finding
 - C. Severe ischemia
 - D. An abnormally high reading

3. At which stage of the lifespan is skin approximately 13% of the total body weight?
 - A. Premature newborn
 - B. Term newborn
 - C. Adult
 - D. Elderly

ANSWER KEY

Question	Correct Answer
1.	C
2.	A
3.	A

Advanced Practice Examination Content

To begin your preparation in an informed and organized manner, each candidate should know what to expect from the actual examination in terms of the content. Information regarding the content of the examination is presented in this Examination Handbook. The content outline will give you a general impression of the examination, and with closer inspection, can give specific study direction by revealing the relative importance given to each category on the examination.

The content for the examination is directly linked to a job analysis, a research study that involved sending surveys to practicing wound, ostomy, and continence nurses. An advisory committee of subject matter experts appointed by WOCNCB® reviewed a summary of the responses of hundreds of nurses. The committee determined the content of the examination by evaluating the practice activities judged by the respondents to be a part of practice and significant enough to warrant inclusion in the examination. The Content Outline indicates the content categories relevant to each of the performance areas and the number of questions for each category. Complexity levels for questions are also assigned as recall, application and analysis:

Recall: The ability to recall or recognize specific information is required.

Application: The ability to comprehend, relate or apply knowledge to new or changing situations is required.

Analysis: The ability to analyze and synthesize information, determine solutions or to evaluate the usefulness of a solution is required.

Disclaimer: WOCNCB embraces the latest evidence based practices in our specialty areas, incorporating such evidence into our testing. Exams are updated on a regular schedule. Exam development is a lengthy process, which ensures a quality product and adherence to best practices in testing. Candidates should be aware it is possible to see prior content while tests are updated.

CWCN-AP Detailed Content Outline

Type	Description	Classification Code	Test Specifications	
Domain 1	Comprehensive Assessment	010000	% 19.73%	100 items 20
Task 1	Obtain a comprehensive patient health history through interviews, medical records, and questionnaires to determine the patient's current health and risk status.	010100	5.21%	5
Knowledge	Components of a health history interview (e.g., chief complaint, history of present illness, medications, allergies)	010101		
Knowledge	Holistic nursing perspective (i.e., family, social, personal, and developmental history)	010102		
Knowledge	Health literacy	010103		
Knowledge	Psychosocial factors affecting care (e.g., psychiatric diagnosis, cognition, cultural factors) on present chief complaint	010104		
Knowledge	Nutritional factors affecting wound healing	010105		
Knowledge	Review of systems	010106		
Knowledge	Appropriate diagnostic tests as it relates to disease processes (e.g., lab values, imaging studies, vascular studies)	010107		
Skill	Conducting a health history interview	010108		
Skill	Evaluating pain by using verbal and nonverbal skills	010109		
Skill	Interpreting effectiveness of systemic pain management and other pharmacologic agents	010110		
Skill	Performing risk assessments (e.g., Braden scale, Braden Q scale, Norton Plus scale)	010111		

Task 2	Perform a problem-focused physical examination.	010200	5.58%	6
Knowledge	Wound characteristics and related disease processes (e.g., periwound characteristics, phases of wound healing, tissue healing)	010201		
Knowledge	Barriers to wound progression/healing	010202		
Knowledge	Modalities for wound management (e.g., electrotherapy, biologic therapy, negative pressure wound therapy (NPWT), hyperbaric oxygen therapy (HBOT), ultrasound)	010203		
Knowledge	Skin and wound classification systems	010204		
Knowledge	Wound etiology	010205		
Knowledge	Lower extremity assessments (e.g., anklebrachial index, toe-brachial index)	010206		
Knowledge	Wound cultures	010207		
Knowledge	Dermatological etiology	010208		
Skill	Identifying wound characteristics	010209		
Skill	Determining pathology	010210		
Skill	Assessing for risk factors and indications of infection	010211		
Skill	Staging pressure injuries	010212		
Skill	Assessing lower extremity vascular and neurological status	010213		
Skill	Assessing for foot malformations (e.g., Charcot changes, hammer toes, and variations)	010214		
Task 3	Utilize pertinent diagnostics to identify etiology.	010300	4.89%	5
Knowledge	Vascular studies	010301		
Knowledge	Radiologic studies (e.g., x-ray, MRI, bone scan, ultrasound)	010302		
Knowledge	Laboratory studies	010303		
Knowledge	Culture and biopsy	010304		
Skill	Interpreting diagnostic results	010305		
Task 4	Establish goals for patient care.	010400	4.05%	4
Knowledge	Risk assessment and indicators for reassessment	010401		
Knowledge	Physical and psychosocial barriers to care	010402		
Skill	Conducting a risk assessment	010403		
Skill	Identifying patient/caregiver goals	010404		
Skill	Identifying barriers affecting care (e.g., cost, inability to access health care, inability to reach wound site, cognitive deficits)	010405		
Domain 2	Diagnosis	020000	20.18%	20
Task 1	Develop differential diagnoses based on symptomology and diagnostic data.	020100	9.86%	10
Knowledge	Disease characteristics and processes	020101		
Skill	Collecting diagnostic data (e.g., radiology, labs, vascular studies)	020102		
Skill	Analyzing diagnostic data	020103		
Skill	Initiating referrals or consultations	020104		
Skill	Developing differential diagnoses	020105		
Skill	Eliminating non-plausible diagnoses	020106		

Task 2	Synthesize a primary diagnosis based on a comprehensive assessment to address altered skin integrity.	020200	10.31%	10
Knowledge	Pressure injuries	020201		
Knowledge	Extremity ulcers (e.g., neuropathic, arterial, venous)	020202		
Knowledge	Lymphedema	020203		
Knowledge	Traumatic/mechanical injury wounds (e.g., medical adhesive-related skin injury (MARSII))	020204		
Knowledge	Thermal injuries (e.g., burns, radiation, frostbite, chemical trauma)	020205		
Knowledge	Atypical wounds (e.g., autoimmune, neoplastic)	020206		
Knowledge	Surgical wound complications	020207		
Knowledge	Allergic reactions	020208		
Knowledge	Skin infections (e.g., bacterial, fungal)	020209		
Skill	Choosing appropriate diagnostic testing	020210		
Skill	Formulating a primary diagnosis	020211		
Domain 3	Planning	030000	15.83%	16
Task 1	Develop a patient-centered plan of care using comprehensive health history and physical examination.	030100	4.71%	5
Knowledge	Diagnostic studies	030101		
Knowledge	Current treatment modalities	030102		
Knowledge	Referral sources	030103		
Skill	Interpreting results of diagnostic studies	030104		
Skill	Incorporating a multidisciplinary team approach	030105		
Skill	Executing timely referrals	030106		
Task 2	Evaluate patient/caregiver resources by assessing self-care skills and health care access to determine educational needs.	030200	3.35%	3
Knowledge	Health literacy	030201		
Knowledge	Social determinants of health	030202		
Skill	Conducting motivational interviewing	030203		
Skill	Utilizing active listening techniques	030204		
Task 3	Determine needed supplies and accessibility based on individual patient resources to promote adherence to the plan of care.	030300	3.80%	4
Knowledge	Various products/treatments and their appropriate applications	030301		
Knowledge	Community resources	030302		
Skill	Coordinating resources	030303		
Task 4	Develop a plan for follow-up care/referral.	030400	3.96%	4
Knowledge	Intrinsic factors (e.g., disease process, nutrition, glucose management) that contribute toward patient goals	030401		
Knowledge	Extrinsic factors (e.g., environmental, access to utilities, financial) that contribute toward patient goals	030402		
Skill	Identifying adherence to the plan of care	030403		
Skill	Coordinating follow-up care	030404		
Skill	Coordinating ancillary services	030405		

Domain 4	Implementation	040000	17.87%	18
Task 1	Instruct patient/caregiver on wound management by teaching relevant interventions and promoting healthy behaviors.	040100	4.55%	5
Knowledge	Teaching methods that meet health literacy needs of the patient/caregiver	040101		
Knowledge	Anticipatory guidance for diagnostic or therapeutic interventions	040102		
Knowledge	Current practices and interventions to address the diagnosis	040103		
Skill	Teaching patient/caregivers to identify and manage risk (e.g., falling, infection, pressure)	040104		
Skill	Teaching patient/caregivers on self-care of wound interventions	040105		
Skill	Teaching patient/caregivers on prevention strategies (e.g., trauma, foot care)	040106		
Task 2	Coordinate individual, clinical, and community resources to support the therapeutic interventions.	040200	3.39%	3
Knowledge	Available individual, clinical, and community resources	040201		
Knowledge	Relevant consultation and appropriate referrals	040202		
Skill	Coordinating clinical practice to meet patient needs	040203		
Skill	Coordinating available program services	040204		
Skill	Providing consultation to other medical staff on wound care issues	040205		
Task 3	Utilize therapeutic interventions to promote wound healing and prevent complications.	040300	6.02%	6
Knowledge	Pharmaceutical agents	040301		
Knowledge	Cleansing procedures and solutions	040302		
Knowledge	Measures to minimize risk of infection	040303		
Knowledge	Hydrotherapy or pulsed lavage (whirlpool excluded)	040304		
Knowledge	Debridement (e.g., autolytic, enzymatic, mechanical, surgical, sharp instrument, biosurgical)	040305		
Knowledge	Chemical cauterization	040306		
Knowledge	Pressure, shear, and friction reduction modalities	040307		
Knowledge	Hyperbaric oxygen therapy (HBOT)	040308		
Knowledge	Growth factor treatments	040309		
Knowledge	Negative pressure wound therapy (NPWT)	040310		
Knowledge	Bioengineered tissue products	040311		
Knowledge	Compression therapy (e.g., pumps, wraps, stockings)	040312		
Knowledge	Systemic factors that affect wound healing (e.g., perfusion, nutrition, glucose control, immune compromise, mobility, incontinence)	040313		
Skill	Prescribing/recommending dressings and modalities to address wound characteristics (e.g., eliminate dead space, reduce bacterial load, control odor, maintain moisture balance, promote adequate perfusion)	040314		
Skill	Applying specialty treatments (e.g., negative pressure wound therapy (NPWT), skin substitutes)	040315		
Skill	Performing sharp instrument debridement	040316		
Skill	Performing chemical cauterizations	040317		
Skill	Applying compression therapy	040318		
Skill	Addressing pain-control measures	040319		

Task 4	Place appropriate referrals/consultations for continuity of patient care.	040400	3.90%	4
Knowledge	Community and internet resources	040401		
Knowledge	Expected outcomes and limitations of current practice setting	040402		
Knowledge	Payer sources	040403		
Skill	Referring for medical/surgical interventions	040404		
Skill	Referring patient for consultation with other disciplines	040405		
Domain 5	Evaluation	050000	16.27%	16
Task 1	Evaluate effectiveness of treatment through routine assessment of wound healing.	050100	6.33%	6
Knowledge	Impact of comorbidities on wound healing processes	050101		
Skill	Performing a comprehensive physical examination	050102		
Skill	Collaborating with ancillary services	050103		
Task 2	Promote fiscally responsible treatments.	050200	4.62%	5
Knowledge	Dressing categories (e.g., alginate, hydrocolloid)	050201		
Knowledge	Prevention of wound-related complications and readmissions	050202		
Skill	Assisting the patient/caregiver in identifying and securing products and services	050203		
Skill	Utilizing community and organizational resources to enhance the plan of care	050204		
Task 3	Revise the plan of care based on evaluation of wound care goals.	050300	5.32%	5
Knowledge	Palliative wound care	050301		
Knowledge	Complication prevention	050302		
Knowledge	Current wound care modalities	050303		
Skill	Identifying complications impacting wound progression	050304		
Skill	Reassessing a plan of care reflecting wound status	050305		
Domain 6	Professional Issues	060000	10.13%	10
Task 1	Promote quality of practice by active participation in quality/performance improvement (QPI) initiatives.	060100	1.01%	1
Knowledge	Patient outcomes data (e.g., healing rates, prevalence, incidence)	060101		
Skill	Using QPI data to make evidence-informed decisions about practice	060102		
Skill	Using QPI data to facilitate organizational policy and procedural changes	060103		
Task 2	Educate the health care team to elevate the quality of patient care.	060200	1.18%	1
Knowledge	Patient outcomes data and implications for educational needs	060201		
Knowledge	Individual competency levels	060202		
Knowledge	Learning styles	060203		
Skill	Identifying educational needs	060204		
Skill	Designing educational programs for colleagues	060205		
Skill	Evaluating the effectiveness and utilization of education	060206		
Task 3	Evaluate individual professional practice to enhance patient outcomes.	060300	1.32%	1
Knowledge	Age-appropriate care	060301		
Knowledge	Cultural and ethnic considerations for provision of patient care	060302		
Knowledge	Professional licensing and certification requirements	060303		
Skill	Providing age-appropriate care in a culturally and ethnically sensitive manner	060304		
Skill	Engaging in a formal process to seek feedback about practice	060305		
Skill	Taking action to achieve professional goals (i.e., short-term, long-term)	060306		
Skill	Participating in continuing education	060307		

Task 4	Collaborate with health care colleagues to promote patient-centered care.	060400	1.47%	2
Knowledge	Colleagues' role within the health care team	060401		
Skill	Collaborating with other members of the health care team	060402		
Skill	Serving as a resource (e.g., mentor, preceptor, educator)	060403		
Task 5	Demonstrate ethical behavior and patient advocacy in the advanced practice setting.	060500	1.93%	2
Knowledge	Professional standards and scope of practice	060501		
Skill	Serving as a resource to facilitate ethical decision-making	060502		
Skill	Supporting team decision-making related to ethics	060503		
Skill	Advocating for patients' autonomy, dignity, and rights	060504		
Task 6	Utilize research to inform practice decisions, advance patient care, and enhance professional growth.	060600	1.19%	1
Knowledge	Research methods	060601		
Knowledge	Data analysis	060602		
Knowledge	Translational research	060603		
Knowledge	Trends in current research	060604		
Skill	Integrating results from evidence-informed literature to promote wound healing	060605		
Skill	Participating in clinical research activities (e.g., protocol development, subject selection, data collection, analysis, disseminating results)	060606		
Task 7	Participate in processes which promote efficient utilization of resources within the practice setting.	060700	0.94%	1
Knowledge	Factors dictating product costs and availability (e.g., insurance coverage, regulatory parameters, formulary)	060701		
Knowledge	Multidisciplinary team resources	060702		
Skill	Participating in formulary development processes	060703		
Skill	Evaluating resource options for efficient delivery of patient care and optimal patient outcomes	060704		
Task 8	Exemplify leadership amongst colleagues to promote positive patient outcomes.	060800	1.09%	1
Knowledge	Professional scope and standards of practice	060801		
Knowledge	Relevant professional organizations (e.g., national, regional, state, local)	060802		
Knowledge	Factors influencing delivery of patient care (e.g., policies, regulations, access to resources, insurance)	060803		
Skill	Promoting collaboration and healthy work environments	060804		
Skill	Influencing decision-making regarding wound care issues	060805		
Skill	Promoting the advancement of the profession through participation in professional organizations	060806		

COCN-AP Detailed Content Outline

Type	Description	Classification Code	Test Specifications	
Domain 1	Comprehensive Assessment	010000	% 20.97%	100 items 21
Task 1	Obtain a comprehensive patient health history through interviews, medical records, surgical reports, and questionnaires to determine the patient's current health and risk status.	010100	5.97%	6
Knowledge	Components of a health history interview (e.g., chief complaint, history of present illness, surgical history, medications, allergies)	010101		
Knowledge	Holistic nursing perspective (i.e., family, social, personal, and developmental history)	010102		
Knowledge	Health literacy	010103		
Knowledge	Psychosocial factors affecting care (e.g., psychiatric diagnosis, cognition, cultural factors) on present chief complaint	010104		
Knowledge	Nutritional factors related to ostomy management	010105		
Knowledge	Review of systems	010106		
Knowledge	Appropriate diagnostic tests as it relates to disease processes (e.g., lab values, imaging studies, gastrointestinal/genitourinary (GI/GU) studies)	010107		
Skill	Conducting a health history interview	010108		
Skill	Evaluating pain by using verbal and nonverbal skills	010109		
Skill	Interpreting effectiveness of systemic pain management and other pharmacologic agents	010110		
Skill	Performing risk assessments (e.g., weight, dehydration, electrolyte balance)	010111		
Task 2	Perform a problem-focused physical examination.	010200	6.27%	6
Knowledge	Stoma characteristics and related disease processes (e.g., peristomal skin, color, size, height)	010201		
Knowledge	Peristomal characteristics	010202		
Knowledge	Continent diversions/neobladder	010203		
Knowledge	Fistula characteristics (e.g., location, type, source, volume of output)	010204		
Knowledge	Barriers to surgical site progression/healing	010205		
Skill	Assessing stomal characteristics	010206		
Skill	Assessing peristomal characteristics	010207		
Skill	Assessing continent diversions/neobladder	010208		
Skill	Assessing fistula characteristics (e.g., location, type, source, and volume of output)	010209		
Skill	Assessing tubes and drains	010210		
Skill	Assessing current products being utilized	010211		
Skill	Assessing effluent/output character (e.g., location, type, source, volume)	010212		
Skill	Assessing abdominal and pelvic function	010213		
Skill	Assessing hydration and nutrition status	010214		
Task 3	Utilize pertinent diagnostics to identify potential complications.	010300	4.20%	4
Knowledge	Radiologic studies (e.g., x-ray, MRI)	010301		
Knowledge	Laboratory studies	010302		
Knowledge	Culture and biopsy	010303		
Knowledge	Endoscopic studies	010304		
Skill	Interpreting diagnostic results	010305		

Task 4	Establish goals for patient care.	010400	4.54%	5
Knowledge	Risk assessment and indicators for reassessment	010401		
Knowledge	Physical and psychosocial barriers to care	010402		
Skill	Conducting a risk assessment	010403		
Skill	Identifying patient/caregiver goals	010404		
Skill	Identifying barriers affecting care (e.g., cost, inability to access health care, mobility/dexterity issues, vision, cognitive deficits)	010405		
Domain 2	Diagnosis	020000	19.15%	19
Task 1	Synthesize a primary diagnosis based on a comprehensive assessment to address peristomal complications.	020100	4.51%	5
Knowledge	Allergic dermatitis	020101		
Knowledge	Irritant dermatitis	020102		
Knowledge	Mechanical trauma	020103		
Knowledge	Hernia	020104		
Knowledge	Skin infections (e.g., bacterial, fungal)	020105		
Knowledge	Pseudoverrucous lesions	020106		
Knowledge	Mucosal transplantation	020107		
Knowledge	Caput medusa	020108		
Knowledge	Atypical complications (e.g., pyoderma gangrenosum, malignancy)	020109		
Knowledge	Fistulas	020110		
Knowledge	Hypergranulation	020111		
Skill	Choosing appropriate diagnostic testing	020112		
Skill	Formulating a primary diagnosis	020113		
Task 2	Synthesize a primary diagnosis based on a comprehensive assessment to address stomal complications.	020200	4.40%	4
Knowledge	Necrosis/impaired perfusion	020201		
Knowledge	Bleeding	020202		
Knowledge	Mucocutaneous separation	020203		
Knowledge	Prolapse	020204		
Knowledge	Retraction	020205		
Knowledge	Stenosis	020206		
Knowledge	Laceration	020207		
Knowledge	Melanosis coli	020208		
Knowledge	Increased edema	020209		
Knowledge	Polyps	020210		
Skill	Choosing appropriate diagnostic testing	020211		
Skill	Formulating a primary diagnosis	020212		

Task 3	Synthesize a primary diagnosis based on a comprehensive assessment to address continent urinary diversion complications.	020300	3.53%	4
Knowledge	Pouchitis	020301		
Knowledge	Incontinence	020302		
Knowledge	Urinary retention/stenosis	020303		
Knowledge	Urinary tract infections	020304		
Knowledge	Trauma/intubation trauma	020305		
Knowledge	Peristomal skin injuries	020306		
Skill	Choosing appropriate diagnostic testing	020307		
Skill	Formulating a primary diagnosis	020308		
Task 4	Synthesize a primary diagnosis based on a comprehensive assessment to address continent fecal diversion complications.	020400	3.33%	3
Knowledge	Pouchitis	020401		
Knowledge	Perianal/peristomal skin alteration	020402		
Knowledge	Incontinence	020403		
Knowledge	Fluid and electrolyte balance	020404		
Knowledge	Abscess/fistula formation	020405		
Skill	Choosing appropriate diagnostic testing	020406		
Skill	Formulating a primary diagnosis	020407		
Task 5	Synthesize a primary diagnosis based on a comprehensive assessment to address fistulas.	020500	3.37%	3
Knowledge	Etiology	020501		
Knowledge	Alteration in skin integrity	020502		
Knowledge	Fluid and electrolyte imbalance	020503		
Knowledge	Abscess formation	020504		
Knowledge	Delayed wound healing	020505		
Skill	Choosing appropriate diagnostic testing	020506		
Skill	Formulating a primary diagnosis	020507		
Domain 3	Planning	030000	15.94%	16
Task 1	Develop a patient-centered plan of care using comprehensive health history and physical examination.	030100	4.66%	5
Knowledge	Diagnostic studies	030101		
Knowledge	Current treatment modalities	030102		
Knowledge	Referral sources	030103		
Skill	Interpreting results of diagnostic studies	030104		
Skill	Incorporating a multidisciplinary team approach	030105		
Skill	Executing timely referrals	030106		
Task 2	Evaluate patient/caregiver resources by assessing self-care skills and health care access to determine educational needs.	030200	4.03%	4
Knowledge	Health literacy	030201		
Knowledge	Social determinants of health	030202		
Skill	Conducting motivational interviewing	030203		
Skill	Utilizing active listening techniques	030204		

Task 3	Determine needed supplies and accessibility based on individual patient resources to promote adherence to the plan of care.	030300	3.58%	3
Knowledge	Various products/treatments and their appropriate applications	030301		
Knowledge	Community resources	030302		
Skill	Coordinating resources	030303		
Skill	Assisting the patient in identifying and securing services	030304		
Task 4	Develop a plan for follow-up care/referral.	030400	3.67%	4
Knowledge	Intrinsic factors (e.g., disease process, nutrition, anatomical considerations) that contribute toward patient goals	030401		
Knowledge	Extrinsic factors (e.g., environmental, access to utilities, financial) that contribute toward patient goals	030402		
Skill	Identifying adherence to the plan of care	030403		
Skill	Coordinating follow-up care	030404		
Skill	Coordinating ancillary services	030405		
Domain 4	Implementation	040000	17.44%	18
Task 1	Instruct patient/caregiver on ostomy management by teaching relevant interventions and promoting healthy behaviors.	040100	5.44%	6
Knowledge	Teaching methods that meet health literacy needs of the patient/caregiver	040101		
Knowledge	Surgical procedures (e.g., colostomy, ileostomy, urostomy, neobladder)	040102		
Knowledge	Pouching procedures (e.g., application, removal, emptying, burping)	040103		
Knowledge	Irrigation	040104		
Knowledge	Continent stoma intubation	040105		
Knowledge	Anticipatory guidance for diagnostic or therapeutic interventions	040106		
Knowledge	Current practices and interventions to address the diagnosis	040107		
Knowledge	Body image perception	040108		
Skill	Educating patient of medical diagnosis (e.g., cancer, bowel or urinary dysfunction, genetic and congenital disease, necrotizing enterocolitis)	040109		
Skill	Teaching patient/caregivers to identify and manage risk (e.g., infection, weight change, blockage, dehydration)	040110		
Skill	Teaching patient/caregivers on ostomy management (e.g., pouching application, continent stoma intubation)	040111		
Skill	Teaching tube management (e.g., irrigation, stabilization)	040112		
Skill	Teaching how to clean intermittent urethral catheterization	040113		
Skill	Teaching patient/caregivers on prevention strategies (e.g., hernia, leaking, odor control)	040114		
Skill	Teaching management of retained distal segment of bowel	040115		
Skill	Teaching dietary modifications (foods and fluids)	040116		
Skill	Teaching changes in absorption of fluids, medications, and vitamins	040117		
Skill	Teaching perianal skin care	040118		
Skill	Teaching control of incontinence	040119		
Skill	Teaching pelvic floor muscle exercises	040120		
Skill	Teaching managing activities of daily living	040121		
Skill	Counseling regarding sexual function	040122		
Skill	Teaching signs and symptoms requiring followup care (e.g., infection, pouchitis, stomal or peristomal complications, bleeding)	040123		

Task 2	Coordinate individual, clinical, and community resources to support the therapeutic interventions.	040200	3.31%	3
Knowledge	Available individual, clinical, and community resources	040201		
Knowledge	Relevant consultation and appropriate referrals	040202		
Skill	Coordinating clinical practice to meet patient needs	040203		
Skill	Coordinating available program services	040204		
Skill	Providing consultation to other medical staff on ostomy care issues	040205		
Task 3	Utilize therapeutic interventions to promote ostomy management and prevent complications.	040300	5.19%	5
Knowledge	Pharmaceutical agents	040301		
Knowledge	Non-prescriptive topical agents	040302		
Knowledge	Products (e.g., skin protection, odor control, containment of effluent, concealment/body image)	040303		
Knowledge	Irrigation (e.g., intestine, internal pouch, rectal stump)	040304		
Knowledge	Fluid replacement	040305		
Knowledge	Chemical cauterization	040306		
Knowledge	Indications for gastrostomy tube replacement	040307		
Knowledge	Indications for dilation	040308		
Knowledge	Selection of stomal site marking	040309		
Skill	Prescribing/recommending pharmaceutical agents	040310		
Skill	Administering pharmaceutical agents	040311		
Skill	Applying non-prescriptive topical agents	040312		
Skill	Utilizing products (e.g., skin protection, odor control, containment of effluent, concealment/body image)	040313		
Skill	Performing irrigation (e.g., intestine, internal pouch, rectal stump)	040314		
Skill	Managing fluid replacement	040315		
Skill	Performing chemical cauterizations	040316		
Skill	Replacing a gastrostomy tube in an established tract	040317		
Skill	Performing dilation of stoma os	040318		
Skill	Performing stomal site marking	040319		
Skill	Addressing pain-control measures	040320		
Task 4	Place appropriate referrals/consultations for continuity of patient care.	040400	3.50%	4
Knowledge	Community and internet resources	040401		
Knowledge	Expected outcomes and limitations of current practice setting	040402		
Knowledge	Payer sources	040403		
Skill	Referring for medical/surgical interventions	040404		
Skill	Referring patient for consultation with other disciplines	040405		

Domain 5	Evaluation	050000	17.44%	17
Task 1	Evaluate effectiveness of treatment through routine assessment of ostomy care.	050100	5.74%	6
Knowledge	Impact of anatomical considerations on ostomy care	050101		
Knowledge	Impact of comorbidities on ostomy management	050102		
Skill	Performing a comprehensive physical examination	050103		
Skill	Collaborating with ancillary services	050104		
Task 2	Promote fiscally responsible treatments.	050200	5.39%	5
Knowledge	Pouching systems (e.g., one piece, two piece, convexity, moldable)	050201		
Knowledge	Prevention of ostomy-related complications and readmissions	050202		
Skill	Assisting the patient/caregiver in identifying and securing products and services	050203		
Skill	Utilizing community and organizational resources to enhance the plan of care	050204		
Task 3	Revise the plan of care based on evaluation of ostomy care.	050300	6.30%	6
Knowledge	Anatomical considerations related to ostomy management	050301		
Knowledge	Complication prevention (e.g., dehydration, peristomal skin injury)	050302		
Knowledge	Current ostomy pouching systems and products	050303		
Skill	Identifying complications impacting ostomy management	050304		
Skill	Reassessing a plan of care	050305		
Domain 6	Professional Issues	060000	9.06%	9
Task 1	Promote quality of practice by active participation in quality/performance improvement (QPI) initiatives.	060100	0.85%	1
Knowledge	Patient outcomes data (e.g., social adjustment, complication prevention, self-care)	060101		
Skill	Using QPI data to make evidence-informed decisions about practice	060102		
Skill	Using QPI data to facilitate organizational policy and procedural changes	060103		
Task 2	Educate the health care team to elevate the quality of patient care.	060200	0.95%	1
Knowledge	Patient outcomes data and implications for educational needs	060201		
Knowledge	Individual competency levels	060202		
Knowledge	Learning styles	060203		
Skill	Identifying educational needs	060204		
Skill	Designing educational programs for colleagues	060205		
Skill	Evaluating the effectiveness and utilization of education	060206		
Task 3	Evaluate individual professional practice to enhance patient outcomes.	060300	1.31%	1
Knowledge	Age-appropriate care	060301		
Knowledge	Cultural and ethnic considerations for provision of patient care	060302		
Knowledge	Professional licensing and certification requirements	060303		
Skill	Providing age-appropriate care in a culturally and ethnically sensitive manner	060304		
Skill	Engaging in a formal process to seek feedback about practice	060305		
Skill	Taking action to achieve professional goals (i.e., short-term, long-term)	060306		
Skill	Participating in continuing education	060307		
Task 4	Collaborate with health care colleagues to promote patient-centered care.	060400	1.27%	1
Knowledge	Colleagues' role within the health care team	060401		
Skill	Collaborating with other members of the health care team	060402		
Skill	Serving as a resource (e.g., mentor, preceptor, educator)	060403		

Task 5	Demonstrates ethical behavior and patient advocacy in the advanced practice setting.	060500	1.62%	2
Knowledge	Professional standards and scope of practice	060501		
Skill	Serving as a resource to facilitate ethical decision-making	060502		
Skill	Supporting team decision-making related to ethics	060503		
Skill	Advocating for patients' autonomy, dignity, and rights	060504		
Task 6	Utilize research to inform practice decisions, advance patient care, and enhance professional growth.	060600	1.00%	1
Knowledge	Research methods	060601		
Knowledge	Data analysis	060602		
Knowledge	Translational research	060603		
Knowledge	Trends in current research	060604		
Skill	Integrating results from evidence-informed literature to promote ostomy health	060605		
Skill	Participating in clinical research activities (e.g., protocol development, subject selection, data collection, analysis, disseminating results)	060606		
Task 7	Participate in processes which promote efficient utilization of resources within the practice setting.	060700	0.94%	1
Knowledge	Factors dictating product costs and availability (e.g., insurance coverage, regulatory parameters, formulary)	060701		
Knowledge	Multidisciplinary team resources	060702		
Skill	Participating in formulary development processes	060703		
Skill	Evaluating resource options for efficient delivery of patient care and optimal patient outcomes	060704		
Task 8	Exemplify leadership amongst colleagues to promote positive patient outcomes.	060800	1.12%	1
Knowledge	Professional scope and standards of practice	060801		
Knowledge	Relevant professional organizations (e.g., national, regional, state, local)	060802		
Knowledge	Factors influencing delivery of patient care (e.g., policies, regulations, access to resources, insurance)	060803		
Skill	Promoting collaboration and healthy work environments	060804		
Skill	Influencing decision-making regarding ostomy care issues	060805		
Skill	Promoting the advancement of the profession through participation in professional organizations	060806		

CCCN-AP Detailed Content Outline

Type	Description	Classification Code	Test Specifications	
Domain 1	Comprehensive Assessment	010000	% 22.22%	100 items 22
Task 1	Obtain a comprehensive patient health history through interviews, medical records, surgical reports, and questionnaires to determine the patient's current health and risk status.	010100	6.16%	6
Knowledge	Components of a health history interview (e.g., chief complaint, history of present illness, surgical history, medications, allergies)	010101		
Knowledge	Holistic nursing perspective (i.e., family, social, personal, and developmental history)	010102		
Knowledge	Health literacy	010103		
Knowledge	Psychosocial factors affecting care (e.g., psychiatric diagnosis, cognition, cultural factors) on present chief complaint	010104		
Knowledge	Nutrition and fluid needs related to continence management	010105		
Knowledge	Review of systems	010106		
Knowledge	Appropriate diagnostic tests as it relates to disease processes (e.g., lab values, imaging studies, gastrointestinal/genitourinary (GI/GU) studies)	010107		
Skill	Conducting a health history interview	010108		
Skill	Evaluating pain by using verbal and nonverbal skills	010109		
Skill	Evaluating bowel and bladder history	010110		
Skill	Assessing for history of sexual trauma	010111		
Skill	Interpreting effectiveness of systemic pain management and other pharmacologic agents	010112		
Skill	Performing risk assessments (e.g., weight, dehydration, electrolyte balance)	010113		
Task 2	Perform a problem-focused physical examination.	010200	6.26%	6
Knowledge	Anatomy and physiology of gastrointestinal/genitourinary (GI/GU)	010201		
Knowledge	Characteristics and related disease processes (e.g., urinary tract infection, diarrhea)	010202		
Knowledge	Gastrointestinal/genitourinary (GI/GU) physiological exams (e.g., pelvic, rectal, neuromuscular, external anal sphincter)	010203		
Skill	Assessing functional status (e.g., environmental barriers, mobility, dexterity)	010204		
Skill	Assessing abdomen	010205		
Skill	Assessing skin (e.g., incontinence-associated dermatitis (IAD), moisture-associated skin damage)	010206		
Skill	Conducting external urogenital exams	010207		
Skill	Conducting pelvic internal exams (e.g., pelvic organ prolapse, pelvic muscle strength, infection)	010208		
Skill	Conducting rectal exams (e.g., impaction, stenosis)	010209		
Skill	Conducting neuromuscular testing (e.g., genital sensation, anal wink, bulbocavernosus reflex)	010210		
Skill	Conducting external anal sphincter assessments	010211		
Skill	Monitoring intake and output	010212		

Task 3	Utilize pertinent diagnostics to identify potential complications.	010300	5.21%	5
Knowledge	Radiologic studies (e.g., x-ray, MRI)	010301		
Knowledge	Laboratory studies	010302		
Knowledge	Culture and biopsy	010303		
Knowledge	Endoscopic studies	010304		
Knowledge	Urodynamics	010305		
Knowledge	Motility studies	010306		
Knowledge	Studies related to sexual dysfunction	010307		
Knowledge	Pelvic discharge variations	010308		
Skill	Interpreting diagnostic results	010309		
Skill	Analyzing bladder and bowel diaries (i.e., Bristol stool scale)	010310		
Skill	Interpreting laboratory studies (e.g., PSA, liver function test (LFT), CBC, chemistry, hemocult)	010311		
Skill	Interpreting urine studies (e.g., urinalysis, microbiology, 24-hour creatinine clearance, cytology)	010312		
Skill	Performing post-void residual urine measurements (by catheter or bladder scan)	010313		
Skill	Interpreting urodynamics (e.g., cystometry, uroflowmetry, pressure flow, video)	010314		
Skill	Interpreting electromyography studies	010315		
Skill	Interpreting radiologic procedures (e.g., kidney, ureters, bladder (KUB), voiding cystometrogram)	010316		
Skill	Performing urethral hypermobility testing and provoked stress maneuvers	010317		
Skill	Differentiating urine from vaginal discharge	010318		
Skill	Differentiating urethral vs. vesicovaginal urine loss (e.g., pH, pattern, timing, amount, color)	010319		
Skill	Interpreting pouchograms	010320		
Task 4	Establish goals for patient care.	010400	4.59%	5
Knowledge	Risk assessment and indicators for reassessment	010401		
Knowledge	Physical and psychosocial barriers to care	010402		
Knowledge	Voiding and defecation dysfunctions	010403		
Knowledge	Sexual trauma and associated dysfunctions	010404		
Skill	Conducting a risk assessment	010405		
Skill	Identifying patient/caregiver goals	010406		
Skill	Identifying barriers affecting care (e.g., cost, inability to access health care, mobility/dexterity issues, cognitive deficits)	010407		

Domain 2	Diagnosis	020000	20.66%	21
Task 1	Synthesize a primary diagnosis based on a comprehensive assessment to address urinary incontinence.	020100	5.82%	6
Knowledge	Transient incontinence	020101		
Knowledge	Stress incontinence	020102		
Knowledge	Urge incontinence (e.g., overactive bladder)	020103		
Knowledge	Mixed incontinence	020104		
Knowledge	Functional incontinence	020105		
Knowledge	Retention with overflow incontinence (e.g., bladder outlet obstruction [anatomic or detrusor sphincter dyssynergia], detrusor hypocontractility)	020106		
Knowledge	Urinary reflux	020107		
Knowledge	Nocturnal enuresis	020108		
Knowledge	Post-prostatectomy incontinence	020109		
Knowledge	Bladder infections (e.g., simple, complex, recurrent)	020110		
Skill	Choosing appropriate diagnostic testing	020111		
Skill	Formulating a primary diagnosis	020112		
Task 2	Synthesize a primary diagnosis based on a comprehensive assessment to address other lower gastrointestinal/genitourinary (GI/GU) dysfunction.	020200	4.59%	5
Knowledge	Detrusor hyperactivity with impaired contractility	020201		
Knowledge	Neurogenic bladder with and without detrusor sphincter dyssynergia	020202		
Knowledge	Nocturia	020203		
Knowledge	Urgency/frequency without leakage	020204		
Knowledge	Bladder and pelvic pain syndromes	020205		
Knowledge	Pelvic floor dysfunction (e.g., urethral/uterine/rectal prolapse, cystocele, rectocele)	020206		
Skill	Choosing appropriate diagnostic testing	020207		
Skill	Formulating a primary diagnosis	020208		
Task 3	Synthesize a primary diagnosis based on a comprehensive assessment to address bowel dysfunction.	020300	4.36%	4
Knowledge	Constipation	020301		
Knowledge	Fecal impaction	020302		
Knowledge	Fecal incontinence	020303		
Knowledge	Diarrhea encopresis	020304		
Knowledge	Psychosocial factors affecting bowel continence	020305		
Knowledge	Incontinence/moisture-associated dermatitis	020306		
Skill	Choosing appropriate diagnostic testing	020307		
Skill	Formulating a primary diagnosis	020308		

Task 4	Manage situations that may warrant immediate medical evaluation or consultation.	020400	5.89%	6
Knowledge	Urinary calculi	020401		
Knowledge	Pyelonephritis	020402		
Knowledge	Pelvic organ prolapse	020403		
Knowledge	Gastrointestinal/genitourinary (GI/GU) cancers	020404		
Knowledge	Gastrointestinal/genitourinary (GI/GU) fistulas	020405		
Knowledge	Upper urinary tract damage related to lower urinary tract dysfunction	020406		
Knowledge	Patient and conditions amenable to surgical interventions	020407		
Knowledge	Prostatic enlargement	020408		
Knowledge	Unexpected neurologic findings	020409		
Skill	Performing gastrointestinal (GI) examinations (e.g., rectal, abdominal palpitation)	020410		
Skill	Performing genitourinary (GU) examinations (e.g., vaginal, prostate, pelvic floor)	020411		
Skill	Initiating appropriate referrals	020412		
Domain 3	Planning	030000	14.91%	15
Task 1	Develop a patient-centered plan of care using comprehensive health history and physical examination.	030100	4.11%	4
Knowledge	Diagnostic studies	030101		
Knowledge	Current treatment modalities	030102		
Knowledge	Referral sources	030103		
Skill	Interpreting results of diagnostic studies	030104		
Skill	Incorporating a multidisciplinary team approach	030105		
Skill	Executing timely referrals	030106		
Task 2	Evaluate patient/caregiver resources by assessing self-care skills and health care access to determine educational needs.	030200	3.97%	4
Knowledge	Health literacy	030201		
Knowledge	Social determinants of health	030202		
Skill	Conducting motivational interviewing	030203		
Skill	Utilizing active listening techniques	030204		
Task 3	Determine needed supplies and accessibility based on individual patient resources to promote adherence to the plan of care.	030300	3.27%	3
Knowledge	Various products/treatments and their appropriate applications (e.g., containment and skin care products)	030301		
Knowledge	Community resources	030302		
Skill	Coordinating resources	030303		
Skill	Assisting the patient in identifying and securing services	030304		
Task 4	Develop a plan for follow-up care/referral.	030400	3.56%	4
Knowledge	Intrinsic factors (e.g., disease process, pelvic floor, anatomical considerations) that contribute toward patient goals	030401		
Knowledge	Extrinsic factors (e.g., environmental, access to utilities, financial) that contribute toward patient goals	030402		
Skill	Identifying adherence to the plan of care	030403		
Skill	Coordinating follow-up care	030404		
Skill	Coordinating ancillary services	030405		

Domain 4	Implementation	040000	16.81%	17
Task 1	Instruct patient/caregiver on continence management by teaching relevant interventions and promoting healthy behaviors.	040100	4.70%	5
Knowledge	Teaching methods that meet health literacy needs of the patient/caregiver	040101		
Knowledge	Anticipatory guidance for diagnostic or therapeutic interventions	040102		
Knowledge	Current practices and interventions to address the diagnosis	040103		
Knowledge	Body image perception	040104		
Skill	Teaching patient to foster healthy bladder and bowel habits	040105		
Skill	Teaching dietary and fluid management (including bladder irritants)	040106		
Skill	Teaching emptying maneuvers	040107		
Skill	Teaching bladder and bowel rehabilitation programs (e.g., pelvic floor exercises)	040108		
Skill	Teaching skin care/topical treatments	040109		
Skill	Teaching appropriate use of pharmacologic agents	040110		
Skill	Counseling regarding sexual health issues	040111		
Task 2	Coordinate individual, clinical, and community resources to support the therapeutic interventions.	040200	3.25%	3
Knowledge	Available individual, clinical, and community resources	040201		
Knowledge	Relevant consultation and appropriate referrals	040202		
Skill	Coordinating clinical practice to meet patient needs	040203		
Skill	Coordinating available program services	040204		
Skill	Providing consultation to other medical staff on elimination issues	040205		
Task 3	Utilize therapeutic interventions to promote continence management and prevent complications.	040300	5.46%	6
Knowledge	Pharmaceutical agents (e.g., bladder relaxants, antibiotics, hormonal, bowel)	040301		
Knowledge	Surgical interventions	040302		
Knowledge	Toileting programs (e.g., bladder training, scheduled toileting, prompted voiding)	040303		
Knowledge	Containment products and devices	040304		
Knowledge	Environmental modifications (e.g., bedside commode, urinal, clothing)	040305		
Knowledge	Prevention strategies to maintain optimal bowel/bladder function	040306		
Knowledge	Lifestyle modifications (e.g., diet, fluids, exercise)	040307		
Knowledge	Measures to protect skin	040308		
Skill	Teaching pessary fitting and care	040309		
Skill	Teaching urgency suppression techniques (e.g., quick flicks, distraction)	040310		
Skill	Teaching catheterization (e.g., clean intermittent, indwelling)	040311		
Skill	Teaching suprapubic catheter care	040312		
Skill	Teaching strategies to maintain optimal bowel/bladder function	040313		
Skill	Promoting healthy lifestyle modifications (e.g., diet, fluids, exercise)	040314		
Skill	Prescribing/recommending pharmacologic management of bowel/bladder dysfunction	040315		
Skill	Instructing on pelvic muscle rehabilitation (e.g., Kegel, biofeedback, manometer)	040316		
Skill	Implementing skin protection therapies	040317		
Skill	Managing factors that affect continence (i.e., glucose control, mobility, neuromuscular diseases, altered nutrition/absorption, pain)	040318		

Task 4	Place appropriate referrals/consultations for continuity of patient care.	040400	3.39%	3
Knowledge	Community and internet resources	040401		
Knowledge	Expected outcomes and limitations of current practice setting	040402		
Knowledge	Payer sources	040403		
Skill	Referring for medical/surgical interventions	040404		
Skill	Referring patient for consultation with other disciplines	040405		
Domain 5	Evaluation	050000	16.44%	16
Task 1	Evaluate effectiveness of treatment through routine assessment of continence care.	050100	6.17%	6
Knowledge	Impact of anatomical considerations on continence	050101		
Knowledge	Impact of comorbidities on continence	050102		
Skill	Performing a comprehensive physical examination	050103		
Skill	Collaborating with ancillary services	050104		
Task 2	Promote fiscally responsible treatments.	050200	4.78%	5
Knowledge	Containment devices/products	050201		
Knowledge	Prevention of continence-related complications and readmissions	050202		
Skill	Assisting the patient/caregiver in identifying and securing products and services	050203		
Skill	Utilizing community and organizational resources to enhance the plan of care	050204		
Task 3	Revise the plan of care based on evaluation of continence care.	050300	5.49%	5
Knowledge	Anatomical considerations related to continence	050301		
Knowledge	Complication prevention (e.g., incontinence-associated dermatitis (IAD), fungal skin conditions, fecal impaction, urinary retention)	050302		
Knowledge	Current continence containment products and devices	050303		
Skill	Identifying complications impacting continence	050304		
Skill	Reassessing a plan of care	050305		
Domain 6	Professional Issues	060000	8.97%	9
Task 1	Promote quality of practice by active participation in quality/performance improvement (QPI) initiatives.	060100	0.74%	1
Knowledge	Patient outcomes data (e.g., social adjustment, complication prevention, self-care)	060101		
Skill	Using QPI data to make evidence-informed decisions about practice	060102		
Skill	Using QPI data to facilitate organizational policy and procedural changes	060103		
Task 2	Educate the health care team to elevate the quality of patient care.	060200	1.09%	1
Knowledge	Patient outcomes data and implications for educational needs	060201		
Knowledge	Individual competency levels	060202		
Knowledge	Learning styles	060203		
Skill	Identifying educational needs	060204		
Skill	Designing educational programs for colleagues	060205		
Skill	Evaluating the effectiveness and utilization of education	060206		
Task 3	Evaluate individual professional practice to enhance patient outcomes.	060300	1.43%	2
Knowledge	Age-appropriate care	060301		
Knowledge	Cultural and ethnic considerations for provision of patient care	060302		
Knowledge	Professional licensing and certification requirements	060303		
Skill	Providing age-appropriate care in a culturally and ethnically sensitive manner	060304		
Skill	Engaging in a formal process to seek feedback about practice	060305		
Skill	Taking action to achieve professional goals (i.e., short-term, long-term)	060306		
Skill	Participating in continuing education	060307		

Task 4	Collaborate with health care colleagues to promote patient-centered care.	060400	1.26%	1
Knowledge	Colleagues' role within the health care team	060401		
Skill	Collaborating with other members of the health care team	060402		
Skill	Serving as a resource (e.g., mentor, preceptor, educator)	060403		
Task 5	Demonstrate ethical behavior and patient advocacy in the advanced practice setting.	060500	1.42%	1
Knowledge	Professional standards and scope of practice	060501		
Skill	Serving as a resource to facilitate ethical decision-making	060502		
Skill	Supporting team decision-making related to ethics	060503		
Skill	Advocating for patients' autonomy, dignity, and rights	060504		
Task 6	Utilize research to inform practice decisions, advance patient care, and enhance professional growth.	060600	1.18%	1
Knowledge	Research methods	060601		
Knowledge	Data analysis	060602		
Knowledge	Translational research	060603		
Knowledge	Trends in current research	060604		
Skill	Integrating results from evidence-informed literature to promote continence health	060605		
Skill	Participating in clinical research activities (e.g., protocol development, subject selection, data collection, analysis, disseminating results)	060606		
Task 7	Participate in processes which promote efficient utilization of resources within the practice setting.	060700	0.74%	1
Knowledge	Factors dictating product costs and availability (e.g., insurance coverage, regulatory parameters, formulary)	060701		
Knowledge	Multidisciplinary team resources	060702		
Skill	Participating in formulary development processes	060703		
Skill	Evaluating resource options for efficient delivery of patient care and optimal patient outcomes	060704		
Task 8	Exemplify leadership amongst colleagues to promote positive patient outcomes.	060800	1.10%	1
Knowledge	Professional scope and standards of practice	060801		
Knowledge	Relevant professional organizations (e.g., national, regional, state, local)	060802		
Knowledge	Factors influencing delivery of patient care (e.g., policies, regulations, access to resources, insurance)	060803		
Skill	Promoting collaboration and healthy work environments	060804		
Skill	Influencing decision-making regarding continence care issues	060805		
Skill	Promoting the advancement of the profession through participation in professional organizations	060806		

AP exam sample questions

- Which of the following vascular tests is the best choice to order when determining the location of the occlusion for surgical intervention?
 - Segmental limb pressure
 - Pulse volume recording
 - Doppler waveform studies
 - Skin perfusion pressure
- Which medication, when prescribed for a patient with excessive ileostomy output requires thyroid function tests at baseline and periodically throughout treatment?
 - Loperamide
 - Diphenoxylate/atropine
 - Cholestyramine
 - Octreotide acetate
- A 65-year old female reports recent, intermittent, postvoid fullness and difficulty starting her urinary stream. She underwent a mid-urethral sling procedure 2 years ago with no reported voiding problems after surgery. The APN should suspect which condition?
 - Cystocele beyond the hymenal ring
 - Rectocele at the hymenal ring
 - Sling erosion
 - Sling infection

ANSWER KEY

Question	Correct Answer	Complexity Level
1.	A.	Recall
2.	D.	Application
3.	A.	Analysis