I. CLINICAL JUDGMENT (80%)

A. Cardiovascular (33%)

1. Acute coronary syndromes
   a. non-ST segment elevation myocardial infarction
   b. ST segment elevation myocardial infarction
   c. unstable angina
2. Acute inflammatory disease (e.g., myocarditis, endocarditis, pericarditis)
3. Aneurysm
   a. dissecting
   b. repair
4. Cardiac surgery (e.g., open chest surgery) more than 48 hours postoperative
5. Cardiac tamponade
6. Cardiogenic shock
7. Cardiomyopathies
   a. dilated (e.g., ischemic/non-ischemic)
   b. hypertrophic
   c. stress-induced (e.g., Takotsubo)
8. Dysrhythmias
   a. bradydysrhythmias
   b. conduction defects and blocks
   c. device-related (e.g., ICD and pacemaker)
   d. lethal ventricular dysrhythmias
   e. tachydysrhythmias
9. Genetic cardiac disease (e.g., long QT syndrome, Brugada syndrome)
10. Heart failure
    a. acute exacerbations (e.g., pulmonary edema)
    b. chronic
11. Hypertensive crisis
12. Minimally invasive cardiac surgery (i.e., non-sternal approach)
13. Septal defects (congenital and acquired)
14. Valvular heart disease
    a. aortic
    b. mitral
15. Vascular disease
    a. carotid artery stenosis
    b. minimally invasive interventions (e.g., stents, endografts)
    c. peripheral arterial occlusions
    d. peripheral surgical interventions
    e. peripheral venous thrombosis

B. Pulmonary (14%)

1. Acute respiratory distress syndrome (ARDS, to include acute lung injury or ALI)
2. Exacerbation of COPD
3. Obstructive sleep apnea
4. Pleural space abnormalities and complications (e.g., pneumothorax, hemothorax, pleural effusion, empyema)
5. Pulmonary embolism
6. Pulmonary hypertension
7. Respiratory depression (e.g., medication-induced, decreased-LOC-induced)
8. Respiratory failure
   a. acute
   b. chronic
9. Respiratory infections (e.g., pneumonia)
10. Severe asthma
11. Thoracic surgery
    a. lobectomy
    b. pneumonectomy

C. Endocrine/Hematology/Gastrointestinal/Renal (18%)

1. Endocrine
   a. diabetes mellitus
   b. diabetic ketoacidosis
   c. hyperglycemic hyperosmolar syndrome (HHS)
   d. hypoglycemia
   e. metabolic syndrome
2. Hematology/Immunology/Oncology
   a. anemia
   b. cancer
   c. hemostasis disorders (i.e., coagulopathies)
      i. heparin-induced thrombocytopenia (HIT)
      ii. other drug-induced overdose (e.g., Coumadin, Pradaxa)
   d. immunosuppressive disorders
3. Gastrointestinal
   a. functional GI disorders (e.g., obstruction, ileus, diabetic gastroparesis, gastro-esophageal reflux, irritable bowel syndrome)
   b. GI bleed
      i. lower
      ii. upper
   c. GI infections
d. hepatic failure
e. ischemic bowel
f. malnutrition (e.g., failure to thrive, malabsorption disorders)
g. pancreatitis

4. Renal
a. acute renal failure
b. chronic renal failure
c. contrast-induced nephropathy
d. end-stage renal disease (ESRD)
e. electrolyte imbalances
f. medication-induced renal failure
g. nephritic syndrome

D. Neurology/Multisystem/Behavioral (15%)

1. Neurology
a. cerebrovascular malformation (including aneurysm, AV malformation)
b. encephalopathy (e.g., hypoxic-ischemic, metabolic, edema, infectious, hepatic)
c. intracranial hemorrhage (e.g., subarachnoid, epidural, encephalitis)
d. seizure disorders
e. stroke (cerebrovascular accident)
   i. ischemic (embolic)
   ii. hemorrhagic
   iii. transient ischemic attack (TIA)

2. Multisystem
a. complex wounds and pressure ulcers
b. healthcare-acquired infections
   i. catheter-associated urinary tract infections (CAUTI)
   ii. central-line-associated bloodstream infections (CLABSI)
c. palliative care
d. end-of-life (e.g., comfort care measures, hospice)
e. infectious diseases
   i. influenza
   ii. multidrug-resistant organisms (e.g., MRSA, VRE)
f. pain
g. sepsis continuum
   i. systemic inflammatory response syndrome (SIRS)
   ii. sepsis
   iii. severe sepsis
   iv. septic shock
h. shock states (hypovolemic and anaphylactic)

3. Behavioral/Psychosocial
a. altered mental status
b. delirium
c. dementia
d. psychological disorders
   i. anxiety disorders
   ii. depression
e. substance abuse
   i. alcohol withdrawal
   ii. chronic alcohol abuse
   iii. chronic drug abuse
   iv. drug-seeking behavior

II. PROFESSIONAL CARING AND ETHICAL PRACTICE (20%)

A. Advocacy
B. Caring Practices
C. Collaboration
D. Systems Thinking
E. Response to Diversity
F. Clinical Inquiry
G. Facilitation of Learning

Order of content does not necessarily reflect importance.
PCCN TESTABLE NURSING ACTIONS
Applies to exams taken on and after June 26, 2013.
Refer to the PCCN Exam Handbook for detailed testing information.

CLINICAL JUDGMENT

Cardiovascular
- Perform a comprehensive cardiovascular assessment
- Identify, interpret and monitor:
  - dysrhythmias
  - ST segments
  - QTc intervals
- Select leads for cardiac monitoring for the indicated disease process
- Recognize indications for and manage patients requiring hemodynamic monitoring using non-invasive hemodynamic monitoring
- Monitor hemodynamic status and recognize signs and symptoms of hemodynamic instability
- Monitor patients and follow protocols for managing patients with:
  - pacemakers
  - defibrillation
  - arterial/venous sheaths
  - transesophageal echocardiogram (TEE)
- Monitor patients pre- and post-procedure:
  - cardioversion
  - pericardiocentesis
  - cardiac catheterization
  - ablation
  - arterial closure devices
- Monitor normal and abnormal cardiovascular diagnostic test results
- Administer cardiovascular medications and monitor response
- Titrate vasoactive medications
- Recognize signs and symptoms of cardiovascular emergencies, initiate standardized interventions and seek assistance as needed
- Monitor and manage patient following coronary intervention

Pulmonary
- Perform a comprehensive pulmonary assessment
- Monitor normal and abnormal diagnostic test results
- Interpret ABGs and report findings
- Monitor patient for response to pulmonary medications
- Manage patients requiring non-invasive O$_2$ or ventilation delivery systems:
  - nasal cannula
  - face mask
  - venti-mask
  - non-rebreather mask
  - BIPAP
  - CPAP
- Manage patients requiring mechanical ventilation - tracheostomy tube
- Manage patients requiring respiratory monitoring devices:
  - continuous SPO$_2$
  - intermittent SPO$_2$
  - end-tidal CO$_2$ (capnography)
- Recognize signs and symptoms of respiratory complications and seek assistance as needed
- Maintain airway
- Manage patients with chest tubes
- Assist with procedures:
  - thoracentesis
  - chest tube insertion
- Administer medications for procedural (conscious) sedation and monitor patient response

Endocrine/Hematology/Gastrointestinal/Renal
- Endocrine
  - identify signs and symptoms associated with endocrine disorders
  - monitor normal and abnormal endocrine diagnostic test results
  - administer medications and monitor patient response
  - manage and titrate insulin infusions
  - manage patients using insulin pumps
- Hematology/Immunology/Oncology
  - identify signs and symptoms associated with hematologic/immunologic/oncologic disorders
  - monitor normal and abnormal diagnostic hematologic/immunologic/oncologic test results
  - administer medications and monitor patient response
• Gastrointestinal
  ◦ perform a comprehensive gastrointestinal assessment
  ◦ monitor normal and abnormal gastrointestinal diagnostic test results
  ◦ recognize indications for and complications of enteral and parenteral nutrition
  ◦ administer medications and monitor patient response

• Renal
  ◦ identify normal and abnormal renal assessment findings
  ◦ monitor normal and abnormal renal diagnostic test results
  ◦ monitor peritoneal dialysis
  ◦ identify medications that may cause nephrotoxicity
  ◦ initiate renal protective measures for nephrotoxic procedures

Neurology/Multisystem/Behavioral

• Neurology
  ◦ perform a comprehensive neurological assessment
  ◦ monitor normal and abnormal neurological diagnostic test results
  ◦ administer medications and monitor patient response
  ◦ recognize signs and symptoms of increased intracranial pressure
  ◦ use the NIH Stroke Scale (NIHSS)
  ◦ perform bedside screening for dysphagia

• Multisystem
  ◦ administer medications and monitor patient response
  ◦ identify early signs and symptoms of sepsis (SIRS criteria)
  ◦ initiate early goal-directed therapy (EGDT) for treating sepsis
  ◦ initiate emergency interventions (e.g., ACLS, rapid response team)
  ◦ differentiate types of wounds, pressure ulcers, and deep tissues injuries
  ◦ manage patients with complex wounds (e.g., fistulas, drains, and vacuum-assisted closure devices)
  ◦ manage patients with infections
  ◦ manage patients at the end of life
  ◦ facilitate the organ/tissue donation process

• Behavioral/Psychosocial
  ◦ perform a comprehensive psychosocial, behavioral and risk assessment
  ◦ administer medications and monitor patient response
  ◦ recognize signs and symptoms of behavioral emergencies and initiate interventions
  ◦ perform Clinical Institute Withdrawal Assessment (CIWA, CIWA-Ar scale)
  ◦ screen patients using a delirium assessment tool
  ◦ implement suicide prevention measures

PROFESSIONAL CARING AND ETHICAL PRACTICE

Systems Thinking

• Informatics
  ◦ use word processing applications use internet resources to locate patient support groups, online resources
  ◦ use hospital or nursing information systems to access, enter and retrieve data related to patient care
  ◦ use database applications to enter and retrieve data and information
  ◦ conduct online and database literature searches
  ◦ use computer applications to document patient care
  ◦ use computer applications to plan patient care, including discharge planning
  ◦ use information management systems for patient education
  ◦ use technology-based patient monitoring systems
  ◦ operate peripheral/point-of-care devices, bedside and hand-held (e.g., smart pump)