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## Gerontological Nursing Board Certification Test Content Outline - effective date: April 6, 2012

There are 175 questions on this examination. Of these, 150 are scored questions and 25 are pretest questions that are not scored. Pretest questions are used to determine how well these questions will perform before they are used on the scored portion of the examination. The pretest questions cannot be distinguished from those that will be scored, so it is important for a candidate to answer all questions. A candidate's score, however, is based solely on the 150 scored questions. Performance on pretest questions does not affect a candidate's score.

This Test Content Outline identifies the areas that are included on the examination. The percentage and number of questions in each of the major categories of the scored portion of the examination are also shown.

Category	Domains of Practice	No. of Questions	Percent
I	Assessment	30	20%
II	Plan of Care	62	41%
III	Professional Practice	58	39%
	<b>Total</b>	<b>150</b>	<b>100%</b>

# Gerontological Nursing

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### I Assessment (20%)

#### A. Data collection

Knowledge of:

1. Evidence-based tools and techniques for history-taking used with older adults (e.g., medical, psychological, social, surgical, family, immunization, health promotion, alternative treatments)
2. Evidence-based tools and techniques for physical exams and psychosocial assessments used with older adults in many settings (e.g., Braden, mental status exam, functional status, fall risk, wandering, safety, vision, hearing)
3. Developmental stages (e.g., Erickson, Maslow, Kubler-Ross) and age-related changes (e.g., sensory, neurological, circulatory) in normal older adults
4. Pathophysiology (e.g., system-related, metabolic, and degenerative) and diagnostic tests (e.g., geriatric depression scale, nutritional, bone density)

Skill in:

5. Identifying changes in older adults
6. Adapting physical exams and interviews to older adults (e.g., avoiding distractions, quiet environment, pacing speech, language choice)
7. Identifying multiple sources of data (e.g., family, friends, prior providers, environment, community)
8. Identifying risk factors (e.g., abuse and neglect, environmental, level of knowledge of health promotion, social and economic status, sexuality, addiction, suicide behavior, self harm)

#### B. Data interpretation

Knowledge of:

1. Norms and variances (e.g., normal values, physical assessment, psychosocial assessment, psychological)
2. Patterns, trends, and changes in data (e.g., natural progression of diseases and illnesses, changes in functional status)
3. Factors that influence test results (e.g., medications, hydration, age, environment, nutrition, cognitive ability, physical status, lab variation)

Skill in:

4. Discerning the quality of test results (e.g., collection and handling methodology, recording error, recency of labs)
5. Discerning the quality of assessment findings and reconciling data (e.g., credibility of the source, validation of information, appropriateness of tools used, incomplete data, equipment calibration)
6. Analyzing data to make nursing diagnoses
7. Identifying situations and critical values that require immediate action (e.g., infection control, critical labs)

### II Plan of Care (41%)

#### A. Develop

Knowledge of:

1. Nursing diagnoses and problem lists
2. Evidence-based interventions and treatments

Skill in:

3. Individualizing plans of care and education for the older adult
4. Identifying expected outcomes
5. Prioritizing plans (e.g., criticality of conditions, patient and family preferences)

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#### B. Implement

##### Knowledge of:

1. Pharmacological considerations (e.g., polypharmacy, medication reconciliation, complementary and alternative medicines [OTC], allergies to medications, side effects, adverse effects)
2. Nonpharmacological considerations (e.g., pain management, pressure reduction, distraction, massage, aroma therapy, adaptive equipment, pet therapy)
3. Developmentally appropriate needs (e.g., alternative teaching methods, repetitiveness of interventions, adaptive equipment, end-of-life, coping)
4. Healthcare systems (e.g., community resources, long-term care, assisted living, home care, acute care, guided care, hospice, certified geriatric care managers)
5. Strategies for adult learning (e.g., one-step directions, written, audio-visual, tactile, group vs. one-on-one)

##### Skill in:

6. Coordinating with others to implement the plan of care (e.g., physical therapy, occupational therapy, speech-language pathology, social work, recreation therapy, spiritual care, family, nutritional services)
7. Facilitating a safe and therapeutic environment (e.g., fall reduction program, home safety evaluation, turning program, injury prevention, patient-centered care model)
8. Recognizing the potential adverse effects of polypharmacy and treatment modalities (e.g., AIMS test, Beers criteria, problematic medications in older adults)
9. Adapting learning strategies based on the characteristics of the older adult (e.g., culture, language, religion, life experience, intrinsic vs. extrinsic motivation, familial support, literacy level)

#### C. Evaluate

##### Knowledge of:

1. Expected and unexpected responses to interventions
2. Factors that cause unexpected responses (e.g., non-adherence, comprehension of the plan of care, cognitive deficit, environment, financial and economic, misappropriation of medications)

##### Skill in:

3. Evaluating patient progress and updating the plan of care

### III Professional Practice (39%)

#### A. Communication

##### Knowledge of:

1. Interdisciplinary and family communication across the continuum of care
2. Situations that require advocacy and conflict resolution on behalf of the older adult (e.g., abuse, inappropriate behavior, physical and emotional boundary violations, human subject protection, ageism, intergenerational differences)
3. Electronic information systems (e.g., patient instruction and education, trends and health promotion, gerontological internet resources, communications, telehealth)

##### Skill in:

4. Intervening to address the vulnerability of older adults (e.g., ombudsman, adult protective services, social workers, crisis center, ethics committee, law enforcement)
5. Using evidence-based communication techniques specific to older adults in different settings and health conditions (e.g., trust, rapport, pacing, quiet environment,

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repetition)

### **B. Quality improvement and leadership considerations**

Knowledge of:

1. Quality improvement (e.g., federal standards, internal standards such as alignment with mission, cost containment, resource utilization)
2. Role of the gerontological nurse (e.g., collaboration, team building, role model, professional development, delegating)

Skill in:

3. Using trend data and analysis to identify areas for improvement

### **C. Legal and ethical considerations**

Knowledge of:

1. Documentation guidelines and requirements (e.g., Medicare, preauthorization, care planning, HIPAA, long-term care insurance, interagency transfers)
2. Legal and regulatory compliance (e.g., advance directives, power of attorney, authorized representative, competency, capacity, Americans with Disabilities Act)
3. Scope and standards of practice for gerontological nursing

Skill in:

4. Supporting patient and resident rights (e.g., autonomy, independence)

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