

AANPCB

Family Nurse Practitioner

Adult-Gerontology Primary Care Nurse Practitioner

FNP & AGNP Certification

Candidate Handbook



American Academy of Nurse Practitioners National Certification Board, Inc.

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This HANDBOOK* is written for the candidate desiring to take the **Adult-Gerontology Primary Care Nurse Practitioner (A-GNP) or Family Nurse Practitioner (FNP) Certification Examination** offered by AANPCB. It provides important information concerning the eligibility requirements, application processes, testing information, examination blueprints, and AANPCB Policies. It is a candidate’s responsibility to read and understand the contents of this handbook before applying for the certification examination. Information in the handbook and on the website is updated on a regular basis and every effort is made to present policies and directions clearly. The information contained in this handbook supersedes information contained in all previous handbooks. Normal application processing time is 4-6 weeks, depending upon receipt of a complete application, required documents, and applicable fees. AANPCB does not expedite processing of applications.

**Content in this Handbook is subject to change without notice.*

The American Academy of Nurse Practitioners Certification Board (AANPCB)

About AANPCB

AANPCB was established by Dr. Jan Towers PhD, NP-C, CRNP, FAAN, FAANP in 1993 as the **American Academy of Nurse Practitioners Certification Program (AANPCP)** for the purpose of providing a valid and reliable program for the evaluation of individuals wishing to enter, continue, and/or advance in the Nurse Practitioner profession through the certification process. Effective January 2017, AANPCP changed its business name and acronym from the **American Academy of Nurse Practitioners Certification Program (AANPCP)** to the **American Academy of Nurse Practitioners Certification Board (AANPCB)**.

Because AANPCB offers more than one certification program, Certification “Board” more accurately represents and describes the full scope of the AANPCB certifying organization. While the name and logo changed slightly, the website domain and contact information remained the same. AANPCB is separately incorporated under the name **American Academy of Nurse Practitioners National Certification Board, Inc.** AANPCB is a nonprofit organization.

Vision, Mission, and Core Values

VISION - To be the leading organization upholding the highest certification standards for nurse practitioners in promoting high quality healthcare.

MISSION - To provide excellence in professional nurse practitioner certification.

CORE VALUES that support the mission and vision of the AANPCB: **ACCOUNTABILITY, QUALITY, and TRANSPARENCY.**

PURPOSE - The purpose of the AANPCB is to assess the knowledge and practice competencies of nurse practitioners required to provide safe and quality health care.

CURRENT ACTIVE CERTIFICATIONS*		
AANPCB	FNP-C	86,723
	AGNP-C	9,188
	ANP-C	8,458
	ENP-C	233
	GNP-C	115
	TOTAL:	104,717

*NUMBERS AS OF MARCH 7th, 2018

As a national nursing certification board, AANPCB:

- Is responsible for facilitating the application processes for Nurse Practitioner (NP) certification.
- Is responsible for providing a reliable, valid, competency-based examination for NPs to assess knowledge, skills and abilities for entry-into-practice.
- Provides initial certification of the **Adult-Gerontology Primary Care Nurse Practitioner (A-GNP)** and **Family Nurse Practitioner (FNP)** meeting eligibility requirements for certification by exam.
- Provides processes for *renewal of certification* for the certified **A-GNP, FNP, Adult Nurse Practitioners (ANP), Gerontologic Nurse Practitioners (GNP), and Emergency Nurse Practitioners (ENP)** meeting current requirements for recertification.
- Retired the GNP exam in December 2012 and the ANP exam in December 2016 to comply with the national **Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education.**
- Launched its first specialty certification examination in January 2017 -- the **Emergency Nurse Practitioner (ENP) Certification Examination** for certified Family Nurse Practitioners with specialty education and experience in emergency care. The ENP examination meets the requirements of the Consensus Model for both specialty

certification and builds upon APRN role/population-focused competencies. ENPs must maintain current FNP certification to remain certified as an ENP.

Board of Commissioners

AANPCB is an independent, nonprofit organization governed by a Board of Commissioners (BOC) composed of dedicated, knowledgeable, and experienced NPs representative of the certificant population. Commissioner names are published on the certification website. The BOC governs all of the major decisions affecting the certification programs and processes, and offers input and guidance into organizational decisions. Elections for the Commissioners are held annually in October. All active AANPCB certificants are eligible to vote. One public member (who is not a healthcare professional) is appointed to represent and protect the public.

Accreditation, Affiliation, Recognition

ACCREDITATION

The A-GNP and FNP certification programs offered by AANPCB are accredited by both the Accreditation Board for Specialty Nursing Certification, Inc. (ABSNC) and the National Commission for Certifying Agencies (NCCA). Changes to a certification program will align with certification accreditation standards promulgated by ABSNC and NCCA. Accreditation dates may be found on the certification website.

The [Accreditation Board for Specialty Nursing Certification, Inc. \(ABSNC\)](#), formerly known as the ABNS Accreditation Council, is the only accrediting body specifically for nursing certification. ABSNC accreditation provides a peer review mechanism that allows nursing certification organizations to obtain accreditation of their certification programs by demonstrating compliance with the highest quality standards available in the industry.



The [National Commission for Certifying Agencies \(NCCA\)](#), the accrediting body of the Institute for Credentialing Excellence (ICE), serves to ensure the health, welfare, and safety of the public through the accreditation of certification programs and organizations that assess professional competence. Accreditation by NCCA indicates AANPCB compliance with the NCCA Standards for the Accreditation of Certification Programs.



MEMBERSHIP ORGANIZATION AFFILIATION

AANPCB is affiliated with two national nurse practitioner membership organizations. Affiliation with a membership organization is neither a requirement for, nor an indication of, certification. Certification and Membership organizations are independent organizations, therefore, certification and membership account information is held separately by each organization. **Certification numbers and membership numbers are uniquely different.** Please contact the membership organization if assistance is needed with membership, continuing education, or professional opportunities.

- [American Association of Nurse Practitioners](#) – AANP is the largest full-service national professional membership organization for NPs of all specialties. Visit www.aanp.org for more information.
- [American Academy of Emergency Nurse Practitioners](#) – AAENP is the professional membership organization for NPs who practice in emergency care settings and provide emergency care for patients of all ages and acuities. Visit www.aaenp-natl.org for more information.



RECOGNITION

AANPCB certifications are recognized by all U.S. Boards of Nursing, Canadian provincial nurse regulators, the Centers for Medicare and Medicaid Services (CMS), the Veterans Administration, private managed care organizations, institutions, and health care agencies for credentialing purposes.

AANPCB Nurse Practitioner Programs — *1993 to present*

ADULT NURSE PRACTITIONER (ANP)

The Adult Nurse Practitioner examination was retired December 2016 to meet the regulatory requirements of the Consensus Model for role and population foci. ANPs should check with their individual State Boards of Nursing for further requirements or stipulations regarding practice as an Adult Nurse Practitioner. Individuals certified by AANPCB as an ANP will continue to be certified and recognized as a NP-C as long as current requirements for renewal of certification are met and the certification does not expire. ANPs who allow their certification to expire will be unable to renew it.

FAMILY NURSE PRACTITIONER (FNP)

The Family Nurse Practitioner examination tests clinical knowledge in family/individual across the life span (prenatal, pediatric, adolescent, adult, elderly, and frail elderly primary care).

GERONTOLOGIC NURSE PRACTITIONER (GNP)

Like the ANP examination, the Gerontologic Nurse Practitioner certification examination was retired in December 2012 to meet the regulatory requirements of the Consensus Model for role and population foci. GNPs should check with their individual State Boards of Nursing for further requirements or stipulations regarding practice as a Gerontologic Nurse Practitioner. Individuals certified by AANPCB as a GNP will continue to be certified and recognized as a NP-C as long as current requirements for renewal of certification are met and the certification does not expire. GNPs who allow their certification to expire will be unable to renew it.

ADULT-GERONTOLOGY PRIMARY CARE NURSE PRACTITIONER (A-GNP)

The Adult-Gerontology Primary Care Nurse Practitioner examination tests clinical knowledge of adolescents (including emancipated minors), young adults, adults, older adults, and the elderly. Certificants who are dual-certified by AANPCB as both an ANP and a GNP are eligible to apply for conversion to the Adult-Gerontology Nurse Practitioner.

EMERGENCY NURSE PRACTITIONER SPECIALTY CERTIFICATION FOR FNPs (ENP)

AANPCB collaborated with the American Academy of Emergency Nurse Practitioners (AAENP) in 2016 to develop the Emergency Nurse Practitioner Specialty Certification Examination for certified Family Nurse Practitioners with specialty education and practice in emergency care. NPs certified by AANPCB as an ENP must maintain active certification as a Family Nurse Practitioner in order to renew ENP certification. (See [ENP Handbook](#)).

AANPCB CERTIFICATION PROGRAMS

INITIAL EXAM ADMINISTRATION YEAR:

1994 - Adult NP
 1994 - Family NP
 2007 - Gerontologic NP
 2013 - Adult-Gerontology Primary Care NP
 2017 - Emergency NP Specialty

EXAMS RETIRED:

December 2012 - Gerontologic
 December 2016 - Adult

Candidate and Certificant Responsibility

- Candidates and certificants are responsible for updating their online profile or notifying AANPCB of changes to their contact information. Failure to keep AANPCB informed of current contact information and email address may result in non-receipt of important information (e.g.; application status, program changes, or renewal notices).
- **CERTIFICATION EXPIRES AUTOMATICALLY AT THE END OF THE 5-YEAR CERTIFICATION PERIOD.** Renewal is required for continued use of the credential. It is the certificant's professional responsibility to renew their certification before their certification expires.
- Individuals who allow their certification to expire may not represent themselves as being certified as a nurse practitioner by AANPCB.
- Individuals dual-certified by AANPCB as an FNP **and** an ENP who allow their FNP certification to expire may not represent themselves as being certified as an Emergency Nurse Practitioner by AANPCB.
- AANPCB will not be held responsible for loss of wages, employment, or certification in the event that a certificant fails to renew in a timely manner prior to expiration of current certification.

General Principles/ NP Standards of Conduct

Applicants, candidates, and certificants must:

- Be truthful, forthcoming, prompt, and cooperative in their dealings with AANPCB;
- Be in continuous compliance with AANPCB policies;
- Respect AANPCB intellectual property rights and abide by AANPCBs Examination Security Conditions Policy and Federal copyright law protecting AANPCBs examination item content.
- Abide by AANPCB and the testing vendor test administration rules;
- Abide by laws related to advanced nursing practice and to general public health and safety; and
- Conduct their professional work in a competent manner.

Scope of Practice

Certificants shall subscribe to the:

- **Scope of Practice for Nurse Practitioners** (*American Association of Nurse Practitioners*). (See **Appendix E**).
- **Nursing: Scope and Standards of Practice** (*American Nurses Association*).
- Holding the NP-C credential does not confer any permission to manage patients beyond the scope of the individual's professional practice.
- Boundaries of professional practice are determined by each state or territory's **Nurse Practice Act** that guide and govern nursing practice.
- Job functions are determined by the employing agency, not the credential.

Standards of Practice

Certificants shall subscribe to the:

- **Standards of Practice for Nurse Practitioners** (*American Association of Nurse Practitioners*). (See **Appendix F**).
- **Nursing: Scope and Standards of Practice** (*American Nurses Association*).

NP-C Credential

NP-C MEANS "NURSE PRACTITIONER-CERTIFIED".

- NP-C is the credential authorized for use by individuals who have met the standards, qualifications, and testing requirements established by AANPCB to indicate certification status.
- First use of the credential was in 1999.
- NP-C is the registered certification mark owned by the American Academy of Nurse Practitioners National Certification Board, Inc.

NP-C or ANP-C	Adult Nurse Practitioner
NP-C or AGNP-C	Adult-Gerontology Primary Care Nurse Practitioner
NP-C or ENP-C	Emergency Nurse Practitioner
NP-C or FNP-C	Family Nurse Practitioner
NP-C or GNP-C	Gerontologic Nurse Practitioner

The first letter of the population specialty (i.e.; Adult, Adult-Gerontology, Emergency, Family, or Gerontologic) precedes the certification number printed on both the official embossed certificate and the wallet card. The initial A, E, F, G, or A-G indicating population specialty is optional and precedes the NP-C credential (see box).

Certification granted is time-limited. Only certificants meeting requirements for renewal of their certification are authorized to continue to use the credential. The AANPCB Board of Commissioners has determined that a 5-year cycle of certification meets requirements to ensure continued competence based on review of literature and consultation with credentialing experts. This decision is reviewed periodically in conjunction with subsequent practice analyses.

Contact Us

Email is the preferred method for general correspondence. Copies of RN licenses, completed paper applications, and correspondence may be mailed, faxed, or emailed.

Email:	certification@aanpcert.org
Fax:	(512) 637-0540
Certification Administration:	(512) 637-0500
Toll-free Number:	(855) 822-6727
Mailing Address:	AANPCB P.O. Box 12926 Austin, TX 78711-2926

Overnight Delivery: If an applicant wishes to ensure that materials are received by AANPCB, it is recommended that a guaranteed courier delivery service be used and sent to:

AANPCB
2600 Via Fortuna, Suite 240
Austin, TX 78746-7006

Transcripts:

- May be sent to transcripts@aanpcert.org via secure electronic transmission from a University Registrar.
- May be mailed directly to AANPCB by a University Registrar in a sealed envelope.
- May be obtained by the student from a University Registrar in a **sealed envelope** and mailed to AANPCB without opening the sealed envelope.

Certification Fees

- Fees may be found on the Certification website.
- Fees are shown in and must be paid in U.S. dollars, and are subject to change without notification.
- A paper processing fee is charged for paper applications received via mail, email, or fax.
- There is no charge for processing of supporting documents received by AANPCB for the purposes of certification and recertification (e.g., RN licenses, CEs, unofficial transcripts).
- Applications are processed in a timely manner. AANPCB **does not expedite** or charge an expediting fee for processing of applications.

AANPCB Policies

Non-Discrimination Policy

AANPCB does not discriminate against individuals with respect to age, sex, race, color, religion, national origin, ethnicity, disability, marital status, sexual orientation, gender identity, veteran status, or any other characteristic legally protected by law. Reasonable and consistent use of non-discrimination and impartiality policies and procedures will apply to all programs of the AANPCB, to include application processes, testing processes, and business operations. AANPCB complies with applicable federal, state, and local laws. AANPCB business operations includes, but is not limited to the selection of volunteers and vendors, volunteer or staff member conduct, hiring and firing of certification staff, and compliance with the **Americans with Disabilities Act (ADA, 1990, updated 2010)**. Examinations will be job-related and developed based on the program's current role delineation studies and close adherence to the program's test specifications. AANPCB shall make its services available to all applicants, candidates, and certificants who meet the eligibility criteria as defined in the program's publically available procedures subject to limitations defined in policy.

Confidentiality and Disclosure Policy

Candidate information and scores are considered confidential information. Sensitive and confidential information received by AANPCB is used solely for the purposes of certification and verification and cannot be shared without written permission or required by law. Disclosure will not take place that violates an applicant, candidate, or a certificant right of privacy. Individual scores are not included in the verification documents sent to Boards of Nursing or other entities unless specifically requested in writing by the certificant or required by law. Individuals who wish to have their individual scores sent to their education program must request that particular service in writing to AANPCB.

AANPCB certificants, applicants, credentialing agencies, employers, and third-party vendors may order **Primary Source Verification of Certification** of individuals who hold or have held active AANPCB certification. To protect the confidentiality of applicants, written authorization is required before information is released regarding an individual's scores or status in the certification program. Electronic online requests made by a vendor must be authorized by a candidate or certificant granting permission to disclose verification of eligibility to test or to verify the NP's certification.

Examination Security Policy

Federal copyright law protects AANPCB's examinations and the items contained therein. The certification examinations and all items on the examinations are the exclusive property of the **American Academy of Nurse Practitioners National Certification Board, Inc.** Candidates who apply for the certification examination acknowledge that they understand and agree to the following prior to taking the examination:

- Retention, possession, copying, distribution, disclosure, discussion or receipt of any AANPCB certification examination question, in whole or in part, by written, electronic, oral, or other form of communication, including but not limited to emailing, copying or printing of electronic files, and reconstruction through memorization and/or dictation, before, during or after the certification examination is strictly prohibited.
- Disclosure, discussion or receipt of any AANPCB certification examination questions and/or the examination, in whole or in part, on social media networking, in study groups, or by other methods is strictly prohibited.
- Theft or attempted theft of examination content is punishable by law.
- Candidate participation in any irregularity occurring during or after the examination, such as giving or obtaining unauthorized information or aid, as evidenced by observation or subsequent statistical analysis, may be sufficient cause to terminate participation, invalidate results of the examination, or necessitate other appropriate action per **AANPCB Disciplinary Policy**.
- Incidents regarding examination administration security will be reported to the AANPCB Board of Commissioners. Grounds for sanction may be warranted.
- Visit www.psiexams.com to view PSI Testing Center Regulations.

Disciplinary Policy

The **American Academy of Nurse Practitioners National Certification Board, Inc.** is a national certifying body which develops and administers nurse practitioner (NP) certification programs for individuals wishing to enter, continue and/or advance in the NP profession through established certification processes. To be eligible for certification or recertification, an individual must comply with AANPCB policies and procedures, and standards of conduct as set forth in the [Disciplinary Policy](#). AANPCB awards the NP-C credential. As the owner of the Nurse Practitioner-Certified certification mark, AANPCB controls its use.

The AANPCB Disciplinary Policy:

- Articulates standards of conduct for individuals seeking certification and recertification and for individuals holding certification, and
- Establishes a fair process for addressing noncompliance.

Violations and Sanctions

Actions which constitute a violation of AANPCB Disciplinary Policy include, but are not limited to:

- Cheating on an examination.
- Providing false information.
- Misrepresenting certification status.
- Misusing AANPCB property.
- Being subject to any regulatory, criminal, or civil action related to the practice as a certified NP.

Grounds for sanctions are as follows:

- Conviction of a felony or other crime of moral turpitude under federal or state law in a matter related to the practice of, or qualifications for professional activity.
- Gross negligence or willful misconduct in the performance of professional services or other unethical or unprofessional conduct based on the formal determination of a licensing body.
- Fraud or misrepresentation of the NP-C® credential.

Process for Submitting Complaints

Complaints about a Nurse Practitioner certified by AANPCB may be submitted by any individual or entity, must be in writing, and include the identity of the submitter as well as the identity of the certificant. Address correspondence to the attention of the AANPCB Certification Manager at certification@aanpcert.org or mail to the American Academy of Nurse Practitioners Certification Board at P.O. Box 12926, Austin, TX 78711.

Individuals who bring forth complaints are not entitled to relief or damages by virtue of this process. Actions taken by AANPCB do not constitute enforcement of the law, although referral to appropriate federal, state or local government agencies, including boards of nursing, law enforcement, public health agencies, or employers may be made about a certificant's conduct in appropriate situations. The Board of Commissioners may amend, modify, or change the Disciplinary Policy and procedures without prior notice.

Appeals Policy

Applicants who do not meet eligibility criteria may appeal their denied application for initial certification. Appropriate and complete documentation must be submitted along with the required fee before the appeal can be reviewed. The appeal will be reviewed within 30 days of receipt of documents. Notice of determination shall be provided to the applicant within 10 business days of the decision via electronic or paper methods to include email and postal service. The appeal decision is final. There is no further appeal beyond this point. The applicant will be responsible for any expenses incurred during the Appeals process.

A review process for candidates who do not pass the examination and wish to have their exam results reevaluated is available. Examinees are discouraged from requesting this service as extensive and rigorous quality control procedures are employed to ensure the accuracy of results and in all previous score challenges there is no record of a score

discrepancy being detected. Examinations are computer-based and electronically scored. An exam rescore is limited to verifying that the responses as scored were made by the examinee and were correctly transformed into a scaled score. The rescore service is not a review of the exam content, what the correct answer should be, the acceptability of testing conditions, or a reconsideration of the passing standard. Candidates will be charged a fee for hand scoring by the testing vendor (\$150.00 subject to change). Results of the rescore will be sent to the candidate within six weeks of receipt of request.

Correspondence regarding an appeal should be addressed to the attention of the AANPCB Certification Manager at certification@aanpcert.org.

Aggregate Score Report Policy

- Data summary reports for each specialization are compiled annually for nurse practitioner educational programs for the purpose of providing information on performance of program graduates.
- To protect candidate confidentiality, score data are provided only when three or more program graduates test for a given specialization during a calendar year.
- Disclosure will not take place if it violates an applicant or certificant right of privacy.
- If a candidate wishes to have individual scores sent to their education program, they must request that particular service in writing to AANPCB.

Records Retention Policy

AANPCB implements a **Records Management and Retention Policy** and institutes best business practices with regards to retention, security, and disposal of paper and electronic records received from applicants, candidates, and certificants. These processes are reviewed annually and may be modified at any time for compliance with local, state, and federal laws affecting record retention.

Certification records are considered confidential information, and includes but is not limited to RN licenses, official and unofficial transcripts, continuing education documents, education records as defined by the **Family Educational Rights and Privacy Act (FERPA)** of 1974, financial data, and individual identifiable information/unique identifiers as defined by the **Health Insurance Portability and Accountability Act of 1996 (HIPAA)**.

Data from paper records received are entered into the AANPCB **Certification Management System (CMS)**, the repository for all certification and recertification applications, files, and pertinent and associated information. Information entered into the CMS remains a permanent electronic record. In the event of a circumstance involving litigation, disposal of any documents pertaining to the litigation will be suspended.

All documents submitted for application consideration become the property of AANPCB. At such time that a paper record is no longer required for the processing of an application or valued for its information, the paper record is destroyed per the AANPCB **Records Management and Retention Policy**. Individuals should retain copies of their records for personal use. AANPCB is under no obligation to return or issue copies of these documents for future use by a certificant. Failure to submit the required documentation or fees, or the submission of duplicate or expired licensure or CE, will delay the review and approval of an application.

Abandoned Application

Examination scores cannot be released until the final official transcript is received. Incomplete applications will be considered abandoned if a final official transcript showing the degree awarded is not received. Submission of a new application to sit for the National Certification Examination again, along with applicable fees, will be required after an incomplete application has been deemed abandoned regardless of whether the candidate initially passed the exam or not. An exception to this, due to extenuating circumstances, must be submitted in writing and is subject to approval (e.g., delay in completing final DNP project). The period of abandonment is:

- 1 year after taking the national certification examination for graduates of a Master's program
- 2 years after taking the national certification examination for graduates of a Doctoral program.

About the Adult-Gerontology Primary Care & Family NP Certification Exams

Under the direction of the BOC, certification examinations are developed to provide a reliable, valid, competency-based examination for NPs to assess knowledge, skills and abilities for entry-into-practice in the population-foci of adult-gerontology primary care and family/ across the life span.

The A-GNP and FNP certification examinations are:

- Focused solely on requirements for safe clinical practice.
- Limited to content that can be tested in an objective format.
- Entry-level, competency-based examinations reflective of the Advanced Practice Registered Nursing (APRN) Core and NP role competencies across a population focus of practice as defined by the [Consensus Model for APRN Regulation: Licensure, Accreditation, Certification & Education \(2008\)](#).
- Developed and maintained in partnership with a contracted test development organization, whose program directors and psychometric consultants help to ensure that generally accepted psychometric principles and best education testing practices are used, and national accreditation standards for certification programs are met.

Examination Content

- AANPCB examinations are process focused; based on the assessment, diagnosis, planning, and evaluation components of patient care; and associated with the NP role, specialty population, wellness-illness continuum, and associated problem areas.
- The A-GNP exam tests clinical knowledge of adolescents including emancipated minors, young adults, adults, older adults, and elderly.
- The FNP exam tests clinical knowledge in the role and population focus of the family/ individual across the life span of prenatal, pediatric, adolescent, adult, elderly, and frail elderly primary care.

GRADUATE CORE COMPETENCIES AND APRN CORE CONTENT

- Entry-level NPs are expected to apply knowledge of the **Graduate Core Competencies** and **APRN Core Content** to the processes of assessment, diagnosis, and management of patients in their care.
- **Graduate Core Competencies** can be defined as the integrated knowledge, skills, judgment, and abilities required of an APRN to practice safely and ethically in a designated role and setting.
- **APRN Core Content** (advanced pathophysiology, advanced pharmacology, and advanced health assessment) will be presented as three separate comprehensive graduate-level courses.

DOMAINS, TASKS, KNOWLEDGE, AND TECHNICAL SKILLS/PROCEDURES

- Typically, a **Practice Analysis Study** includes a description of the tasks performed in practice, organized within broad domains of practice, and the knowledge needed in order to perform the tasks. Technical skills or procedures used on the job are included the practice analysis as well.
- **Knowledge Areas** serve as the basis for the test blueprints. Knowledge refers to acquired information necessary to perform the job tasks, the ability to perform skills/procedures, and reflects characteristics of the individual worker performing the job.
- **Testing Domains** (assess, diagnose, plan, evaluate) contain the knowledge and skills required to competently perform tasks. Domains are the major responsibility areas that make up a profession, are mutually exclusive, and encompass all of the tasks performed in practice.
- **Tasks** are discrete work elements within domains, distinct, identifiable, and practice-related specific activities.
- **Procedures** are learned cognitive and psychomotor actions that must be performed correctly in order to successfully complete one or more job tasks.

Examination Blueprints

- Test specifications (**Content Outlines**) identify the proportion of test questions related to each of the domains and tasks that appear on the multiple-choice examinations. Exam items are distributed across **Domain I (Practice)** and then further divided across **Domain II (Patient Age)**. Percentage weights and number of test questions on the multiple-choice examinations in each domain are shown in the Examination Blueprints. Age Parameters are not defined for any population
- See **Adult-Gerontology 2016 Practice Analysis Test Blue Print**, Appendix A.
- See **Family 2015 Practice Analysis Test Blue Print**, Appendix B.

Exam Development

- Certification examinations are developed and maintained in partnership with a contracted test development organization, whose program director and psychometric consultants help to ensure that generally accepted psychometric principles and best education testing practices are used and national accreditation standards for certification programs are met.
- New examinations are developed annually for the following year using the current year's therapeutic guidelines and references. See **Reference List**, Appendix D. Items are screened for bias and sensitivity.
- The certification program selects panels of certified Adult, Family, Gerontologic, and Adult-Gerontology Primary Care Nurse Practitioner subject matter experts (SMEs) engaged in clinical practice and academic environments from diverse geographical areas to assist in exam development. SMEs must meet requirements for impartiality related to education and training leading to certification. The rigor of the examination development process guarantees quality competency-based certification examinations.

Application Process

Online Profile

- Applicants are responsible for creating their Online Profile account at www.aanpcert.org.
- Applicants and certificants must update their Online Profile or notify AANPCB of changes to their contact information during their period of certification. Contact information such as a change of name or address can be updated online.
- Documents can be uploaded, application status viewed, and printable wallet card accessed online.

Application Process

- Online applications and electronic submissions are preferred. Applicants should visit www.aanpcert.org to establish an online account. An additional fee is assessed for processing of all paper applications.
- To avoid loss of information submitted, an application must be completed within 30 days once started.
- Normal processing time for initial applications is 2-4 weeks, depending upon receipt of a **complete application**, required documents, and applicable fees. Because applications are processed in a timely manner, AANPCB does not expedite processing of applications or charge an expediting fee.
- Applicants are notified by email once weekly if additional information is needed to complete an application.
- Applications are reviewed to determine qualification to take the examination and for completeness and undergo professional review by qualified Nurse Practitioners.

Documents

- Documents sent to AANPCB become the property of AANPCB. Individuals should retain copies of their records for personal use and for their professional portfolio. AANPCB is under no obligation to return or issue copies of these documents for future use by a certificant. Failure to submit the required documentation or fees, or the submission of duplicate or expired licensure or CE, will delay the review and approval of an application.

Taking the Certification Examination

Qualifications and Eligibility

- Meet specific educational requirements that prepare graduate, post-graduate, or doctoral students in national competencies of the graduate core, NP role, and population foci of adult-gerontology primary care or family/ across the life span in accordance with the **2016 Criteria for Evaluation of Nurse Practitioner Programs, 5th edition**.
- Successful completion of the APRN core courses (advanced physical assessment, advanced pharmacology, and advanced pathophysiology) **and** the minimum of 500 faculty-supervised direct patient care clinical hours are required.
- Post-graduate students successfully complete didactic and clinical requirements of an academic NP program through a formal graduate-level certificate or degree-granting graduate-level Adult-Gerontology Primary Care or Family NP program. Post-graduate certificate students who are not already NPs are required to complete a minimum of 500 supervised direct patient care clinical hours.
- The NP educational program **must be accredited** by an independent national nursing organization recognized by the U.S. Department of Education (e.g., Accreditation Commission for Education in Nursing, Inc. or the Commission on Collegiate Nursing Education). NP educational programs in Canadian Provinces/Territories must be approved by a national nursing organization in Canada. (cont.)
- Current U.S. or Canadian registered nurse licensure is required.
- An individual's educational preparation must be congruent with the corresponding national certification examination/process.
- The examination may not be taken more than TWICE in a calendar year (Jan. 1 - Dec. 31).

Information for Candidates enrolled in a Graduate (MSN) or Post-Graduate program

- Applicants enrolled in MSN or post-masters certificate program may begin the application process **6 months** before completion of their program.
- An interim transcript showing completed academic "coursework-to-date" or a final **Official transcript** showing degree and date awarded (conferred) is required to initiate processing of an application.

Additional Information for Candidates enrolled in a Doctor of Nursing Practice (DNP) program

- Applicants enrolled in a Doctor of Nursing Practice (DNP) program may begin the application process as early as **1 year** prior to completion of their program.
- Candidates enrolled in a DNP program must complete all of their NP program didactic courses and requirements including the faculty-supervised clinical practice hours required for the program before they will be eligible to sit for the certification examination in the area of their specialty.
- **Exam scores of DNP candidates who take the examination do not expire.**
- An official transcript showing DNP degree awarded and conferral date is required to release a score.
- The certification start date will be the date the score is released, not the date the examination was taken.

Approval and Eligibility to Test Notifications

- Applications are reviewed to determine qualification to take the examination and for completeness.
- Candidates may not sit for an examination until after they have completed all didactic and clinical coursework required in the NP portion of their program.
- When an application is verified and approved, AANPCB will (1) notify PSI of the candidate's approval to test and (2) send the candidate an email informing them of their approval to test.
- Upon program completion date on the application, PSI will send an eligibility confirmation email to the candidate from no-reply@psionline.com by end of business day. For example, if the NP program ends May 15, the ETT letter is emailed May 16. This eligibility confirmation email provides important instructions for scheduling a testing appointment at PSI Testing Centers.

- Upon notification, PSI will email the candidate their authorization to register for the examination. This authorization email grants the 120-day testing window, and provides important instructions for scheduling a testing appointment at PSI Testing Centers.
- Candidate's names must match on their application, testing site registration, and forms of identification required by the testing center for an applicant to sit for their scheduled examination.

Scheduling an Examination

- The certification examinations are administered at PSI's Testing Centers via computer-based testing format.
- Candidates must create an account at PSI Exams online at www.psiexams.com before registering for an exam.
- Candidates receive a 120-day window to test. This window allows candidates the flexibility of scheduling their test around their personal schedule, employment schedule, religious needs, or any other issues without requiring the need for additional accommodations or forms.
- The fastest and most convenient way to schedule a test is to schedule online on PSI's scheduling website at www.psiexams.com. Candidates may also contact a PSI Customer Service Representative at (800) 211-2754 during PSI's hours of operation.
- Testing centers are located throughout the United States and Canada and maintained by **PSI Services, LLC (PSI)**.
- Refer questions concerning exam administration to PSI.
- Contact PSI regarding questions concerning examination administration and testing site regulations.

Extension Requests

Extensions are granted on a case-by-case basis for reasons of hardship with sufficient justification. Candidates unable to sit for the examination within their 120-day window to test may request an extension. There must not be an examination appointment scheduled. If the extension is approved, a **one-time 60-day window to test** is granted. Candidates who do not test during the 60-day extension window forfeit applicable fees, will need to reapply to take the examination, and pay the applicable fees. Extension requests must be emailed to certification@aanpcert.org.


Rescheduling and Canceling an Examination

- Refer to the **AANPCB Candidate Information Bulletin** at www.psiexams.com for procedures for rescheduling or canceling an exam.
- Changes to a scheduled examination appointment may be done either online by accessing PSI's scheduling website at www.psiexams.com or by contacting a PSI Customer Service Representative at (800) 211-2754 during PSI's hours of operation.
- In order for an applicant to cancel and reschedule a test appointment, **the request must be within the 120-day window-to-test AND notice must be received by PSI at least 2 business days before the scheduled test date.**
- Candidates who do not cancel appropriately or fail to report for their scheduled examination appointment **will not** be entitled to a refund and will be responsible for fees **charged by the testing center.**

Examination Withdrawal

Applicants wishing to withdraw from taking the examination must email a request for withdrawal to certification@aanpcert.org. **If the request is received before expiration of the 120-day testing window AND the candidate has not scheduled a test appointment with PSI, the registration fee, less a processing fee, will be refunded within 30 days.**

Download the AANPCB Candidate Information Bulletin at www.psiexams.com for scheduling procedures and testing regulations.

 AMERICAN ACADEMY OF NURSE PRACTITIONERS CERTIFICATION BOARD (AANPCB)	
CERTIFICATION EXAMINATIONS OFFERED	
The following American Academy of Nurse Practitioners Certification Board examinations are offered at PSI Testing Center locations: <ul style="list-style-type: none"> • Adult Gerontology Primary Care Nurse Practitioner Certification Examination (AGNP) • Emergency Nurse Practitioner Certification Examination (ENP) • Family Nurse Practitioner Certification Examination (FNP) 	
Please refer to the AANPCB Candidate Handbook on the certification program website at www.aanpcert.org for detailed information on eligibility requirements, the application process, and exam information.	
Phone:	512-637-0500
Fax:	512-637-0540
Site:	www.aanpcert.org
Email:	certification@aanpcert.org
EXAMINATION SCHEDULING PROCEDURES	
The AANPCB application process is an online process. Qualified candidates will be approved to sit for an examination after they have completed all of the didactic and clinical coursework required in the nurse practitioner portion of their program. When an application is complete and approved, AANPCB will notify PSI of a candidate's eligibility to test. Upon notification of eligibility, PSI will send an eligibility email from support@psionline.com to the candidate which will include their candidate Eligibility ID Number and the link to schedule their examination testing date, time, and location online in the PSI System. PSI test sites are located throughout the United States and Canada.	
INTERNET REGISTRATION	
For the fastest and most convenient test scheduling process, PSI recommends that candidates access the online registration website at www.psiexams.com .	
1. Internet registration is available 24 hours a day to schedule an appointment to test. Log onto PSI's website and create an account. You must put in your email address and the EXACT spelling of your first and last name. Enter your zip code. A list of the testing sites closest to you will appear. Once you select the desired test site, available dates will appear.	
2. You will be asked to select the examination. Enter the Eligibility ID number provided in the email sent by PSI from support@psionline.com . Your record will be found and you may proceed to schedule the exam. Enter your zip code. A list of the testing sites closest to you will appear. Once you select the desired test site, available dates will appear.	
Note: Candidates requesting special accommodations because of a disability must follow PSI guidelines. DO NOT schedule your examination until your completed PSI Special Accommodations Request Form and required documentation have been reviewed and processed by the PSI Special Accommodations department.	
TELEPHONE REGISTRATION	
Candidates may also call PSI at (800) 733-9267 to contact a test operator seven days a week to schedule an appointment for	

Important Testing Site Information

Visit www.psiexams.com for the following information:

- Schedule an exam
- Required Identification for Exam Site
- Special Accommodations
- Testing Center Regulations
- Reschedule an exam
- Cancel a Scheduled exam
- Practice Examination
- Find Testing Center Sites near You

IF YOU:

- Arrive late for your scheduled examination time;
- Do not cancel at least 24 hours before the scheduled examination date;
- Miss your scheduled examination appointment; or
- Arrive without required identification ...



... YOU WILL:

- Not be able to take the examination as scheduled;
- Be responsible for paying any applicable testing center fees;
- Forfeit your fee and require a new registration number.

Examination Security Policy

The certification examinations and all items on the examinations are the exclusive property of the **American Academy of Nurse Practitioners National Certification Board, Inc.** Candidates who apply for the certification examination **must** acknowledge that they understand and agree to the following prior to taking the examination:

- Federal copyright law protects AANPCB's examinations and the items contained therein.
- Retention, possession, copying, distribution, disclosure, discussion or receipt of any AANPCB certification examination question, in whole or in part, by written, electronic, oral, or other form of communication, including but not limited to emailing, copying or printing of electronic files, and reconstruction through memorization and/or dictation, before, during or after the certification examination is strictly prohibited.
- Disclosure, discussion or receipt of any AANPCB certification examination questions and/or the examination, in whole or in part, on social media networking, in study groups, or by other methods is strictly prohibited.
- Theft or attempted theft of examination content is punishable by law.
- Candidate participation in any irregularity occurring during or after the examination, such as giving or obtaining unauthorized information or aid, as evidenced by observation or subsequent statistical analysis, may be sufficient cause to terminate participation, invalidate results of the examination, or necessitate other appropriate action per **AANPCB Disciplinary Policy**.
- Incidents regarding examination administration security will be reported to the AANPCB Board of Commissioners. Grounds for sanction may be warranted.
- PSI Testing Center Regulations may be viewed at www.psiexams.com.

Exam Scores

- AANPCB receives examination scores once weekly from PSI.
- The certification examinations are **critierion-referenced tests** designed to assess knowledge required for competent practice as a nurse practitioner. In a criterion-referenced examination, a candidate must obtain a score equal to or higher than the "**passing score**" to pass the test. The passing score represents absolute standards and is determined using psychometrically accepted standard-setting methodology (modified-Angoff). It is a complex scoring system that assesses standards that define what minimally competent candidates would know and answer correctly.
- Exam results are reported as a "**scaled score**". The total number of correct responses is called the *total raw score*. Total raw scores are converted to a scaled score ranging from 200 to 800 points using statistical procedures equivalent for all administrations of the examination. A minimum passing scaled score of 500 must be obtained to pass the examination. A candidate's performance on the examination is not compared to the performance of others taking the examination. (The scaled score is neither a "number correct" nor a "percent correct" score.)
- Candidates may obtain a **Preliminary Pass** or **Fail status** at the testing center upon completion of the examination. A preliminary report of *Pass* from the testing site is not official notification, does not indicate active certification status, and may NOT be used for employment or licensure as an NP.
- A candidate's examination score is considered confidential information and will not be disclosed to anyone other than the candidate without specific written instructions from the candidate indicating to whom and why the information is to be disclosed. Results will not be given out by telephone, email, or fax.
- Neither AANPCB nor PSI staff have access to, or are able to discuss, individual questions with candidates.

Candidates who pass the Examination

- **An official final transcript showing degree conferred and date awarded by the educational program must be received and processed before a score report is released to any candidate.** In the case of a post-graduate certificate program, a certificate may be required in addition to the official final graduate transcript.
- Candidates who pass the certification examination will receive an official score letter with final exam score and relative performance from strongest to weakest in the Testing Domains when all requirements for certification have been met. Refer to the **Domains and Tasks for the NP Examination Blueprint** in the Practice Analysis section for content that describes each testing domain in detail.
- The official score letter authorizes the use the NP-C credential and will have the *certification beginning and end date of expiration* on it.
- A packet with score letter, certification number, personalized certificate, wallet card, and lapel pin will be prepared and mailed to the certificant within 2 weeks of score release. A printable wallet card may be accessed on the individual's Online Account.
- Requested **State Board of Nursing Verification** and **Primary Source Verification** requests will be processed and sent one business day following score release (See **Verification Requests**).
- An individual who is board-certified by AANPCB as an NP-C is referred to as a **Certificant**, indicating the following requirements for certification have been/will be met:
 - Specific educational requirements that assess national competencies of the APRN core, NP role, and population focus area of practice.
 - Demonstration of professional knowledge in the NP role and population focus by successfully passing the national certification examination.
 - Current registered nurse licensure.
 - Renewal of certification via an established certification renewal process.
 - Maintenance of Continuing Competence in the NP profession by acquiring new knowledge in the professional role on an ongoing basis.
 - Subscribe to the **Scope of Practice for Nurse Practitioners** and **Standards of Practice for Nurse Practitioners** established by the American Association of Nurse Practitioners (AANP), and the Nursing: Scope and Standards of Practice (American Nurses Association).

In the Event a candidate does not pass the Examination

- **An official final transcript showing degree conferred and date awarded by the educational program must be received and processed before a score report is released to any candidate.** In the case of a post-graduate certificate program, a certificate may be required in addition to the official final graduate transcript.
- Candidates who do not pass the certification examination will receive an official score letter with final exam score and the relative performance from strongest to weakest in the Testing Domains by mail. Candidates should review the **Domains and Tasks for the NP Examination Blueprint** in the Practice Analysis section for content that describes each testing domain in detail.
- Requested State Board of Nursing (SBON) Verification Requests and primary source verification will be sent one business day following score release (See **Verification Requests**).
- Candidates may apply to retake the examination after completion of a general review course or additional advanced practice continuing education. (See **Retaking the Examination**).
- Examinations are computer-based and electronically scored. Errors in scoring are virtually non-existent. Candidates who wish to appeal their exam score will be charged a fee. (See **Appeals Policy**).

Retaking the Examination

- In order to avoid examination item compromise, candidates cannot take the certification examination more than TWICE in a calendar year (January 1st to December 31st).
- To retake the examination, apply online using the **Retake Application** option.
- Candidates are required to complete a minimum of 15 hours of advanced practice continuing education from an accredited CE provider in the areas of weakness as indicated on their score report. A general NP certification examination review course is recommended, but is not required. CE must be completed **after** the examination date which the candidate did not pass.

Special Accommodations/Arrangements

Applicants receive a 120-day window to test. This window allows applicants the flexibility of scheduling their test around their personal schedule, employment schedule, religious needs, or any other issues without requiring the need for additional accommodations or forms.

AANPCB and PSI comply with the **Americans with Disabilities Act (ADA, 1990, updated 2010)** to provide reasonable and appropriate arrangements for applicants with a disability who submit appropriate documentation.

Applicants must follow PSI guidelines regarding **Special Arrangements for Candidates with Disabilities**. Applicants requiring special arrangements must complete the **PSI Special Accommodation Request Form** and fax it, along with documentation from the medical authority or learning institution that rendered a diagnosis, to PSI at (702) 932-2666. Verification must be submitted to PSI (not AANPCB) on letterhead stationery of the authority or specialist and include the following:

- Description of the disability and limitations related to testing
- Recommended accommodation/modification
- Name, title, and telephone number of the medical authority or specialist
- Original signature of the medical authority or specialist

Applicants must allow four (4) business days after faxing the form and supporting documentation to PSI. After 4 days, call PSI at (800) 367-1565, ext. 6750 and leave a voice message. A PSI Special Accommodations representative will call the applicant back within 48 hours to schedule the exam.

The **Special Accommodations Request Form** may be found online at www.aanpcert.org/certs/policy_nondisc or at [www.psiexams.com/AANPCB Candidate Information Bulletin](http://www.psiexams.com/AANPCB_Candidate_Information_Bulletin).

General Information

Certificate and Wallet Card

- A printable wallet card is available on a certificant's online account.
- To order a duplicate certificate packet, complete and submit the [Certificate Packet Request Form](#) with fee.

Name and Address Changes

- Applicants and certificants are responsible for updating their [Online Profile](#) or notifying the certification program of changes to their legal name or contact information. Applicants may make changes to their own name and contact information at any time by logging into their Online Profile with their username and password.
- To avoid problems with identification documents at the testing center, candidates who have been approved to test, a name change request should be made after they have sat for their examination and received preliminary notification of test status to avoid problems with identification documents at the testing center.
- A [Request for Change of Name, Address, or Certification Status Form](#) may be found online. The form may be submitted via email, fax, or mail to the AANPCB office. **Please allow five business days from time of receipt for processing of mailed, emailed, or faxed requests for changes to name or contact information.**
- In the event of a legal name change, a copy of supporting documentation (e.g., court record, marriage license) providing proof of the name change must accompany the [Request for Change of Name, Address, or Certification Status Form](#).

How do I sign my name?

- In general, there is a standard way to list post-nominal credentials which is important because consumers, insurance companies, credentialing, and government officials or entities may require or expect it. Certificants should check with the state regulatory agencies regarding legal titling.
- Academic degrees are listed first because they are earned, considered permanent, and in most cases cannot be taken away from an individual. Example: Jane Doe, MSN, APRN, AGNP-C.
- Nursing licensure and APRN designation are regulated by State Boards of Nursing and may be revoked.
- Certification may be voluntary or required.

Correspondence from AANPCB

- Reminders are emailed weekly from the database if an application is missing information.
- Applicants receive an email from AANPCB informing them of their Approval to Test. By the end of next business day, the applicant should receive an email from PSI from no-reply@psionline.com with eligibility to test confirmation.
- Applicants and certificants will be notified by email of important information concerning AANPCB (e.g.; commissioner elections, changes to a certification program). General announcements are posted on the website.
- As a courtesy, postcard reminders are mailed to the certificant's last known mailing address on file 12-months and 6-months prior to expiration of the NP certification.
- The Certification Program is not responsible for email sent from AANP, AAENP, or any other Membership organization.

Commonly Asked Questions

1. How many questions are on the examination?

There are [150 questions](#) on each examination. Of the 150 questions, 15 are pretest questions that are placed on the exams to determine how well they perform statistically as a part vetting them for use as a scored question. Pretest questions cannot be distinguished from those that are scored. A test-taker's score on pretest questions does not affect a candidate's final score. A candidate's score is based solely on the 135 scored questions.

2. How long do I have to take the exam?

You have [3 hours \(180 minutes\)](#) to take the exam. Before the exam starts, you will be given an opportunity to take a tutorial that shows how to use the computer and keyboard provided. The time spent on the tutorial, up to 15 minutes, DOES NOT count as part of your test time. During the examination, minutes remaining will be displayed at the top of the screen.

3. What clinical guidelines are used when writing the examination?

New AANPCB exams are developed annually and released for administration in January. All items are reviewed to ensure consistency with therapeutic clinical guidelines published at the time exams are developed.

4. What specific Age Parameters are used?

[Specific age parameters are not defined](#) for any population on AANPCB examinations. The FNP population is lifespan, and the A-GNP population is young adult (including adolescents) to elderly. The *Consensus Model for APRN Regulation* does not define specific age parameters for any of the population foci, therefore, growth and development are used as the basis of age-related changes for constructing the certification exams and for NP practice. (See [Examination Blueprint Domains](#)). Legal scope of practice is defined by state boards of nursing in their nurse practice acts.

5. What is the difference between the "Program Completed" and "Degree Conferred" dates?

[Program Completion date](#) is the date all didactic courses and clinical hours in the NP program are completed. [Degree Conferred date](#) is the date the graduate degree or post-graduate certificate is/will be awarded. Many students have the ability to complete their NP program before their scheduled graduation and degree conferral date (e.g., DNP students).

6. What are the major components of the examination development process?

- [Practice Analysis](#) - Examinations are based on a practice analysis, also known as a [Role Delineation Study](#), which is an objective measure of the knowledge and skills required of competent NPs and provide the foundation for defining AANPCB [Knowledge Areas and Testing Domains](#). Practice analysis methodology used is designed to adhere to best practices in the testing industry. Utilizing nationally established NP core and population specific competencies, a task force of SMEs delineate commonly seen patient conditions and identify procedures performed in clinical practice. This information is validated via survey research by NPs who are engaged in clinical practice, work with different patient populations, and reside in different U.S. geographical areas. Organizations typically conduct a practice analysis every 3 to 5 years, depending on the rate of change in the profession that the certification program represents. Periodic studies ensure that the examination continues to assess what is most relevant to current practice.
- [Examination Blueprint](#) - Specifications derived from the practice analyses serve as the Examination Blueprint. NP content experts, referred to as subject matter experts (SMEs), develop and review all items for content relevance, competency level, currency, and importance.
- [Examination Construction](#) - Development of all items is directly linked to the Examination Blueprint to guarantee consistent emphasis on content areas from one examination to another. Each item is reviewed for psychometric quality; editorial staff review each item for grammar, spelling, and usage; and additional panels of content experts conduct a final review of each certification examination. All items are secured in an Exam Item Bank. AANPCB maintains ownership of all items in the bank. Access is restricted to authorized personnel requiring approval of the CEO.

- **Standard Setting** - Industry-accepted, psychometrically sound performance standards are used to establish the Passing Point for all new exams.

7. I completed an Adult NP (ANP) program. Can I take the Adult-Gerontology NP (AGNP) certification examination?

Certification specialty must align with the population area of an applicant's education program. Graduates of an Adult NP program, in many cases, do not qualify for the AGNP certification and should contact their academic program to clarify if their ANP program met AGNP program requirements. Documentation from the academic program administrator may be required to confirm eligibility.

Practice Examination

Practice Examinations provide individuals with the opportunity to familiarize themselves with the format of test questions on an examination. The Practice Exam meets the same examination blueprint specifications. Like the certification examinations, questions were developed by nurse practitioner content experts.

Performance on a Practice Exam is **not** a predictor of whether a candidate will pass the competency-based certification examination. Taking the Practice Exam:

- Is not required
- Does not give an advantage over candidates who do not choose to take them.
- Is not the only or preferred route to adequate preparation for the certification examination.

Candidates should understand all of the following prior to taking a practice test:

- Taking, completing, and passing the Practice Examination does not in any way guarantee the passing of the actual certification examination nor does it result in certification.
- Practice Exams are an optional assessment tool and not a study guide for a certification exam.
- There is only one version of the A-GNP Practice Examination.
- There is only one version of the FNP Practice Examination.
- Each exam has 75 multiple-choice items.
- Test takers have 90 minutes in which to complete the practice test and review their scores.
- The Practice Examination score is reported in percentile (unlike the scaled score reports of the certification examination).
- Practice Examination scores remain confidential and are not accessible by, or used by, for certification purposes.
- Continuing education credit is not awarded for completion of the practice exam.
- AANPCB staff do not have access to the practice examination and cannot respond to technical difficulties that may arise during the administration of the exam.
- Register at **PSI Exams online** at <https://candidate.psiexams.com> for the Practice Examination.

Primary Source Verification of Certification

Primary Source Verification provides confirmation of specific information from the original source to determine the qualifications of an individual. AANPCB conducts and provides primary source verification of nurse practitioner certification to state boards of nursing, employers, third-party vendors, and the public upon formal written request. AANPCB also provides verification of a candidate's eligibility-to-test to state boards of nursing per written request from the candidate. Information accessed through this process is a reflection of AANPCB records.

- To protect the confidentiality of applicants, written authorization is required before information is released regarding an individual's scores or status in the certification program. Disclosure will not take place if it violates an applicant, candidate, or certificant right of privacy. Sensitive and confidential information received by AANPCB is used solely for the purposes of certification and verification and cannot be shared without written permission or required by law.
- Requests for Verification information will not be accepted or provided by telephone.
- Electronic online requests made by a vendor must be authorized by the candidate or certificant granting permission to disclose verification of eligibility to test or to verify the NP's certification.
- While every effort is made to ensure that the information provided is accurate and reliable, delays in posting data, updating data, or human/mechanical error remains a possibility. AANPCB will not be liable for any damages resulting from use of the information obtained through the verification process.
- Active duty military personnel will not be charged a fee for a verification request.
- Verification request forms, fees, and additional information is found online at www.aanpcert.org.

State Boards of Nursing (SBON)

- State Boards of Nursing are not automatically notified of an applicant's *Eligibility-to-Test* or of an exam taken.
- AANPCB provides verification of certification status to SBON free of charge.
- A completed **State Board of Nursing Notification Form** is required to notify a SBON of a candidate's Eligibility-to-Test or certification status upon release of exam score.
- A completed **State Board of Nursing Notification Form** is required to notify a SBON of a NP's current certification status (certified or not certified) and renewal.
- Requests are usually processed within one business day of receiving a State Board of Nursing Notification Form.
- Requests for verification submitted the same week that a candidate tests may reflect that the individual is not certified.
- Verification of certification status is delivered by email or regular mail according to individual state board preference.
- A SBON may request notification of certification, failure, or expiration status.

Third-Party Vendor

- A completed **Primary Source Verification Order Form** is required to send employers an official letter of verification of NP certification. The **Primary Source Verification Order Form** is available online.
- Employers and related organizations may purchase **Prepaid Verification Vouchers** to order primary source verification of individuals holding active AANPCB certification. The verification voucher process is available online under the tab **Verify**.
- Verification requests must be accompanied by a current signed release from the NP and dated within 6 months of the request. Processing time for a third-party vendor verification request of certification may take up to 10 business days from receipt of request and is subject to fee.
- Verification letters will be sent via email. Embossed hard copies are available upon request and will be mailed.

Appendix A - 2016 Adult-Gerontology Nurse Practitioner Practice Analysis

Domains and Tasks for the Adult-Gerontology NP Examination

Test specifications derived from the AGNP practice analysis serve as the Examination Blueprint. Test specifications are based on two domain parameters:

- **Domain I (Practice – (Assess, Diagnose, Plan, Evaluate))**
- **Domain II (Patient Age - Developmental Parameters)**

A total of 135 scored items are on each examination. These items are distributed across Domain I (Practice) and then further divided across Domain II (patient age parameters). Percentage weights and number of test questions in each domain are shown in the following Examination Blueprint. Age Parameters are not defined for any population as AANPCB uses growth and development for constructing certification exams.

A-GNP EXAMINATION BLUEPRINT

DOMAIN - I Practice	# items	% items
01 – Assess	45	33%
02 – Diagnose	34	25%
03 – Plan	32	24%
04 – Evaluate	24	18%
TOTAL	135	100.0%

DOMAIN II - Patient Age Ranges	# items	% items
Adolescent (early/ late)	3	2%
Young Adult	18	13%
Adult	40	30%
Older Adult	51	38%
Elderly	23	17%
TOTAL	135	100%

DOMAIN 01 - ASSESS

Task 0101 Obtain subjective information including but not limited to relevant medical history (e.g., biopsychosocial, economic, environmental, family, military, travel, occupational, preventive, functional ability, and medication components, chief complaint, history of present illness, health goals, and review of systems) to determine health needs and problems by:

- interviewing patient/family/appropriate others
- reviewing records
- identifying other healthcare providers caring for the patient
- identifying both patient- and population-specific health and psychosocial risk factors
- evaluating caregiver role and capabilities as appropriate

Task 0102 Obtain objective information based on demographics, health history, and comorbidity/multi-morbidity to further define health needs and problems by:

- performing physical examinations
- ordering/performing/supervising diagnostic tests and procedures
- ordering/performing/supervising screening tests

DOMAIN 02 - DIAGNOSE

Task 0201 Formulate differential diagnoses by:

- synthesizing and analyzing subjective/objective information
- differentiating between normal and abnormal changes associated with development and aging
- prioritizing differential diagnoses, including recognizing urgent and emergent conditions

Task 0202 Establish definitive diagnoses by:

- obtaining additional subjective information as indicated
- ordering, performing, and interpreting additional diagnostics
- performing and interpreting additional examinations e.g., physical, psychosocial, functional, mental status
- synthesizing and analyzing additional information

DOMAIN 03 - PLAN**Task 0301** Establish a patient-centered plan of care that is safe, timely, individualized, cost-effective, consistent with best evidence, age-appropriate, and culturally-sensitive in order to address the diagnoses by:

- considering comorbidity/multi-morbidity
- considering health goals
- including patient/family/appropriate others as active participants
- ordering, performing, supervising and interpreting further diagnostics
- prescribing/ordering/administering non-pharmacologic therapies/procedures/equipment
- prescribing/ordering/administering pharmacologic therapies
- providing relevant education and/or counseling
- providing health promotion, injury prevention/risk reduction, and anticipatory guidance
- providing for appropriate follow-up and continuity of care
- seeking consultation, referring to and/or coordinating care with other health professionals and community resources
- managing transitions between health care settings
- facilitating advance care planning
- advocating for patients and families
- responding to urgent and emergent situations

DOMAIN 04 - EVALUATE**Task 0401** Determine the quality and effectiveness of the plan of care based on outcomes by:

- assessing patient and/or caregiver response to pharmacologic and non-pharmacologic therapies
- evaluating impact of therapies on health goals
- collecting additional subjective/objective information as needed
- evaluating outcomes of services from other healthcare providers
- determining patient's ability to adhere to plan of care

Task 0402 Modify the plan of care as appropriate based on outcomes by:

- including patient/family/appropriate others as active participants
- ordering, conducting, supervising and interpreting further diagnostics
- adjusting therapies
- providing additional education and/or counseling
- initiating referrals/consultations
- providing for ongoing follow-up

A-GNP Knowledge Areas

- Health promotion, disease prevention, and anticipatory guidance
- Anatomy, physiology, and pathophysiology
- Therapeutic communication
- Health history
- Signs and symptoms
- Physical examination
- Diagnostic and therapeutic tests and/or procedures
- Clinical decision-making
- Differential diagnosis

- Pharmacologic therapies
- Polypharmacy
- Non-pharmacologic/ complementary/ alternative therapies
- Biopsychosocial principles/ theories
- Patient, family, and caregiver education and counseling
- Community resources
- Evidence-informed practice
- Legal and ethical issues
- Ethno-cultural and spiritual competency
- Principles of epidemiology
- Health literacy
- Principles of risk management
- Palliative and end of life care
- Pain management
- Healthcare economics
- Interprofessional practice
- Information management
- Crisis management/ disaster preparedness
- Settings of care
- Comorbidity/multi-morbidity

A-GNP Procedures

- Skin lesion removal
 - Skin biopsy
 - Joint aspirations and injections
 - Therapeutic injections
 - Wound management
 - Surgical debridement
 - Incision and drainage
 - Foreign body removal
 - Nail removal
 - Cerumen removal
 - Fluorescein dye
 - Splinting
 - Casting
 - Pulmonary function testing and office spirometry
 - Pap tests
 - In-dwelling contraceptive management
 - Long-term hormonal implantation
 - Microscopy
 - Suturing
 - Other
-

Appendix B - 2015 Family Nurse Practitioner Practice Analysis

Domains and Tasks for the Family NP Examination

Test specifications derived from the FNP practice analysis serve as the Examination Blueprint. Test specifications are based on two domain parameters:

- **Domain I (Practice - Assessment, Diagnose, Plan, Evaluate)**
- **Domain II (Patient Age - Developmental Parameters)**

A total of 135 scored items are on each examination. These items are distributed across Domain I (Practice) and then further divided across Domain II (patient age parameters). Percentage weights and number of test questions in each domain are shown in the following Examination Blueprint. Age Parameters are not defined for any population. AANPCB uses growth and development for constructing certification exams.

FNP EXAMINATION BLUEPRINT

DOMAIN I - Practice	# items	% items
01 – Assess	48	36%
02 – Diagnose	33	24%
03 – Plan	31	23%
04 – Evaluate	23	17%
TOTAL	135	100.0%

DOMAIN II - Patient Age Ranges*	# items	% items
Prenatal	4	3%
Pediatric (includes Newborn & Infant)	19	14%
Adolescent (early /late)	24	18%
Adult	50	37%
Geriatric	29	21%
Elderly	9	7%
TOTAL	135	100%

DOMAIN 01 - ASSESS

Task 0101 Obtain subjective patient information including but not limited to relevant medical history (including biopsychosocial, economic, environmental, family, military, travel, occupational, preventive components), chief complaint, history of present illness, and review of systems to determine health needs and problems by:

- interviewing patient/family/appropriate others
- reviewing records
- obtaining information regarding additional healthcare providers involved in patient care
- identifying both patient- and population-specific health, medical, and psychosocial risk factors

Task 0102 Obtain objective information based on patient age/developmental level, health history, and comorbidities to further define and evaluate health needs and problems by:

- performing physical examinations
- ordering/performing/supervising diagnostic tests and procedures
- ordering/performing/supervising screening tests

DOMAIN 02 - DIAGNOSE

Task 0201 Formulate differential diagnoses by:

- synthesizing and analyzing subjective/objective information
- prioritizing potential diagnoses, including recognizing urgent and emergent conditions

Task 0202 Establish definitive diagnoses by:

- ordering, performing, supervising, and interpreting additional diagnostic tests
- performing and interpreting additional physical examinations
- synthesizing and analyzing additional information

DOMAIN 03 - PLAN

Task 0301 Establish a safe plan of patient-centered treatment and care that is individualized, cost effective, consistent with best evidence, age appropriate, and culturally-sensitive in order to address the diagnoses by:

- considering co-morbidities
- ordering, performing, supervising, and interpreting results of further tests
- prescribing, ordering, and administering pharmacological therapies
- prescribing, ordering, and administering non-pharmacologic therapies and/or procedures
- providing relevant education and/or counseling
- providing anticipatory guidance, health promotion, and injury prevention
- making referrals to and engaging in consultation with other health professionals and community resources
- including patient/family/appropriate others as active participants
- providing for appropriate follow-up
- responding to patients in urgent and emergent situations

DOMAIN 04 - EVALUATE

Task 0401 Determine the effectiveness of the plan of treatment and care based on outcomes by:

- assessing patient response(s)
- collecting additional subjective and/or objective information as needed

Task 0402 Modify the plan of treatment and care as appropriate based on outcomes by:

- ordering, conducting, supervising and interpreting further tests
- adjusting therapies
- providing additional education
- initiating referrals and consultations
- coordinating follow-up and monitoring plan of care
- including patient, family, and/or appropriate others as active participants

FNP Knowledge Areas

- Health promotion, harm reduction, and disease prevention
- Anatomy, physiology, and pathophysiology
- Therapeutic communication, change management, and crisis management
- Health history
- Sign and symptoms
- Physical examination
- Diagnostic and therapeutic tests and/or procedures
- Clinical decision-making
- Differential diagnosis
- Pharmacological therapies
- Non-pharmacological/ complementary/ alternative therapies
- Biopsychosocial principles/theories
- Patient and family education and counseling
- Community resources
- Healthcare economics
- Evidence-informed practice
- Legal and ethical issues
- Cultural competence
- Principles of epidemiology, population health, and social determinants of health
- Practice management

FNP Procedures

- Minor Lesion Removal
 - Microscopy
 - Pap Tests
 - Joint Aspirations And Injections
 - Skin Biopsy
 - Therapeutic Injections
 - Wound Closure
 - Splinting
 - Casting
 - Wound Management
 - Incision And Drainage
 - Diagnostic Interpretation Of ECG
 - Diagnostic Interpretation Of X-Ray
 - Cerumen Removal
 - Pulmonary Function Testing & Office Spirometry
 - Fluorescein Dye
 - Long-Term Contraceptive Management
 - Long-Term Hormonal Implantation
 - Foreign Body Removal
 - Nail Removal
-

Appendix C - Sample Questions

Listed below are **examples of the type of questions** that are on the certification examinations. They range from knowledge of pathophysiology, pharmacology, physical assessment, diagnosis, treatment and follow-up to testing for synthesis of information in clinical decision making while carrying out those activities.

THE FOLLOWING QUESTIONS ARE EXAMPLES ONLY. THESE QUESTIONS ARE NOT UPDATED ANNUALLY LIKE THE ACTUAL EXAMINATIONS. NO CORRECT ANSWER IS GIVEN SINCE ANSWERS MAY CHANGE WITH EVOLVING EVIDENCE.

1. A patient who presents with fever, cervical lymphadenopathy, tonsillar exudate, and fine maculopapular rash most likely has:
 - a. streptococcal pharyngitis
 - b. secondary syphilis
 - c. pharyngeal candidiasis
 - d. mononucleosis
2. A 24 year-old patient complains of intermittent heartburn, which has become worse since he started his new job. The discomfort is worse after eating and at night, and is relieved by antacids. Your most likely diagnosis is:
 - a. diffuse esophageal spasm
 - b. infectious esophagitis
 - c. gastroesophageal reflux disease
 - d. carcinoma of the esophagus
3. A 65 year old patient presents with a history of recurrent right upper quadrant pain associated with intermittent nausea and vomiting. Laboratory tests reveal isolated elevations of serum alkaline phosphatase and normal amylase levels. Physical examination results are within normal limits. The tentative diagnosis is:
 - a. biliary obstruction
 - b. peptic ulcer
 - c. chronic pancreatitis
 - d. hepatic dysfunction
4. A 37 year-old male diagnosed with hypertension has been treated with a low sodium diet and hydrochlorothiazide (HCTZ) 50 mg qd for the past two months. He denies Family history of cardiovascular disease. At today's follow-up visit his BP=150/90 and T=100 F. Physical examination reveals no bruits, clear chest, no atrial gallop, edema and tenderness of the left ankle, and an intact neurological system. Which laboratory values will provide the most useful follow-up information?
 - a. serum sodium and potassium
 - b. total serum cholesterol and serum glucose
 - c. serum uric acid and complete blood count
 - d. blood urea nitrogen and creatinine
5. In order to determine the presence of postural hypotension, blood pressure should be taken in which of the following positions?
 - a. sitting to standing
 - b. supine to sitting
 - c. supine to standing
 - d. standing to supine

6. A 16 year-old female patient presents with an edematous ankle. Your examination reveals a pinpoint wound at the lateral aspect of the ankle and X-rays show a distal fibular fracture. In addition to managing the fracture, which intervention is most appropriate?
 - a. administer tetanus prophylaxis and submit wound scraping for culture
 - b. irrigate the wound and apply topical antibiotic
 - c. administer tetanus prophylaxis and prescribe oral antibiotics
 - d. apply topical antibiotic and cover the wound with a sterile dressing
 7. Conductive hearing loss involves the:
 - a. inner ear
 - b. middle ear
 - c. 5th cranial nerve
 - d. 8th cranial nerve
 8. A 70 year-old female with urinary stress incontinence should be instructed to:
 - a. perform abdominal strengthening exercises twice a day
 - b. perform pelvic floor muscle (Kegel) exercises 100 times per day
 - c. perform pelvic floor (Kegel) exercises 35-40 times per day
 - d. void frequently
 9. The hormone responsible for producing a positive pregnancy test is:
 - a. Human chorionic gonadotropin
 - b. Estradiol
 - c. Human growth hormone
 - d. Progesterone
 10. A 78 year old patient presents with complaints of left-sided "rib pain" during the past few days. The patient also complains of headache, a feverish feeling, and general malaise. Physical examination reveals an area of papular eruptions with a few vesicles on the left side of the chest. The most likely cause of the patient's symptoms is:
 - a. herpes zoster
 - b. eczema
 - c. intertrigo
 - d. actinic keratosis
 11. A seven year old who presents with two lesions on the extremities is diagnosed with impetigo. Which topical treatment is most appropriate?
 - a. Clotrimazole (Lotrimin) cream
 - b. Mupirocin (Bactroban) cream or lotion
 - c. Hexachlorophene emulsion (pHisoHex)
 - d. Acyclovir (Zovirax) ointment
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Appendix E - AANP Scope of Practice for Nurse Practitioners



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Scope of Practice for Nurse Practitioners

Professional Role

Nurse practitioners (NPs) are licensed, independent practitioners who practice in ambulatory, acute and long-term care as primary and/or specialty care providers. Nurse practitioners assess, diagnose, treat, and manage acute episodic and chronic illnesses. NPs are experts in health promotion and disease prevention. They order, conduct, supervise, and interpret diagnostic and laboratory tests, prescribe pharmacological agents and non-pharmacologic therapies, as well as teach and counsel patients, among other services.

As licensed, independent clinicians, NPs practice autonomously and in coordination with health care professionals and other individuals. They may serve as health care researchers, interdisciplinary consultants, and patient advocates. NPs provide a wide-range of health care services to individuals, families, groups, and communities.

Education

NPs are advanced practice registered nurses who obtain graduate education, post-master's certificates, and doctoral degrees. Educational preparation provides NPs with specialized knowledge and clinical competency which enable them to practice in various health care settings, make differential diagnoses, manage and initiate treatment plans and prescribe medications and treatment. National NP education program accreditation requirements and competency-based standards ensure that NPs are equipped to provide safe, high-quality patient care from the point of graduation. Clinical competency and professional development are hallmarks of NP education.

Accountability

The autonomous nature of NP practice requires accountability to the public for delivery of high-quality health care. NP accountability is consistent with an ethical code of conduct, national certification, periodic peer review, clinical outcome evaluation, and evidence of continued professional development.

Responsibility

The patient-centered nature of the NP role requires a career-long commitment to meet the evolving needs of society and advances in health care science. NPs are responsible to the public and adaptable to changes in health care. As leaders in health care, NPs combine the roles of provider, mentor, educator, researcher, and administrator. NPs take responsibility for continued professional development, involvement in professional organizations, and participation in health policy activities at the local, state, national and international levels. Five decades of research affirms that NPs provide safe, high-quality care.

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<https://www.aanp.org/images/documents/publications/scopeofpractice.pdf>

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Appendix F - AANP Standards of Practice for Nurse Practitioners



Standards of Practice for Nurse Practitioners

I. Qualifications

Nurse practitioners are licensed, independent practitioners who provide primary and/or specialty nursing and medical care in ambulatory, acute and long-term care settings. They are registered nurses with specialized, advanced education and clinical competency to provide health and medical care for diverse populations in a variety of primary care, acute and long-term care settings. Master's, post-master's or doctoral preparation is required for entry-level practice (AANP 2006).

II. Process of Care

The nurse practitioner utilizes the scientific process and national standards of care as a framework for managing patient care. This process includes the following components.

A. Assessment of health status

The nurse practitioner assesses health status by:

- Obtaining a relevant health and medical history
- Performing a physical examination based on age and history
- Performing or ordering preventative and diagnostic procedures based on the patient's age and history
- Identifying health and medical risk factors

B. Diagnosis

The nurse practitioner makes a diagnosis by:

- Utilizing critical thinking in the diagnostic process
- Synthesizing and analyzing the collected data
- Formulating a differential diagnosis based on the history, physical examination and diagnostic test results
- Establishing priorities to meet the health and medical needs of the individual, family, or community

C. Development of a treatment plan

The nurse practitioner, together with the patient and family, establishes an evidence-based, mutually acceptable, cost-awareness plan of care that maximizes health potential. Formulation of the treatment plan includes:

- Ordering and interpreting additional diagnostic tests
- Prescribing or ordering appropriate pharmacologic and non-pharmacologic interventions
- Developing a patient education plan
- Recommending consultations or referrals as appropriate

D. Implementation of the plan

Interventions are based upon established priorities. Actions by the nurse practitioners are:

- Individualized
- Consistent with the appropriate plan for care
- Based on scientific principles, theoretical knowledge and clinical expertise
- Consistent with teaching and learning opportunities

E. Follow-up and evaluation of the patient status

The nurse practitioner maintains a process for systematic follow-up by:

- Determining the effectiveness of the treatment plan with documentation of patient care outcomes
- Reassessing and modifying the plan with the patient and family as necessary to achieve health and medical goals

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III. Care Priorities

The nurse practitioner's practice model emphasizes:

- A. Patient and family education
The nurse practitioner provides health education and utilizes community resource opportunities for the individual and/or family
- B. Facilitation of patient participation in self care.
The nurse practitioner facilitates patient participation in health and medical care by providing information needed to make decisions and choices about:
 - Promotion, maintenance and restoration of health
 - Consultation with other appropriate health care personnel
 - Appropriate utilization of health care resources
- C. Promotion of optimal health
- D. Provision of continually competent care
- E. Facilitation of entry into the health care system
- F. The promotion of a safe environment

IV. Interdisciplinary and Collaborative Responsibilities

As a licensed, independent practitioner, the nurse practitioner participates as a team leader and member in the provision of health and medical care, interacting with professional colleagues to provide comprehensive care.

V. Accurate Documentation of Patient Status and Care

The nurse practitioner maintains accurate, legible and confidential records.

VI. Responsibility as Patient Advocate

Ethical and legal standards provide the basis of patient advocacy. As an advocate, the nurse practitioner participates in health policy activities at the local, state, national and international levels.

VII. Quality Assurance and Continued Competence

Nurse practitioners recognize the importance of continued learning through:

- A. Participation in quality assurance review, including the systematic, periodic review of records and treatment plans
- B. Maintenance of current knowledge by attending continuing education programs
- C. Maintenance of certification in compliance with current state law
- D. Application of standardized care guidelines in clinical practice

VIII. Adjunct Roles of Nurse Practitioners

Nurse practitioners combine the roles of provider, mentor, educator, researcher, manager and consultant. The nurse practitioner interprets the role of the nurse practitioner to individuals, families and other professionals.

IX. Research as Basis for Practice

Nurse practitioners support research by developing clinical research questions, conducting or participating in studies, and disseminating and incorporating findings into practice.

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