Preparing for the Pain Management Certification Exam

Pamela Merriam, MSN, RN-BC, ANP-BC, OCN
Certified, Pain Management Nursing
Nurse Practitioner, Division of Pain Medicine
Department of Anesthesiology
Keck School of Medicine of USC

Conflict of Interest Disclosure

• Authors Conflicts of Interest
  • Pamela Merriam, No Conflict of Interest
Know Your Exam!

Pain Management Certification History

- ANCC (American Nurses Credentialing Center) sponsored exam
- This is a computer based test and is offered throughout the year
- There are almost 1900 nurses certified in pain management as of 2014
- First given in October 2005 with 302 nurses certified

Exam Requirements

Description of Practice

- The nurse in pain management provides comprehensive nursing care to clients experiencing acute and chronic pain from a variety of causes such as cancer, labor and delivery, post op, headaches, etc.
- The nurse uses pain management knowledge and skills to make clinical decisions, develop client diagnosis, establish a plan of care, and evaluate the effectiveness of care for pts of all ages, including special populations. Care is provided in collaboration w/ other HCP.
Exam Requirements

Eligibility

• Current, active RN license
• Practiced the equivalent of 2 yrs full time as an RN
• Practiced in a nursing role which involves aspects of pain management for at least 2,000 hrs in the 3 yrs prior to application
• Completed 30 hrs of CEs in the 3 yrs prior to taking the exam, w/ min of 15 hrs related to pain management

Pain Management Test

Content Outline

• 175 questions; 150 are scored and 25 are non-scored pretest questions
• 3.5 hours
• Pass/Fail. Minimum 350/500 score

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>DOMAINS OF PRACTICE</th>
<th>NO OF QUEST.</th>
<th>PERCENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Foundations of Pain</td>
<td>29</td>
<td>19.33%</td>
</tr>
<tr>
<td>II</td>
<td>Pain Assessment &amp; Reassessment</td>
<td>40</td>
<td>26.67%</td>
</tr>
<tr>
<td>III</td>
<td>Intervention</td>
<td>65</td>
<td>43.33%</td>
</tr>
<tr>
<td>IV</td>
<td>Education and Collaboration</td>
<td>16</td>
<td>10.67%</td>
</tr>
</tbody>
</table>

Computer-Based Testing

CBT still offers the flexibility of paper and pencil testing: you can change answers, move around in the test, and mark questions for further review

• Apply online OR mail, 8 wks to evaluate application
• Make appt. w/in 90 days of receiving Eligibility Notice
• More than 300 testing sites in the US
• 10 sites in So. California
• Check testing sites at www.prometric.com/ANCC
• $395 for non-member
• $270 for ANA member
• $340 for ASPMN member
• Renew every 5 years
**The Psychology of Test Preparation**

- **Self Awareness**
  - Success begins with knowing your strengths and weaknesses
  - What kind of test taker are you?
    - Rusher
    - Personalizer
    - Turtle
    - Squisher
    - Philosopher
    - 2nd Guesser
    (see appendix)
- **Attitude**
  - Attitude is everything!
  - Winners:
    - set goals
    - establish plans
  - Address Test Anxiety

---

**The Psychology of Test Preparation**

- **Self Confidence/Self Esteem**
  - Success is shaped by self confidence and feelings of self worth
  - Perseverance
    - No goal is achieved without perseverance
  - Motivation
    - Motivation is the muscle behind success
  - Self-Fulfilling Prophecy
    - The outcome of your efforts is directly related to your self-expectancy

---

**Test Related Anxiety**

- **Identify Source**
  - Limited preparation
  - Past experiences
  - Comparison with others
  - Lack of confidence

- **Tips**
  - Preparation
  - Do not focus on past
  - Study Efficiently
  - Space out activity vs cramming
  - Focus on Content Outline topics
  - Take Practice Tests
  - Externalize
Set Your Goal(s)

• "My goal is to pass the ANCC exam in September."
• Setting goals is an invitation to success!
• RSVP to your goals. Goals must:
  • Be Reasonable
  • Be Specific
  • Be Verifiable
  • Have a Payoff

Assess Learning Needs

• Take an inventory of your knowledge of the 4 Domains of Practice (see the Content Outline)
• Rank the areas
  • 1: unfamiliar
  • 4: confident in
• Study those areas you identified as learning needs; especially those weighted heavily on the exam
• Take practice tests
• Dissect multiple choice questions
• Eliminate distracters
• Do not read into question
• Do not miss KEY word(s)

Build A Study Plan

• Begin approx. 6 months before exam
• Create a table for your study plan;
  • goals
  • objectives
  • planned activities
  • target dates for completion
• Place your target dates on the calendar that you use to organize your activities
• Choose your study methods
  • Self, buddy, group, computer, practice tests, etc.
Collect Materials

- ANCC Testing Information
  - Test Content Outline
  - Test Reference List
  - Sample Test Questions & Answers
  - Test Taking Strategies ($)
- ASPMN Core Curriculum
- ASPMN Publications
  - Certification Review Course, $150
  - Practice Test Booklet, $35
  - Study Guide, $40.95
  - Scope & Standards of Practice, $15
  - Position Papers
  - Self Directed Learning Programs, $75 each
    - Epidural Analgesia for Acute Pain Mgmt in Adults
    - Intravenous Patient Controlled Analgesia in Adults

Rated 4-5 Stars on Amazon.com

Carry Out Your Plan

- Ask a colleague (or CNS) to hold you accountable
- Study Group
- Enlist your friends or family as cheerleaders
- Provide yourself with frequent small rewards for completing objectives
Take the Test with Confidence!

- You have worked hard to be prepared for the exam, be confident that you have what it takes to pass the test
- Listen carefully to the instructions given
- Answer every question, as there is no penalty for incorrect answers
- Breathe!!

Test Day Checklist

- Be sure to:
  - Get at least 6 hours of sleep the night before (night shift at least 2-3 nights before)
  - Wake up at your regular time and follow your regular breakfast routine
  - Limit caffeine
  - Exercise briefly (invigorates your mind with cerebral blood flow) but not vigorously
- Arrive 15 minutes early
- Don’t Forget to Bring:
  - Directions to the test site
  - Money for parking
  - Admission ticket (Eligibility Notice)
  - One form of government issued picture ID
  - A watch
  - Snacks and bottled water for after the test
  - PRN medications you need frequently (inhalers, ibuprofen)

Relaxation During the Exam

- Positive Self Talk:
  - “I am calm and relaxed.”
  - “I am well prepared and will pass this exam.”
  - “I can focus.”
  - “I’m in control.”
- Relaxation Techniques:
  - Full Body Relaxation
  - Relaxation Breathing
  - Control-Alt-Delete
  - Visualization
    - Your Success
    - Your favorite relaxing place
AFTER THE EXAM

• Celebrate your accomplishment
  (you finished the exam, which is a major accomplishment in itself)

• Resist the urge to “compare answers” or discuss questions with colleagues...
  Let the test go. It is behind you!

• Treat yourself... Dinner out? Weekend Away?
  Massage? New outfit?
  YOU DESERVE IT!

THANK YOU !!

PAIN MANAGEMENT NURSING EXAM

SAMPLE QUESTIONS
The pain mgmt nurse notices a patient grimacing as he moves from the bed to a chair. The pt tells the nurse that he is not experiencing any pain. The nurse:

1. Clarifies the patient’s report by stating the patient’s nonverbal behavior
2. Confronts the patient’s denial of pain
3. Obtains an order for pain medication from the HCP
4. Supports the patient’s stoic behavior

Which medication is the best choice to treat BTP for a pt who is currently receiving methadone 10 mg q 8hrs?

1. Codeine
2. Controlled-release morphine
3. Immediate-release morphine
4. Transdermal fentanyl

An 86yr old patient with chronic low back pain is being started on a new nonsteroidal anti-inflammatory drug. The pain mgmt nurse expects the starting dose to be:

1. The usual recommended dose
2. 50% or less of the usual recommended dose
3. 75% of the usual recommended dose
4. 90% of the usual recommended dose
Chronic neuropathic pain is caused by an accident, injury or certain illness(es). Which of the following conditions may occur with chronic neuropathic pain?

1. Muscle Atrophy
2. Rough toughened skin
3. Excessive hair growth
4. Increased sensation to pinprick or temperature

A 62 yr old woman is receiving SR morphine (MS Contin) 15 mg q 12 hrs The pain management nurse knows that this patient understands the use of the medication when the patient says:

1. “I’m going away on vacation next month and the md(np can just call my medication into the pharmacy”
2. “I know I can take a few extra doses during the day if my pain gets really bad”
3. “I understand that by taking this medication, I am now addicted”
4. “I will make my next appointment a week before I need a refill on my prescription”

Which of the following is NOT a common obstacle to successful pain management?

1. Inaccurate knowledge about pharmacologic principles
2. A lack of basic assessment skills
3. A lack of available knowledge in the field
4. Legal impediments
During your initial assessment of pain, you ask your pt to help establish a ‘functional goal’. Your pt asks for an explanation. The best answer would be:

1. A pain level that allows you to sleep well at night
2. Type of activities you would like to participate in
3. A pain level that allows you to perform activities of daily living
4. Resolution of their pain syndrome

What quality improvement strategy is most likely to succeed when changing existing system practices which interfere with effective pain management?

1. Educating the medical staff
2. Lobbying for administrative support
3. Selecting several pain rating scales
4. Using an interdisciplinary approach

Pain related to Spinal Cord Injury/Disease may be described by all of the following EXCEPT:

1. Hyperesthesia
2. Allodynia
3. Adenia
4. Hyperalgesia
When converting the dosage of IV morphine to epidural morphine, the IV dosage is divided by what number?

1. 3  
2. 6  
3. 10  
4. 12

Which of the following statements about assessing pain in older adults are FALSE?

a. Regardless of whether there is a change in pain perception in older pts., the pt. self-report remains the best indicator of the pain experience  
b. In general, older pts. readily report pain during routine office visits, so obtaining a thorough pain assessment is not difficult  
c. On initial presentation, the HCP should assess the older pt. for evidence of persistent pain  
d. As part of the pain assessment, a thorough PE, med review, pt./family education, & evaluation of psych, social & behavioral parameters is recommended

1. a only  
2. b only  
3. a and b only  
4. a, b, and c

What are key points in assessing older patients with pain?

a. Recognize that words such as ‘burning’, discomfort, ‘aching’, ‘soreness’, and other terms may be a substitute for ‘pain’  
b. Interpret nonverbal and vocalized pain behaviors, as well as eliciting a history of recent changes in function as indicators of pain  
c. Be aware of the influence of persistent pain on mood and psychological function and employ age-specific assessment scales  
d. Evaluate ADLs and performance of function

1. a only  
2. a and b  
3. a, b, and c  
4. all of the above
Which of the following may contribute to undertreatment of pain in children?

a. The belief that infants and children do not feel pain or suffer from it less than adults
b. Lack of routine pain assessments
c. Fears of respiratory depression or other adverse effects of medication
d. Lack of knowledge about newer treatment modalities and proper dosing strategies for analgesics in children

1. a only 2. a and b 3. a, b, and c 4. all of the above

Which of the following statements are TRUE about adjuvant analgesics?

a. While tricyclic antidepressants do not have FDA-approved labeling for pain, the WHO analgesic ladder does recognize their use in pain treatment
b. The anticonvulsant gabapentin is used to treat chronic neuropathic pain d/t diabetes and herpes zoster
c. Adjuvant analgesics are often used to treat neuropathic pain
d. Newer antidepressants may be useful adjuvant analgesics

1. a only 2. a and b 3. a, b, and c 4. all of the above

Which of the following is true regarding the use of epidural analgesics and the resulting impairment of motor function that delays ambulation?

a. Pain control is more desirable than motor function
b. A reduction in rate or concentration of the anesthetic may correct lower extremity weakness
c. Withdrawal of the epidural catheter a few centimeters to improve the catheter tip position
d. Both b and c
CONGRATULATIONS
on your interest
and on obtaining
your New Certification
!!!

ADDENDUM

Test Taking Personalities
Which One Are You?
The Rusher

- The Rusher is the nurse who hurries through the entire process of taking the exam in a desperate rush to complete the exam before the essential facts are forgotten.
- The Rusher is at risk for misreading, misinterpreting, and mistaking text.
- The Rusher needs to reduce test anxiety and develop a study plan to prepare well in advance of the exam.

The Personalizer

- The Personalizer is often an older, more mature nurse who relies more heavily on personal and professional experiences than formal, structured education.
- The Personalizer is at risk for selecting the wrong answer because personal experience may not be the norm or standard.
  - Broad concepts and applications cannot be made from false understandings and stereotypes.
- The Personalizer needs to focus on fact rather than experience and must work to avoid making mental connections between patients in case scenarios on the exam and real patient situations.

The Turtle

- The Turtle is the nurse who moves painfully slowly and methodically through the exam; reading & rereading each question several times before deliberating over an answer.
- The Turtle is at risk for not completing the exam or having to hurry through the last part of the exam.
- The Turtle needs to take practice tests at home focusing on the time spent per item.
- She/he must calculate the number of minutes allowable for each question.
The Squisher

- The Squisher is the nurse who views the exam as a hurdle to jump, a barrier to cross, and a threat to self-esteem.
- Squishers are at risk for being ill-prepared to take the exam because they spend excess time worrying about the test; attempting to postpone the reality that the test could create a failure.

Squishers need to set up a plan for progressive disciplined study.

The Philosopher

- The Philosopher is a very bright nurse, but who never quite believes that he/she knows enough about the subject.
- The Philosopher is at risk for overanalyzing test questions; searching for the “trick”.

The Philosopher needs to:
- Develop self-esteem and self-confidence.
- Must learn to read test questions as they are written.
- Need to take practice tests.

The Second Guesser

- The Second Guesser is one who takes the test for the first time, then retakes the test as an examiner ‘correcting’ the answers.
- The Second Guesser is at risk for changing correct answers to incorrect answers.
- The Second Guesser needs to focus on moving through the exam progressively, rereading only those items that they are unsure of.
- Avoid changing answers, unless very certain the original answer is incorrect.
References

- American Nurses Credentialing Center. www.nursecredentialing.org/PainManagementNursing
- American Society for Pain Management Nursing. www.aspmn.org