Test Content Outline  
Effective Date:  June 9, 2014

Pain Management Nursing  
Board Certification Examination

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

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

<table>
<thead>
<tr>
<th>Category</th>
<th>Domains of Practice</th>
<th>No. of Questions</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>Assessment and Reassessment</td>
<td>40</td>
<td>26.67%</td>
</tr>
<tr>
<td>III</td>
<td>Interventions</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>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>150</strong></td>
<td><strong>100%</strong></td>
</tr>
</tbody>
</table>


I. **Foundations of Pain (19.33%)**
   A. Definitions and Classifications of Pain (e.g., subjective nature, suffering, malignant and non-malignant)
      Knowledge of:
      1. Nociceptive and neuropathic pain
      2. Acute and chronic/persistent pain
      3. Terminology (e.g., breakthrough pain, allodynia, hyperalgesia, sensitization)
   
   B. Science of Pain
      Knowledge of:
      1. Theories and concepts related to pain (e.g., biopsychosocial, gate control)
      2. Pain process (e.g., transduction, transmission, perception, modulation)
      3. Common pain conditions (e.g., cancer/treatment related, lower back, gastrointestinal, arthritis, headaches, HIV, post surgical, neuropathy)
      4. Syndromes (e.g., complex regional pain syndrome [CRPS], phantom limb, fibromyalgia, chronic pain syndrome)
      5. Physiological and psychological benefits of controlled pain and consequences of uncontrolled pain
      6. Addiction, tolerance, physical dependence, and pseudoaddiction
   
   C. Ethical and Regulatory Considerations
      Knowledge of:
      1. Scope, standards and guidelines of pain management nursing practice (e.g., American Society of Pain Management Nursing, The Joint Commission, evidence-based practice)
      2. Ethical concepts (e.g., provider bias, placebo avoidance, confidentiality, abuse and addiction, end-of-life considerations, patient self-determination)

II. **Assessment and Reassessment (26.67%)**
   A. Assessment and Re-assessment of Pain
      Knowledge of:
      1. Pain descriptors and characteristics (e.g., quality, onset, location, duration, radiation, intensity, temporal characteristics, aggravating and alleviating factors, pain goal)

      Skills in:
      2. Interviewing patients regarding the characteristics of pain
      3. Conducting a physical assessment related to pain
      4. Interpreting pain assessment data
      5. Integrating pain assessment data to establish a pain goal
      6. Re-assessing patients after interventions
B. Pain Assessment Scales and Tools
   Knowledge of:
   1. Hierarchy of pain assessment techniques (e.g., self-report, pathologic conditions that may cause pain, observed behaviors, proxy reports, vital signs)
   2. Valid Pain Assessment Scales and Tools (e.g., numerical rating scale [NRS], verbal descriptor, checklist of non-verbal pain indicators [CNPI] FLACC, brief pain inventory [BPI])

   Skills in:
   3. Selecting and applying appropriate assessment scales or tools for patients in pain

C. Functional Assessment, Quality of Life, and Associated Conditions
   Knowledge of:
   1. Effects of pain and related factors (e.g., fatigue, depression, anxiety, insomnia, stress, sexual dysfunction, anorexia, immobility)
   2. Quality of life indicators (e.g., pain interferes with activities of daily living, walking, sleeping, disability)

   Skills in:
   3. Conducting a functional assessment
   4. Integrating assessment data to establish functional goals with patients in pain

D. Patient and Family’s Pain Experience
   Knowledge of:
   1. Components of a pain history (e.g., medication use, family perceptions and behaviors related to pain management, past interventions, substance use)
   2. Barriers to pain management (e.g., cultural, gender, misconceptions, financial, developmental level, cognitive level, bias)

   Skills in:
   3. Identifying and assessing patient and family coping mechanisms and support systems (e.g., maladaptive, adaptive)

III. Interventions (43.33%)
   A. Pharmacological Treatment (pharmacokinetics and pharmacodynamics)
      Knowledge of:
      1. Opioid
      2. Non-Opioid
      3. Adjuvants (e.g., local anesthetics, anxiolytics, anticonvulsants)
      4. Routes of Administrations (e.g., intrathecal, oral, IV, topical, patient controlled analgesia [PCA], transdermal, epidural)
      5. Complementary and alternative therapies (e.g., herbals, other dietary supplements)
      6. Limitations of pharmacological pain management modalities
Skills in:
7. Recognizing medication misuse or diversion
8. Selecting appropriate treatment based on patient presentation

B. Non-pharmacologic Treatments
Knowledge of:
1. Physical modalities (e.g., active and passive activities, exercise, massage, thermal, positioning, sleep hygiene)
2. Cognitive/behavioral modalities
3. Spiritual care
4. Environmental considerations (e.g., lighting, noise, comfort, temperature)
5. Complementary/Integrative therapies (e.g., acupuncture, chiropractic, healing touch, homeopathy)
6. Limitations of non-pharmacological pain management modalities

C. Pharmacologic and Non-Pharmacologic Management
Knowledge of:
1. Opioid safety (e.g., tolerance, risk factors for sedation, respiratory depression, risk stratification, storage, drug screening)
2. Adjuvant Safety (e.g., organ dysfunction, ceiling does, concomitant sedating medications)
3. Non-pharmacologic safety (e.g., external devices, heat/cold, herbal use)
4. Equianalgesia
5. Principles of administration (e.g., titration and rotation, scheduled dosing, breakthrough pain dosing, multimodal)

Skills in:
6. Managing routes of administrations
7. Developing a plan of care (e.g., individualized regimen, multimodal approach, least invasive first)
8. Analyzing laboratory data (e.g., hepatic, renal)

D. Adverse Effects and Complications of Interventions
Knowledge of:
1. Side effects of pharmacologic interventions (e.g., constipation, urinary retention, nausea, pruritus, dry mouth, dizziness, sedation)
2. Signs and symptoms of toxicity
3. Complications of regional analgesia (e.g., motor/sensory block, hemodynamic instability)

Skills in:
4. Identifying and monitoring for potential side effects of pharmacologic interventions
5. Identifying prevention strategies (e.g., pre-medication, bowel regimen, sedation monitoring) to minimize side effects
6. Implementing strategies for the management of side effects and complications
IV. **Education and Collaboration (10.67%)**

A. Clinical Application of Teaching and Learning
   Knowledge of:
   1. Teaching and learning strategies (e.g., age appropriate learning, visual and verbal learning, demonstration learning, readiness to learn, reinforcement)

   Skills in:
   2. Evaluating patient and family comprehension and competency

B. Communication and Collaboration
   Knowledge of:
   1. Barriers to effective communication or collaboration (e.g., patient, family, provider, organization)
   2. Roles of interprofessional team members and community resources (e.g., pastoral care, social worker, music therapy, support groups, child life specialists)
   3. Crisis Situations (e.g., withdrawal, suicidal ideation, loss of insurance)

   Skills in:
   4. Applying therapeutic communication skills
   5. Developing a collaborative care plan (e.g., goal-setting, consultations, referrals, work/school re-entry)
   6. Making appropriate referrals for patients in crises (e.g., suicide, financial)