CNA Webinar Series Progress in Practice

Getting ready for the NCLEX-RN exam

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The information and views in this webinar are those of the presenter(s) and do not necessarily reflect the official opinion of the Canadian Nurses Association.
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Overview
NCLEX-RN® Format

• from 75 to 265 questions
• up to 6 hours
NCLEX-RN® Question Formats

Multiple choice individual items

Alternative format items
Computerized testing means

The candidate cannot

- return to previous items
- progress to the next item until the item on the screen is answered
- underline words
Computer Adaptive Testing (CAT)

Program adjusts the difficulty of items

If answer

• Correctly

Next item

• More difficult question

• Incorrectly

• Easier question
CAT means

Program continuously re-estimates candidate’s ability based on:

- most recent response
- all the previous responses

Each candidate has a unique exam
The exam continues until……

- 95% confidence rule
  - computer determines with 95% confidence that the candidate has passed

  OR

- Maximum-length rule (final ability rule)

  OR

- Run-out-of time (ROOT) rule

https://www.ncsbn.org/534.htm
CAT means always selects an item that it calculates the candidate will have a 50% chance of answering correctly, based on the previous item.
NCLEX-RN® Passing Standard

• GOAL:
  ✓ set high enough to protect the public
  ✓ low enough so that competent nurses who have completed nursing programs are not denied licensure
Re-Writing Policies
• Taxonomy
• Clients
• Integrated processes
• Foundation
NCLEX-RN® Taxonomy

• Analysis
• Application
• Comprehension
• Knowledge
• more focused on individual health alterations
  • medical diagnoses, physical assessment, lab values, and technical aspects of care
NCLEX-RN® Integrated Processes

“fundamental to nursing”
- Nursing process
- Caring
- Communication and Documentation
- Teaching/learning
- Culture and spirituality
NCLEX Test Plan “Foundation”

April 2016 Exam (3 years)

• Practice analysis of RNs with 12 months or less experience (Nursing Knowledge Survey)

• Began in Canada November 2013
2014 RN Practice Analysis: Linking the NCLEX-RN Examination to Practice - U.S. and Canada (Vol. 62)
Published 2015
https://www.ncsbn.org/7109.htm

2013 Canadian RN Practice Analysis: Applicability of the 2013 NCLEX-RN Test Plan to the Canadian Testing Population (Vol. 60)
https://www.ncsbn.org/3973.htm
Practice Analysis

Question Categories
2016 NCLEX-RN Detailed Test Plan - Candidate Version

https://www.ncsbn.org/8629.htm
Foundation

Practice Analysis
<table>
<thead>
<tr>
<th>Question Categories</th>
<th>Sub-categories</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Safe &amp; Effective Care Environment</td>
<td>Management of Care</td>
<td>17-23%</td>
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<td></td>
<td>Safety &amp; Infection Control</td>
<td>9-15%</td>
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<tr>
<td>Health Promotion &amp; Maintenance</td>
<td></td>
<td>6-12%</td>
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<td>Psychosocial Integrity</td>
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<td>Physiological Integrity</td>
<td>Basic Care &amp; Comfort</td>
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<td>Pharmacological &amp; Parenteral Therapies</td>
<td>12-18%</td>
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<tr>
<td></td>
<td>Reduction of Risk Potential</td>
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</tr>
<tr>
<td></td>
<td>Physiological Adaptation</td>
<td>11-17%</td>
</tr>
</tbody>
</table>
Safe and effective care environment

a. Management of Care (17-23%)

• Advance Directives/Self-Determination/Life Planning
• Advocacy
• Assignment/Delegation/Supervise
  • Organize workload to manage time effectively
• Use information technology
• Collaboration with interdisciplinary team
• Participate in providing cost effective care
• Confidentiality/Information Security
• Organ Donation
Safe and effective care environment

b. Safety and Infection Control (9-15%)

- Emergency Response Plan (internal/external disaster)
- Security Plans
  - newborn nursery security, violence, controlled access
- Universal/Standard Precautions
Health Promotion and Maintenance (6-12%)

• Aging
• Techniques of physical assessment
• Risk factors (i.e. linked to ethnicity such as hypertension, diabetes)
• Prevention and treatment of high risk health behaviors (e.g., smoking cessation, safe sexual practices, needle exchange)
Psychosocial Integrity (6-12%)

- End of life care
- Religious, spiritual, cultural influences
- Assess client in coping with life changes and provide support (e.g., palliative, amputation, new diagnoses)
- Behavioral management techniques when caring for a client (e.g., positive reinforcement, setting limits, de-escalation techniques)
- Cultural awareness/cultural influences on health - Use appropriate interpreters to assist in achieving client understanding
Physiological Integrity

a. Basic Care and Comfort (6-12%)

• Assess client need for pain management (e.g., light dimming, warm blanket)

• Recognize complementary therapies and identify potential contraindications (e.g., aromatherapy, acupressure, supplements)
Physiological Integrity

b. Pharmacological and Parenteral Therapies (12-18%)

- Insert, maintain, and remove IV
- Venous access devices
- TPN
- Handle and maintain medication in a safe and controlled environment
Physiological Integrity

c. Reduction of Risk Potential (9-15%)

• Perform and monitor diagnostic testing (e.g., electrocardiogram, oxygen saturation, glucose monitoring)
• Monitor results of maternal and fetal diagnostic tests
• Assess specific systems
• Monitor/assess for complications
Physiological integrity

c. Reduction of Risk Potential

• Identify laboratory values

BUN, cholesterol (total) glucose, hematocrit, hemoglobin, glycosylated hemoglobin (HgbA1C), platelets, potassium, sodium, WBC, creatinine, PT, PTT & APTT, INR for ABGs (pH, PO2, PCO2, SaO2, HCO3)

• Evaluate invasive monitoring data
Physiological integrity

d. Physiological Adaptation (11-17%)

• Assist with invasive procedures (e.g., central line, thoracentesis, bronchoscopy)

• Monitor and maintain devices and equipment used for drainage (e.g., surgical wound drains, chest tube suction, negative pressure wound therapy)

• Monitor and maintain arterial lines
Physiological integrity

d. Physiological Adaptation

• Manage the care of a client with
  • a pacing device (e.g., pacemaker) on telemetry
  • receiving hemodialysis
  • a medical emergency
  • alteration in hemodynamics, tissue perfusion and hemostasis (e.g., cerebral, cardiac, peripheral)

• Manage the care of a client receiving hemodialysis or continuous renal replacement therapy
2016 NCLEX-RN Detailed Test Plan - Candidate Version

https://www.ncsbn.org/8629.htm
• SAFETY
• Priority
• Delegation
• Confidentiality
• Performance Improvement
• Collaboration
• Universal Precautions
• SAFETY
The look and
Alternative format questions
The Look
The nurse is reviewing the nursing care plan of a client hospitalized with sickle cell crisis. Which client problem is the **least** priority?

a. Generalized pain

a. Signs of dehydration

b. Inability to deal with the disease

c. Lack of perfusion to peripheral tissues

(Silvestri, 2013)
Style

• No client name
• No gender or age (unless necessary)
• No repetitive words in the stem
• Generic medication names only
• Health care provider prescribes
Context
Alternative Format Questions

• Fill-in-the-blank (drug calculations)
• Multiple response (select/choose all that apply)
• Exhibit/chart
• Hot spots
• Drag and drop/ordered response
• Audio
• Graphic (in the stem, or as options)
• Video

http://www.pearsonvue.com/nclex/
https://www.ncsbn.org/2334.htm
Fill-in-the-blank
Fill-in-the-blank / Calculation

Candidates asked to respond by typing in a numerical response
What can be tested

• Dosage calculation
  • number of tablets
  • mL to inject
  • rate of IV infusion

• Intake and output
Multiple Response
Multiple Response

• Similar to a multiple choice question (MCQ)
  • a stem (incomplete statement or question)
  • 5- 6 options from which the candidate must select the correct responses of which at least 2 correct

• Items contain the statement “Select all that apply”

• Must select all of the correct responses in order to be awarded credit
Multiple Response

• If using steps do not need to be all inclusive

**General rule:**

with five options – at least 2 and no more than 3 correct options
Multiple Response

What can be tested

- Manifestations
  - laboratory data
  - adverse effects of medications
  - tasks to delegate
  - nursing interventions to include in the plan of care
  - risk factors
Exhibit/Chart
Exhibit/Chart

- Standard four-option multiple choice format
- Prompt that appears regarding answering an exhibit items is: "Click on the exhibit button below for additional client information."
- Important for student NOT to skim
Exhibit/Chart

Provides client assessment data on three separate simulated medical records

1. prescriptions, MAR

2. history & physical, progress notes, flow sheets, vital signs

3. laboratory and imaging results
Hotspot

- Candidate is presented with an image or a figure.
- Indicate answer by using the mouse to click on a region of a presented image or figure.
Hotspot

- Appropriate sites for physical assessment
- Components of an ECG or fetal monitor tracing
- Placement of equipment
- Components of equipment
Drag and Drop/Ordered
Drag and Drop/Ordered

• Click and drag with a mouse objects to corresponding targets to place objects in order

• Once the source object is dragged to its appropriate target, the click button is released
The nurse is performing an abdominal assessment on a client. In what order should the nurse assess this client? (Arrange the first item on top and the last item on the bottom.)

A. Percussion  
B. Palpation  
C. Inspection  
D. Auscultation
Drag and Drop/Ordered

What can be tested

• Nursing skills
  • tracheostomy, chest tubes

• Assessment techniques
  • chest pain, dyspnea, shock, infection

• Emergency responses (dehiscence, seizure, anaphylaxis etc)
Audio
Audio

Listen to an audio recording and then asked to answer an applicable question
What can be tested

• Bowel sounds
• Breath sounds
• Heart sounds
What can be tested

- Choose among different pieces of equipment
  - needles
  - syringes
  - catheters
  - tubes
- Interpret data
  - ECG tracings
  - Client position
Video

- View an animation or video clip
- Prompted to click on video icon
- May have sound
- Content examples:
  - Assessment
  - Procedures
  - Communications skills
When do you start studying???
Answering NCLEX questions

• Be prepared
• Be calm
• Be confident
The web!!!!!!

Mnemonic
http://www.nursebuff.com/2014/06/nursing-mnemonics/

Medication endings
http://memorize.com/common-drug-endings/awilson0715

Khan Academy
https://www.khanacademy.org/test-prep/nclex-rn
Answering NCLEX Questions

Doing well involves more than just "knowing your stuff"

--you must have a strategy!
Registering with a Provincial Nursing Regulatory Body - A New Grad's Experience

Jaimie Carrier
RN, BScN, MScN (Student)
My registration process…

• Finished practicum in **June 2016**
• Started registration process with CRNNS in mid June 2016
• Started registration process with ARNNL in end June 2016
• Wrote NCLEX August 15th, 2016
• Received my full practicing RN license from CRNNS **Dec. 6th, 2016**
Registration Process

• What do they need?
  • Registration forms
  • Background / Vulnerable Sector Checks
  • Transcripts
  • Characters References
  • Proof of Language Competency
  • Payment
  • Proof of Completion/Graduation
  • Jurisprudence Exam!
Keep in mind that…

• Every province has a different process
• Every student will have a slightly different registration experience
• Some provinces function via mail/fax rather than email
• Some provinces are bigger than others
• Unexpected delays (strikes, illness, wrong forms, miscommunications)
“If I had to do it again…”

• Do some research
  • Most information can be found online
  • However, not EVERYTHING will be online
  • Some websites may be out of date
  • Most people do not follow the “traditional” template
“If I had to do it again…”

• Start the process early
  • Summer? Many people go on vacation
  • Mail vs. email
  • Many components can be completed before you graduate (forms, background checks, etc)
“If I had to do it again…”

• If you are not sure, call and ask someone
  • Talk to someone on the phone, and then email to confirm
  • ALWAYS take down the name, date and time of calls/communications
• Keep a trail of what you do
• If there are many representatives, reconfirm important information
• They are only human too! They don’t always know everything
“If I had to do it again…”

• Follow-up!
  • Don’t wait for them to tell you something is wrong
  • Wait the appropriate amount of time for something to be processed and then follow-up
  • Call and/or email
“If I had to do it again…”

• Be prepared for fees ($)
  • Form completion and mailing
  • Priority expedition of documents
  • Background checks
  • Registration fees
  • It can add up quickly
During this time...

- Studying for NCLEX-RN exam
- Registering with PearsonVue
- Registering to write exam
- Writing the exam
- Writing a jurisprudence exam
- Looking for a job
No matter how the process goes for you, eventually you will be able to put RN after your name!

Thank you!
• Type in your question in the text box at the bottom of the Q&A window
• Then click on the text bubble button on the right.
For More Information

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To download all the documents together in the Files window:

- Click on the first document
- Hit the Shift button on your keyboard
- Click on the last document
- Then click on the Download File(s) button

To open the webpages in the Web Links window:

- Click one of the links
- Then click on the Browse To button
Upcoming Webinar

Starting a conversation to improve patient safety

Tuesday, February 21, 2017, 12-1 p.m. ET
Thank you!