



# **AONN+ Foundation for Learning** Guide to Certification Preparation ONN-CG

## CERTIFICATION AND AONN+ FFL

Certification is an important step in your career and provides value to you, your patients, and your hospital system. Obtaining ONN-CG certification allows you to use AONN+ FFL-designated credentials on your badge and signature to demonstrate your navigation expertise. Certification is not education, nor is it a certificate program. Certification is much more robust and requires experience and preparation.

## PURPOSE OF THIS GUIDE

This guide is intended as a preparation guide to help you determine the best way for you to plan and study for certification exam. **Use of this guide in no way guarantees examination success.** The guide is divided into six (6) sections, covering the following topics:

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- **The Domains**
  - **The Exam Blueprint**
  - **Recommended Study Materials**
  - **Developing Your Study Plan**
  - **Multiple Choice Questions**
  - **Exam Day**
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## SECTION I: USE YOUR RESOURCES—THE DOMAINS

The 8 knowledge domains for oncology nurse navigation define the core competencies required for successful practice. Additionally, they define the basic outline for the certification examination. These domains were created by a collection of oncology navigation stakeholders, utilizing their expertise, experience, and a thorough literature review. They are reviewed regularly as outlined by accreditation guidelines.

Your first step in preparing for certification exam should be familiarizing yourself with these domains, as they are the foundations of your practice as an oncology nurse navigator. If there are any domains that seem unfamiliar, begin your review of the recommended study materials with that domain. If you don't understand any terminology, look it up. Every detail of the exam begins with these domains, so make sure you know and understand them before moving forward.

### ★ Domain 1: Community Outreach/Prevention

- Finding community resources
- Community needs assessment
- Identification of barriers to care
- Interventions to remove barriers to care
- Community education prevention and screening
- Population health
- Risk assessment
- Cultural competency
- Behavior modification
- Genetics

### ★ Domain 2: Coordination of Care/Care Transitions

- Chronic Care Model (CCM) and National Comprehensive Cancer Network (NCCN) guidelines
- Identification/intervention of clinical and service barriers to care
- Patient care process/cancer care continuum (prevention/screening/risk assessment, diagnosis, clinical trials, treatment, survivorship/end-of-life care)
- Patient/family center education (screening, diagnosis, treatment, side effects and management, survivorship/end of life)
- Identify models of navigation

- Cultural competency
- Multidisciplinary approach to care, and Tumor Board

## ★ Domain 3: Patient Advocacy/Empowerment

- Patient problem-solving
- Engagement in decision-making tools
- Relationship building/trust
- Assisting the patient with the care team/communication
- Counseling: conduit between patient and providers
- Patient/family center education (assess educational needs)
- Provide culturally sensitive care and education

## ★ Domain 4: Psychosocial Support Services/Assessment

- Distress screening
- Strategies for coping: disease, treatment, distress/anxiety
- Referrals to psychosocial support/resources

## ★ Domain 5: Survivorship/End of Life

- Goal-setting—life goals
- Survivorship education: long-term/late effects
- Care planning
- Palliative care
- Hospice

## ★ Domain 6: Professional Roles and Responsibilities

- Critical thinking
- Problem solving
- Ethics

- Team building
- Leadership
- History/evolution of navigation
- Definition of navigation and types of navigators (community, lay, clinical navigator—RN/SW)
- Tracking workload
- Documentation

## ★ Domain 7: Operations Management

- Healthcare reform
- Utilization of resources
- Workforce shortages
- Organizational structure, mission, and vision
- Organizational development
- Healthcare economics

## ★ Domain 8: Quality and Performance Improvement

- Value/role of nursing research to validate practice and build evidence-based practices
- Research
- Quality metrics (selection of metrics; develop, measure, and create dashboards)
- Performance improvement (methodologies—Plan-Do-Study-Act [PDSA], SMART goals)
- Role in identifying quality needs, areas of quality improvement
- Role in improving the process

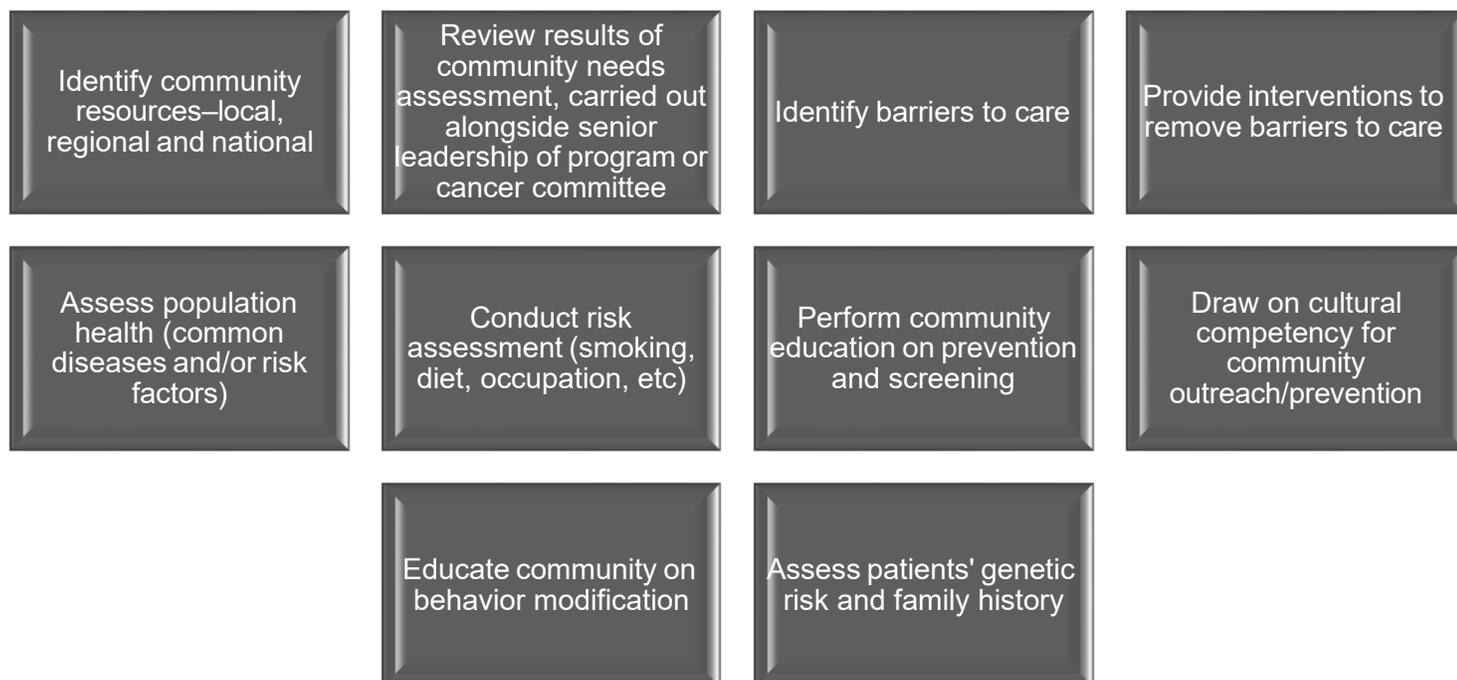
## SECTION II: USE YOUR RESOURCES—THE EXAM BLUEPRINT

The second resource you should review is the Exam Blueprint, which is always accessible on the AONN+ FFL website <https://aonnffl.org/>.

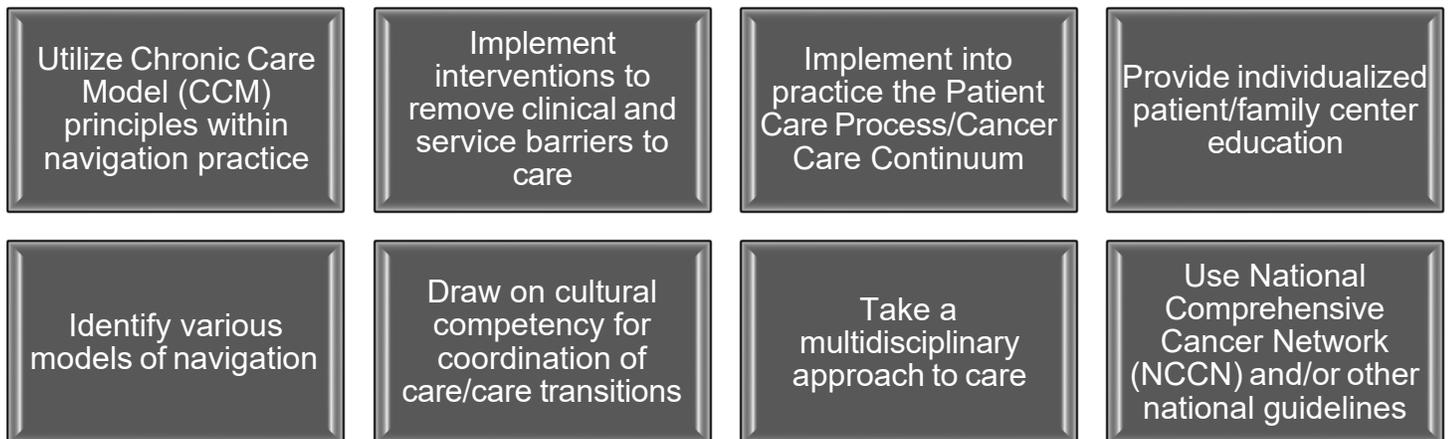
The Exam Blueprint is exactly what it sounds like—it is an outline of examination topics based upon the 8 domains we reviewed. It defines what actions/knowledge must be demonstrated via the exam, as well as what percentage of the exam focuses on each specific domain.

You should utilize the Blueprint to guide your exam preparation, as it provides a clear overview of all elements you will be required to demonstrate on the exam. You should also begin to recognize how the domains guide the creation of the exam Blueprint and, thus, the exam questions. While the domains define the competencies of oncology navigation (what navigators do), the Exam Blueprint begins to define actions that demonstrate competency (how navigators do, what navigators know). At all times, exam question development is based on current literature review and standardized best practices.

### Community Outreach/Prevention (9% of Questions)



## Coordination of Care/Care Transitions (27% of Questions)



## Patient Advocacy/Patient Empowerment (21% of Questions)



## Psychosocial Distress Services/Assessment (10% of Questions)

Conduct distress screening

Promote strategies for coping: disease, treatment, distress

Make referrals to psychosocial support/resources

## Survivorship/End of Life (13% of Questions)

Train in goal-setting/life goals

Provide survivorship education: long-term/late effects

Engage in survivorship and/or end-of-life care planning

Provide access to palliative care

Refer to hospice care

## Professional Roles and Responsibilities (8% of Questions)

Engage in team building

Use performance standards

Provide leadership

Generate documentation

## Operations Management (5% of Questions)

Understand organizational  
structure, mission, and  
vision

Draw on knowledge of  
healthcare reform

Participate in patient flow  
and processes of care  
improvement

## Quality and Performance Improvement (7% of Questions)



## **SECTION III: USE YOUR RESOURCES— RECOMMENDED STUDY MATERIALS**

Recommended study materials can also be found on the AONN+ FFL website:

<https://aonnffl.org/certifications/nurse-navigator-certification>

These materials outline evidence-based practices across all 8 oncology nurse navigation domains and should be used to define your course of study. Due to the intensity of study required and the number of evidence-based resources, you should ideally have no less than 2 months of preparation time prior to sitting for certification. Most candidates will find a 3 to 6-month timeframe more accommodating when balancing other responsibilities with certification preparation.

Additional resources you may find helpful include the *Patient Navigator Training Collaborative's* free courses platform: <https://patientnavigatortraining.org/elearning/course-listing/>. Keep in mind that these trainings have been designed for patient navigators with limited understanding of healthcare systems and patient interactions. You may find them foundationally useful for reviewing the basics of navigation practice.

If you are a member of AONN+, you may wish to utilize CE activities and education available on the AONN+ website <https://aonnonline.org/education>, as you may find these helpful study resources as well.

## **Foundational Resources**

- Oncology Navigation Standards of Professional Practice <https://jons-online.com/issues/2022/march-2022-vol-13-no-3/4399:oncology-navigation-standards-of-professional-practice>
- A Decade Later: The State of Patient Navigation in Cancer (2022) *Cancer*: Volume 128, Issue S13 Pages: 2553-2677, July 1, 2022  
<https://acsjournals.onlinelibrary.wiley.com/toc/10970142/2022/128/S13>
- CMS Payment for Principal Illness Navigation: How Do I Credential My Navigators? <https://www.jons-online.com/issues/2024/march-2024-vol-15-no-3/5030-cms-payment-for-principal-illness-navigation-how-do-i-credential-my-navigators>
- Christensen DM, Cantril C, eds. *Oncology Nurse Navigation: Delivering Patient-Centered Care Across the Continuum*. Pittsburgh, PA: Oncology Nursing Society; 2020.
- Brant JM. *Core Curriculum for Oncology Nursing*. Pittsburgh, PA: Oncology Nursing Society; 2020.
- Desimini EM, Kennedy JA, Helsley MF, et al. Making the case for nurse navigators—benefits, outcomes, and return on investment. *Oncol Issues*. 2011;26-33.  
[www.jons-online.com/issues/2012/october-2012-vol-3-no-5/1197-jons-607](http://www.jons-online.com/issues/2012/october-2012-vol-3-no-5/1197-jons-607).
- Oncology Patient Navigator Training: The Fundamentals. George Washington University Cancer Institute. 2015.
- Optimal Resources for Cancer Care: 2020 Standards. American College of Surgeons. Copyright © 2019 American College of Surgeons, 633 N. Saint Clair St., Chicago, IL 60611-3295.
- Shockney LD. Navigation needs for breast health and breast cancer populations of low- and middle-income countries. *Journal of Oncology Navigation & Survivorship*. 2013;4(1):21-31.
- Shockney LD. *Becoming a Breast Cancer Nurse Navigator*. 1st ed. Sudbury, MA: Jones & Bartlett Publishers; 2011.
- Shockney LD, Haylock PJ, Cantril C. Development of a breast navigation program. *Semin Oncol Nurs*. 2013;29(2):97-104.  
 Shockney LD. *Team-Based Oncology Care: The Pivotal Role of Oncology Navigation*. Springer International Publishing; 2018.  
<https://www.springer.com/us/book/9783319690377>

- Yarbo C, Wujcik D, Gobel B. *Cancer Nursing: Principles and Practice*. Sudbury, MA: Jones & Bartlett Learning. 2011:Chapters 4-10,25-27,30,33,70-75.

## **Community Outreach/Prevention**

- The Affordable Care Act and Patient Navigation - George Washington SMHS. <https://smhs.gwu.edu>; [www.cancer.gov/cancertopics/factsheet/disparities/cancer-health-disparities#1](http://www.cancer.gov/cancertopics/factsheet/disparities/cancer-health-disparities#1)
- <http://www.ils.org/#/diseaseinformation/getinformationsupport/financialmatters/copayassistance>  
[www.spohnc.org](http://www.spohnc.org)
- [www.cancer.org/copyfoundation](http://www.cancer.org/copyfoundation)
- [https://www.uspreventiveservicestaskforce.org/uspstf/recommendation-topics/uspstf-and-b-recommendations#:~:text=For%20women%20aged%2030%20to,combination%20with%20cytology%20\(cotesting\)](https://www.uspreventiveservicestaskforce.org/uspstf/recommendation-topics/uspstf-and-b-recommendations#:~:text=For%20women%20aged%2030%20to,combination%20with%20cytology%20(cotesting))

## **Coordination of Care/Care Transitions**

- Canosa R, Gentry S. Helping your patients manage chemotherapy-induced nausea and vomiting. *Journal of Oncology Navigation & Survivorship*. 2012;3(5):22-26.
- Informed Consent and Patients with Cancer: Role of the Nurse as Advocate. <http://www.ncbi.nlm.nih.gov/pubmed/22842685>
- Shockney LD, Tsangaris TN. *The Johns Hopkins Breast Cancer Handbook for Health Care Professionals*. Burlington, MA: Jones & Bartlett Learning; 2008.
- [www.livestrong.org/we-can-help/healthy-living-after-treatment/late-effects-of-cancer-treatment](http://www.livestrong.org/we-can-help/healthy-living-after-treatment/late-effects-of-cancer-treatment)

## **Patient Advocacy/Patient Empowerment**

- [www.eeoc.gov/laws/types/cancer.cfm](http://www.eeoc.gov/laws/types/cancer.cfm)
- Mann S. Education and health promotion for new patients with cancer. *Clin J Oncol Nurs*. 2011;15(1):55-61. <http://doi.org/10.1188/11.CJON.55-61>.
- Pillay T, van Zyl HA, Blackbeard D. Chronic pain perception and cultural experience. *Procedia - Social and Behavioral Sciences*. 2014;113:151-160. <https://www.sciencedirect.com/science/article/pii/S1877042814000238/>.
- Shared decision making among individuals with cancer in non-Western cultures: a literature review. <http://www.ncbi.nlm.nih.gov/pubmed/23989019/>.
- [www.canceradvocacy.org/resources/employment-rights/how-employment-discrimination-laws-protect-cancer-survivors/](http://www.canceradvocacy.org/resources/employment-rights/how-employment-discrimination-laws-protect-cancer-survivors/)

## Psychosocial Support Services/Assessment

- Bush NJ. *Psychosocial Nursing Care Along the Cancer Continuum*. 3rd ed. Pittsburgh, PA: Oncology Nursing Society; 2018; Chapters 1-5,8,9,17.
- [www.canceradvocacy.org/resources/employment-rights/how-employment-discrimination-laws-protect-cancer-survivors/](http://www.canceradvocacy.org/resources/employment-rights/how-employment-discrimination-laws-protect-cancer-survivors/)
- Kaplan, M. SPIKES-a framework for breaking bad news to patients with cancer. *Clin J Oncol Nurs*. 2010;14:514-516. <http://dx.doi.org/> PMID: 20682509. <https://cjon.ons.org/cjon/14/4/spikes-framework-breaking-bad-news-patients-cancer/>.
- National Comprehensive Cancer Network. National clinical practice guidelines in oncology (NCCN Guidelines): Distress management. 2014. [http://www.nccn.org/professionals/physician\\_gls/pdf/distress.pdf/](http://www.nccn.org/professionals/physician_gls/pdf/distress.pdf/).

## Survivorship/End of Life

- Bell CL, Somogyi-Zalud E, Masaki KH. Factors associated with congruence between preferred and actual place of death. *J Pain Symptom Manage*. 2010;39(3):591-604. <http://www.ncbi.nlm.nih.gov/pubmed/20116205/>.
- Dow LA, Matsuyama RK, Ramakrishnan V, et al. Paradoxes in advance care planning: the complex relationship of oncology patients, their physicians, and advance medical directives. *J Clin Oncol*. 2010;28:299-304. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2815718/>.
- Jones J, Nowels C, Kutner JS, Matlock DD. Shared decision making and the use of a patient decision aid in advanced serious illness: provider and patient perspectives. *Health Expect*. 2015;18:3236-3247. [www.ncbi.nlm.nih.gov/pubmed/25439268/](http://www.ncbi.nlm.nih.gov/pubmed/25439268/).
- Pizzi MA. Promoting health, wellness, and quality of life at the end of life: hospice interdisciplinary perspectives on creating a good death. *J Allied Health*. 2014;43(4):212-220. [www.ncbi.nlm.nih.gov/pubmed/25433185/](http://www.ncbi.nlm.nih.gov/pubmed/25433185/).
- Shockney LD. Fulfilling hope: supporting the needs of patients with advanced cancers. *Nova Science*. 2014;50:109,111,124.
- Surbone A, Halpern MT. Unequal cancer survivorship care: addressing cultural and sociodemographic disparities in the clinic. *Support Care Cancer*. 2016;24:4831-4833. <http://doi.org/10.1007/s00520-016-3435-4/>.

## Professional Roles and Responsibilities

- Blaseg K. Patient navigation at Billings Clinic: an NCI Community Cancer Centers Program (NCCCP) pilot site. ACCC's Cancer Care Patient Navigation: A Call to Action. Rockville, MD: Association of Community Cancer Centers; 2009:15-24. [https://www.accc-cancer.org/docs/projects/resources/pdf/patientnavigation-guide/s15.pdf?sfvrsn=875c3b10\\_0](https://www.accc-cancer.org/docs/projects/resources/pdf/patientnavigation-guide/s15.pdf?sfvrsn=875c3b10_0).

## Operations Management

- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2793740/>
- Bellomo C, Strusowski T. The importance of operations management, organizational development, and health economics. *Journal of Oncology Navigation & Survivorship*. September 2017 Vol 8, No 9.
- Fraser I, Encinosa W, Glied S. Improving efficiency and value in health care: introduction. *Health Serv Res*. 2008;43(5 Pt 2):1781-1786. doi:10.1111/j.1475-6773.2008.00904.x.

## Quality and Performance Improvement

- Cunning S. The only constant is change...make it last with process improvement. *Nurs Manage*. 2014;45:1517. [https://journals.lww.com/nursingmanagement/fulltext/2014/04000/The\\_only\\_constant\\_is\\_change\\_make\\_it\\_last\\_with.4.aspx](https://journals.lww.com/nursingmanagement/fulltext/2014/04000/The_only_constant_is_change_make_it_last_with.4.aspx).
- Stevens KR. The impact of evidenced-based practice in nursing and next big ideas. *Online J Issues Nurs*. 2013;18(2):4. <http://ojin.nursingworld.org/MainMenuCategories/ANAMarketplace/ANAPeriodicals/OJIN/TableofContents/Vol-18-2013/No2-May-2013/Impact-of-Evidence-Based-Practice.html>.
- Strusowski T, Sein E, Johnston D. Academy of Oncology Nurse & Patient Navigators announces standardized navigation metrics. *Journal of Oncology Navigation & Survivorship*. 2017;8(2):62-68. [www.jons-online.com/issues/2017/february-2017-vol-9-no-2/1590-academy-of-oncology-nurse-patient-navigators-announces-standardized-navigation-metrics](http://www.jons-online.com/issues/2017/february-2017-vol-9-no-2/1590-academy-of-oncology-nurse-patient-navigators-announces-standardized-navigation-metrics).

## SECTION IV: CREATING YOUR STUDY PLAN

Use your knowledge of the Domains and Exam Blueprint as well as all printed or downloaded study materials to begin developing your study plan. There are several additional elements you should consider to ensure wise and effective use of your time.

- How much time do you have before exam day?
- What kind of learner are you?
- Do you have the space and support you need?
- Do you have a Local Navigator Network? (LNN)

These questions may lead you to think about the materials you need or connections you may wish to make.

### How much time is enough time?

You've heard this before—cramming for any exam is a terrible idea. While there are some people who seem to be able to cram right before an exam and succeed, that is not the norm. You must give yourself enough time to review the elements of the exam and the recommended study materials in a way that will be meaningful for your learning style.

## Consider the importance of certification

ONN-CG certification represents expertise in oncology nurse navigation, which is why navigation experience is a prerequisite for applying to sit. When credentials are awarded, those letters mean that AONN+ FFL formally recognizes that individual as an expert in the field. That's a big deal!

Consider other nursing certification exams with which you might be familiar. Oncology Nurse (OCN) Certification represents expertise in oncology practice and requires often intense preparation, even for nurses who have worked in oncology for years. Critical Care and Emergency Department nurses spend long hours preparing for their certification exams. The ONN-CG is no different. It represents excellence and expertise in Oncology Navigation, across all aspects of generalized care. As AONN+ FFL commits to continued development of its programs, exams, and preparation materials to guide your development as an oncology nurse navigator, you too must commit to dedicating the necessary time to professional certification preparation. As you study, you will learn new information and gain new skills that will, in turn, elevate your practice as an oncology nurse navigator and a leader in oncology care.

## What kind of learner are you?

It's important to understand your learning style before developing study materials, as learning is not one-size-fits-all. Use this simple assessment to determine your style:

<http://www.educationplanner.org/students/self-assessments/learning-styles.shtml>

There are numerous learning styles, but often they are simplified to the 3 main styles: Visual Learners, Auditory Learners, and Tactile Learners. In the following section, information from ThoughtCo., an online learning, education, and information site, outlines some strengths and recommended study strategies for each learning style.

		
<b>Visual Learning Style</b>	<b>Auditory Learning Style</b>	<b>Tactile Learning Style</b>

## Visual Learners

- ✓ Are often good at spelling and grammar
- ✓ May be able to quickly comprehend charts and graphs
- ✓ May have an ability to convey or prefer to convey complex ideas in a visual format
- ✓ May be good at sign language or other visual forms of communication
- ✓ Are often creative and may enjoy art or writing

## Learning Strategies for Visual Learners

- ✓ Print reading materials so you have handouts/notes
- ✓ Incorporate white space in your notes to prevent too much information in one place and to organize your thoughts
- ✓ Draw symbols and pictures to help you remember information
- ✓ Create flashcards
- ✓ Create graphs and charts
- ✓ Make outlines
- ✓ Write your own practice test

<https://www.thoughtco.com/visual-learning-style-p2-1857113>

## Auditory Learners

- ✓ Are often good at explaining things verbally
- ✓ May be adept at understanding changes in others' tone of voice
- ✓ Can be an effective member to include in study groups
- ✓ Often skilled at presentations
- ✓ Usually unafraid to speak up or verbalize ideas
- ✓ May follow verbal directions well
- ✓ May love to tell stories
- ✓ May find they work through complex problems by talking through them out loud

## Learning Strategies for Auditory Learners

- ✓ Find a study buddy or study group so you can discuss the study materials
- ✓ Read articles and study materials out loud and take notes while doing that
- ✓ Record yourself reading your study materials and play recordings back to yourself
- ✓ Listen to music without lyrics while studying
- ✓ If you need to memorize information, close your eyes and repeat that information out loud
- ✓ Pretend to "teach" the information to a fake audience

<https://www.thoughtco.com/auditory-learning-style-p3-3212038>

## Tactile Learners

- ✓ May struggle with sitting for too long, so may need to move around while reading materials
- ✓ May prefer to study with loud music
- ✓ Can be great at role-playing scenarios
- ✓ Often very good at assembling models or building things
- ✓ Are often active and enjoy a lot of activities like dance or fitness
- ✓ Excel at taking on new skills quickly

## Learning Strategies for Tactile Learners

- ✓ Study in small bursts
- ✓ When able, role-play or act out information to help you remember
- ✓ Create flashcards
- ✓ Use a Smart pen for notetaking
- ✓ Make up and answer your own essay questions to prepare for exams
- ✓ Create study games

<https://www.thoughtco.com/tactile-learning-style-1857111>

## Remember, space and support are important, too

No matter what style of learner you are, you will need a study space to claim as your own where you can read quietly, talk out loud, or act out scenarios. Find a time of day and a place you can use consistently so you can develop a routine and stick with it. Remember, learning styles are important. While a noisy family area may work as a study space for a tactile learner, it will never work well for an auditory learner.

Also important is to gain buy-in from your family and/or social support. You may have to get clever to find time to study. Make sure your loved ones and friends know what you're doing and support your decision to advance your career through certification. Allow them to help you create a study plan (this could be a fun activity with children), and if friends or loved ones are willing to help you with household chores or childcare so you can succeed, allow them to do so. Then, when you succeed at your goal, you all celebrate together.

## Local Navigator Networks (LNNs)

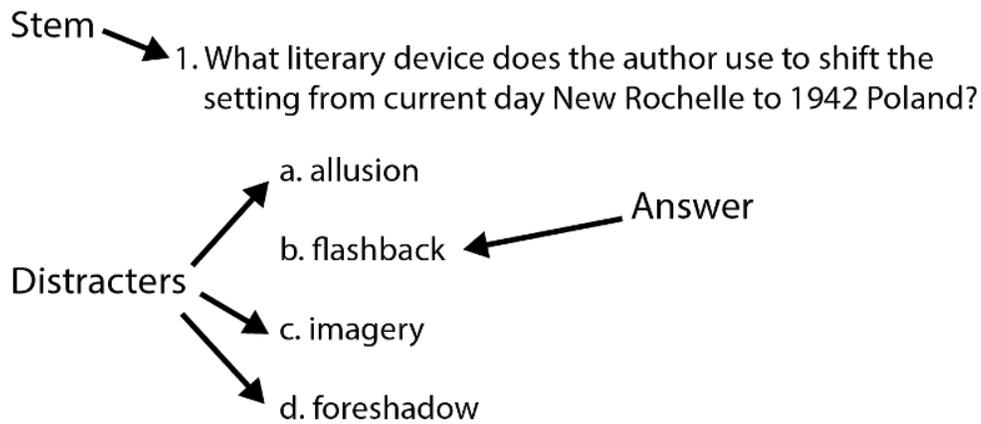
Another resource some AONN+ members may have available is an AONN+ Local Navigator Network. Because LNNs bring together navigators from a particular geographic area, it's a great way to stay current on navigation topics and network with peers. It's also a great place to find a study partner or create a study group. The LNN may also schedule guest speakers to discuss Domain-related topics and define best practices.

# SECTION V: ANSWERING MULTIPLE-CHOICE QUESTIONS

Certification exams often use complex multiple-choice questions. This type of question can be challenging, especially if it has been a long time since you've answered one. First, let's look at how complex multiple-choice questions are created and then outline a few tips to keep in mind when testing.

There are 3 parts to every multiple-choice question: **the stem, the answer, and the distracters**. The **stem** is the question being asked. Sometimes, you might discover a question containing a long lead-in patient scenario prior to the stem. In that case, determine the stem first, then go back through the scenario so you can pull relevant information. Regardless of whether the question is short or long, take time to locate the stem so you know what is being asked. Look at the question shown in the graphic below and locate the stem. In this instance, the stem is asking us to name the literary device that allows a shift in perspective from modern day to 1942.

## Parts of a Multiple-choice Question



Once you've located and analyzed the stem, you can determine that to answer the question, you will need to know the definitions of various literary devices—it's a simple knowledge check. In your mind, you should review the definitions of allusion, flashback, imagery, and foreshadowing, to determine which means "to shift perspective from modern day to a time in the past." Once you do (and if you know the definitions), the **answer, or correct answer**, is clear: flashback. The incorrect answers are known as **distracters**, as they are incorrect answers that may distract you from the correct answer. Well-written distracters are not intentionally tricky, nor do they hint at the correct answer by being a "goofy" choice. You should have to apply critical thinking to reach the correct answer, but ultimately, only one answer IS the correct answer.

Let's look at another question:

**A 25-year-old woman with cystic fibrosis is receiving care for her condition in a patient-centered medical home. Her care is most likely to differ from traditional services by including:**

- a) Coverage for both outpatient and emergency room care
- b) Instruction on how to manage her GI and respiratory symptoms
- c) Only protocols that follow US Preventative Services guidelines for care of patients with cystic fibrosis
- d) Rapid access to emergency room care when she experiences exacerbated shortness of breath
- e) Reduced cost of Pancreatic enzymes, Fluticasone, Albuterol, nebulized DNase and Montelukast

Question taken from: [https://medicine.utah.edu/faculty-dev/programs/academy-med-education/files/symposium\\_2015\\_powerpoints/scenario-based-mcqs.pdf](https://medicine.utah.edu/faculty-dev/programs/academy-med-education/files/symposium_2015_powerpoints/scenario-based-mcqs.pdf)

The stem of this question is quite direct, but what do you need to know? What is it asking? To answer this question, you need to understand the basics of cystic fibrosis as well as the patient-centered medical home model. Upon reading the answer choices, there is one correct answer based on what the stem is asking: **B**.

The other answers are distracters. Some, you may have been able to eliminate immediately, while others may have left you questioning yourself. While D seems like a good option upon first reading, critical thinking reminds us that ALL patients with shortness of breath receive rapid access in the ED, and this answer is not centered on what this patient needs to know to manage care in the patient-centered medical home model.

The more time you can prepare by writing and reviewing your own questions—based upon the study materials—the better prepared you will be.

## Test-Taking Tips/Reminders

- ✓ Identify the stem and determine what the question is asking
- ✓ Review the stem to determine if the question is a simple knowledge question, or if you need to think critically to answer
- ✓ While you want to reference your personal experience to help you answer, do not create what-if scenarios by asking, “but in this situation…” or “if the patient did this…” Stick to what the question asks and only what the question asks
- ✓ Read the question more than once before reviewing the potential answers
- ✓ Cross out answers you know are incorrect
- ✓ Once you select an answer, do not change it
- ✓ If you become frustrated by a question, skip it
- ✓ Remember, there is only one correct answer
- ✓ The intent is not trying to trick you—certification should be challenging, as it tests your level of expertise and ability to think critically

## SECTION VI: EXAM DAY

Finally, let's review some recommendations for handling the stress of exam day.

- ✓ If you're able, wake up early and give yourself plenty of time for a last-minute review
- ✓ Take a walk or exercise in the morning—this will reduce your stress, increase your focus, and boost your mood
- ✓ If you struggle with test anxiety, practice meditation, deep breathing techniques, or power poses right before the exam begins (the bathroom is a perfect place for this). If you've never tried power poses, they can sound silly, but many people have found them beneficial for boosting confidence. More information may be found here: <https://jamesclear.com/body-language-how-to-be-confident>.
- ✓ Make sure you're well-hydrated
- ✓ Give yourself plenty of time to commute to and locate the testing facility. You don't want to be rushing last minute to check in.

**And most importantly, believe in yourself! You wouldn't be qualified to sit for the exam if you didn't have the experience necessary to succeed. Have confidence, trust your study plan, and just do it!**