



# AOCNP® TEST CONTENT OUTLINE (TEST BLUEPRINT)

## I. Screening, Prevention, Early Detection, and Genetic Risk — 7%

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- A. At-risk populations (e.g., disparities in cultures, socioeconomic status, age, occupations, cancer history)
  - B. Screening, early detection
  - C. Cancer prevention, risk reduction guidelines (e.g., cancer risk factors such as smoking, nutrition, environmental)
  - D. Hereditary cancer risk assessment and genetic counseling methods
  - E. Epidemiology (e.g., frequency, incidence, prevalence)


## II. Diagnosis, Staging, and Treatment Planning — 14%

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- A. Diagnostic tests and results
  - B. Patient assessment
  - C. Staging guidelines
  - D. Natural history of disease (e.g., presentation, common metastatic sites, prognosis)
  - E. Prognostic indicators (e.g., immunoassays, flow cytometry, performance status, hormonal status, biomarkers)


## III. Cancer Treatment — 19%

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- A. Clinical trials and research studies
  - B. Systemic therapies (e.g., chemotherapy, hormonal, targeted, biologic)
  - C. Localized therapies (e.g., intravesicular, intraperitoneal, intrathecal)
  - D. Surgical and interventional procedures
  - E. Radiation therapy
  - F. Blood and marrow transplantation
  - G. Multimodal (combined) therapies
  - H. Complementary and alternative therapies
  - I. Delivery systems (e.g., VAD, infusion devices)
  - J. Interrelationship of disease, treatment, and comorbid conditions
  - K. Standards of care for specific cancers
  - L. Clinical response to treatment
  - M. Palliative care


## IV. Side Effect and Symptom Management — 19%

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- A. Etiology, incidence, and patterns (e.g., acute, chronic, late)
  - B. Toxicity rating scales
  - C. Pharmacologic interventions
  - D. Multidisciplinary therapies (e.g., rehabilitation services, nutrition, counseling)
  - E. Integrative therapies (e.g., complementary and alternative methods)
  - F. Procedural interventions (e.g., paracentesis, thoracentesis, surgery, stents, drains)
  - G. Management of complications (e.g., infection, thrombosis)


## V. Oncologic Emergencies — 8%

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- A. Risk factors and prevention strategies
  - B. Etiology
  - C. Assessment strategies (e.g., physical examination, differential diagnosis)
  - D. Treatment strategies


## VI. Survivorship — 6%

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- A. Psychosocial (e.g., fear of recurrence, depression, PTSD, family relations)
  - B. Physical (e.g., neuropathy, cardiomyopathy, cognitive effects, secondary cancers, infertility)
  - C. Financial and legal (e.g., employment, insurance, discrimination, disability, debt)
  - D. Survivorship treatment summaries
  - E. Survivorship plan of care (e.g., communication with primary care provider, follow-up surveillance)


## VII. End-of-Life Care — 6%

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- A. Philosophy of hospice
  - B. End-of-life care principles (e.g., symptom management, family and caregiver support, cultural variations, education)
  - C. Grief and bereavement process
  - D. End-of-life care settings
  - E. Financial issues in end-of-life care


## VIII. Psychosocial Issues — 6%

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- A. Risk factors for psychosocial disturbances/alterations (e.g., social support, financial aspects, family dynamics)
  - B. Assessment instruments and techniques (e.g., interview, patient self-assessment)
  - C. Psychiatric and psychosocial comorbidities (e.g., anxiety, depression, cognitive impairment)
  - D. Effects of cancer or treatment on psychosocial issues (e.g., sexuality, quality of life, family dynamics, coping)
  - E. Cultural, spiritual, and religious diversity


## IX. Coordination of Care — 5%

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- A. Patient navigation
  - B. Case management
  - C. Insurance and reimbursement issues
  - D. Roles of other healthcare disciplines
  - E. Community resources

## X. Professional Practice — 5%

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- A. Ethical/legal issues (e.g., ethical decision-making models, informed consent, advanced directives)
  - B. Legal or regulatory requirements (e.g., licensing, documentation)
  - C. Insurance reimbursement documentation requirements
  - D. Outcomes of advance practice nurse interventions on individuals, groups, and systems
  - E. Accreditation standards (e.g., Joint Commission, ACOS, HCFA)
  - F. Competency evaluation of self and others (e.g., peer review)
  - G. Advanced practice standards of care
  - H. Collaborative practice agreements (e.g., peers, physician)
  - I. Healthcare Legislation

## XI. Roles of the Advanced Practice Nurse — 5%

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- A. Mentor, preceptor, and educator
  - B. Patient education (e.g., needs assessment, preparation of materials)
  - C. Research process (e.g., problem identification, synthesis of research literature, rights of human subjects)
  - D. Research application
  - E. Consultant

Please note: ONCC uses generic names of drugs used in treatment, not brand names, on tests.