

AOCNS® TEST CONTENT OUTLINE (TEST BLUEPRINT)

I. Screening, Prevention, Early Detection, and Genetic Risk – 4%

- 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
- E. Epidemiology (e.g., frequency, incidence, prevalence)

II. Diagnosis, Staging, and Treatment Planning – 9%

- 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 – 16%

- 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%

- 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 (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 – 9%

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

VI. Survivorship – 7%

- A. Psychosocial (e.g., fear of recurrence, depression, PTSD, family relations)
- B. Physical (e.g., neuropathy, cardiomyopathy, cognitive effects, secondary cancers, fertility)
- 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 – 7%

- 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

VIII. Psychosocial Issues – 8%

- 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 – 7%

- A. Patient navigation
- B. Care management
- C. Roles of other healthcare disciplines
- D. Community resources

X. Professional Practice – 7%

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

XI. Roles of the Advanced Practice Nurse – 7%

- A. Mentor, preceptor, and educator
- B. Presentations and publications
- C. Patient education (e.g., needs assessment, preparation of materials)
- D. Research process (e.g., problem identification, synthesis of research literature, rights of human subjects)
- E. Research application
- F. Strategic planning process (e.g., for specific projects or organization-wide)
- G. Program development methods and funding strategies
- H. Consultative process

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