

CRRN examination content outline

1. Rehabilitation nursing models and theories (11%)

1.1 Identify models and theories (e.g., self-care, family, developmental, aging, teaching, coping with stress, change, conflict management) using standards of care in order to plan, implement, and evaluate nursing practice.

Knowledge of:

Models and theories
Standards of care
Rehabilitation scope of practice
Nursing diagnosis and process

Skill in:

Applying models and theories
Implementing standards of care
Applying the nursing process
Applying rehabilitation scope of practice

2. Functional health patterns: Theories, physiology, assessment, standards of care, and interventions in individuals with injury, chronic illness, and disability (33%)

2.1 Assess, plan, implement, and evaluate health and disease management using standards of care for the restoration, maintenance, and promotion of optimal health.

Knowledge of:

Health disease management
Physiology of health and diseases
Standards of care
Nursing diagnosis and process
Safety concerns
Models and theories
Evidence-based practice
Technology (e.g., web sources, personal response devices, competency assessment tools, tele-health)

Skill in:

Applying principles of physiology
Applying principles of health disease management
Using standards of care
Using nursing diagnosis and process
Incorporating safety interventions

Teaching interventions to manage health and disease process
Applying theories
Evaluating effectiveness of interventions
Assessing individual's health and disease processes
Initiating plan of care using evidence-based practice
Applying technology

2.2 Assess and monitor nutritional and metabolic needs by interpreting collected data (e.g., swallowing, lab results, caloric counts, Braden scale, intake, and output) to plan and implement interventions and to evaluate outcomes for optimal nutritional status, fluid volume, and skin integrity.

Knowledge of:

Nursing diagnosis and process
Physiology of nutritional and metabolic functions across the lifespan (e.g., endocrine, obesity)
Nutritional needs
Fluid volume
Anatomy and physiology across the lifespan (e.g., swallowing, skin integrity)
Safety concerns and interventions across the lifespan (e.g., swallowing, skin integrity)
Data collection and analysis
Feeding techniques
Diagnostic testing
Pharmacology (e.g., antispasmodics, anticholinergics, analgesics)
Consistency of foods and liquids
Nursing interventions
Adaptive equipment
Evidence-based practice

Skill in:

Applying principles of physiology of nutrition and metabolic functions
Teaching interventions to manage nutrition and metabolic problems
Teaching interventions for skin integrity (e.g. breakdown, pressure relief, hydration)
Teaching interventions for swallowing concerns (e.g. aspiration, chewing, choking)
Initiating plan of care for nutrition, swallowing, skin integrity, metabolic functions
Assessing nutritional intake, fluid volume deficits, swallowing ability, and eating, skin integrity
Implementing interventions for nutritional intake, fluid volume deficits, swallowing ability and eating, skin integrity
Collaborating with team members to address problems
Evaluating outcomes for nutritional intake, fluid volume deficits, skin integrity, swallowing ability and eating
Using adaptive equipment appropriately
Applying nursing diagnosis and process

2.3 Determine elimination needs using assessment data to plan, implement, and evaluate individualized, regular, and predictable bowel and bladder management program.

Knowledge of:

Nursing diagnosis and process
Bladder and bowel protocols
Bladder and bowel training (e.g., incontinence, retention, ostomies, catheters)
Autonomic dysreflexia
Bladder and bowel resources and technology (e.g., bladder scan, competency assessment tools, supplies, adaptive equipment)
Anatomy and physiology of bladder and bowel (e.g., constipation, diarrhea, incontinence, retention)
Types of incontinence
Pharmacology
Stages of grief and loss related to changes in bodily functions
Stages of development

Skill in:

Assessing bowel and bladder patterns
Initiating plan of care based on evidence-based practice
Teaching interventions for autonomic dysreflexia
Teaching interventions for bowel and bladder management incontinence
Teaching interventions for normal predictable patterns of elimination
Evaluating outcomes for bowel and bladder management
Recommending and obtaining bowel and bladder resources
Teaching and using adaptive equipment appropriately
Using medications appropriately
Recognizing readiness to learn
Recognizing stages of grief and loss of bodily functions
Applying nursing diagnosis and process
Using technology

2.4 Identify individualized activity tolerance and exercise routine using their functional abilities and lifestyle to plan, implement, and evaluate optimal self-care, mobility, respiratory and cardiovascular function.

Knowledge of:

Anatomy and physiology of musculo-skeletal, respiratory, and cardiovascular function
Self care activities and activities of daily living
Safety concerns (e.g., falls, burns)
Interventions of problems related to musculo-skeletal, respiratory, and cardiovascular function
Assistive devices (e.g., self-care, respiratory, mobility, cardiac)
Pharmacology

Disease management and outcomes
Standards of care using evidence-based practice
Clinical signs of disrupted sensory and motor function
Nursing diagnosis and process
Technology (e.g., alarms)

Skill in:

Assessing self-care ability and mobility
Assessing specific motor impairments and sensory impairments (e.g. vision, tactical, hearing, spasticity, paralysis, tremor, flaccidity, endurance, energy, balance, strength, contractures)
Assessing level of pain
Assessing level of safety risks
Implementing interventions for self-care ability
Implementing interventions for pain relief
Implementing interventions for safety (e.g., sitters, reorientation, environment, diversion, chemical and physical restraints)
Implementing interventions for motor and sensory impairments
Implementing interventions for cardiovascular and respiratory impairments
Teaching safety intervention (e.g., home, community)
Teaching medication management
Applying nursing diagnosis and process
Using technology
Teaching pain and comfort management
Teaching strategies for activity and exercise (energy and endurance)
Teaching strategies for adaptive equipment
Teaching active and passive range of motion to prevent contractures and heterotropic ossification
Evaluating outcomes for self care, mobility, pain, safety, teaching
Assessing home and community settings
Initiating plan of care using evidence-based practice

2.5 Assess, plan, implement, and evaluate activities for individuals with sleep-rest disturbances using strategies (e.g., imagery, music therapy, medications) in order to promote adequate rejuvenation.

Knowledge of:

Physiology of sleep and rest cycles
Normal sleep and rest patterns
Sleep and rest aids
Disruptions to sleep and rest patterns due to injury, illness, and disability
Pharmacology and diet
Factors affecting sleep and rest (e.g., sleep habits, alcohol, pain, and environment)
Nursing diagnosis and process
Technology

Skill in:

Assessing sleep and rest patterns
Initiating plan of care using evidence-based practice
Teaching interventions and strategies to promote sleep and rest
Evaluating effectiveness of sleep and rest interventions
Applying nursing diagnosis and process
Using technology

2.6 Assess the cognitive perception issues of individuals using tools (e.g., Rancho scale, Glasgow Coma Scale, Mini Mental Exam) and standards of care in order to plan, implement, and evaluate achievable outcomes towards independence.

Knowledge of:

Neuro anatomy and physiology (e.g., cognition, judgment, sensation, and perception)
Pain (e.g., receptors, acute, chronic, theories)
Measurement tools (e.g., Rancho, Glasgow, Mini Mental Exam, pain analog scales)
Neurological changes
Pharmacology
Safety concerns
Life span issues in cognition
Nursing diagnosis and process
Technology

Skill in:

Assessing cognition, perception, sensation, apraxia, perseveration, and pain
Teaching strategies pain management
Teaching strategies for neurological problems
Teaching strategies across the life span
Initiating plan of care using evidence-based practice
Implementing strategies for safety (e.g., personal response devices, alarms)
Implementing strategies for safe judgment
Evaluating appropriateness of individual behavior
Applying nursing diagnosis and process
Using technology

2.7 Identify an individual's self-image (e.g., self-perception and self-concept) using interview and observation skills to plan, implement, and evaluate interventions that promote optimal self-worth.

Knowledge of:

Self-perception and self-concept (e.g., powerlessness, hopelessness, helplessness, stress, unresolved grief)
Body image
Self-esteem

Stages of grief and loss
Roles and relationships
Evidence-based practice
Nursing diagnosis and process
Technology (e.g., biofeedback)

Skill in:

Assessing self-perception and self-concept
Initiating plan of care using evidence-based practice
Implementing strategies to promote self-worth (e.g., role playing, positive affirmation)
Evaluating outcomes of interventions
Communicating effectively
Providing constructive feedback
Applying nursing diagnosis and process
Using technology

2.8 Recognize changes in roles of and relationships between individuals using activities (e.g., Q&A format, observation, and family dynamics) to plan, implement, and evaluate strategies to improve altered lifestyle.

Knowledge of:

Theories
Roles and relationships
Cultural competence
Spirituality
Human behaviors
Environmental variables
Standards of care using evidence-based practice
Restoration and rehabilitation of special populations (e.g., pediatrics, geriatrics, burns, cardiovascular, renal, cancer, hospice)
Role reversals
Nursing diagnosis and process

Skill in:

Assessing change in roles and relationship
Using effective communication
Incorporating cultural and spiritual values
Facilitating appropriate resources and services
Setting and evaluating goals and strategies
Initiating a plan of care using theories and evidenced-based practice
Implementing strategies to cope with changes in roles and relationships (e.g., special populations, responsibilities, and life styles)
Applying nursing diagnosis and process

2.9 Identify and assess the sexuality and reproductive cycles of the individual using strategies (e.g., body positioning, PLISSIT) in order to plan, implement, and evaluate appropriate developmental and functional ability.

Knowledge of:

Human behaviors and other factors that can affect sexual relationships
Anatomy and physiology of sexual response
Sexuality throughout the life span
Alterations in sexual function
Autonomic dysreflexia (e.g., labor and delivery, bowel, and bladder)
Safe sexual practices (e.g., pregnancy, STD prevention)
Nursing diagnosis and process
Technology (e.g., pumps, implants, rings, other devices)
Pharmacology

Skill in:

Assessing sexual function
Assessing readiness to learn
Interpreting diagnostic tests
Implementing interventions (e.g., body positioning, mirrors)
Considering risk factors associated with autonomic dysreflexia
Communicating effectively
Initiating a plan of care based on evidenced-based practice
Teaching safety issues related to sexuality (e.g., STDs, abuse, and pregnancy)
Teaching about medications and sexual functioning
Applying nursing diagnosis and process
Using technology
Evaluating interventions

2.10 Assess coping and stress management strategies (e.g., decision making, problem solving) of the individual's and family's plan of care using interventions (e.g., anger management, spirituality, imagery) in order to plan, implement, and evaluate optimal interactions

Knowledge of:

Technology (e.g., biofeedback)
Coping and stress management strategies for individuals and family systems
Coping across the life span
Physiology
Role delineation
Stages of grief and loss
Psychosocial adaptation
Types of stress and stressors for an individual or situation
Self-esteem and self-concept
Culture competency

Community resources (e.g., face-to-face support groups, Internet, respite care, clergy)
Theories (e.g., coping, stress, grief)
Safety concerns (e.g., harm to self and others)
Nursing diagnosis and process

Skill in:

Assessing the ability to cope and manage stress
Applying cognitive screening (appraisals)
Facilitating appropriate referral
Implementing appropriate interventions and evaluating effectiveness
Remaining nonjudgmental
Implementing appropriate strategies to relieve stress and enhance coping
Initiating a plan of care based on theories and evidenced-based practice
Evaluating the outcomes of coping and managing stress strategies
Applying nursing diagnosis and process
Using technology

2.11 Assess individual's values and belief system (e.g., observation, Q&A) and plan, implement, and evaluate interventions using strategies in order to achieve holistic wellness.

Knowledge of:

Cultural competency
Belief systems and values
Community and organizational resources
Traditional modalities (e.g., spirituality, medications, psychosocial therapy)
Alternative modalities (e.g., biofeedback, hypnotherapy, acupuncture, botanicals, faith healer)
Nursing diagnosis and process
Technology (e.g., Internet)

Skill in:

Assessing values and belief systems and their impact on the individual
Using culturally competent interventions
Making appropriate referrals (e.g., traditional and alternative modalities)
Remaining nonjudgmental
Incorporating interventions to include values and beliefs
Respecting beliefs and values
Teaching about modalities
Initiating a plan of care using evidenced-based practice
Evaluating outcomes of interventions
Applying nursing diagnosis and process
Using technology

2.12 Assess individualized spirituality using strategies to plan, implement, and evaluate interventions (e.g., psychosocial support, and clergy) in order to work towards holistic health, peace, and spiritual well-being.

Knowledge of:

Spiritual assessments
Factors influencing spirituality
Individual's belief system
Community resources
Nursing diagnosis and process
Technology (e.g., Internet, radio, television)

Skill in:

Completing spiritual assessments
Making and accessing appropriate spiritual referrals
Using spiritual techniques (e.g., listening, meditation, visualization, prayer, imaging, humor, art)
Remaining nonjudgmental
Respecting beliefs
Initiating a plan of care based on individual's beliefs and evidenced-based practices
Evaluating interventions
Applying nursing diagnosis and process
Using technology

2.13 Assess communication abilities and deficits of the individual to plan, implement, and evaluate established techniques using standard protocols and tools in order to allow communication of needs.

Knowledge of:

Anatomy and physiology
Communication techniques and equipment
Cognition and comprehension
Language development across lifespan
Linguistic deficits (e.g., Broca's aphasia, Wernicke's aphasia, dysarthria)
Culture competency
Developmental factors
Patterns of recovery
Verbal and nonverbal communication
Nursing diagnosis and process
Technology

Skill in:

Using appropriate techniques and equipment
Using effective communication skills

Using classifications of aphasia
Recognizing clinical features of aphasia and dysarthria
Respecting cultural differences
Implementing safety precautions
Creating a therapeutic environment
Facilitating communication behaviors and techniques
Involving support systems
Assessing comprehension and communication (e.g., oral, written, auditory, and visual)
Initiating a plan of care using evidenced-based practices
Evaluating communication techniques and equipment
Using technology
Applying nursing diagnosis and process

3. The function of the rehabilitation team and community re-entry (35%)

3.1 Interact with the interdisciplinary team members using effective communication skills and goal setting to progress the individual to attain and maintain their highest level of independence and optimal health.

Knowledge of:

Team building
Theory (e.g., change, leadership, teaching, conflict)
Communication skills
Roles of team members
Organizational interactions
Goal setting
Rehab philosophy and definition
Community Resources (e.g., psychologist, neurologist, clergy, teacher, case manager, vocational rehabilitation counselor, home health)

Skill in:

Using effective communication
Using effective collaboration
Respecting team members
Building cohesion within the team
Setting and evaluating goals
Using appropriate theory
Accessing appropriate services
Applying rehab philosophy

3.2 Identify and teach life skills to individuals using a variety of strategies (e.g., coping, culture, spiritual, social, and economic) in order to effectively return to and remain in a community setting.

Knowledge of:

Teaching and learning strategies
Life skills
Community settings
Resources and cost considerations
Culture competence
Spiritual practices
Technology

Skill in:

Using community resources
Teaching life skills
Recognizing needs
Knowing and using resources
Accessing resources and costs
Incorporating cultural and spiritual preferences
Using technology (e.g., tele-health, Internet)

3.3 Identify and coordinate discharge planning strategies of the individual and caregiver (e.g. family, power of attorney) using available resources (e.g., financial, community, geographic, spiritual) in order to continue a prescribed level of services and care to meet their needs.

Knowledge of:

Resources and services available
Discharge planning
Family interactions
Legal implications
Culture competency
Length of stay
Injury, disability, and chronic illness process and prognosis
Nursing diagnosis and process
Technology

Skill in:

Matching resources and services
Communicating and interacting with all parties involved
Incorporating cultural implications
Planning for level of care along the healthcare continuum
Reassessing outcomes and resetting goals as needed.
Documenting services provided
Applying nursing diagnosis and process
Using technology

4. Legislative, economic, ethical, and legal issues (21%)

4.1 Identify legislative and regulatory issues (e.g., ADA, Section 504 of the Rehabilitation Act of 1973, social security, Medicare, Medicaid) that can affect the individual with an altered functional ability using practice standards in order to promote independence and access to care.

Knowledge of:

Specific laws and regulatory agencies related to rehab (e.g., Medicare, Medicaid, rehab acts, HIPAA, FIM, CMS, CARF, JCAHO, ADA, SSA, APS , CPS, OSHA, Workers Comp)
Practice standards

Skill in:

Rating FIM, MDS, OASIS
Using regulatory manuals
Interpreting laws and regulations
Interpreting policies (e.g., insurance)
Using practice standards

4.2 Identify and implement cost effective care to individuals using appropriate and available resources to promote optimal health.

Knowledge of:

CMG (case mix group)
PPS (Perspective Payment System)
Staffing
RUG's
Resources (organizational- and individual-centered)
Third party payors
Life care plan

Skill in:

Arranging discharge planning
Documenting services provided
Using acuity system
Communicating with third party payors
Managing resources in a cost effective manner
Reviewing life-care costs

4.3 Integrate knowledge of ethical and legal considerations using practice standards in order to advocate for individuals with chronic illness and disability.

Knowledge of:

Advance directives

Health care power of attorney
Informed consent
Cultural and spiritual practices
HIPAA
Ethics committee
Laws and legal issues
Advocacy
Ethical theories
Resources regarding Medicare, Medicaid, and insurance issues

Skill in:

Arranging discharge planning
Communicating effectively
Obtaining informed consents
Facilitating legal and payment resources
Advocating for individual's well-being
Documenting services provided