NCLEX-RN® Examination

Test Plan for the National Council Licensure Examination for Registered Nurses

Effective | April 2007
**Mission Statement**

The National Council of State Boards of Nursing, composed of Member Boards, provides leadership to advance regulatory excellence for public protection.

**Purpose and Functions**

The purpose of the National Council of State Boards of Nursing (NCSBN) is to provide an organization through which boards of nursing act and counsel together on matters of common interest and concern affecting the public health, safety and welfare, including the development of licensing examinations in nursing.

The major functions of NCSBN include developing the NCLEX-RN® and the NCLEX-PN® examinations, performing policy analysis and promoting uniformity in relationship to the regulation of nursing practice, disseminating data related to NCSBN’s purpose, and serving as a forum for information exchange for NCSBN members.

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NCLEX-RN® Test Plan

Test Plan for the National Council Licensure Examination for Registered Nurses (NCLEX-RN® Examination)

Introduction

Entry into the practice of nursing in the United States and its territories is regulated by the licensing authorities within each jurisdiction. To ensure public protection, each jurisdiction requires candidates for licensure to pass an examination that measures the competencies needed to perform safely and effectively as a newly licensed, entry-level registered nurse. The National Council of State Boards of Nursing, Inc. (NCSBN) develops a licensure examination, the National Council Licensure Examination for Registered Nurses (NCLEX-RN®), which is used by state, commonwealth and territorial boards of nursing to assist in making licensure decisions.

Several steps occur in the development of the NCLEX-RN® Test Plan. The first step is conducting a practice analysis that is used to collect data on the current practice of the entry-level nurse (Report of Findings from the 2005 RN Practice Analysis: Linking the NCLEX-RN® Examination to Practice, NCSBN, 2006). Six thousand newly licensed registered nurses are asked about the frequency and priority of performing more than 150 nursing care activities. Nursing care activities are analyzed in relation to the frequency of performance, impact on maintaining client safety and client care settings where the activities are performed. This analysis guides the development of a framework for entry-level nursing practice that incorporates specific client needs as well as processes fundamental to the practice of nursing. The second step is the development of the NCLEX-RN® Test Plan, which guides the selection of content and behaviors to be tested.

The NCLEX-RN® Test Plan provides a concise summary of the content and scope of the licensing examination. It serves as a guide for examination development as well as candidate preparation. NCLEX-RN® examination is based on the test plan. The NCLEX examination assesses the knowledge, skills and abilities that are essential for the nurse to use to meet the needs of clients requiring the promotion, maintenance or restoration of health. The following sections describe beliefs about people and nursing that are integral to the examination, cognitive abilities that will be tested in the examination and specific components of the NCLEX-RN® Test Plan.

Beliefs

Beliefs about people and nursing underlie the NCLEX-RN® Test Plan. People are finite beings with varying capacities to function in society. They are unique individuals who have defined systems of daily living reflecting their values, motives and lifestyles. Additionally, people have the right to make decisions regarding their health care needs and to participate in meeting those needs.

Nursing is both an art and a science, founded on a professional body of knowledge that integrates concepts from the liberal arts and the biological, physical, psychological and social sciences. It is a learned profession based on an understanding of the human condition across the life span and the relationships of an individual with others and within the environment. Nursing is a dynamic, continually evolving discipline that employs critical thinking to integrate increasingly complex knowledge, skills, and technologies and client care activities into evidence-based nursing practice. The goal of nursing for client care in any setting is preventing illness; alleviating suffering; protecting, promoting and restoring health; and promoting dignity in dying.
The registered nurse provides a unique, comprehensive assessment of the health status of the client (individual, family or group), and then develops and implements an explicit plan of care. The nurse assists clients in the promotion of health, in coping with health problems, in adapting to and/or recovering from the effects of disease or injury, and in supporting the right to a dignified death. The registered nurse is accountable for abiding by all applicable federal, state and territorial statutes related to nursing practice.

**Classification of Cognitive Levels**

The examination consists of items that use Bloom’s taxonomy for the cognitive domain as a basis for writing and coding items (Bloom, et al., 1956; Anderson & Krathwohl, 2001). Since the practice of nursing requires application of knowledge, skills and abilities, the majority of items are written at the application or higher levels of cognitive ability, which requires more complex thought processing.

**Test Plan Structure**

The framework of Client Needs was selected for the examination because it provides a universal structure for defining nursing actions and competencies, and focuses on clients in all settings.

**Client Needs**

The content of the *NCLEX-RN* Test Plan is organized into four major Client Needs categories. Two of the four categories are further divided as follows:

- **Safe and Effective Care Environment**
  - Management of Care
  - Safety and Infection Control

- **Health Promotion and Maintenance**

- **Psychosocial Integrity**

- **Physiological Integrity**
  - Basic Care and Comfort
  - Pharmacological and Parenteral Therapies
  - Reduction of Risk Potential
  - Physiological Adaptation
Integrated Processes

The following processes are fundamental to the practice of nursing and are integrated throughout the Client Needs categories and subcategories:

- **Nursing Process** – a scientific problem-solving approach to client care that includes assessment, analysis, planning, implementation and evaluation.

- **Caring** – interaction of the nurse and client in an atmosphere of mutual respect and trust. In this collaborative environment, the nurse provides encouragement, hope, support and compassion to help achieve desired outcomes.

- **Communication and Documentation** – verbal and nonverbal interactions between the nurse and the client, the client’s significant others and the other members of the health care team. Events and activities associated with client care are validated in written and/or electronic records that reflect standards of practice and accountability in the provision of care.

- **Teaching/Learning** – facilitation of the acquisition of knowledge, skills and attitudes promoting a change in behavior.

**Distribution of Content**

The percentage of test questions assigned to each Client Needs category and subcategory of the NCLEX-RN® Test Plan is based on the results of the Report of Findings from the 2005 RN Practice Analysis: Linking the NCLEX-RN Examination to Practice (NCSBN, 2006), and expert judgment provided by members of the NCSBN Examination Committee.

<table>
<thead>
<tr>
<th>Client Needs</th>
<th>Percentage of Items from Each Category/Subcategory</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Safe and Effective Care Environment</strong></td>
<td></td>
</tr>
<tr>
<td>• Management of Care</td>
<td>13-19%</td>
</tr>
<tr>
<td>• Safety and Infection Control</td>
<td>8-14%</td>
</tr>
<tr>
<td><strong>Health Promotion and Maintenance</strong></td>
<td>6-12%</td>
</tr>
<tr>
<td><strong>Psychosocial Integrity</strong></td>
<td>6-12%</td>
</tr>
<tr>
<td><strong>Physiological Integrity</strong></td>
<td></td>
</tr>
<tr>
<td>• Basic Care and Comfort</td>
<td>6-12%</td>
</tr>
<tr>
<td>• Pharmacological and Parenteral Therapies</td>
<td>13-19%</td>
</tr>
<tr>
<td>• Reduction of Risk Potential</td>
<td>13-19%</td>
</tr>
<tr>
<td>• Physiological Adaptation</td>
<td>11-17%</td>
</tr>
</tbody>
</table>
The following processes are integrated into all Client Needs categories and subcategories of the NCLEX-RN® Test Plan: Nursing Process; Caring; Communication and Documentation; and Teaching and Learning.

**Overview of Content**

All content categories and subcategories reflect client needs across the life span in a variety of settings.

**Safe and Effective Care Environment**

The nurse promotes achievement of client outcomes by providing and directing nursing care that enhances the care delivery setting in order to protect clients, family/significant others and other health care personnel.

- **Management of Care** – providing and directing nursing care that enhances the care delivery setting to protect clients, family/significant others and health care personnel.

Related content includes but is not limited to:

- Advance Directives
- Advocacy
- Case Management
- Client Rights
- Collaboration with Interdisciplinary Team
- Concepts of Management
- Confidentiality/ Information Security
- Consultation
- Continuity of Care
- Delegation
- Establishing Priorities
- Ethical Practice
- Informed Consent
- Information Technology
- Legal Rights and Responsibilities
- Performance Improvement (Quality Improvement)
- Referrals
- Resource Management
- Staff Education
- Supervision
**Safety and Infection Control** – protecting clients, family/significant others and health care personnel from health and environmental hazards.

Related content includes but is **not limited** to:

- Accident Prevention
- Disaster Planning
- Emergency Response Plan
- Ergonomic Principles
- Error Prevention
- Handling Hazardous and Infectious Materials
- Home Safety
- Injury Prevention
- Medical and Surgical Asepsis
- Reporting of Incident/Event/Irregular Occurrence/Variance
- Safe Use of Equipment
- Security Plan
- Standard/Transmission-Based/Other Precautions
- Use of Restraints/Safety Devices

**Health Promotion and Maintenance**

The nurse provides and directs nursing care of the client, and family/significant others that incorporates the knowledge of expected growth and development principles; prevention and/or early detection of health problems, and strategies to achieve optimal health.

Related content includes but is **not limited** to:

- Aging Process
- Ante/Intra/Postpartum and Newborn Care
- Developmental Stages and Transitions
- Disease Prevention
- Expected Body Image Changes
- Family Planning
- Family Systems
- Growth and Development
- Health and Wellness
- Health Promotion Programs
- Health Screening
- High Risk Behaviors
- Human Sexuality
- Immunizations
- Lifestyle Choices
- Principles of Teaching/Learning
- Self-Care
- Techniques of Physical Assessment

**Psychosocial Integrity**

The nurse provides and directs nursing care that promotes and supports the emotional, mental and social well-being of the client and family/significant others experiencing stressful events, as well as clients with acute or chronic mental illness.

Related content includes but is **not limited** to:

- Abuse/Neglect
- Behavioral Interventions
- Chemical and Other Dependencies
- Coping Mechanisms
- Crisis Intervention
- Cultural Diversity
- End of Life Care
- Family Dynamics
- Grief and Loss
- Mental Health Concepts
- Psychopathology
- Religious and Spiritual Influences on Health
- Sensory/Perceptual Alterations
- Situational Role Changes
- Stress Management
- Support Systems
- Therapeutic Communications
- Therapeutic Environment
- Unexpected Body Image Changes
Physiological Integrity

The nurse promotes achievement of client outcomes by providing and directing nursing care that enhances the care delivery setting in order to protect clients, family/significant others and other health care personnel.

- **Basic Care and Comfort** – providing comfort and assistance in the performance of activities of daily living.

  Related content includes but is **not limited to**:
  - Assistive Devices
  - Complementary and Alternative Therapies
  - Elimination
  - Mobility/Immobility
  - Non-Pharmacological Comfort Interventions
  - Nutrition and Oral Hydration
  - Palliative/Comfort Care
  - Personal Hygiene
  - Rest and Sleep

- **Pharmacological and Parenteral Therapies** – providing care related to the administration of medications and parenteral therapies.

  Related content includes but is **not limited to**:
  - Adverse Effects/Contraindications
  - Blood and Blood Products
  - Central Venous Access Devices
  - Dosage Calculation
  - Expected Effects/Outcomes
  - Medication Administration
  - Parenteral/Intravenous Therapies
  - Pharmacological Agents/Actions
  - Pharmacological Interactions
  - Pharmacological Pain Management
  - Total Parenteral Nutrition

- **Reduction of Risk Potential** – reducing the likelihood that clients will develop complications or health problems related to existing conditions, treatments or procedures.

  Related content includes but is **not limited to**:
  - Diagnostic Tests
  - Laboratory Values
  - Monitoring Conscious Sedation
  - Potential for Alterations in Body Systems
  - Potential for Complications of Diagnostic Tests/Treatments/Procedures
  - Potential for Complications from Surgical Procedures and Health Alterations
  - System Specific Assessments
  - Therapeutic Procedures
  - Vital Signs

- **Physiological Adaptation** – managing and providing care for clients with acute, chronic or life threatening physical health conditions.

  Related content includes but is **not limited to**:
  - Alterations in Body Systems
  - Fluid and Electrolyte Imbalances
  - Hemodynamics
  - Illness Management
  - Infectious Diseases
  - Medical Emergencies
  - Pathophysiology
  - Radiation Therapy
  - Unexpected Response to Therapies
Administration of the NCLEX-RN® Examination

The NCLEX-RN® examination is administered to the candidate by Computerized Adaptive Testing (CAT). CAT is a method of delivering examinations that uses computer technology and measurement theory. Items go through an extensive review process before they can be used as items on the examination. Items on a candidate's examination are primarily four-option, multiple-choice items. Other types of item formats may include multiple-choice items that require a candidate to select one or more responses, fill-in-the-blank items, or items asking a candidate to identify an area on a picture or graphic. Any of the item formats, including standard multiple-choice items, may include charts, tables or graphic images.

With CAT, each candidate's examination is unique because it is assembled interactively as the examination proceeds. Computer technology selects items to administer that match the candidate's ability level. The items, which are stored in a large item pool, have been classified by test plan category and level of difficulty. After the candidate answers an item, the computer calculates an ability estimate based on all of the previous answers the candidate selected. The next item presented to the candidate is selected from the set of items that measure the candidate's ability most precisely in the appropriate test plan category. This process is repeated for each item, creating an examination tailored to the candidate's knowledge and skills while fulfilling all NCLEX-RN® Test Plan requirements. The examination continues with items selected and administered in this way until a pass or fail decision is made.

All registered nurse candidates must answer a minimum of 75 items. The maximum number of items that the candidate may answer is 265 during the allotted six-hour time period. Examination instructions and all rest breaks are included in the measurement of the time allowed for a candidate to complete the examination.

More information about the NCLEX® examination, including CAT methodology, is listed on the NCSBN Web site: www.ncsbn.org.
Bibliography


