

Certified Hospice and Palliative Licensed Nurse - CHPLN®

TEST CONTENT OUTLINE

- 1. Patient Care: End-Stage Disease Process in Adult Patients 12%**
 - A. Identify specific patterns of disease progression, complications, and treatment for:
 1. Neoplastic conditions
 2. Neurological conditions
 3. Cardiac conditions
 4. Pulmonary conditions
 5. Renal conditions
 6. Gastrointestinal conditions
 7. Debility/decline in health status
 8. Dementia
 9. Hepatic conditions
 10. Hematologic conditions
 - B. Identify and respond to indicators of imminent death
- 2. Patient Care: Pain and Comfort Management 17%**
 - A. Data Gathering
 1. Identify pain and other distressing symptoms
 2. Identify causes of pain
 3. Identify types of pain
 4. Identify factors that may influence the patient's experience of pain (e.g., fear of pain, depression, despair, cultural or spiritual issues)
 - B. Pharmacologic Interventions
 1. Identify medications appropriate to severity and specific type of pain
 2. Administer analgesic and adjuvant (e.g., NSAIDs, corticosteroids, anticonvulsants) medications
 - C. Nonpharmacologic Interventions
 1. Identify the need for nonpharmacologic interventions
 2. Implement nonpharmacologic interventions (e.g., massage, music, and pet therapy)
 3. Respond to psychosocial and spiritual issues related to pain and other distressing symptoms
 - D. Evaluation
 1. Identify medication side effects, interactions, or complications
 2. Respond to medication side effects, interactions, or complications
 3. Evaluate efficacy of relief interventions (pharmacologic and nonpharmacologic)
 4. Identify side effects of interventional therapy (e.g., antineoplastic, radiological, surgical)
- 3. Patient Care: Symptom Management 32%**
 - A. Manage symptoms related to Neurological conditions:
 1. Aphasia
 2. Dysphagia
 3. Lethargy or sedation
 4. Myoclonus
 5. Paraesthesia or neuropathies
 6. Seizures
 7. Extrapyramidal symptoms
 8. Spinal cord compression
 - B. Manage symptoms related to Cardiovascular conditions:
 1. Edema (including pulmonary)
 2. Syncope
 - C. Manage symptoms related to Respiratory conditions:
 1. Congestion
 2. Cough
 3. Dyspnea
 4. Pleural effusions
 - D. Manage symptoms related to Gastrointestinal conditions:
 1. Constipation
 2. Diarrhea or bowel incontinence
 3. Ascites
 4. Hiccoughs
 5. Nausea or vomiting
 6. Bowel obstruction
 - E. Manage symptoms related to Genitourinary conditions:
 1. Bladder spasms
 2. Urinary incontinence
 3. Urinary retention
 4. Infections
 - F. Manage symptoms related to Musculoskeletal conditions:
 1. Impaired mobility
 2. Complications of immobility
 3. Pathological fractures
 4. Weakness or activity intolerance
 - G. Manage alterations in Skin and Mucous Membrane
 1. Dry mouth
 2. Oral lesions
 3. Pruritis
 4. Wounds, including pressure ulcers
 5. Excessive secretions
 - H. Manage symptoms related to Psychosocial and Emotional conditions:
 1. Anxiety
 2. Stages of grief (e.g., anger, denial)
 3. Depression
 4. Impaired communication
 5. Sleep disturbances
 - I. Manage symptoms related to Nutritional and Metabolic conditions:
 1. Anorexia
 2. Cachexia or wasting
 3. Dehydration
 4. Electrolyte imbalance
 5. Fatigue
 - J. Manage symptoms related to the Immune System
 1. Fever
 - K. Manage symptoms related to Mental Status Changes
 1. Agitation (including terminal restlessness)
 2. Confusion
 3. Delirium
 4. Dementia
 5. Hallucinations
 - L. Manage symptoms related to Lymphedema
- 4. Patient Care: Treatments and Procedures 7%**
 - A. Perform the following treatments or procedures:
 1. Wound care (including incision, injury, metastatic disease, pressure ulcer)
 2. Respiratory therapy (e.g., oxygen, suction, inhalation treatments, tracheostomy care)
 3. Surgical alterations (e.g., ileostomy, colostomy)
 - B. Care for patients with the following treatments or procedures:
 1. Intravenous pain and symptom management
 2. Subcutaneous pain and symptom management
 3. Urinary drainage systems (i.e., indwelling, suprapubic, nephrostomy)
 - C. Maintain infection control procedures related to:
 1. Pathogens (e.g., bloodborne, airborne)
 2. Precautions
 3. Chain of infection
- 5. Care of Patient, Family, and Other Caregivers 14%**
 - A. Resource Management
 1. Identify and respond to socioeconomic factors
 2. Identify and respond to environmental and safety risks

3. Monitor disposal of supplies/equipment
 4. Monitor controlled substances (i.e., use, abuse, destroy at time of death)
 5. Monitor health status of family caregiver
 6. Recommend appropriate DME for patient well-being
 7. Explain Medicare hospice benefits
 8. Inform patient/family how to access 24-hours a day: services, medications, equipment, supplies
- B. Psychosocial, Spiritual, and Cultural
1. Respond to spiritual needs
 2. Identify and respond to cultural values and behaviors
 3. Identify and respond to sexual/intimacy issues
 4. Respond to stages of grief
 5. Respond to loss of hope or meaning
 6. Facilitate nearing death awareness
 7. Respond to spiritual distress or unresolved spiritual issues
 8. Identify suicidal or homicidal ideation
 9. Identify unresolved interpersonal matters
 10. Respond to family dynamics
- C. Grief and Loss
1. Participate in advance care planning
 2. Encourage life review
 3. Provide emotional support regarding grief and loss for adults
 4. Provide emotional support regarding grief and loss for children
 5. Provide information regarding funeral practices/preparation
 6. Provide care and support at time of death
 7. Facilitate transition into bereavement services
 8. Participate in formal closure activity (e.g., visit, call, card)
 9. Facilitate self-determined life closure

6. Patient and Family Education and Advocacy 9%

- A. Caregiver Support
1. Teach family and other caregivers techniques for patient care (e.g., positioning, ostomy care)
 2. Monitor family and other caregiver's ability to provide care
 3. Monitor and respond to caregiver burnout
 4. Identify and respond to neglect and abuse
- B. Education
1. Identify and respond to barriers to learning (e.g., communication)
 2. Teach about the end-stage disease process
 3. Teach about pain and symptom relief
 4. Teach alternative methods of pain and symptom relief (e.g., relaxation, distraction, humor, massage, aroma)
 5. Teach about the signs and symptoms of imminent death
 6. Teach about self care methods
- C. Advocacy
1. Monitor needs for levels of care or increased services
 2. Facilitate effective communication between patient, family, and health care providers
 3. Encourage patient and family to participate in decision-making regarding treatment options
 4. Access appropriate interdisciplinary team (IDT) members and other resources to meet the needs of patient and family

7. Interdisciplinary and Collaborative Practice Issues 9%

- A. Coordinate and Monitor
1. Coordinate patient care with other health care providers
 2. Monitor activities of unlicensed personnel (e.g., hospice aide)
 3. Arrange for equipment, supplies, or medications
 4. Assist in transfer to a different care setting

- B. Collaborate
1. Communicate with patient's attending/primary care provider
 2. Participate in effective group process
 3. Encourage family role in IDT decisions
 4. Participate in development of an individualized, interdisciplinary plan of care for patient/family
- C. Practice Issues
1. Identify and incorporate standards into practice (e.g., HPNA standards, ANA standards, NHPCO standards) and guidelines (e.g., National Consensus Project, WHO ladder, CDC)
 2. Identify and incorporate legal regulations into practice (e.g., OSHA, Hospice Medicare Conditions of Participation, HIPAA)
 3. Adhere to documentation standards for Levels of Care
 4. Participate in evaluating educational materials for patients and family
 5. Participate in quality assurance, performance improvement processes
 6. Educate the public on end-of-life issues and hospice and palliative care
 7. Participate in peer review
 8. Demonstrate awareness and knowledge of LP/VN scope of practice
- D. Professional Development
1. Maintain boundaries between patient/family and staff
 2. Contribute to development of peers, colleagues, and others as preceptor, educator, or mentor
 3. Participate in self-care (e.g., stress management)
 4. Read professional journals to remain current in practice
 5. Participate in professional organization activities
 6. Maintain personal continuing education plan to update knowledge
 7. Identify ethical concerns related to the end-of-life