2022 CRRN® Exam Content Outline

Domain I: Nursing Models and Theories (8%)
Task 1: Understand nursing models and theories as a framework for rehabilitation nursing practice.

Knowledge of:
- a. Nursing theories and models significant to rehabilitation (e.g., King, Rogers, Neuman, Orem)
- b. Rehabilitation standards and scope of practice
- c. Nursing process (i.e., assessment, diagnosis, outcomes identification, planning, implementation, evaluation)

Skill in:
- a. Applying nursing models and theories
- b. Applying rehabilitation scope of practice
- c. Applying the nursing process

Task 2: Incorporate relevant research, nursing models, and theories into individualized patient-centered rehabilitation care.

Knowledge of:
- a. Evidence-based research
- b. Nursing theories and models significant to rehabilitation (e.g., King, Rogers, Neuman, Orem)
- c. Nursing process (i.e., assessment, diagnosis, outcomes identification, planning, implementation, evaluation)
- d. Related theories and models (e.g., developmental, behavioral, cognitive, moral, personality, caregiver development and function)
- e. Rehabilitation standards and scope of practice
- f. Patient-centered care

Skill in:
- a. Incorporating evidence-based research into practice
- b. Applying nursing models and theories
- c. Applying rehabilitation scope of practice
- d. Applying the nursing process

Domain II: Functional Health Patterns (53%)
Task 1: Apply the nursing process to optimize the restoration and preservation of the patient’s health and holistic well-being across the lifespan.

Knowledge of:
- a. Physiology and management of health, injury, acute and chronic illness, and adaptability
- b. Pharmacology (e.g., antispasmodics, anticholinergics, antidepressants, analgesics)
- c. Rehabilitation standards and scope of practice
- d. Technology (e.g., smart devices, internet sources, personal response devices, telehealth, adaptive and advanced equipment)
- e. Alterations in sexual function and reproduction

Skill in:
- a. Assessing health status and health practices
- b. Teaching interventions to manage health and wellness
- c. Using rehabilitation standards and scope of practice
d. Using technology
e. Assessing goals related to sexuality and reproduction

Task 2: Apply the nursing process to promote optimal psychosocial patterns and coping and stress management skills of the patients and caregivers.

Knowledge of:

a. Community resources (e.g., face-to-face support groups, internet, respite care, clergy)
b. Coping and stress management strategies for patients and support systems
c. Cultural diversity
d. Physiology of the stress response
e. Safety concerns regarding harm to self and others
f. Technology for self-management
g. Theories (e.g., developmental, coping, stress, grief and loss, self-esteem, role, relationship, interaction)
h. Types of stress and stressors
i. Stages of grief and loss
j. Individual roles, relationships, and alterations (e.g., cultural, environmental, societal, familial, gender, age)
k. Psychosocial disorders (e.g., substance abuse, anxiety, depression, bipolar, PTSD, psychosis)
l. Traditional and alternative modalities (e.g., medications, healing touch, botanicals, spiritual, mindfulness, self-care)

Skill in:

a. Assessing potential for harm to self and others
b. Assessing the ability to cope and manage stress
c. Facilitating appropriate referrals
d. Implementing and evaluating strategies to reduce stress and improve coping (e.g., biofeedback, cognitive behavioral therapy, complementary alternative medicine, pharmacology)
e. Using therapeutic communication
f. Assessing and promoting self-efficacy, self-care, and self-concept
g. Accessing supportive team resources and services (e.g., psychologist, clergy, peer support, community support)
h. Promoting strategies to cope with role and relationship changes (e.g., patient and caregiver counseling, peer support, education)
i. Including the patient and caregiver in the plan of care
j. Incorporating cultural awareness and spiritual values in the plan of care
k. Promoting positive interaction among patients and caregivers

Task 3: Apply the nursing process to optimize the patient’s functional ability.

Knowledge of:

a. Anatomy, physiology, and interventions related to musculoskeletal, respiratory, cardiovascular, and neurological function
b. Assistive devices and technology (e.g., mobility aids, orthostatic devices, orthotic devices)
c. Clinical signs of sensorimotor deficits
d. Activity tolerance and energy conservation
e. Pharmacology (e.g., antispasmodics, anticholinergics, antidepressants, analgesics)
f. Safety concerns (e.g., falls, burns, skin integrity, infection prevention)
g. Self-care activities (e.g., activities of daily living, instrumental activities of daily living)

Skill in:

a. Assessing and implementing interventions to prevent musculoskeletal, respiratory, cardiovascular, and neurological complications (e.g., motor and sensory impairments, contractures, heterotrophic ossification, aspiration, pain)
b. Assessing, implementing, and evaluating interventions for self-care ability and mobility
c. Implementing safety interventions (e.g., sits, reorientation, environment, redirection, non-behavioral restraints)
d. Using technology and assistive devices (e.g., mobility aids, pressure relief devices, informatics, assistive software)
e. Teaching interventions to prevent complications of immobility (e.g., skin integrity, DVT prevention)

Task 4: Apply the nursing process to optimize management of the patient’s neurological and other complex medical conditions.

Knowledge of:

a. Measurement tools (e.g., Rancho Los Amigos, Glasgow, Mini Mental State Examination, ASIA, pain analog scales)
b. Neuroanatomy and physiology (e.g., cognition, judgment, sensation, perception)
c. Pain (e.g., receptors, acute, chronic, theories)
d. Pharmacology (e.g., antispasmodics, anticholinergics, antidepressants, analgesics)
e. Safety concerns (e.g., seizure precautions, fall precautions, impaired judgment)
f. Medical equipment and technology (e.g., LVAD, assisted ventilation)
g. Central lines, ports, and catheters (e.g., triple lumen, hemodialysis)

Skill in:

a. Assessing cognition, perception, sensation, apraxia, perseveration, and pain
b. Implementing and evaluating strategies for safety (e.g., personal response devices, alarms, helmets, padding)
c. Teaching strategies for neurological deficits
d. Teaching strategies for pain and comfort management (e.g., pharmacological, non-pharmacological)
e. Using medical equipment and technology (e.g., TENS unit, baclofen pump, LVAD)
f. Implementing behavioral management strategies (e.g., contracts, positive reinforcement, rule setting)
g. Teaching the patients and the caregivers about the purpose and caring for central lines, ports, and catheters

Task 5: Apply the nursing process to optimize the patient’s ability to communicate effectively.

Knowledge in:

a. Anatomy and physiology (e.g., cognition, comprehension, sensory deficits)
b. Communication techniques (e.g., active listening, anger management, reflection)
c. Cultural diversity
d. Developmental factors
e. Linguistic deficits (e.g., aphasia, dysarthria, language barriers)
f. Assistive technology and adaptive equipment

Skill in:
   a. Assessing comprehension and communication (e.g., oral, written, auditory, visual)
   b. Implementing and evaluating communication interventions
   c. Involving and educating support systems
   d. Using assistive technology and adaptive equipment (e.g., Passy Muir)
   e. Using communication techniques
   f. Teaching self-advocacy skills to patients and caregivers

Task 6: Apply the nursing process to promote optimal nutrition and hydration.

Knowledge of:
   a. Adaptive equipment and feeding techniques (e.g., modified utensils, scoop plates, positioning)
   b. Enteral and parenteral nutrition and hydration
   c. Anatomy and physiology related to nutritional and metabolic patterns (e.g., endocrine, obesity, swallowing)
   d. Diagnostic testing
   e. Diet types (e.g., cardiac, diabetic, renal, dysphagia)
   f. Fluid and electrolyte balance
   g. Nutritional requirements
   h. Skin integrity (e.g., Braden scale, pressure ulcer staging)
   i. Pharmacology (e.g., antispasmodics, anticholinergics, antidepressants, analgesics)
   j. Safety concerns and interventions (e.g., swallowing, positioning, food textures, fluid consistency)
   k. Cultural and religious practices related to dietary habits

Skill in:
   a. Using and managing manual and mechanical devices to provide nutrition and hydration
   b. Assessing nutritional and metabolic patterns (e.g., nutritional intake, fluid volume deficits, skin integrity, metabolic functions, feeding and swallowing)
   c. Implementing and evaluating interventions for nutrition
   d. Implementing and evaluating interventions for skin integrity (e.g., skin assessment, pressure relief, moisture reduction, nutrition and hydration)
   e. Teaching interventions for swallowing deficits
   f. Using adaptive equipment

Task 7: Apply the nursing process to optimize the patient’s elimination patterns.

Knowledge of:
   a. Anatomy and physiology of altered bowel and bladder function
   b. Bladder and bowel adaptive equipment and technology (e.g., bladder scan, types of catheters, suppository inserter)
   c. Bladder and bowel training (e.g., scheduled self- catheterization, timed voiding, elimination programs)
   d. Pharmacologic and non-pharmacological interventions

Skill in:
   a. Assessing elimination patterns (e.g., elimination diary, patient’s history)
b. Implementing and evaluating interventions for bladder and bowel management (e.g., nutrition, exercise, pharmacological, adaptive equipment)

c. Teaching interventions to prevent complications (e.g., constipation, urinary tract infections, autonomic dysreflexia)

d. Providing patient and caregiver education related to bowel and bladder management

e. Using adaptive equipment and technology

Task 8: Apply the nursing process to optimize the patient’s sleep and rest patterns.

Knowledge of:
  a. Factors affecting sleep and rest (e.g., diet, sleep habits, alcohol, pain, environment)
  b. Pharmacological and non-pharmacological sleep aids
  c. Physiology of sleep and rest cycles
  d. Technology

Skill in:
  a. Assessing sleep and rest patterns
  b. Evaluating effectiveness of sleep and rest interventions
  c. Teaching interventions and strategies to promote sleep and rest (e.g., energy conversation, environmental modifications)
  d. Using technology (e.g., sleep study, CPAP, BiPAP, relaxation technology)

Domain III: The Function of the Rehabilitation Team and Transitions of Care (12%)

Task 1: Collaborate with the interdisciplinary team to achieve patient-centered goals.

Knowledge of:
  a. Goal setting and expected outcomes
  b. Models of healthcare teams (e.g., interdisciplinary, multidisciplinary, transdisciplinary)
  c. Rehabilitation philosophy and definition
  d. Role of the rehabilitation nurse and other team members
  e. Related theories (e.g., change, leadership, communication, team function, organizational)

Skill in:
  a. Applying appropriate theories (e.g., change, leadership, communication, team function, organizational)
  b. Communicating and collaborating with the interdisciplinary team
  c. Developing and documenting plans of care to attain patient-centered goals
  d. Appropriate delegation of responsibilities to team members

Task 2: Apply the nursing process to promote the patient’s community reintegration or transition to the next level of care.

Knowledge of:
  a. Technology and adaptive equipment (e.g., electronic hand-held devices, electrical simulation, service animals, equipment to support activities of daily living)
  b. Community resources (e.g., housing, transportation, community support systems, social services, recreation, CPS, APS)
  c. Personal resources (e.g., financial, caregiver support systems, caregivers, spiritual, cultural)
d. Professional resources (e.g., psychologist, neurologist, clergy, teacher, case manager, vocational rehabilitation counselor, home health, outpatient therapy)
e. Teaching and learning strategies for self-advocacy
f. Different levels of care and care continuum (e.g., acute rehab, home care, assisted living)

Skill in:
   a. Accessing community resources
   b. Assessing readiness for discharge
c. Assessing barriers to community reintegration
d. Evaluating outcomes and adjusting goals (e.g., interdisciplinary team and patient-centered)
e. Identifying financial barriers and providing appropriate resources
f. Facilitating appropriate referrals
g. Participating in team and patient caregiver conferences
h. Planning discharge (e.g., home visits, caregiver teaching)
i. Teaching health, wellness, and life skills maintenance
j. Using adaptive equipment and technology (e.g., voice activated call systems, computer supported prosthetics)

**Domain IV: Legislative, Economic, Ethical, and Legal Issues (27%)**

**Task 1: Integrate legislation and regulations in the management of care.**

Knowledge of:
   a. Agencies related to regulatory, disability, and rehabilitation (e.g., CARF, The Joint Commission, APS, CPS, CMS, SSA, OSHA)
   b. Specific legislation related to disability and rehabilitation (e.g., Medicare, Medicaid, ADA, rehabilitation acts, HIPAA, Affordable Care Act, workers’ compensation, IDEA, Vocational, IMPACT Act)

Skill in:
   a. Accessing, interpreting, and applying legal, regulatory, and accreditation information
   b. Using standardized assessment tools

**Task 2: Use the nursing process to deliver cost effective patient-centered care.**

Knowledge of:
   a. Clinical practice guidelines
   b. Community and public resources
c. Insurance and reimbursement (e.g., PPS, workers’ compensation)
d. Regulatory agency audit processes
e. Staffing patterns and policies
f. Utilization review processes
g. Patient-centered care

Skill in:
   a. Analyzing quality and utilization data
   b. Collaborating with private, community, and public resources
c. Incorporating clinical practice guidelines
d. Managing current and projected resources in a cost-effective manner
e. Documentation to support regulatory requirements

Task 3: Incorporate ethical considerations and legal obligations that affect nursing practice.

Knowledge of:
  a. Ethical theories and resources (e.g., deontology, ombudsperson, ethics committee)
  b. Legal implications of healthcare related policies and documents (e.g., HIPAA, advance directives, powers of attorney, POLST/MOLST, informed consent)

Skill in:
  a. Advocating for the patient
  b. Documenting services provided
  c. Identifying appropriate resources to assist with legal documents
  d. Implementing strategies to resolve ethical dilemmas
  e. Applying ethics in the delivery of care

Task 4: Promote a safe environment of care for patients and staff to minimize risk.

Knowledge of:
  a. Safe patient handling practices
  b. Safety measures (e.g., safe medication practices, restraint and alternatives, fall prevention)
  c. Risk factors and mitigation strategies
  d. Infection control practices
  e. Behavioral management techniques

Skill in:
  a. Assessing safety risks
  b. Minimizing safety risk factors
  c. Implementing safety prevention measures
  d. Applying behavior management techniques (e.g., de-escalation techniques)
  e. Using appropriate safety devices (e.g., restraints and alternatives, alarms)

Task 5: Integrate quality improvement processes into nursing practice.

Knowledge of:
  a. Quality measurement and performance improvement processes (e.g., Agency for Healthcare Research and Quality, Institute of Medicine, National Database of Nursing Quality Indicators)
  b. Models and tools used in process improvement (e.g., Plan, Do, Check, Act; Six Sigma; Lean approach)
  c. Federal quality measurement efforts
  d. Reporting requirements (e.g., infection rates, healthcare- acquired pressure injury, sentinel events, discharge to community, readmission rates)

Skill in:
  a. Using standardized assessment tools
  b. Incorporating standards of professional performance
  c. Applying quality measurement tools in practice
  d. Using quality improvement model to improve patient care