

# CRNI<sup>®</sup> EXAM HANDBOOK



Be Exceptional. Choose CRNI<sup>®</sup>.



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**TO ENSURE YOUR REGISTRATION PROCESS GOES SMOOTHLY,  
PLEASE REVIEW ALL OF THE ENCLOSED INFORMATION CAREFULLY.**

# ABOUT CERTIFICATION

Certification, as defined by the American Board of Nursing Specialties, is the formal recognition of the specialized knowledge, skills, and experience demonstrated by the achievement of standards identified by a nursing specialty to promote optimal health outcomes.

INCC offers the only specialty certification for infusion nurses that is nationally recognized and accredited.

Becoming a CRNI® exemplifies a commitment to excellence. The prestigious CRNI® credential warrants the recognition and respect of patients, peers, and employers and demonstrates a dedication to the pursuit of lifelong learning and delivery of quality health care. A CRNI® is, first and foremost, an advocate for improving patient care.

## HOW DOES CERTIFICATION BENEFIT YOU?

Validate your experience by becoming a CRNI®. It is one of the most significant personal and professional decisions you can make. These are just a few of the benefits that result from becoming a CRNI®:

- Recertification requirements ensure you keep abreast of any developments in the field
- 73% of people say they are more likely to choose a hospital with a high percentage of certified nurses<sup>1</sup>
- Certification has been linked to fewer medical errors and increased job satisfaction and confidence<sup>1</sup>
- Nurses who are certified have higher perceptions of empowerment and, therefore, improve work effectiveness<sup>2</sup>
- Certification demonstrates commitment to the infusion nursing specialty
- Certification lends greater credibility from recognized validation of your infusion therapy experience

Visit our Resources page at [www.incc1.org](http://www.incc1.org) for a number of complimentary tools and ideas to help you build a case for investing in CRNI® certification and communicating the value of specialty nursing certification in general.

## BENEFITS FOR PATIENTS AND EMPLOYERS

The CRNI® is exposed to the latest developments, technologies, and techniques within the infusion specialty. This increases positive patient outcomes, providing benefits for the employer. CRNI®s help meet the demand for standards and safety by showing they are competent and skilled specialists. Furthermore, patient satisfaction increases when practice errors are decreased and patient outcomes are improved. Employers who support their nurses through certification improve retention rates by showing they are willing to invest in their nurses' education. This helps develop a stable and highly skilled work force while decreasing in-house infusion training time. Employers with credentialed infusion nurses are better able to establish a quality mentor program using nurses whose experience has been tested and validated.

Visit [www.incc1.org](http://www.incc1.org) for tips on employer support.

1. Harris Interactive. American Association of Critical-Care Nurses Survey. <http://www.aacn.org/WD/Certifications/Docs/harrispollrpt.pdf>. 2002. Accessed January 29, 2013.

2. Piazza IM, Donahue M, Dykes PC, Griffin MQ, Fitzpatrick JJ. Differences in perceptions of empowerment among nationally certified and noncertified nurses. *J Nurs Adm*. 2006;36(5):277-283.

## ABOUT INCC AND INS



INCC is committed to promoting the CRNI® credential as the standard of excellence that nurses seek in order to provide optimal infusion care. Through the development and administration of a comprehensive, evidence-based certification program, INCC is dedicated to promoting optimal health outcomes that the public expects, demands, and deserves.

While INCC is affiliated with INS and shares the same goals of providing the best infusion-related care, the two organizations are legally and financially independent.



The Infusion Nurses Society (INS) was established as a nonprofit professional membership association designed to further the profession of the specialty of infusion nursing by offering up-to-date clinical information and networking opportunities with the ultimate goal of providing the best infusion-related care.

## CRNI® EXAMINATION BASICS

### *Eligibility Criteria*

CRNI® exam applicants must document the following:

- A current, active, unrestricted registered nurse (RN) license in the United States or Canada
- A minimum of 1,600 hours of experience in infusion therapy as an RN within the past two years. Nursing experience may be in the areas of nursing education, administration, research, or clinical practice within the infusion specialty. Direct bedside care is not a requirement (see Clinical Practice Documentation and Affirmation Form on p. 25 for details).

### *Locations*

The CRNI® Exam is offered in 290 locations throughout the United States and abroad by our testing partner AMP, a PSI business. PSI/AMP Assessment Centers provide accessibility to most candidates in all states and major metropolitan areas. A current listing of PSI/AMP Assessment Centers, including addresses and driving directions, is at [www.goAMP.com](http://www.goAMP.com). If there is no location near you, INCC can work with PSI/AMP to find and approve an appropriate local testing center.

### *Date and Time*

The CRNI® exam is offered during the months of March and September (exclusive of Labor Day). Appointments are offered Monday through Saturday at 9:00 am and 1:30 pm. *Appointments can be made approximately three weeks before the testing window, after appointment notifications are sent to candidates by PSI/AMP.*

Appointment notifications are sent by mail and e-mail. Please ensure that INCC has your most current contact information. See page 8 for more information on scheduling your exam.

## EXAM APPLICATION DEADLINES AND FEES

	Early Bird <i>Includes \$50 discount</i>	Regular
March Exam September Exam	November 10 June 10	January 10 July 10
Exam Fees: Initial Certification		
INS Member	\$310	\$360
Nonmember	\$450	\$500
Recertification by Exam † (includes \$175 recertification fee)		
INS Member	\$485	\$535
Nonmember	\$650	\$700
International Candidates		
International Fee	\$140 Additional Fee	\$140 Additional Fee

Applications received after regular deadlines are not guaranteed acceptance. A \$50 late fee will apply.

†Accepted for September exam only. (See p. 24 for details.)

## INTERNATIONAL APPLICANT INFORMATION

### Eligibility and Application Requirements

#### Eligibility Requirements

- Documentation of a current, active, unrestricted registered nurse (RN) license in the country in which the applicant practices
- A minimum of 1,600 hours of experience in infusion therapy as an RN within the past two years; 1,600 hours of direct bedside care are not required. Nursing experience may be in the areas of nursing education, administration, research, or clinical practice within the infusion specialty.
- Online applicants must upload RN license documentation.

Correspondence will be primarily through e-mail. Please ensure that INCC has your correct e-mail address and that [incc@incc1.org](mailto:incc@incc1.org) is approved through your e-mail server.

### Locations

The CRNI® exam is offered at more than 100 international locations in 40 countries. An additional \$140 international site fee is required. A full listing of locations is available at [www.goAMP.com](http://www.goAMP.com). Other locations may be available; however, additional fees may apply. Contact INCC for information.

By the first week of February or August, contingent on your preferred exam administration, international applicants will receive an e-mail from PSI/AMP. The applicant must respond with three dates on which they are available to test in order of preference. Those dates must be during the month of March or September (exclusive of Labor Day). PSI/AMP will confirm the testing date by e-mail. (Candidates testing in South Korea, please contact INCC for information on exam availability.)

### Exam Results

Exam results will be mailed to international candidates within two business days after the exam.

International candidates can also print unofficial copies of their score reports from the **My Home** section of the PSI/AMP website.

For step-by-step help accessing the online score report, please visit [www.incc1.org](http://www.incc1.org).



## APPLICATION PROCESS

Complete your application online at [www.incc1.org](http://www.incc1.org), or fax or mail the forms on pages 24-26.

### Application Requirements

- State and expiration date of RN license
- Supervisor's contact information. INCC may contact the employer to verify clinical experience.

### Application Acceptance

INCC will mail a receipt and confirmation letter of eligibility to all applicants within 7 to 14 days of processing an exam application. If you do not receive a confirmation letter after you submitted your application, e-mail [incc@incc1.org](mailto:incc@incc1.org) or call (781) 440-9400 to confirm that your application was successfully processed. The confirmation letter will include your unique ID number, which is required to log into PSI's/AMP's website to schedule your exam appointment and to register at the test site. **NOTE: The first digit of your unique ID number is the letter I.**

Applications are not considered complete until the applicant receives a confirmation letter from INCC. Applicants who are found to be ineligible to take the exam will be notified. Ineligibility decisions may be appealed by submitting a written request for appeal to INCC within 15 calendar days of the denial of eligibility to sit for the exam. A copy of the full Applicant Appeals Process policy is available from INCC on request.

### Application Submission Policy

INCC reserves the right to verify information supplied by or on behalf of a candidate. Any misrepresentation of information shall be considered grounds for prohibition from testing or revocation of certification. An application is considered complete only if all information required is complete, legible, and accurate; if the candidate is eligible for the exam; and if the appropriate fee accompanies the application. Applications should not be considered accepted until a confirmation letter from INCC is received. INCC is not responsible for lost, misdirected, late, or undeliverable mail. A certified mail, certificate of mailing, or other courier receipt can serve as proof that the application was mailed. Applications not received by published deadlines are not guaranteed acceptance and may be subject to a \$50 late fee.

Applications are processed in the order they are received.

INCC does not discriminate among candidates on the basis of age, gender, race, religion, national origin, disability, sexual orientation, or marital status.

## DISCOUNTS

### Retake Discount

Candidates who were previously unsuccessful CRNI® exam candidates automatically qualify for a \$50 discount. CRNI®s who are recertifying by exam are not eligible. If you do not receive your \$50 discount, please contact INCC.

## SPECIAL ACCOMMODATIONS

In compliance with the Americans with Disabilities Act of 1990, all reasonable special requests will be accommodated. Complete the Special Accommodation Request Form (p. 27) and submit it to INCC, with your application and fee, and a letter from a health care or education professional explaining your requirements. *Applications for special accommodations must be received by regular deadlines.* Special accommodation requests cannot be processed online. Exam appointments can be made only by calling PSI/AMP at (888) 519-9901.

## SCHEDULING AN EXAM

After eligibility requirements are approved and the candidate has received confirmation from PSI/AMP, approximately three weeks before the testing window, the candidate can schedule an appointment to take the exam. Appointments are available on a first-come, first-served basis, Monday through Saturday, at 9:00 am and 1:30 pm. Schedule your exam promptly to secure your preferred testing date and time. You must schedule your testing appointment at least two business days before your preferred testing appointment.

There are two ways to schedule an appointment to take the CRNI® Examination:

### Online Scheduling

The candidate may schedule a testing appointment online by using PSI's/AMP's Online Application/Scheduling service at [www.goAMP.com](http://www.goAMP.com). To use this service, follow these easy steps:

- Go to [www.goAMP.com](http://www.goAMP.com) and select Candidates.
- Follow the simple, step-by-step instructions to complete the scheduling process.

### Telephone Scheduling

Call PSI/AMP at **(888) 519-9901** to schedule a testing appointment. This toll-free number is available from 7:00 am to 9:00 pm (Central Time) Monday through Thursday, 7:00 am to 7:00 pm on Friday, and 8:30 am to 5:00 pm on Saturday. Hours are subject to change.

When scheduling an exam, be prepared to confirm a location, a preferred date and time for testing, and to provide the unique identification number you will be assigned at the time of exam application. When you contact PSI/AMP to schedule an exam appointment, you will be notified of the time to report to the center. Please make a note of it because you will not receive an admission letter.

### Exam Appointment Changes

A candidate may reschedule an exam appointment within the same exam administration once at no charge by calling PSI/AMP at **(888) 519-9901** at least two business days before the scheduled testing session. Online rescheduling is available 24 hours a day, seven days a week.

## EXAM WITHDRAWAL

### Cancellation

If written notification of cancellation is submitted to INCC before regular deadlines (see table below), the payee will receive a refund of the exam fee, less a \$50 processing fee. No refunds can be issued after regular deadlines.

### Transfer

After regular deadlines, applicants can transfer their exam application to the next March or September exam.

A Transfer Request Form and \$50 administrative fee must be processed before dates noted in the table below. Late transfers are subject to a \$50 late fee in addition to the \$50 administrative fee and are not guaranteed acceptance.

You will be required to select your preferred exam administration (the following March or September exam) at the time of transfer. Transfers are offered once only. Refunds are not permitted.

Contact INCC at **(781) 440-9400** or download an application online at [www.incc1.org](http://www.incc1.org)

Withdrawal Deadlines		
	March Exam	September Exam
Cancellation Notification	January 10	July 10
Transfer Request	February 1	August 1

### *Missed Appointments and Cancellations*

A candidate will forfeit the application and all fees paid to take the exam under the following circumstances:

- The candidate does not submit a written request to withdraw or transfer according to above policies.
- The candidate wishes to reschedule an exam but fails to contact PSI/AMP at least two business days before the scheduled testing session.
- The candidate wishes to reschedule a second time.
- The candidate appears more than 15 minutes late for an exam.
- The candidate fails to report for an exam appointment.

A complete application and exam fee are required to reapply for the exam.

### *Inclement Weather, Power Failure, or Emergency*

In the event of inclement weather or unforeseen emergencies on the day of an exam, PSI/AMP will determine whether circumstances warrant the cancellation and subsequent rescheduling of an exam. The exam will usually not be rescheduled if the Assessment Center personnel are able to open the Assessment Center. If power to a testing center is temporarily interrupted during an administration, your exam will restart where you left off, and you may continue the exam. Candidates may contact PSI's/AMP's Weather Hotline at **(800) 380-5416** (24 hours a day) or visit [www.goAMP.com](http://www.goAMP.com) before the exam to determine if PSI/AMP has been advised that any Assessment Centers are closed. Every attempt is made to administer the exam as scheduled; however, should an exam be cancelled at an Assessment Center, all scheduled candidates will receive notification regarding rescheduling or reapplication procedures.

## **TEST DAY**

The CRNI® Examination will be administered by computer at an PSI/AMP Assessment Center. Candidates do not need any computer experience or typing skills to take the exam. On the day of your testing appointment, report to the Assessment Center no later than your scheduled testing time. Look for the signs indicating PSI/AMP Assessment Center Check-In. A candidate who arrives more than 15 minutes after the scheduled testing time will not be admitted.

### *Identification*

To gain admission to the Assessment Center, candidates need to present two forms of identification, one with a current photograph. Both forms of identification must be current and include the candidate's current name and signature. The candidate will be required to sign a roster for verification of identity. Acceptable forms of photo identification include a current driver's license with photograph, a current state identification card with photograph, a current passport, or a current military identification card with photograph. Employment ID cards, student ID cards, and any type of temporary identification are not acceptable as the primary form of identification.

You must have proper identification to gain admission to the Assessment Center. Failure to provide appropriate identification at the time of the exam is considered a missed appointment. There will be no refund of your testing fee.

## Security

PSI/AMP administration and security standards are designed to ensure that all candidates are provided the same opportunity to demonstrate their abilities. The Assessment Center is continuously monitored by audio and video surveillance equipment for security purposes.

The following security procedures apply during the examination:

- Examinations are proprietary. No cameras, notes, tape recorders, pagers, or cell phones are allowed in the testing room. Possession of a cell phone or other electronic devices is strictly prohibited and will result in dismissal from the examination.
- Only silent, nonprogrammable calculators without alpha keys or printing capabilities are allowed in the testing room.
- No guests, visitors, or family members are allowed in the testing room or reception areas.
- Candidates may be subjected to a metal detection scan upon entering the examination room.

## Personal Belongings

No personal items, valuables, or weapons should be brought to the Assessment Center. Only wallets and keys are permitted. Coats must be left outside the testing room. You will be provided a soft locker to store your wallet and/or keys with you in the testing room. You will not have access to these items until after the examination is completed. Please note the following items will not be allowed in the testing room except when securely locked in the soft locker:

- Watches
- Hats

Once you have placed everything in the soft locker, you will be asked to pull out your pockets to ensure they are empty. If all personal items will not fit in the soft locker, you will not be able to take the test. The site will not store any personal belongings.

If any personal items are observed in the testing room after the examination has started, the administration will be forfeited.

## Examination Restrictions

- Pencils will be provided during check in.
- You will be provided with one piece of scratch paper at a time to use during the examination, unless noted on the sign-in roster for a particular candidate. You must return the scratch paper to the supervisor at the completion of testing or you will not receive your score report.
- No documents or notes of any kind may be removed from the Assessment Center.
- No questions concerning the content of the examination may be asked during the examination.
- Eating, drinking, or smoking will not be permitted in the Assessment Center.
- You may take a break whenever you wish, but you will not be allowed to make up for time lost during breaks.

## Practice Exam

After your identification has been confirmed, you will be directed to a testing carrel. You will be instructed on screen to enter your unique identification number. You will take your photograph, which will remain on screen throughout your exam session. This photograph also will print on your score report. Before attempting the timed exam, you will be given the opportunity to practice taking an exam on the computer. The time you use for this practice exam is not counted as part of your exam time or score. When you are comfortable with the computer testing process, you may quit the practice session and begin the timed exam.

## Timed Exam

Following the practice exam, you will begin the actual exam. Before beginning, instructions for taking the exam are provided on screen.

The three-hour, computer-based CRNI® exam consists of 170 items. Candidates are scored on 150 items. Twenty items are pretested for future use.

The computer monitors the time you spend on the exam. The exam will terminate if you exceed the time allowed. You may click on the **Time** box in the lower right portion of the screen or select the **Time** key to monitor your time. A digital clock indicates the time remaining for you to complete the exam. The **Time** feature may be turned off during the exam.

Only one exam item is presented at a time. The question number appears in the lower right portion of the screen. Choices of answers to the exam question are identified as A, B, C, or D. You must indicate your choice by either typing in the letter in the response box in the lower left portion of the screen or clicking in the option using the mouse. To change your answer, enter a different option by pressing the A, B, C, or D key or by clicking on the option using the mouse. You may change your answer as many times as you wish during the testing time limit.

To move to the next question, click on the forward arrow (>) in the lower right portion of the screen. This action will move you forward through the exam question by question. If you wish to review any question, click the backward arrow (<) or use the left arrow key to move backward through the exam.

An exam question may be left unanswered and returned to later in the testing session. Questions may also be bookmarked for later review by clicking in the blank square to the right of the **Time** button. Click on the hand icon to advance to the next unanswered or bookmarked question on the exam. To identify all unanswered and bookmarked questions, repeatedly click on the hand icon. When the exam is completed, the number of exam questions answered is reported. If all questions have not been answered and there is time remaining, return to the exam and answer those questions. Be sure to provide an answer for each exam question before ending the exam. There is no penalty for guessing.

## Candidate Comments

During the exam, online comments may be provided for any question by clicking on the button displaying an exclamation point (!) to the left of the **Time** button. This opens a dialogue box where comments may be entered. Comments will be reviewed, but individual responses will not be provided.

Any problems during testing should be directed to the testing supervisor.

## Misconduct

If you engage in any of the following conduct during the examination you may be dismissed, your scores will not be reported, and examination fees will not be refunded. Examples of misconduct are when you:

- create a disturbance, are abusive, or otherwise uncooperative;
- display and/or use electronic communications equipment such as pagers, cell phones;
- talk or participate in conversation with other examination candidates;
- give or receive help or are suspected of doing so;
- leave the Assessment Center during the administration;
- attempt to record examination questions or make notes;
- attempt to take the examination for someone else;
- are observed with personal belongings; or
- are observed with notes, books, or other aids without it being noted on the roster.

## Copyrighted Exam Questions

All exam questions are the copyrighted property of INCC. It is forbidden under federal copyright law to copy, reproduce, record, distribute, or display these exam questions by any means, in whole or in part. Doing so may subject you to severe civil and criminal penalties.

## Scoring the Exam

After completing the exam, candidates are asked to complete a short evaluation of their testing experience. Candidates then are instructed to report to the testing supervisor to receive their score report. You may also access your score report online at [www.goAMP.com](http://www.goAMP.com). International candidates will receive their official score reports by postal mail within two business days.

Your score report will indicate a pass or fail. Additional detail is provided in the form of raw scores by major content category. A raw score is the number of questions you answered correctly. Your pass-fail status is determined by your raw score.

The minimum passing score required to pass the CRNI® Examination is established by the Angoff method, a criterion-referenced methodology in which expert judges estimate the passing probability of each question on the examination. These ratings are averaged for a “base form” of the examination to determine the minimum passing score (i.e., the number of correctly answered questions required to pass the examination), to ensure that those who pass have demonstrated the expertise deserving of the credential. Since different forms of the examination will be developed, the level of expertise required to pass is preserved through preequating. This procedure involves evaluating the performance characteristics of items on a new form, specifically the difficulty and discrimination indexes to determine the passing point on the new form that best represents the same amount of knowledge as was required to pass the base form. Because the new forms can vary somewhat in difficulty, the passing point may be slightly higher or lower than that of the base form.

## Score Cancellation

INCC and PSI/AMP are responsible for the validity and integrity of the scores they report. On occasion, occurrences such as computer malfunction or misconduct by a candidate may cause a score to be suspect. INCC and PSI/AMP reserve the right to void or withhold exam results if, on investigation, violation of its regulations is discovered.

## If You Pass the Exam

The CRNI® credential becomes effective April 1 for successful candidates of a March exam and expires three years later on March 31. The credential becomes effective October 1 for successful candidates of a September exam and expires three years later on September 30.

## If You Do Not Pass the Exam

Those who do not pass the exam can reapply for the next exam administration by submitting another complete application with appropriate fee to INCC. Unsuccessful candidates who retake the CRNI® Examination qualify for a \$50 discount. Candidates may take the exam an unlimited number of times as long as they continue to meet the eligibility requirements.

Individuals who do not pass the exam and believe that their exam was incorrectly graded, that the exam was administered in a manner inconsistent with INCC policies, or who experienced a major disruption of the exam process may file an appeal. Adverse testing conditions and disruptions should be reported on exam day to the testing supervisor. Appeals must be submitted in writing to INCC within 15 days of receipt of the exam result. A full copy of the *Applicant Appeals Process* is available on the INCC website.

## Confidentiality

Information about candidates and their exam results is considered confidential. Studies and reports concerning candidates will contain no information identifiable with any candidate, unless authorized by the candidate.

INCC will verify the certification status of an individual. Verification will include the individual's name and whether he or she is currently certified as a CRNI® in good standing. Verification requests can be made at [www.incc1.org](http://www.incc1.org) and must include the certificant's name and address.

## Duplicate Score Report

Candidates may purchase additional copies of their results at a cost of \$25 a copy. Requests must be submitted to PSI/AMP in writing within 12 months after the exam. The request must include the candidate's name, unique identification number, mailing address, telephone number, date of exam, and exam taken. Submit this information with the required fee payable to PSI/AMP in the form of a money order or cashier's check. Duplicate score reports will be mailed within approximately two weeks after receipt of the request and fee. Mail requests to PSI/AMP, Examination Services Department, 18000 W. 105th Street, Olathe, KS 66061-7543, or you may access your unofficial online score report from the **My Home** section of the PSI/AMP website. For step-by-step help accessing the online score report, please visit [www.incc1.org](http://www.incc1.org).

## REVOCATION OF THE CRNI® CREDENTIAL

INCC may withdraw certification status or impose other sanctions if a CRNI® loses his or her RN license, misrepresents his or her credential(s), or practices in a manner deemed morally or ethically unacceptable by the INCC Board of Directors. Alleged violations will be investigated by the INCC Disciplinary Committee. In the event of an unfavorable decision, appeals may be directed to the INCC Board of Directors, who are the final authority in INCC disciplinary matters. A complete copy of the *Disciplinary Action and Appeals for Misrepresentation and Non-Compliance* policy is available on the INCC website.

## FREQUENTLY ASKED QUESTIONS

### 1. *What constitutes 1,600 hours of clinical infusion therapy experience?*

The requirement of 1,600 hours of clinical infusion therapy experience ensures that the RN has sufficient exposure to infusion technologies and has the skill set required for knowledge of the infusion practice. Experience may be within one or several of the eight core areas; 1,600 hours of direct clinical bedside experience is not required. RNs functioning as educators, researchers, administrators, or managers are eligible; if you have regularly practiced infusion therapy in any of those capacities within the past two years, you have more than likely obtained the requisite hours.

### 2. *What should I use to study for the exam?*

See Studying for the Exam on page 17, and visit our **Study Information** page at [www.incc1.org](http://www.incc1.org) for more detailed information on how and what to study.

### 3. *When does my CRNI® credential become effective?*

The CRNI® credential becomes effective April 1 for March passers and October 1 for September exam passers.

### 4. *What are my recertification options?*

CRNI®s can recertify by exam or continuing education. Those choosing to recertify by exam must take the September exam during their final year of certification. CRNI®s choosing to recertify by continuing education can begin earning recertification units from the date their credential becomes effective: either April 1 or October 1. A total of 40 CRNI® recertification units (not contact hours or CEs), including 30 earned at national INS meetings or through INS Virtual Education Conferences are required.

# CRNI® EXAMINATION CONTENT OUTLINE

The CRNI® Examination is scored on 150 multiple-choice questions in eight core areas of infusion therapy. The test specifications that follow are based on a job analysis—a survey that determines the activities and job requirements for an infusion nurse. To ensure the exam is current, a job analysis is conducted approximately every five years. The findings of INCC’s most recent job analysis, conducted in 2012, were implemented with the September 2013 exam.

The exam consists of four-option, multiple-choice questions written at three different cognitive levels:

1. Recall: The ability to recall or recognize specific information.
2. Application: The ability to comprehend, relate, or apply knowledge to new or changing situations.
3. Analysis: The ability to analyze and synthesize information, to determine solutions, and/or to evaluate the usefulness of a solution.

These categories represent an organized way to identify the performance that practitioners will use on the job.

## 1. Technology and Clinical Applications - 22% or 33 questions

### A. Anatomy and Physiology

### B. Techniques and Equipment

1. Containers
2. Administration sets
3. Filters
4. Electronic infusion devices (including pumps)
5. Calculations
6. Vein location devices (eg, transillumination, ultrasound)

### C. Peripheral Access

1. Access devices
  - a. Short peripheral
  - b. Midline
2. Peripheral access
  - a. Dressings
  - b. Site preparation
  - c. Complications
  - d. Site selection

### D. Central Access

1. Access devices
  - a. Peripherally inserted central catheter (PICC)
  - b. Tunneled
  - c. Nontunneled
  - d. Implanted

### 2. Central access

- a. Dressings
- b. Site preparation
- c. Complications
- d. Site selection
- e. Navigational tools (eg, tip locating system)

### E. Nonvascular Route Access

1. Dressings
2. Site preparation
3. Complications
4. Site selection

### F. Performance Improvement

## 2. Fluid and Electrolyte Balance - 14% or 21 questions

### A. Acid-Base Balance

### B. Fluids and Electrolytes

1. Body composition
2. Fluid volume excess and deficit
3. Electrolyte disorders
  - a. Fluid and electrolyte imbalances (eg, hyponatremia/hypernatremia, hypokalemia/hyperkalemia)
4. Maintenance and replacement
  - a. Diuretics
  - b. Replacement solutions (eg, crystalloids)
  - c. Volume expanders (eg, colloids)

### C. Performance Improvement

### 3. Pharmacology – 12.7% or 19 questions

- A. Antiinfective Agents
- B. Central Nervous System Agents
  - 1. Analgesics
  - 2. Steroids
- C. Cardiovascular Agents
  - 1. Inotropic agents
- D. Hematologic Agents
  - 1. Anticoagulants
  - 2. Thrombolytic
  - 3. Hemostatics
- E. Gastrointestinal Agents
  - 1. Antiemetics
  - 2. Histamine (H<sub>2</sub>) antagonists
  - 3. Gastric acid inhibitors
- F. Hormones and Synthetic Substitute Agents
  - 1. Corticosteroids
  - 2. Insulin
- G. Respiratory Agents: Antihistamines
- H. Performance Improvement

### 4. Infection Prevention and Control – 14.0% or 21 questions

- A. General
  - 1. Epidemiology
  - 2. Standard precautions
  - 3. Gram-negative bacteria
  - 4. Gram-positive bacteria
  - 5. Fungus
- B. Performance Improvement

### 5. Special Populations – 9.3% or 14 questions

- A. Pediatrics
  - 1. Growth and development
  - 2. Body surface area
  - 3. Equipment
  - 4. Doses and calculations
  - 5. Disease states and conditions
- B. Older Adults
  - 1. Cognitive function
  - 2. Nutritional status
  - 3. Doses and calculations
  - 4. Disease states and conditions
- C. Pregnancy: Fluid and Nutritional Status
- D. Performance Improvement

### 6. Transfusion Therapy – 9.3% or 14 questions

- A. Transfusion Therapy
  - 1. ABO-Rh
  - 2. Red blood cells
  - 3. White blood cells (leukocytes)
  - 4. Plasma/albumin
  - 5. Platelets
  - 6. Rh immune globulin
  - 7. Factor products
- B. Performance Improvement

### 7. Antineoplastic and Biologic Therapy – 9.3% or 14 questions

- A. Antineoplastic Therapy
  - 1. Antineoplastic agents
  - 2. Nitrosoureas
  - 3. Plant (Vinca) alkaloids
  - 4. Antitumor antibiotics
  - 5. Antimetabolites (eg, fluorouracil)
  - 6. Biological response modifiers
  - 7. Other antineoplastic agents (eg, paclitaxel)
- B. Biologic Therapy
  - 1. Autoimmune disorders anti-TNF- $\alpha$  inhibitors
    - a. Monoclonal antibodies (eg, Remicade)
  - 2. Autoimmune disorders
    - a. B-cell inhibitors (Rituxan)
    - b. T-cell inhibitors (Orencia)
  - 3. Immune deficiency
    - a. Immunoglobulin therapy
- C. Performance Improvement

### 8. Parenteral Nutrition – 9.3% or 14 questions

- A. Parenteral Nutrition: General Solution Composition
- B. Complications
  - 1. Infection
  - 2. Electrolyte imbalance
  - 3. Glucose imbalance
  - 4. Essential fatty acid deficiency
  - 5. Trace element deficiency
  - 6. Vitamin deficiency
  - 7. Refeeding syndrome
- C. Performance Improvement

## CRNI® TASKS

Items on the examination are not specifically developed to target the following tasks. However, items on the exam that target specific knowledge areas will reference the relevant task(s) that may be required to competently apply that knowledge.

1. Assess the patient's clinical condition and disease state.
  2. Review patient's medical history.
  3. Review laboratory data.
  4. Identify and describe the location and physical characteristics for vascular or nonvascular access.
  5. Apply anatomy and physiology principles relative to infusion therapy.
  6. Participate in patient care planning with the interdisciplinary team.
  7. Verify patient identity.
  8. Obtain or confirm informed consent.
  9. Educate patient and/or significant others regarding type of treatment, purpose of therapy, administration techniques, and potential complications.
  10. Maintain established infection control practices.
  11. Select devices, supplies, and equipment based on prescribed therapy, length of therapy, clinical condition, and age of patient.
  12. Insert vascular access device.
  13. Monitor nonvascular access device.
  14. Verify appropriateness of prescribed therapy regarding pharmacological properties, concentration, calculations, stability, compatibility, cell cycle, and age-specific factors.
  15. Verify matching of the product to the patient.
  16. Administer the prescribed therapy (eg, continuous, intermittent, bolus).
  17. Perform routine care and maintenance based on access type.
  18. Identify and manage complications (local and systemic).
  19. Discontinue therapy.
  20. Dispose of hazardous materials.
  21. Maintain antineoplastic and biologic administration and disposal practices.
  22. Remove the access device.
  23. Evaluate patient's response to therapy.
  24. Document processes and procedures.
  25. Participate in product evaluation.
  26. Identify and apply structural components (eg, laws, standards, guidelines, policies and procedures, regulatory agencies).
  27. Identify and apply structural components based on evidence-based practice.
- Participate in performance improvement process by:*
28. Identifying opportunities for improvement.
  29. Collecting data.
  30. Evaluating data.
  31. Implementing new or revised plan.
  32. Reevaluating outcomes.

## STUDYING FOR THE EXAM

The CRNI® Examination is comprehensive, covering eight core areas of infusion nursing. Daily nursing practice does not always expose the RN to all core areas; therefore, most candidates need to study for the CRNI® Exam. Choice of study aid depends upon learning style and current knowledge base.

See the **Study Information** page at [www.incc1.org](http://www.incc1.org) for more information on preparing for the CRNI® exam, including a list of additional references.

Study Aids

### *CRNI® Academy*

CRNI® Academy combines text from four major INS resources and includes expert content, sample exam questions, hundreds of flashcards, a personalized study plan, and intelligent gamification tools to help you prepare for and pass the CRNI® exam.

**\$250 for 12-month access**

### *CRNI® Exam Study Guide and Practice Questions, 2017 edition*

This is your comprehensive guide to preparing for the CRNI® exam. It includes detailed information about the exam's content, question types, necessary reference lists such as Laboratory Values and Abbreviations, and instructions for required math calculations. One hundred practice questions with rationales and references are also included.

**\$25 INS Member   \$35 Nonmember**

### *Core Curriculum for Infusion Nursing, 4th edition*

The Core is designed as a comprehensive, preparatory resource for the CRNI® exam. The Core outlines fundamental information covering all core areas of the exam.

**\$65 INS Member   \$75 Nonmember**

### *Infusion Nursing: An Evidence-Based Approach, 3rd edition*

With a new focus on evidence-based practice, the third edition of this authoritative reference covers every aspect of infusion therapy. Content details advances in equipment, technology, best practices, guidelines, and patient safety. In addition to serving as a practical clinical reference, this text is ideal for CRNI® exam candidates who feel that in-depth study is required for exam preparation.

**\$105 INS Member   \$120 Nonmember**

### *Infusion Therapy Standards of Practice*

The *Standards* has long provided the framework that guides clinical practice. Used to define and develop organizational infusion-based policies and procedures for all practice settings, the *Standards* is a must-have resource for anyone involved in infusion therapy. A good working knowledge of the *Standards* is particularly important for CRNI® exam candidates.

**\$55 INS Member   \$80 Nonmember**

### *Policies and Procedures for Infusion Therapy, 5th edition*

The *P&P* was revised in tandem with the *Infusion Therapy Standards of Practice* to provide a consistent, step-by-step guide to infusion procedures. Specific to studying for the CRNI® exam, the *P&P* will help you answer questions calling for more in-depth analysis, which require careful evaluation of information to determine solutions and/or to evaluate the usefulness of a solution.

**\$80 INS Member   \$100 Nonmember**

## Study Aids

### *Policies and Procedures for Infusion Therapy: Older Adult*

*Policies and Procedures for Infusion Therapy: Older Adult*, 3rd edition, provides infusion specialists with convenient access to up-to-date procedures that are essential to providing competent infusion therapy delivery in the older adult population. It correlates with the *Infusion Therapy Standards of Practice* (2016) and provides step-by-step procedures for patient assessment, use of equipment, site selection, infection prevention, device placement, care and maintenance, complication management, and quality assurance. Where applicable, “Considerations for the Older Adult”, are noted at the beginning of policies to enhance the clinician’s knowledge of the elderly patient receiving infusion care.

**\$75 INS Member   \$95 Nonmember**

### *Policies and Procedures for Infusion Therapy: Neonate to Adolescent*

The second edition of *Policies and Procedures for Infusion Therapy: Neonate to Adolescent* is an invaluable publication for the clinician involved in the planning, care, and management of infusion therapy for this unique population. “Considerations for the Pediatric Patient,” noted at the beginning applicable policies, highlights information intended to enhance a clinician’s knowledge of pediatric infusion therapy. This revised edition is based on the 2016 revision of *Infusion Therapy Standards of Practice*, ensuring the most current evidence-based, best practices for pediatric patients receiving infusion therapy.

**\$75 INS Member   \$95 Nonmember**

## APPROVED EXAM REFERENCES

*Infusion Therapy Standards of Practice*. Norwood, MA: Infusion Nurses Society; 2016. ISBN-10: 0996594809, ISBN-13: 978-0996594806

*Core Curriculum for Infusion Nursing*. 4th ed. Alexander M, Corrigan A. Philadelphia, PA: Lippincott Williams & Wilkins; 2014. ASIN: B00E6THMN4

*AABB Technical Manual*. 18th ed. Bethesda, MD: American Association of Blood Banks; 2014. ISBN-13: 978-1563958885, ISBN-10: 1563958880

*2016 Intravenous Medications*. 32nd ed. Gahart B, Nazareno A. St Louis, MO: Elsevier Mosby; 2016. ISBN: 9780323296601

*Infusion Nursing: An Evidence-Based Approach*. 3rd ed. Alexander M, Corrigan A, Gorski L, Hankins J, Perucca R. St Louis, MO: Saunders Elsevier; 2010. ISBN-13: 978-1416064107, ISBN-10: 1416064109

*CRNI® Examination Preparation Guide and Practice Questions*. Norwood, MA: Infusion Nurses Certification Corporation; 2017.

*Policies and Procedures for Infusion Therapy*. 5th ed. Norwood, MA: Infusion Nurses Society; 2016. ISBN: 9780996594806

*Wong’s Nursing Care of Infants and Children*. 10th ed. Hockenberry M, Wilson D, eds. St Louis, MO: Elsevier Mosby; 2015. ISBN-13: 978-0323222419, ISBN-10: 0323222412

*Fluids and Electrolytes with Clinical Applications: A Programmed Approach*. 8th ed. Lefever Kee J, Paulanka BJ, Polek C. Clifton Park, NJ: Delmar Cengage Learning; 2010. ASIN: B0047TDET4

*Policies and Procedures for Infusion Therapy: Older Adult*. 3rd ed. Norwood, MA: Infusion Nurses Society; 2016. ISBN-10: 0996594817, ISBN-13: 978-0996594813

*Policies and Procedures for Infusion Therapy: Neonate to Adolescent*. Norwood, MA: Infusion Nurses Society; 2016. ISBN-10: 0996594825, ISBN-13: 978-0996594820

*A.S.P.E.N. Fluids, Electrolytes, and Acid-Base Disorders Handbook*. Canada T, Tajchman S, Tucker A, Ybarra J. Silver Spring, MD: American Society for Parenteral and Enteral Nutrition; 2015. ISBN-10: 1889622176, ISBN-13: 978-1889622170

*Chemotherapy and Biotherapy Guidelines and Recommendations for Practice*. 4th ed. Polovich M, Olsen M, Lefebvre K. 4th ed. Pittsburgh, PA: Oncology Nursing Society; 2014. ISBN-10: 1935864335, ISBN-13: 978-1935864332

Council Reference

Any questions may be directed to INCC’s Senior Certification Associate at (781) 440-9400 or to

## APPROVED ABBREVIATIONS

Acquired Immune Deficiency Syndrome	AIDS	Disseminated intravascular coagulation	DIC
Antidiuretic Hormone	ADH	Electronic Medical Record	EMR
Alanine transaminase	ALT	Erythrocyte sedimentation rate	ESR
Aspartame transaminase	AST	<i>Escherichia species</i>	<i>E. species</i>
Bicarbonate	HCO <sub>3</sub>	Fresh Frozen Plasma	FFP
Blood pressure	BP	Food and Drug Administration	FDA
Blood urea nitrogen	BUN	Gram	g
Body surface area	BSA	Hematocrit	Hct
Bone Marrow Transplant	BMT	Hemoglobin	Hgb
<i>Candida albicans</i>	<i>C. albicans</i>	Human leukocyte antibodies	HLA
Carbon dioxide pressure (arterial)	PaCO <sub>2</sub>	Human immunodeficiency virus	HIV
Carbon dioxide pressure (tension)	PCO <sub>2</sub>	Hydrochloride	HCl
Catheter Related Blood Stream Infections	CR-BSIs	Hydrogen ion concentration	pH
Centers for Disease Control and Prevention	CDC	Input & output	I & O
Centimeter	cm	International normalized ratio	INR
Central Line Associated Blood Stream Infection	CLABSI	Intramuscular, intramuscularly	IM
Chronic Obstructive Pulmonary Disease	COPD	Intravenous	IV
<i>Clostridium difficile</i>	<i>C. diff</i>	Intravenous Fat Emulsion	IVFE
<i>Clostridium difficile</i> Associated Disease	CDAD	Intravenous immunoglobulin	IVIG
Community Health Accreditation Program	CHAP	Joint Commission on the Accreditation of Healthcare Organizations	TJC
Complete blood count	CBC	Kilocalories	Kcal
Creatinine phosphokinase	CPK	Kilogram	Kg
Cubic millimeter	mm <sup>3</sup>	Lactic dehydrogenase	LDH
Central Vascular Access Device	CVAD	Liter	L
Cytomegalovirus	CMV	Methicillin-Resistant <i>Staphylococcus aureus</i>	MRSA
Deciliter	dL	Microgram	mcg
Diabetic Ketoacidosis	DKA	Milliequivalent	mEq
Diagnostic related group	DRG		

Milligram	mg	Peripheral Parenteral Nutrition	PPN
Milliliter	mL	Peripherally inserted central catheter	PICC
Millimeter	mm	Short Peripheral Catheter	SPC
Millimeters of mercury	mmHg	Pound	lb
Milliosmole	mOsm	Pounds per square inch	psi
Multi Drug Resistant Organism	MDRO	Red blood cell	RBC
Osmole	Osm	<i>Staphylococcus</i> species	<i>S. species</i>
Osmolarity	Osm/L	Square meter	m <sup>2</sup>
Oxygen pressure	PO <sub>2</sub>	Square millimeter	mm <sup>2</sup>
Oxygen pressure, arterial	PaO <sub>2</sub>	Total Nutrient Admixture	TNA
Packed red blood cells	PRBCs	Vascular Access Device	VAD
Parenteral Nutrition	PN	Vancomycin-resistant <i>Enterococci</i>	VRE
Patient controlled analgesia	PCA	Vancomycin-resistant <i>Staphylococcus Aureus</i>	VRSA
Peripheral blood stem cells	PBSC	White blood cell	WBC

The following examples illustrate the types of questions found on the exam. An answer key follows the end of this section.

1. *A physician orders the removal of a central venous access device (CVAD) and a culture of the catheter tip. Which of the following is the most appropriate nursing procedure?*
  - A. Use aseptic technique, remove the catheter, and send tip for a qualitative culture
  - B. Prep the catheter site with antiseptic solution, aseptically remove the catheter, and send tip for semiquantitative culture
  - C. Apply antiseptic ointment to the catheter site, aseptically remove the catheter, and send tip for semiquantitative culture
  - D. Aseptically remove the catheter, apply antiseptic ointment, and send tip for a qualitative culture
2. *Which of the following is the most frequently involved pathogen in catheter-related infections?*
  - A. *Staphylococcus*
  - B. *Pseudomonas*
  - C. *Klebsiella*
  - D. *Enterobacter*
3. *Lidocaine HCl (Xylocaine) is administered primarily for the treatment of*
  - A. congestive heart failure.
  - B. ventricular arrhythmias.
  - C. hypertension.
  - D. hypotension.
4. *What percentage of water comprises the body weight of a full-term infant?*
  - A. 45%
  - B. 55%
  - C. 65%
  - D. 75%
5. *Which of the following laboratory values is most important to review before cisplatin (Platino) is administered?*
  - A. sedimentation rate
  - B. biochemical profile (chemistry panel)
  - C. urinalysis
  - D. creatinine clearance
6. *A nurse inserts a short peripheral catheter against the wishes of a coherent adult patient. In this situation, the nurse could be charged with*
  - A. assault.
  - B. battery.
  - C. negligence.
  - D. malpractice.
7. *A nurse is monitoring a patient who has excessive amounts of drainage from a nasogastric tube. The nurse should observe the patient closely for the development of*
  - A. metabolic acidosis.
  - B. metabolic alkalosis.
  - C. hyponatremia.
  - D. hyperkalemia.
8. *A physician has just written an order to discontinue a patient's parenteral nutrition. The patient has been receiving 25% dextrose, 4.25% amino acids, electrolytes, vitamins, and trace elements at a rate of 160 mL/hour for 5 weeks. The discontinuance order reads as follows: Decrease rate to 80 mL/hour for 1 hour, then to 40 mL/hour for 1 hour, and then discontinue. This tapering schedule is*
  - A. too fast, therefore unacceptable.
  - B. acceptable for the unstressed patient.
  - C. slow, but acceptable.
  - D. unacceptable for the stressed patient.
9. *Which of the following statements is true about whole blood that is stored for 19 days before it is transfused?*
  - A. The stored blood supplied all coagulation factors in the plasma.
  - B. Platelets were still present in the stored blood.
  - C. The plasma potassium level has risen in the stored blood.
  - D. The blood will not be outdated until 25 days have passed.

Answer Key: (1) B (2) A (3) B (4) D (5) D (6) B (7) B (8) B (9) C

## RECERTIFICATION BASICS

The CRNI® recertification requirements are designed to enhance the continued competence of nurses and ensure that certificants receive exposure during each recertification cycle to all eight core areas identified by INCC.

The CRNI® recertification requirements support INCC's commitment to promoting excellence in infusion nursing by requiring nurses to remain up-to-date and knowledgeable about innovations and changes in the infusion nursing field.

Please review the following information carefully; it is the CRNI®'s professional responsibility to understand and meet recertification requirements. INCC's policies and procedures for recertification will be strictly enforced.

### *Expiration of Credential and Deadlines*

The CRNI® credential is valid for three years, contingent upon continuous RN licensure. The three-year renewal cycle is based on INCC's assessment of the frequency of significant changes in infusion nursing. The CRNI® credential becomes effective April 1 for successful candidates of a March exam and expires three years later on March 31. The credential becomes effective October 1 for successful candidates of a September exam and expires three years later on September 30. Recertification Units (RUs) must be earned between the date the credential became effective and the date of the credential's expiration.

Failure to successfully recertify or achieve inactive status by the deadline will result in the revocation of the CRNI® credential. You will need to successfully sit for the CRNI® Exam to regain the CRNI® credential. A complete application and exam fee are required to reapply for the exam.

Additional recertification information and reminders will be mailed or e-mailed throughout the certification period. Information is also available at [www.incc1.org](http://www.incc1.org). It is the professional responsibility of the CRNI® to meet recertification requirements and submit a complete recertification application and appropriate fee before published deadlines.

The regular deadline for recertification applications is December 15 of the third year. Late applications are accepted through January 15 and may be subject to a \$50 late fee.

### *Recertification Options*

A CRNI® can recertify by either continuing education or exam. Eligibility requirements for recertification are as follows:

- Documentation of 1,000 hours of clinical experience in infusion therapy within the previous three years. Clinical bedside experience is not a requirement. Nursing experience may be in the areas of nursing education, administration, research, or clinical practice within the infusion specialty.
- Documentation of a current, active, unrestricted RN license.

### *Recertification by Exam*

To recertify by exam, a CRNI® must pass the September CRNI® Exam during the final year of certification. If you elect to recertify through exam, the option to recertify by continuing education is forfeited. Applications are available on the INCC website.

### Recertification by Continuing Education

To recertify by continuing education, 40 CRNI® RUs (not continuing education credits) must be earned within the three-year recertification period, and a complete recertification application with appropriate fee should be submitted before December 15, during the year of a CRNI®'s expiration.

At least 30 of the 40 CRNI® RUs must be obtained through attendance at national INS meetings or INS Virtual Education Conferences. This ensures that CRNI®s receive exposure to continuing education covering all core areas.

### Future Annual Meeting & Industrial Exhibition Sites

May 19-22, 2018 - Cleveland, OH

May 18-21, 2019 - Baltimore, MD

Future National Academy Sites

November 2-4, 2018 - Washington, DC

List of regularly scheduled INS national educational meetings and the number of RUs available.

RU Options	RUs Available
Annual Meeting & Exhibition	40
National Academy	20
One-Day Program	10
Virtual Education Conference	up to 40
Complete the <i>Journal of Infusion Nursing</i> CE test	10
Publish a manuscript in the <i>Journal of Infusion Nursing</i>	10
Participate in a Learning Center Educational Asset	10
Present as a speaker at a national INS meeting	6
Publish an infusion-related manuscript in a peer-reviewed journal	6
Publish a chapter or edit an infusion-related book	6
Attend INS local chapter education programs	5
Teach infusion therapy-related education programs	5
Attend non-INS educational meetings	5
Serve on the <i>Journal of Infusion Nursing</i> Editorial Review Board	5
Other approved CE offerings	10

Details regarding the above options are provided when you pass the CRNI® exam and are available at [www.incc1.org](http://www.incc1.org); please review them carefully.

INS' LEARNING CENTER at [www.LEARNINGCENTER.ins1.org](http://www.LEARNINGCENTER.ins1.org) frequently offers RU-approved, low-cost, and complimentary educational programs for INS members.



# CLINICAL PRACTICE DOCUMENTATION AND AFFIRMATION FORM

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Last Name

First Name

Middle Initial

## Affirmation

By signing this Affirmation Form, I accept the conditions stated in the Infusion Nurses Certification Corporation CRNI® *Exam Handbook* concerning the administration of the exam, the reporting of scores, the release of information to INS, and the certification and recertification processes and policies. I certify that the information in this application is true, complete, and correct to the best of my knowledge and is made in good faith. I understand that if any information is later determined to be false, INCC reserves the right to revoke any certification granted on the basis of that false information. INCC reserves the right to publicize certification information and may provide additional information in response to inquiries from state boards of nursing or other such entities. I understand that the proctors at any assigned test center are authorized by me to take all actions they deem necessary and proper to administer the test securely, fairly, and efficiently. I acknowledge that the proctors may relocate me before or during the exam.

I further affirm that my RN license is current, active, and unrestricted, OR that I am taking an international exam and hold a current, active, unrestricted license in the country in which I am practicing. I will provide documentation of that license with my exam application.

---

Candidate Signature

Date

## CLINICAL PRACTICE STATEMENT

### *New certification candidates only*

My signature below serves to document that as a new certification candidate, I have at least 1,600 hours of clinical experience\* in infusion therapy. Those 1,600 hours were earned as an RN within the two years before the date of this application.

### *Recertification candidates only*

My signature below serves to document that as a recertification by examination candidate, I have at least 1,000 hours of clinical experience\* in infusion therapy, earned as an RN within the three-year recertification period.

---

New certification candidate's signature

Date

---

Recertification candidate's signature

Date

\*Clinical experience can include assessing, planning, implementing, and evaluating the care and needs of patients and clients who require infusion therapy in the course of their care. 1,600 hours of direct clinical bedside experience is not a prerequisite; registered nurses functioning as educators, administrators, or researchers in the infusion nursing specialty are also eligible.

## Supervisor Information

All candidates **MUST** provide a supervisor's contact information below. INCC reserves the right to contact your supervisor to verify compliance with our clinical practice eligibility requirements.

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Supervisor's Name

Title

---

Company

---

E-mail

Telephone

## BIOGRAPHICAL INFORMATION

1. Who is paying for your CRNI® exam application?

- I am paying for myself.
- My employer is paying.
- My employer will provide reimbursement on passing.

2. If an employer is providing any financial support or reimbursement for the CRNI® certification and you authorize INCC to contact your employer to thank them for their support, please provide the name and address of the administrator below.

---

Name

---

Title

---

Company Name

---

Address

---

City

State

Zip

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E-mail

3. How did you hear about the CRNI® exam?

- A peer recommended it.
- A supervisor recommended it.
- My employer requires specialty certification.
- I received a mailing promoting the CRNI®.
- I received an e-mail promoting the CRNI®.
- I was previously certified.

Other

4. What do you plan to use to study for the CRNI® exam?

- The CRNI® Academy
- The *CRNI® Study Guide and Practice Questions*
- The *Core Curriculum for Infusion Nursing*, 4th edition
- The *Infusion Therapy Standards of Practice*
- Infusion Nursing: An Evidence-Based Approach*
- Policies and Procedures for Infusion Therapy*, 5th edition
- Policies and Procedures for Infusion Therapy of the Older Adult*, 3rd edition
- Policies and Procedures for Infusion Therapy of the Pediatric Patient*, 2nd edition

*INCC does not discriminate among candidates on the basis of age, gender, race, religion, national origin, disability, sexual orientation, or marital status.*

# SPECIAL ACCOMMODATION REQUEST FORM (IF APPLICABLE)

### Special Accommodations for Candidates with Disabilities

In compliance with the Americans with Disabilities Act of 1990, all reasonable special requests will be accommodated. Complete this Special Accommodation Request Form and submit it to INCC with your application and fee, and a letter stating your requirements from a health-care or education professional. Applications for special accommodations must be received by regular deadlines.

### Scheduling Your Exam

Candidates requesting a special accommodation must schedule their exam by calling PSI/AMP at (888) 519-9901.

Candidate Name \_\_\_\_\_  
(Last) (First) (MI)

Test Site Location \_\_\_\_\_

Please describe briefly the special accommodation(s) you will need. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(Signature)

