Certified Medical-Surgical Registered Nurse  
CMSRN  
Exam Guide
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Congratulations on your decision to take the Certified Medical-Surgical Registered Nurse (CMSRN®) exam. This guide will assist you in learning about the exam, application, formats, and study resources. If you need further information on any topic, please visit msncb.org/cmsrn.

CERTIFICATION and CREDENTIAL
Certification is awarded to registered nurses who meet the eligibility criteria and pass the multiple choice exam.

The designated credential is CMSRN (Certified Medical-Surgical Registered Nurse). This credential may be used in all correspondence or professional activities. Those who earn the CMSRN credential obtain objective validation of their expertise.

CMSRN certification is valid for 5 years.

ELIGIBILITY CRITERIA
To be eligible to take the exam, candidates must meet the following requirements at the time of application:

- Hold a current, full, and unrestricted license as a registered nurse (RN) in the United States, its territories, or in Canada

  OR

- Hold a current, full, and unrestricted license as a first-level nurse in the country in which one’s nursing education was completed, AND meet the eligibility for licensure as a registered nurse (RN) in the US in accordance with the requirements of the Commission on Graduates of Foreign Nursing Schools (CGFNS).

  AND Have practiced a minimum of 2 calendar years as a registered nurse (RN) in a medical-surgical setting.

  AND Have accrued a minimum of 2,000 hours of practice within the past 3 years in a medical-surgical setting. Practice may include clinical, management, or education.

MSNCB shall not discriminate against any certification candidate on the basis of age, sex, race, religion, national origin, ethnicity, disability, marital status, sexual orientation, or gender identity. MSNCB shall not publish materials with discriminatory content, graphics or language that may be offensive to population subgroups.
APPLICATION INSTRUCTIONS

Before completing the exam application, visit msnbc.org/cmsrn to ensure there is a testing center near you in the exam format of your choice.

Applications may be submitted at any time. You will need to include the last four (4) digits of your social security number as it serves as part of your identifier.

Paper & Pencil: Visit msnbc.org/cmsrn for application deadlines.

1. Apply online at msnbc.org/cmsrn.

2. MSNCB forwards the application to the testing agency, Center for Nursing Education and Testing (C-NET). It is reviewed and criteria is verified.
   
   **NOTE:** If the application is incomplete or the criteria cannot be verified, the candidate will be contacted to provide the missing information. If the requested information is not received within the stated time frame, the application process will stop and a refund less the $75 processing fee will be given.

3. About 3-5 weeks after submitting your application, C-NET will email your exam permit or contact you for more information.
   
The permit will list a 90-day scheduling window within which to take your exam. It will also contain information about how to contact the computer company, PSI, to schedule your exam.
   
   *If you do not receive your permit in 5 weeks, contact C-NET immediately at 800-463-0786, ext. 11 or info@cnetnurse.com.*

   **Special Site Paper & Pencil:** You will receive your exam permit approximately 2 weeks prior to the test date. The permit will include the test date, test site address, and the time you should report. If you do not receive your exam permit three days prior to the exam date, contact C-NET at 800-463-0786, ext. 11 or info@cnetnurse.com and request a duplicate exam permit to be emailed to you. You must bring your permit on the day of your exam.

4. After you receive your permit, contact PSI to schedule the exam. You must schedule your exam date no less than 48 hours prior to your intended exam date.
   
   **TIP:** Schedule early within the 90-day window that is assigned on your permit.

FAILSAFE APPLICANTS

Candidates enrolling through the MSNCB FailSafe Certification Program™ complete the same application process and use a unique code to bypass payment. Visit msnbc.org to learn more about the FailSafe Certification Program.

CERTIFICATION PROGRAM ADMINISTRATION

MSNCB works with the testing agency, the Center for Nursing Education and Testing (C-NET®), to offer the CMSRN certification exam. C-NET staff members have extensive experience in the development and administration of certification and licensure exams for nurses.

SPECIAL ARRANGEMENTS

MSNCB and C-NET will make special arrangements to accommodate candidates with disabilities protected under the Americans with Disabilities Act (ADA) that interfere with test taking. To request special arrangements, complete and submit the exam application first to MSNCB, then contact C-NET with documentation of the disability. For questions about acceptable documentation, contact C-NET directly at 800-463-0786, ext. 11.

Please allow 8 weeks for special arrangements. Every effort will be made to accommodate your disability. To accommodate some requests, a change of exam date or exam location may be required.

Submit documentation to: C-NET–CMSRN Exam; 35 Journal Square, Suite 901; Jersey City, NJ 07306.
FEES
Prices are subject to change without notice. To ensure you have the most updated information, visit msncb.org/cmsrn.

Application Fee

$375  Regular
$255  AMSN member  (AMSN membership must be current at the time of application.)

Join AMSN at amsn.org before completing the certification application to receive the member rate.

All application fees include a non-refundable processing/administrative fee of $75.

FailSafe Applicants

Candidates enrolling through the MSNCB FailSafe Certification Program™ complete the same application process. In order to bypass payment, use the unique code provided by your healthcare organization in the “Apply Discount” box at checkout. Do not enter credit card information.

CBT Extension Fee - $75 (not applicable to FailSafe applicants)

The CBT Extension Fee is a service fee and is non-refundable. Extension requests are discussed on page 4.

First-Time Retake Discount - $75 off exam application fee  (not applicable to FailSafe applicants)

A candidate who does not pass the first exam may retake the exam with a one-time only, first-time retake discount, valid up to 4 months after the exam date. The discount becomes active approximately 4 weeks after the first exam date. Visit msncb.org/cmsrn for more information.

Returned Check Fee - $30

Any candidate whose check is returned for insufficient funds is required to pay this fee. Remittance of fees thereafter must be made by money order, certified check, or credit card.

AUDITS
Our testing agency, C-NET, performs a 5% random audit on all applications to ensure eligibility requirements are met. You will be notified by email if your application has been randomly selected. Your supervisor will be contacted to verify your eligibility. If you receive notification about the audit, inform your supervisor to expect a letter from the testing agency that needs to be completed and returned promptly. Applicants whose supervisors do not respond to the audit request will not be permitted to take the exam. Audited applicants who do not respond to audit requests will be denied and all money forfeited. It is the applicant’s responsibility to ensure that all requested audit information is sent and that their supervisor has returned the verification.
EXTENSION, CANCELLATION/REFUND, TRANSFER, RESCHEDULE

EXTENSION

Computer-based testing (CBT) candidates who are unable to test within the assigned 90-day window listed on their exam permit may request an extension for a $75 service fee.

- Extensions are one-time only per registration, so the candidate must test within the new window.
- Extension requests are only accepted after the original exam permit expiration date and up to 30 days after expiration.
- MSNCB cannot cancel an appointment for you. Candidates must cancel any existing appointment with the computer company PSI no later than 48 hours prior to your exam date. Once cancellation is confirmed, you may request an extension with MSNCB.

Requests that meet criteria are processed in 1-3 business days. In approximately 2 weeks, the candidate will receive a new permit by mail from our testing agency, C-NET. If the new permit is not received in 3 weeks, the candidate should contact C-NET immediately at 800-463-0786, ext. 11.

Extension requests are not available to candidates who registered through the MSNCB FailSafe Certification Program™, missed an exam appointment, or registered for Paper-and-Pencil testing. The CBT Extension Fee is a service fee and is non-refundable.

The Request for Extension form can be found at msncb.org.

CANCELLATION/REFUND

Cancellations are not accepted for either the paper and pencil or the computer-based testing exam. If you miss your exam date, your application payment will be forfeited. For FailSafe candidates, a missed appointment will serve as one attempt to test.

MSNCB understands that emergencies happen. If an emergency occurs which prevents you from testing, you may submit an email to msncb@msncb.org to request to cancel and give the special circumstances of the emergency. Supporting documentation must be provided. Each request will be handled on a case-by-case basis. If your cancellation is accepted, you will be refunded the application payment minus the processing fee.

EXAM FORMAT TRANSFER

Candidates may request a transfer from P&P to CBT exam format within the P&P registration period. When transferring from P&P to CBT, you must test within the 90-day window given. Transfer requests must be submitted in writing.

RESCHEDULE

The candidate may reschedule an existing exam appointment with the computer company, PSI, no later than 48 hours before the test date online at cnetnurse.com/cbt or at 800-733-9267. Be sure to make note of the confirmation number.

Paper & Pencil: May not be rescheduled.
The computer-based testing (CBT) exam consists of 150 questions. 130 questions are scored and contribute to the test candidate's exam score. 20 questions are experimental to test for reliability and do not contribute to the candidate’s exam score. The time allotted for the exam is 3 hours. Plan to arrive 30 minutes prior to your exam appointment for check-in.

The CMSRN exam is offered at PSI computer centers, which use security and administration standards to provide candidates a suitable testing environment.

IDENTIFICATION
You must bring a current government issued photo ID, such as a driver’s license (temporary paper copy is not acceptable), state-issued ID card, passport, or a notarized photograph bearing the candidate’s signature. The first and last name on your permit must match your photo ID. If they do not match, bring supporting documentation of your name change.

- You are not required to bring your exam permit.
- You are not required to bring a copy of your nursing license.
- If you do not have your necessary documents, you will be denied testing and your application payment will be forfeited.

In addition to bringing a photo ID, candidates are digitally photographed. The image prints on the candidate’s score report and is archived with the candidate’s score. Candidates at many locations are also digitally fingerprinted as another level of security.

ADMINISTRATION
A candidate is provided access to the testing room once the identity has been verified. Candidates will be randomly seated. Candidates are actively monitored by a proctor via visual and audio recording and an observation window.

Candidates will be provided a CBT tutorial before the start of the exam. Also, they are provided with a pencil and one sheet of scrap paper to be collected at the end of the exam.

If a candidate takes a break, the exam clock will continue to run during break times. Candidates may not leave the building during the exam.

RESTRICTIONS
- No conversing or any other form of communication among candidates in the testing room.
- No children, cell phones, pagers, cameras, books, notes, programmable electronic devices or recording devices of any kind are permitted to enter the PSI center. Additionally, no personal items are permitted to enter the PSI center, including handbags, backpacks, or heavy coats. PSI will not be responsible for any personal items, and suggests that you leave such items in another safe place of your choosing.
- No smoking, eating, or drinking is permitted in the PSI center.
- Copying or communicating examination content is a violation of security policy and the State Law. Either one may result in the disqualification of exam results and may lead to legal action.
**TAking the Paper and Pencil (P&P) Exam**

The P&P exam is only offered to healthcare organizations who set up a Special Testing Site with MSNCB’s testing vendor. The Special Testing Site determines if the exam is a closed site to employees of the healthcare organization or if it’s available to others outside of the organization.

The P&P exam consists of 150 questions; 130 questions are scored and contribute to the test candidate’s exam score. 20 questions are experimental to test for reliability and do not contribute to the candidate’s exam score. The time allotted for the exam is 3 hours. Plan to arrive 30 minutes prior to your exam appointment for check-in.

**Identification**

You must bring your exam permit.

You must bring a current government issued photo ID, such as a driver’s license (a temporary paper copy is not acceptable), state-issued ID card, passport, or a notarized photograph bearing the candidate’s signature. The first and last name on your permit must match your photo ID. If they do not match, bring supporting documentation of your name change.

- You are not required to bring a copy of your nursing license.
- If you do not have your necessary documents, you will be denied testing and your application payment will be forfeited.

**Administration**

A candidate is provided access to the testing room once the identity has been verified. Candidates will be randomly seated.

Candidates will be provided instructions before the start of the exam. They are provided with one answer sheet, one evaluation form, and one pencil with an eraser. During the examination, the proctor will circulate the room, observing the candidates.

If a candidate takes a break, the exam clock will continue to run during break times. Candidates may not leave the building during the exam.

**Restrictions**

- No conversing or any other form of communication among candidates in the testing room.
- No children, cell phones, pagers, cameras, books, notes, programmable electronic devices or recording devices of any kind are permitted to enter the testing center.
- No smoking, eating, or drinking is permitted in the testing center.
- Copying or communicating examination content is a violation of security policy and the State Law. Either one may result in the disqualification of exam results and may lead to legal action.

**Notification of Exam Score**

A standard score of 95, or approximately 71% correct, is required to pass the CMSRN exam. A total score is provided for candidates who pass the exam. A total score and subscores in the major test areas is provided for candidates who do not pass the exam. Subscores on each of the test areas can be used to assist in further study for those who choose to retake the exam.

A candidate’s pass/fail decision on the test is based on the passing score determined by a modified Angoff procedure, rather than by comparing a candidate’s performance to other candidates who took the examination. To determine the passing score, the Angoff procedure is performed by the Test Development Committee in collaboration with psychometric consultants from MSNCB’s testing service using a criterion-referenced methodology. The criterion is what a minimally competent, certified nurse needs to know.

Scores are reported as scaled scores. In a scaled score, the number of questions answered correctly, called the “raw score,” is converted to a scaled score, which is referred to as a “standard score” on the score report. The conversion is similar to converting a weight from pounds to kilograms; that is, the weight is the same but the scales differ. Raw scores are converted to scaled scores so that scores can be directly compared from year to year and from test to test.
CBT: Test results will be provided at the end of the exam. The MSNCB database will be updated approximately 4 weeks after the exam.

Paper & Pencil: Test results will be mailed approximately 8 weeks after the exam. The MSNCB database will be updated approximately 2 weeks after score notifications.

Successful candidates will receive a wall certificate and a CMSRN lapel pin. The certification wallet card can be printed online through the CMSRN Tracker.

Certification granted by MSNCB is a voluntary process intended solely to test for special knowledge. MSNCB does not license or define the qualifications of any person to practice nursing. The significance of certification in any jurisdiction or institution is the responsibility of the candidate to determine. The candidate should contact the appropriate state board of nursing or institution in order to determine practice implications.

**RECERTIFICATION**

CMSRN certification is valid for 5 years. Recertification is available by exam or by continuing education. Certified nurses receive courtesy recertification notices prior to the expiration of their certification. It is the certificant’s professional responsibility to know their certification expiration date.

Recertification applications must be submitted to MSNCB no later than 30 days prior to your expiration date.

For more information on CMSRN recertification, visit msncb.org/cmsrn.

**DENIAL, SUSPENSION OR REVOCATION OF CERTIFICATION**

The occurrence of any of the following actions will result in the denial, suspension, or revocation of CMSRN certification:

- denial of any restrictions of the professional RN license by a nursing authority such as revocation, suspension, probation, or other sanction
- practicing nursing with a restricted nursing license
- falsification of the application information
- misrepresentation of CMSRN status
- cheating on the CMSRN exam
- failure to pay appropriate fees

A letter of notification will be sent to the certificant/candidate by traceable, secure mail (i.e. UPS or FedEx) and a copy of the letter will be sent to his/her employer.

**RIGHT OF APPEAL**

A candidate who has failed or a certificant who has had his/her certification denied or revoked has the right to appeal. The appeal request must be submitted in writing within thirty (30) days of notification of the pass/fail status, denial, or revocation of certification. The appeal request should state the specific reasons for the appeal.

MSNCB shall appoint an Appeals Task Force of CMSRNs who will review blinded copies of materials sent by applicant/certificant for review. The final decision of the Appeals Task Force will be communicated in writing by the chair to the candidate and to MSNCB within one (1) month of the start of the review process. All decisions of the Appeals Task Force will be final.

**CONTENT AREAS OF EXAM and EXAM BLUEPRINT**

MSNCB subject matter experts (SMEs) in collaboration with the testing agency, the Center for Nursing Education and Testing (C-NET®), maintains best practices to ensure individual test items, the test, and published materials related to the exam are free of bias and discrimination. To avoid bias and ensure sensitivity, individual items and the test as a whole are reviewed at several stages of test development for inappropriate references to age, sex, race, religion, national origin, ethnicity, disability, marital status, sexual orientation, or gender identity; or linguistic ability. The basic issue underlying these efforts is fairness in all
aspects of testing in order to ensure to the extent possible that the test performance of an individual is not adversely affected by factors extraneous to the domain of knowledge being assessed.

**EXAM BLUEPRINT**
The exam blueprint is the framework for the Certified Medical-Surgical Registered Nurse (CMSRN®) certification exam. The blueprint is valuable to the test taker because it breaks down the sections of the test. Use it to help you focus your study as you prepare for the exam.

**CONTENT AREAS**
Each test question stems from the exam blueprint and is based on a Patient Problem and a Nursing Role (Domains of Nursing Practice*) as listed on page 9. For example, an exam question may ask about instructing a patient with diabetes. The Patient Problem is diabetes and the Domain of Practice is teaching/coaching.


**IDEAL DISTRIBUTION OF 150 ITEMS**
The following grid provides the percentage of exam questions for each Patient Problem and Domain of Nursing Practice areas. The numbers below the columns labeled 1-7 refer to the number of exam items (or questions) in each of the sections. For example, in Row A, Column 1, there are 4-6 questions on the exam related to Gastrointestinal Patient Problems and the Helping Role. The Total column and row show the percentage of exam items followed by the total number of exam items in the respective areas. For example, in the TOTAL column for Row A, 16-18% of the entire exam or 24-27 exam items are related to Gastrointestinal Patient Problems.

<table>
<thead>
<tr>
<th>Patient Problem</th>
<th>1 Helping Role</th>
<th>2 Teaching/Coaching</th>
<th>3 Diagnostic/Patient Monitoring</th>
<th>4 Administer Nursing Intervention</th>
<th>5 Managing Emergency</th>
<th>6 Ensuring Quality</th>
<th>7 Org/Work Role Competency</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Gastrointestinal</td>
<td>4-6</td>
<td>4-6</td>
<td>6-8</td>
<td>6-8</td>
<td>2-4</td>
<td>0-1</td>
<td>1-3</td>
<td>(15-17%) [24-27]</td>
</tr>
<tr>
<td>B Pulmonary</td>
<td>3-5</td>
<td>3-5</td>
<td>5-6</td>
<td>5-7</td>
<td>2-4</td>
<td>0-1</td>
<td>1-3</td>
<td>(15-17%) [22-26]</td>
</tr>
<tr>
<td>C Cardiovascular/Hematological</td>
<td>3-5</td>
<td>3-5</td>
<td>5-6</td>
<td>6-8</td>
<td>2-4</td>
<td>0-1</td>
<td>1-3</td>
<td>(15-18%) [24-27]</td>
</tr>
<tr>
<td>D Diabetes (Types 1 &amp; 2)/Other Endocrine/Immunological</td>
<td>3-4</td>
<td>3-4</td>
<td>4-5</td>
<td>5-6</td>
<td>1-3</td>
<td>0-1</td>
<td>0-1</td>
<td>(19-20%) [27-30]</td>
</tr>
<tr>
<td>E Urological/Renal</td>
<td>3-4</td>
<td>3-4</td>
<td>4-5</td>
<td>4-5</td>
<td>1-3</td>
<td>0-1</td>
<td>0-1</td>
<td>(14-16%) [21-24]</td>
</tr>
<tr>
<td>F Musculoskeletal/Neurological/Integumentary</td>
<td>3-4</td>
<td>3-4</td>
<td>4-6</td>
<td>5-7</td>
<td>1-3</td>
<td>0-1</td>
<td>0-1</td>
<td>(15-17%) [22-26]</td>
</tr>
<tr>
<td>TOTAL</td>
<td>(16-18%) [24-27]</td>
<td>(15-17%) [22-26]</td>
<td>(23-25%) [34-38]</td>
<td>(24-26%) [36-39]</td>
<td>(11-13%) [16-20]</td>
<td>(1-3%) [1-5]</td>
<td>(3-5%) [4-8]</td>
<td>(100%) [150]</td>
</tr>
</tbody>
</table>

Revised May 2018/Implemented January 2019
Topics Excluded From the Exam
The exam does not include the care of patients who are on ventilators, immediate postoperative care of patients after open-heart or transplant surgery, care of patients during monitored conscious sedation-analgesia, or care of patients during hemodialysis.

DOMAINS of MEDICAL-SURGICAL NURSING PRACTICE:

1. Helping Role
   1. Maintain an environment in which patient confidentiality is assured.
   2. Assess patient's level of comfort/pain.
   3. Act as an advocate to help patient meet needs/goals.
   4. Acknowledge, respect, and support emotional state of patient and/or family as they experience and/or express their emotions.
   5. Assist patients to achieve optimal level of comfort, using an interdisciplinary approach.
   6. Modify plan of care to achieve patient's optimal level of comfort, i.e., pharmacological interventions, heat, cold, massage, positioning, touch, etc.
   7. Provide a therapeutic environment, considering privacy, noise, light, visitors' providers' interaction with patients.
   8. Provide culturally competent patient care, including education.
   9. Support family involvement in accordance with patient's wishes regarding caregiving and decision making.
   10. Assess for potential for self-harm.
   11. Identify need of patient/family for support systems/resources and make appropriate referrals.
   12. Work on behalf of patient/family to help resolve ethical and clinical concerns.
   14. Identify, acknowledge, support, and facilitate patient/family decisions regarding end-of-life care.
   15. Identify signs of domestic or intimate partner violence.
   16. Assess and provide for spiritual needs of patients and families.
   17. Identify ethical issues in clinical practice and facilitate a resolution with patient, family, and staff.

2. Teaching/Coaching Function
   1. Assess the patient's and family's readiness and ability to learn.
   2. Identify barriers to learning.
   3. Prepare/educate patient for transition in care, e.g., discharge to home or other facility.
   4. Provide information and rationales related to diagnosis, procedures, self-care, prognosis, wellness, and modifiable risk factors.
   5. Utilize opportunities for spontaneous education.
   6. Encourage patient's and family's participation in establishing educational goals.
   7. Develop and implement an individualized teaching plan for patient and/or family.
   8. Evaluate and modify teaching plan based on achievement of pre-established and ongoing learning needs.
   9. Assist staff in identifying educational needs of patients and their families.
   10. Assist staff in selecting/developing educational materials appropriate for intended learner(s).
   11. Teach patient and family about available community resources.

3. Diagnostic and Patient Monitoring
   1. Conduct and document a comprehensive baseline assessment.
   3. Reassess patient based on established standards of care at appropriate intervals.
   4. Interpret results of laboratory and diagnostic studies and take appropriate action.
   5. Use invasive and non-invasive methods to collect data.
   6. Analyze all patient data in formulating a plan of care.
   7. Participate in medication reconciliation at transitions of care.
   8. Anticipate the patient's response and needs related to physiological, psychosocial sexual, spiritual, and cultural aspects of his/her illness.
9. Prioritize identified problems and modify the plan of care to achieve the best possible outcomes.
10. Develop an individualized plan of care congruent with patient goals.
11. Identify purpose and appropriateness of diagnostic studies.

4. Administering and Monitoring Nursing Interventions
   1. Administer medications accurately and safely.
   2. Identify subtle changes in patient's assessment to prevent deterioration of patient status.
   3. Assess patient's level of consciousness.
   4. Monitor patients for therapeutic responses, reactions, untoward effects, toxicity, and incompatibilities of administered medications.
   5. Implement measures to ensure adequate oxygenation and gas exchange.
   6. Monitor and implement measures to prevent alterations in skin integrity.
   7. Initiate, maintain, and monitor intravenous therapy.
   8. Identify, document, and report deviations from expected findings.
   10. Implement measures to address threats to patient safety, e.g., falls, seizures.
   11. Maintain patent airway.
   12. Maintain integrity and prevent infection of invasive drainage systems, e.g., catheters, percutaneous drains.
   13. Implement measures to maintain adequate hydration and electrolyte balance.
   14. Provide care to patients on continuous cardiac monitoring.
   15. Use adaptive/assistive devices for mobility, immobility, positioning, and comfort.
   16. Interpret cardiac rhythm strips.
   17. Monitor for complications of musculoskeletal trauma and surgical procedures.
   18. Perform a neurovascular assessment, e.g., extremities, flaps, grafts.
   19. Provide optimum nutrition during hospitalization, allowing for cultural and individual preferences.
   20. Identify and implement transmission-based precautions based on patient's history and symptoms.
   22. Develop and implement a wound management strategy.
   23. Care for patient receiving IV patient-controlled analgesia
   24. Perform central line dressing change.
   25. Administer heparin drip
   26. Apply and/or monitor devices used to immobilize affected area, e.g., cast, splint, collar, etc.
   27. Care for patient receiving epidural analgesia
   28. Provide care for patients who have chest drainage systems.

5. Effective Management of Rapidly Changing Situations
   1. Recognize signs that a patient's condition is deteriorating and take appropriate action.
   2. Obtain appropriate orders to address a change in the patient's condition.
   3. Determine priorities in rapidly changing situations.
   4. Use existing guidelines/protocols/policies to respond to changing patient situations, e.g., hypoglycemia, wound dehiscence.
   5. Use existing guidelines/protocols/policies to respond to urgent and emergent situations, e.g., acute chest pain, stroke.
   6. Initiate basic life support.

6. Monitoring/Ensuring Quality Health Care Practices
   1. Communicate effectively to the healthcare team.
   2. Question/clarify orders as appropriate.
   3. Incorporate evidence-based practice into the patient's plan of care.
   4. Coordinate and/or participate in interdisciplinary activities to ensure consistent patient outcomes, e.g., core measures.
   5. Report system failures, e.g., chain of command, equipment, safety, medication administration, computer systems.
   6. Assist nursing staff in incorporating evidence-based practice and quality improvement into practice.
   7. Participate in quality improvement activities.
8. Identify clinical problems for further investigation.

7. Organizational and Work-Role Competencies
   1. Practice in accordance with the rules and regulations of the state board of nursing in state(s) of licensure.
   2. Adhere to the Scope and Standards of Medical-Surgical Nursing Practice.
   3. Utilize electronic/computer resources to optimize patient care.
   4. Set priorities based on assignment, unit, and institutional needs.
   5. Act as a professional role model.
   6. Participate as an active member of the interdisciplinary healthcare team.
   7. Delegate patient care assignments based on competency levels and scope of practice of healthcare team members.
   8. Act as a resource for other nurses on the unit.
   10. Incorporate strategies that support effective team dynamics in a caring and nurturing environment.
   11. Evaluate own practice based on established standards of care.
   12. Evaluate nursing care based on outcome criteria.
   13. Recognize unsafe work practices (nurse/patient ratio, ergonomics, standard precautions, etc.) and intervene appropriately.
   14. Identify, develop, and implement strategies to reduce readmissions.
   15. Use the chain of command appropriately.
   16. Serve as consultant to nursing staff and other disciplines.
   17. Coordinate and/or participate in interdisciplinary activities to ensure consistent patient outcomes, e.g., core measures.
   18. Identify, develop, and implement strategies to decrease length of stay while improving patient/family/staff satisfaction and patient care.
   19. Provide expert support to unit educators, preceptors, and nurse managers.
   20. Follow institutional policies and procedures in response to an internal or external crisis or event.
   21. Serve as preceptor/mentor for students and staff.
   22. Assist with data collection (e.g., patient outcomes, nurse-sensitive indicators).

REFERENCE LIST and EXAM PREPARATION RESOURCES
A complete list of resources used as references during the development of the CMSRN exam is available at msncb.org/cmsrn. They will be helpful in preparing for the exam.
In addition, the MSNCB website has more information on valuable preparation resources, including:
   • 15 free sample questions
   • Online practice test
   • AMSN Medical-Surgical Nursing Certification Review Course

CONFIDENTIALITY OF APPLICATION, EXAM, AND SCORES
All application information is considered confidential and is not shared with ANY outside party. It is used only by MSNCB, the testing agency C-NET, and the computer company PSI, for certification processing purposes.
To insure the security of the exam, the test materials are confidential and will not be released to any person or agency.

Pass/fail status will be released to outside parties only when submitted with a written authorization signed by the candidate. Any additional information about a candidate’s individual test results will be released only to the candidate, upon written request. Enrolled MSNCB FailSafe Certification Program™ candidates, by nature of participating in their facility’s program, grants the right to their employer to receive a pass/fail outcome.

MSNCB maintains a searchable directory of all CMSRNs on its website.
**AMSN ENDORSEMENT and ABSNC ACCREDITATION**

The CMSRN exam is the only medical-surgical certification endorsed by the Academy of Medical-Surgical Nurses (AMSN).

The CMSRN exam program has achieved the gold stamp of approval. After meeting rigorous standards, the CMSRN exam was granted accreditation by the Accreditation Board for Specialty Nursing Certification (ABSNC). Accreditation demonstrates that the CMSRN credential is based on a valid and reliable testing process. The CMSRN program received its initial accreditation from ABSNC in 2009 and was reaccredited in 2018.

The ABSNC promotes the highest quality of specialty nursing practice through the establishment of standards of professional specialty nursing certification. ABSNC accreditation is valid for 5 years.

**RECORD MAINTENANCE**

MSNCB and the testing agency C-NET will retain electronic records of all candidates and certificants for at least five (5) years. It is the professional responsibility of the candidate/certificant to notify MSNCB of any change in name, address, phone, and email either before testing or during the 5-year certification period.

If assistance is needed, please contact MSNCB. Contact information can be found on the front page of this guide.

**ABOUT MSNCB**

The Medical-Surgical Nursing Certification Board (MSNCB™) is a nonprofit organization whose mission is to validate excellence in medical-surgical nursing and care coordination and transition management.

MSNCB is composed of seven board members: five who hold an MSNCB certification, a public member, and an ex-officio member (the current AMSN president or designee). MSNCB nurse members are appointed to represent the diverse roles and settings in which medical-surgical nurses and care coordination nurses practice as well as varied demographic characteristics.

**ABOUT AMSN**

AMSN is the only national professional nursing specialty organization dedicated to the practice of medical-surgical nursing. Learn more about AMSN and membership at amsn.org or 866-877-2676.