




 Neonatal/Pediatric Specialty Examination Detailed Content Outline <i>Multiple-choice items are linked to open cells.</i>	Items				
	Ethics	Cognitive Level			Total
		Recall	Application	Analysis	
I. COMPETENCIES SHARED BETWEEN CRITICAL AND GENERAL CARE		10	32	17	59
A. Assess Patient Information		1	5	7	13
1. Patient history, for example, <ul style="list-style-type: none">immunizationspre-existing conditionsenvironmental					
2. Physical examination					
3. Laboratory, for example, <ul style="list-style-type: none">blood gas analysesCBCcultures					
4. Imaging, for example, <ul style="list-style-type: none">chest radiographcardiac catheterization and angiographyechocardiographyfluoroscopyMRICT					
5. Indices of respiratory physiology and mechanics, for example, <ul style="list-style-type: none">oxygenationwork of breathingsleep study results					
6. Neurologic, for example, <ul style="list-style-type: none">respiratory functionlevel of consciousness					
7. Cardiovascular, for example, <ul style="list-style-type: none">physical assessmentpulmonary hypertensionhemodynamicscongenital heart disease					
8. Recognition of respiratory failure mechanisms					
a. primary pulmonary and airway diseases, for example, <ul style="list-style-type: none">atelectasispneumoniaasthmacroup					
b. other, for example, <ul style="list-style-type: none">neuromuscularrespiratory controlflail chestapnea of prematurity					


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9. Renal, metabolic, endocrine, and nutrition, for example, <ul style="list-style-type: none"> fluid status electrolytes inborn errors of metabolism acid-base balance nutrition / feeding diabetic ketoacidosis 				
10. Gastrointestinal, for example, <ul style="list-style-type: none"> congenital anomalies feeding tube placement abdominal distension necrotizing enterocolitis 				
11. Musculoskeletal, for example, <ul style="list-style-type: none"> spinal cord injury myopathy scoliosis myelomeningocele 				
B. Evaluate Pulmonary Status		0	1	1
1. Gas exchange, for example, <ul style="list-style-type: none"> SPO₂ end-tidal CO₂ tension blood gases 				
2. Pulmonary function, for example, <ul style="list-style-type: none"> spirometry MIP peak flow 				
C. Assess and Manage Airways		1	2	0
1. Airway devices, for example, <ul style="list-style-type: none"> established tracheostomy tubes oral and nasopharyngeal 				
2. Airway clearance devices and techniques, for example, <ul style="list-style-type: none"> high-frequency chest wall oscillation PEP postural drainage IPV cough assist 				
3. Airway challenges, for example, <ul style="list-style-type: none"> acute upper airway obstruction unplanned extubation / decannulation difficult / critical airway congenital anomalies 				
D. Select and Manage Equipment		1	6	0
1. Oxygen administration devices, for example, <ul style="list-style-type: none"> heated high flow nasal cannula patient-appropriate sizing 				
2. Aerosol delivery devices, for example, <ul style="list-style-type: none"> intermittent continuous 				


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3. Airway devices, for example, <ul style="list-style-type: none"> oral and nasopharyngeal endotracheal tracheostomy tubes speaking valves LMA 				
4. Transcutaneous monitoring systems				
5. Airway clearance devices, for example, <ul style="list-style-type: none"> insufflator-exsufflator high-frequency chest wall oscillation 				
6. Home care devices, for example, <ul style="list-style-type: none"> mechanical ventilators CPAP humidifiers apnea monitor oxygen delivery portable oxygen concentrators 				
E. Facilitate Procedures and Evaluate Efficacy		1	2	0
1. Bronchoscopy and associated procedures, for example, <ul style="list-style-type: none"> lavage biopsies brush 				
2. Sputum culture, for example, <ul style="list-style-type: none"> nasal swab tracheal aspirate 				
3. Blood gas sampling, for example, <ul style="list-style-type: none"> CBG 				
F. Manage and/or Anticipate Effects of Medication Administration		1	5	4
1. Aerosolized agents				
2. Sedatives, hypnotics, and analgesia				
3. Neuromuscular blocking agents				
4. Reversal agents, for example, <ul style="list-style-type: none"> naloxone neostigmine 				
5. Vasoactive and inotropic agents				
6. Diuretics				
7. Systemic smooth muscle relaxants, for example, <ul style="list-style-type: none"> magnesium sulfate terbutaline 				
8. Drug interactions				
9. Influence of co-morbid conditions <ul style="list-style-type: none"> renal failure hepatic failure 				

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G. Anticipate Care Based on Laboratory Results		1	3	2	6
1. Hematologic, for example, • CBC • Hgb electrophoresis					
2. Chemistry, for example, • electrolytes • glucose • albumin • sweat test					
3. Microbiology, for example, • nasal swab • culture • Gram stain					
4. Toxicology, for example, • drug overdose • neonatal abstinence syndromes					
5. Blood gas analyses and hemoximetry (CO-oximetry)					
H. Anticipate Care Based on Imaging and/or Reports of Imaging		0	1	2	3
1. Radiographs, for example, • sail sign • cardiac silhouette with CHD • lateral views					
2. Other, for example, • CT • ultrasound • MRI					
I. Manage Care Based on Nutritional Status		1	1	0	2
1. Complications of feedings, for example, • intolerance • malposition of feeding tube • aspiration					
2. Morbid obesity, for example, • airway management • sleep disordered breathing					
J. Assist with or Perform Resuscitation		1	1	0	2
1. Selection of appropriate equipment, for example, • T-piece resuscitator • flow-inflating resuscitation bag					
2. Following the appropriate protocol, for example, • NRP • PALS					

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K. Prepare for Disaster and Mass Casualty Events		1	2	0	3
1. Procedures for patient movement and protection					
2. Triage procedures					
3. Equipment and supply management					
L. Interact with Members of an Interdisciplinary Team		0	1	1	2
1. Suggested modifications to the care plan based on the respiratory assessment					
2. Responses to proposed care plan modifications from other team members					
M. Evaluate Patient and Family Understanding of Education		1	2	0	3
1. Discharge and home, for example, • tracheostomy care • CPR • monitoring • car seat challenge					
2. Equipment and procedure instruction, for example, • set-up • troubleshooting • operation					
3. Medication administration					
II. COMPETENCIES SPECIFIC TO CRITICAL CARE		4	29	28	61
A. Evaluate Pertinent Information		1	2	1	4
1. Maternal history, for example, • amniotic fluid index • maternal medication					
2. Fetal and neonatal assessments, for example, • biophysical profile • fetal lung maturity indices • Apgar score					
3. Other diagnostic results, for example, • transillumination • oxygen challenge test					
B. Assess and Manage Airways		0	6	2	8
1. Establishment of a patent airway, for example, • bag-mask ventilation • oral / nasal airway placement					
2. Performing or assisting intubation, for example, • equipment selection • CO ₂ verification					
3. Performing or assisting advanced intubation techniques, for example, • specialty laryngoscopic visualization devices					

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4. Artificial airways				
a. laryngeal mask airway				
b. endotracheal tube, for example,				
• securement • positioning				
c. newly placed tracheostomy tube				
C. Manage Specialty Gas Administration		0	2	2
1. Nitric oxide				
2. Helium-oxygen				
3. Other, for example,				
• isoflurane / sevoflurane • subambient				
D. Manage Ventilation and Oxygenation		1	7	16
1. Selection of initial settings				
2. Conventional modes				
3. High-frequency ventilation, for example,				
• HFJV • HFOV				
4. Alternative modes, for example,				
• volume-targeted • NAVA				
• APRV				
5. Noninvasive, for example,				
• CPAP • bi-level				
6. Adjunct techniques				
a. lung recruitment maneuvers				
b. prone positioning				
c. extracorporeal life support, for example,				
• ECMO • coagulation management				
• CO ₂ removal				
7. Monitoring				
a. measures of lung disease severity, for example,				
• PaO ₂ / F _I O ₂ • OI				
• SaO ₂ / F _I O ₂				
b. airway pressures and volumes, for example,				
• mean airway pressure • minute ventilation				
c. ventilator waveforms, for example,				
• NAVA catheter positioning				

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d. ventilator-patient interaction, for example <ul style="list-style-type: none">synchrony					
e. pulmonary mechanics, for example, <ul style="list-style-type: none">complianceresistanceVD / VTMIP					
f. effects of mechanical ventilation on cardiac function					
g. cerebral oximetry, for example, <ul style="list-style-type: none">near infrared spectroscopy					
8. Strategies					
a. weaning from mechanical ventilation, for example, <ul style="list-style-type: none">spontaneous breathing trialsprotocols					
b. prevention of ventilator-induced lung injury					
c. lung-protective ventilation, for example, <ul style="list-style-type: none">permissive hypercapnia					
9. Optimizing patient-ventilator interaction					
E. Facilitate Procedures and Evaluate Efficacy		1	4	4	9
1. Inter-hospital or intra-hospital transport					
2. Intravascular catheter insertion, for example, <ul style="list-style-type: none">through an umbilical or peripheral site					
3. Intubation					
4. Extubation, for example, <ul style="list-style-type: none">planned decannulationendotracheal tube					
5. Chest tube management, for example, <ul style="list-style-type: none">insertiontroubleshooting					
6. Needle decompression of pneumothorax					
7. Therapeutic hypothermia, for example, <ul style="list-style-type: none">total body / head coolingpassive / active cooling					
F. Manage and/or Anticipate Effects of Medication Administration		0	2	1	3
1. Surfactant replacement therapy, for example, <ul style="list-style-type: none">compliance changesairway obstruction					
2. Airway instillations, for example, <ul style="list-style-type: none">lidocaineepinephrine					

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G. Prevent Hospital-Acquired Conditions		1	4	1	6
1. Ventilator-associated pneumonia					
a. oral care					
b. bed position					
c. minimizing intubation time, for example, • determining • NPPV extubation readiness					
d. ventilator circuit care, for example, • closed suction • heated wire					
2. Device-related pressure ulcers					
H. Manage End-of-Life Care		0	2	1	3
1. Types of end-of-life care, for example, • palliative • advance directive • hospice					
2. Determination of brain death					
3. Withdrawal of life support					
4. Care of organ donor					
Totals	3*	14	61	45	120

* Each test form will include 3 items that engage thinking about ethics to select the best answer.

* Each of these 3 items also will

- include content from a task that shows an open cell under the **Ethics** column.
- be written to a cognitive level permitted for the task to which the item is linked.

Additional Specifications by Patient*Item content also will be classified by a patient's condition or disorder*

Condition or Disorder	Item Counts Across the Examination		
	Target	Acceptable Range for Each Test Form	
	120	Minimum	Maximum
GENERAL – No specific condition or disorder	29	24	34
NEO PULMONARY (Neonatal pulmonary, for example, meconium aspiration, pneumonia, PPHN)	9	7	11
INFECT DISEASE (Infectious disease, for example, pneumonia, croup)	9	7	11
CHRONIC LUNG (Chronic lung disease of prematurity)	9	7	11
ASTHMA	9	7	11
PREMATURITY (Prematurity acute phase, for example, surfactant deficiency apnea)	9	7	11
BRONCHIOLITIS	7	6	8
CON DEFECTS (Congenital defects that require surgical correction)	5	3	7
CON HRT DISEASE (Congenital heart disease)	5	3	7
NEUROLOGIC (for example, seizures, brain tumors, hydrocephalus)	5	3	7
PED AIRWAY (Pediatric airway, for example, tracheomalacia, vocal cord paralysis, vascular ring)	3	2	4
IMMUNOCOMPROMISED	3	2	4
SHOCK	3	2	4
TRAUMA	3	2	4
HEART FAILURE	3	2	4
CYSTIC FIBROSIS	3	2	4
NEUROMUSCULAR (for example, spinal muscle atrophy, muscular dystrophy)	3	2	4
SLEEP RELATED (sleep related disorders, for example, obstructive sleep apnea, central hypoventilation)	2	1	3
INHALATION (Inhalation injuries)	1	0	1
Total	120		