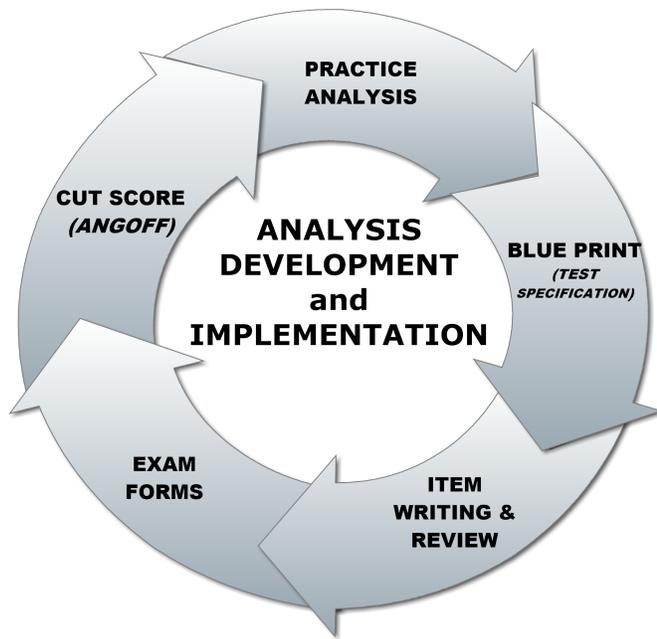


Examination Development



spontaneously from item writers. They are carefully planned to ensure that they are legally defensible and psychometrically sound. A test has a specific blueprint, or test plan, which identifies what content needs to be included on the test. In addition, there is a list of the key content or activities performed by aesthetic nurses. Both the blueprint and the key content/activities serve as item writing guides or “test specifications” for the item writers.

Where do these test specifications come from? The content of the Certified Aesthetic Nurse Specialist (CANS) examination is based on a **practice analysis** survey of aesthetic nurses that identifies the key tasks/activities performed by entry-level aesthetic nurses. A national task force is brought together to plan the survey content. This task force includes aesthetic nurses, as well as clinical educators and clinical managers of aesthetic nurses. Following data collection, the task force reviews the survey results and makes recommendations for the CANS test specifications, or **blueprint**. Most importantly, a practice analysis is performed every five years to be sure the test reflects current practice and is kept up to date.

The group that oversees CANS test development is the Plastic Surgical Nursing Certification Board (PSNCB), which is made up of nurses with expertise in plastic surgical and aesthetic nursing. There is also a CANS Test Committee that writes the actual test questions. **Item writers**, who are certified aesthetic nurses from a variety of geographic and practice settings, write test questions to meet the CANS blueprint requirements. Members of both the PSNCB and the CANS Test Committee are considered “content experts” concerning the knowledge and skills needed by aesthetic nurses for safe practice.

Each question on the test can be linked directly to the tasks/activities in the practice analysis survey. The Test Committee meets in person twice a year to review, evaluate, and write test questions. To be certain that the test content is accurate, all questions are supported using appropriate current references.

The test, now in **exam form**, consists of 150 questions that match the test blueprint. About 25 of the questions are new experimental or “pilot” questions that are not scored. Pilot testing of new questions allows for the evaluation of questions to determine if they are valid before they become scored questions.

The passing score, or **cut score**, of the test is determined by a panel of nurses who serve as subject matter experts (SMEs). Both experienced and newly certified nurses serve on this panel. This group performs a standard setting procedure (Angoff) in which each test question is reviewed to determine its level of difficulty. Finally, the passing score is determined. It is based on the SME panel’s estimation of the level of difficulty required to identify individuals who have an acceptable level of knowledge and skill. Therefore, each candidate’s test score is measured against a predetermined standard, not against the performance of other test takers. A score of about 75% correct is required to pass the CANS examination.