



INP

Inpatient Obstetric Nursing

Your CE and NCC Maintenance Requirements



The National Certification Corporation

INP

Your CE and NCC Maintenance Requirements

- All CE used for maintenance in any core certification area must be in your certification specialty, as defined by the Content Outline of each certification exam
- The new coding does not change the decision making process for determining applicability of CE but the code numbers have changed so it would be useful you to review the new codes and the content related to them. For your convenience, we have a complete listing in this brochure
- All CE must be accredited by an agency recognized by NCC

How the Continuing Competency Initiative Affects Your Maintenance

With the initiation of the Continuing Competency Initiative, the CE requirements for maintenance will be outlined in your Education Plan.

For those in Stage 1:

(individuals whose maintenance is due in 2011, 2012 or 2013)

Your education plan for Stage 1 is **NOT BINDING** and Stage 1 is an **orientation** to the new Professional Development Certification Maintenance Program. If you haven't taken the Stage 1 assessment yet, you are highly encouraged to do now. Once you maintain in 2011, 2012 or 2013, you automatically go into Stage 2 and the opportunity to take the assessment as an orientation will no longer be available to you. Your maintenance requirements remain as previously 45 hours in your certification specialty -- earning CE in each core competency is **not required**.

For those in Stage 2:

(individuals who have a maintenance due date in 2014 or later and all individuals newly certified in 2011 or later)

You should take the assessment within the first 6 months of your maintenance cycle. Since the education plan derived from the assessment outlines how many CE hours you need and in what core competency areas, this will give you over 2 years to earn the necessary CE.

For those in Stage 2: YOU CAN ONLY USE CE EARNED AFTER YOU HAVE TAKEN YOUR ASSESSMENT FOR MAINTENANCE. ANY CE EARNED BEFORE YOU TOOK THE ASSESSMENT CANNOT BE USED (EVEN IF IT MEETS YOUR EDUCATION PLAN).



NCC ("Other" Codes)

NCC Pretest Participant
(Code 21)

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Common Coding Questions

How do I know what content each specialty code covers?

On the maintenance application for each code there is a more information link. The link will provide you with access to content outline for the code and keyword topics. You can also get the same information from Is My CE Acceptable link under the Maintain Your Certification section on the website.

I went to a conference with topics that reflect many different codes, how do I code them?

You have two options:

You can code to the content area that represents the majority of the content presented.

OR

You can breakout content per code (You may combine different sessions of the same content code.) and record total hours for each code, listing the same conference for every content code entry.

I could not list all my CE. I have many more hours but the maintenance application would not let me list them.

45 hours is the maximum hours needed in Stage 1 maintenance, so once you meet the 45 hours in Stage 1 or the CE requirements designated by your education plan in Stage 2, the application will automatically take you to the payment page. There is no need to enter more CE than is required

I was a preceptor for new students, can I use this for maintenance and how do I list it on the application. How do I code it?

10 hours of CE can be used for precepting students, in your same certification specialty area and role. (e.g. In order for a WHNP to use the credit they cannot preceptor nurse midwives or residents – only WHNP students.) Orienting new staff is NOT considered as preceptor hours. On the application select the more information link for the preceptorship code 24 and it will give you information on how to list the information. This is also applicable to any of the "other" codes.

I have multiple certifications. Can I use the same CE for both. How can I code it for two different certifications.

If the CE is applicable to both areas and was earned in the appropriate time frame for each certification, yes. But you still need to file a separate maintenance application and fee for each certification. Each CE activity will be coded to each application.

Accrediting Agencies

Academic credit is accepted as is CME credit. For continuing education credit to be accepted for the purpose of maintenance, the continuing education activity must be accredited by one of the agencies below.

- NCC
- State boards of nursing
- State nursing associations
- Nursing, medical or health care organizations (this would include, for example, such organizations as: AWHONN, NPWH, NANN, ACOG, AMA etc.)
- Colleges or universities
- For profit or not-for-profit continuing education organizations such as Contemporary Forums, Western Schools, Professional Education Consultants, Perifacts etc. provided that programs sponsored by such organizations have been accredited for continuing education.

Most of the for-profit organizations have achieved accreditation for their offering through a state board of nursing or health care organization. Review accreditation details in the registration brochure you received when registering for the particular continuing education activity



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Core Competency Area

Core Competency Area	Content Topic	Keywords
Fetal Assessment (Code 1) 1	General Assessment <ul style="list-style-type: none"> • Antepartum assessment • Electronic fetal monitoring • Non-electronic fetal monitoring • Acid-base assessment • Fetal and placental development 	Acid-base assessment Acoustic stimulation Amniocentesis Amniotic fluid index Antepartum assessment Biochemical fetal markers Biophysical profile Contraction stress test Cord blood sampling Doppler flow studies Electronic fetal monitoring Fetal and placental development Fetal blood sampling Fetal fibronectin testing Fetal heart rate pattern interpretation Fetal heart rate patterns (normal/abnormal) Fetal lung maturation studies Fetal movement assessment Fetal scalp stimulation FHR baseline features FHR non-periodic changes FHR periodic changes Hypotonus Intermittent auscultation Maternal serum markers/screening NICHD categories NICHD EFM terminology Non-electronic monitoring Non-stress testing Nuchal translucency Percutaneous blood sampling Prenatal diagnosis Prenatal screening tests Ultrasound Umbilical cord blood gases Uterine activity assessment Uterine tachysystole
Labor and Delivery (Code 2) 2	Labor and Delivery <ul style="list-style-type: none"> • Physiology of labor • Labor management • Obstetrical procedures • Pain management 	Active management of labor Amnioinfusion Amniotomy Anesthesia during labor Augmentation of labor Bishop score Cervical ripening Cesarean birth - indications, complications, patient management Childbirth education Cultural assessment Deep tendon reflex assessment Eating and drinking in labor Epidural anesthesia Episiotomy External version Failure to progress Fluid electrolyte management in labor Forceps delivery Fundal pressure Herpes management in labor and delivery Induction of labor Induction of labor - complications Induction of labor - indications Induction of labor - methods Induction of labor - nursing management Insulin management in labor/delivery Intraamniotic infection Intrauterine resuscitation Labor curves Labor dystocia Labor management Labor physiology



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Core Competency Area

Core Competency Area	Content Topic	Keywords
Labor and Delivery (Code 2) <i>(Continued)</i> 2	<i>Labor and Delivery</i> <ul style="list-style-type: none"> • Physiology of labor • Labor management • Obstetrical procedures • Pain management 	Labor positions Labor progress Labor support Leopold maneuvers Maternal pregnancy physiology Obstetric triage Obstetrical procedures Operative vaginal birth Oxygen administration Oxytocin administration Pain management - complications Pain management- pharmacologic Pain relief - nonpharmacologic Physical assessment in labor, abdominal, vaginal, etc.
Pregnancy and Obstetric Complications (Code 3) 3	<i>Pregnancy Complications</i> <ul style="list-style-type: none"> • Maternal diseases affecting the fetus and newborn • Lifestyle and environmental pregnancy risks <i>Obstetric Complications</i> <ul style="list-style-type: none"> • Labor and placental disorder • Multiple gestation • Prolonged pregnancy 	Abnormal presentation Abruptio placenta Acute fatty liver disease Addictive disorders in pregnancy Amniotic fluid embolism Amniotic fluid problems Anemia Anticoagulation therapy Antihypertensive therapy Appendicitis Asthma Autoimmune diseases Bleeding disorders in pregnancy Breech presentation Cardiovascular disease affecting pregnancy Diabetes in pregnancy Disease processes affecting mother/fetus/newborn Disseminated intravascular coagulation

Physiology of labor
 Post anesthesia care
 Regional anesthesia
 Rupture of membranes
 Screening physical exam
 for admission to labor
 & delivery
 Stages of labor
 Steroid administration
 Suprapubic pressure
 Triage
 True vs. false labor
 Uteroplacental physiology
 Vacuum-assisted delivery
 Vaginal examination
 VBAC
 Water intoxication

Domestic violence in
 pregnancy
 Dysfunctional labor
 (prolonged/precipitous)
 Eclampsia
 Environmental hazards
 to pregnancy
 Gestational diabetes
 Gestational hypertension
 Group B streptococcus
 infection
 HELLP syndrome
 Hemoglobinopathies
 Hemolytic disease
 History of infertility effects
 on pregnancy and
 the neonate
 Hypertension
 Hypertonic labor
 Hypotonic labor
 Indications for bedrest
 in pregnancy



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Core Competency Area

Core Competency Area	Content Topic	Keywords
Pregnancy and Obstetric Complications (Code 3) (Continued) 3	<p><i>Pregnancy Complications</i></p> <ul style="list-style-type: none"> • Maternal diseases affecting the fetus and newborn • Lifestyle and environmental pregnancy risks <p><i>Obstetric Complications</i></p> <ul style="list-style-type: none"> • Labor and placental disorders • Multiple gestation • Prolonged pregnancy 	<p>Infections in pregnancy - viral, bacterial & fungal</p> <p>Ketoacidosis</p> <p>Labor/placental disorders</p> <p>Macrosomia</p> <p>Malpresentation</p> <p>Maternal risk factors - antepartum</p> <p>Maternal risk factors - intrapartum</p> <p>Maternal risk factors affecting the newborn</p> <p>Meconium stained fluid</p> <p>Multiple gestation</p> <p>Obesity complications - antepartum</p> <p>Obesity complications - intrapartum</p> <p>Occupational hazards</p> <p>Oligohydramnios</p> <p>Placenta previa</p> <p>Placental disorders</p> <p>Polyhydramios</p> <p>Precipitous delivery</p> <p>Preeclampsia</p> <p>Pregnancy risks</p> <p>Premature rupture of membranes</p> <p>Prematurity</p> <p>Preterm labor assessment</p> <p>Preterm labor diagnosis</p> <p>Preterm labor drugs</p> <p>Preterm labor management</p> <p>Prolapsed cord</p> <p>Prolonged pregnancy</p> <p>Pulmonary embolism</p> <p>Rh sensitization</p> <p>Ruptured membranes (preterm/term)</p> <p>Sepsis in pregnancy</p> <p>Shoulder dystocia</p> <p>STDs in pregnancy</p> <p>Stillbirth</p> <p>Substance abuse</p> <p>Third trimester bleeding</p> <p>Thrombocytopenia</p> <p>Thrombophilias</p> <p>Thyroid disease</p> <p>Tocolytic therapy</p> <p>Trauma in pregnancy</p> <p>Twin to twin transfusion</p> <p>Urinary tract infection</p> <p>Uterine dehiscence</p> <p>Uterine inversion</p> <p>Uterine rupture</p> <p>Vaginal infections</p> <p>Vasa previa</p>



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Postpartum (Code 4) 4	Postpartum <ul style="list-style-type: none"> • Physiology of the postpartum woman • Family adaptation • Lactation • Complications of the postpartum period • Discharge planning and home care 	Birth canal lacerations Breast milk composition Breastfeeding Breastfeeding complications Care of the non-breastfeeding woman Deep vein thrombosis Discharge planning Disseminated intravascular coagulation Endometritis Family cultural adaptation Family integration Family psychosocial adaptation Herpes management postpartum Home care Home care - maternal self care Home care - safety issues Home care- routine neonatal care Home care- warning signs Insulin management postpartum	Lactation and drug transfer Lactation physiology Lactation suppression Mastitis Maternal infant attachment Maternal risk factors - postpartum Pain management Perinatal loss Postpartum blues Postpartum care Postpartum depression Postpartum education Postpartum exercises Postpartum hemorrhage Postpartum maternal physiologic changes Postpartum cardiomyopathy Postpartum Infection Postpartum psychosocial adaptation Septic pelvic thrombophlebitis Transition to parenthood Uterine subinvolution Wound infection
Newborn (Code 5) 5	Newborn <ul style="list-style-type: none"> • Adaptation to extrauterine life • Physical assessment • Pathophysiologic conditions • Infant nutrition 	Adaptation to extrauterine life Anemia in the newborn Behavioral assessment of the newborn Birth injuries/trauma in the neonate Brachial plexus injuries Cardiovascular disorders in the neonate Down syndrome - neonatal characteristics Down syndrome - risks Drug withdrawal in the infant Gastrointestinal disorders in the neonate	Gestational age assessment Glucose regulation in the neonate Hyperbilirubinemia Hypoglycemia in the neonate Infant nutrition Infant of a diabetic mother Infant of drug using mother Infections in the newborn Intrauterine growth restriction effects Jaundice in the neonate Late preterm infant Meconium aspiration syndrome Neonatal birth injuries



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Core Competency Area

Core Competency Area	Content Topic	Keywords
Newborn (Code 5) (Continued) 5	<i>Newborn</i> <ul style="list-style-type: none"> • Adaptation to extrauterine life • Physical assessment • Pathophysiologic conditions • Infant nutrition 	Neonatal complications in immediate newborn period Neonatal physiologic transition Neurological assessment of the newborn Newborn assessment and care - general Newborn nutrition Newborn screening tests Newborn complications Newborn resuscitation Physical assessment of the newborn Polycythemia in the neonate Respiratory disorders in the neonate Rh disease in newborn Sepsis in the neonate SIDS Temperature disturbances in the neonate Thermoregulation in the neonate
Professional Practice (Code 6) 6	<i>Research</i> <ul style="list-style-type: none"> • Definitions • Application to practice <i>Legal / Ethical Problem</i> <ul style="list-style-type: none"> • Definitions • Application to practice • Informed consent • Legal issues affecting inpatient obstetric nursing practice 	Continuing competency Ethical principles and theories Evidence based practice Incorporation of research into practice Informed consent Interprofessional communications Legal issues affecting inpatient obstetric nursing practice Medication errors National practice standards and guidelines Patient safety Research Research definitions Systemic errors
Universal Hours (Code 9) 9	<i>Universal Hours</i> <ul style="list-style-type: none"> • Pharmacokinetics • Resuscitation and stabilization (mother and newborn), ACLS, NRP, STABLE • AIDS and HIV infection • Pharmacology 	ACLS AIDS and HIV Infections NRP Pharmacokinetics Resuscitation and stabilization (mother and newborn) Pharmacology