



WHC

Women's Health Care Nurse Practitioner

Your CE and NCC Maintenance Requirements



The National Certification Corporation

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).

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

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.



NCC ("Other" Codes)

NCC Pretest Participant
(Code 21)

NCC Item Writer
(Code 22)

NCC Self Assessment
Reviewer or Author
(Code 23)

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or Preceptor
(Code 24)

Author of a book chapter or
journal article (Code 25)

Core Competency Area

Core Competency Area	Content Topic	Keywords
<p>Normal Physiology and Management (Code 1)</p> <p>1</p>	<p>Primary Care</p> <ul style="list-style-type: none"> • Health promotion • Risk assessment • Disease prevention • National screening guidelines • Preconceptual counseling <p>Obstetrics</p> <ul style="list-style-type: none"> • Maternal adaptation to pregnancy • Prenatal care • Routine postpartum care • Lactation and breastfeeding <p>Gynecology</p> <ul style="list-style-type: none"> • Puberty • Menstrual cycle • Conception • Climacteric changes • Pregnancy prevention and fertility control • Postmenopause changes 	<p>Aging adjustment issues</p> <p>Breast self exam</p> <p>Breastfeeding</p> <p>Cancer screening guidelines (e.g. breast, cervical, colon, etc.)</p> <p>Cardiovascular screening</p> <p>Cervical cap</p> <p>Childbirth preparation</p> <p>Climacteric</p> <p>Coitus interruptus</p> <p>Common discomforts of pregnancy management</p> <p>Condoms</p> <p>Contraception methods</p> <p>Contraceptive sponge</p> <p>Dental care in pregnancy</p> <p>Diabetes screening</p> <p>Diet and nutrition counseling</p> <p>Emergency contraception</p> <p>Emotional and behavioral changes of pregnancy</p> <p>Female sex response</p> <p>Gynecology</p> <p>Health guidance during pregnancy</p> <p>Health promotion</p> <p>Hormone therapy</p> <p>Immunizations</p> <p>Intrauterine devices</p> <p>Lactation amenorrhea method</p> <p>Lactation physiology</p> <p>Maternal adaptation to pregnancy</p> <p>Menarche</p> <p>Menstrual cycle</p> <p>Menstruation</p> <p>Natural family planning</p> <p>Nicotine replacement therapy</p> <p>Nutrition counseling</p> <p>Nuva ring</p> <p>Oral contraceptives</p> <p>Ovulation</p> <p>Parenting issues</p> <p>Parovirus screening</p> <p>Perimenopause</p> <p>Postcoital contraception</p> <p>Postpartum physiology</p> <p>Preconceptional counseling</p> <p>Pregnancy physiology</p> <p>Pregnancy prevention counseling</p> <p>Prenatal care</p> <p>Puberty</p> <p>Routine postpartum care</p> <p>Safe sex practices</p> <p>Serum hormonal levels in pregnancy</p> <p>Sexuality counseling (female/male)</p> <p>Smoking cessation counseling</p> <p>Spermicides</p> <p>Sterilization</p> <p>Stress management counseling</p> <p>Transdermal contraceptive systems</p> <p>Vaginal barrier contraception</p> <p>Vasectomy</p>



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Core Competency Area

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Pathophysiology Gynecology (Code 2A)	<p>2A</p> <p><i>Gynecologic Disorders/Deviations</i></p> <ul style="list-style-type: none"> • Menstrual disorders • STDs and vaginal infections (female/male) • Urinary tract infections • Pelvic pain and related disorders • Infertility (female/male) • Benign reproductive disorders • Malignant reproductive disorders • Breast disorders • Pelvic organ relaxation and prolapse • Polycystic ovarian syndrome • Vulvar dystrophies and dermatoses <p><i>Male Factors Affecting Women's Health</i></p> <ul style="list-style-type: none"> • Sexuality and sexual dysfunction • Contraception • Infertility • STDs 	Adenomyosis Adnexal masses Amenorrhea Androgen excess Bacterial vaginosis Bartholin's gland duct cyst Breast cancer Candida albicans Cervical cancer Cervical intraepithelial neoplasia Cervical polyps Cervical warts Cervicitis Chancroid Chlamydia Cystitis Dysfunctional uterine bleeding Dysmenorrhea Dyspareunia Ectopic pregnancy Endometriosis Fibroadenoma Fibrocystic breast changes Galactorrhea GnRH therapy Gonorrhea Gynecologic diseases/ complications Gynecology Herpes Hirsutism HIV infection Hot flashes Human papilloma virus Hyperlipidemia Hypermenorrhea Hyperprolactinemia Hypomenorrhea Hypothyroidism Hysterectomy Infertility Intermenstrual bleeding Interstitial cystitis

Leiomyomas
 Male infertility
 Mastectomy
 Menstrual irregularities
 Metorrhagia
 Mullerian anomalies
 Nipple discharge
 Obstetrics
 Oligomenorrhea
 Osteoporosis
 Ovarian cancer
 Ovarian cysts
 Paget's disease
 Pelvic inflammatory disease
 Pelvic pain
 Pelvic relaxation disorders
 Polycystic ovarian syndrome
 Polymenorrhea
 Polyps (cervical and endometrial)
 Premenstrual and related disorders
 Primary care
 Pyelonephritis
 Sexual abuse/assault
 Sexual dysfunction
 Sexual transmitted diseases
 Syphilis
 Trichomoniasis
 Turner's syndrome
 Unintended pregnancy
 Urinary incontinence
 Urinary tract infection
 Uterine cancer
 Uterine fibroids
 Vaginitis
 Vulvar cancer
 Vulvar dystrophies and dermatoses
 Vulvodynia
 Vulvovaginal candidiasis



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Core Competency Area

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Pathophysiology Obstetrics (Code 2B) 2B	<i>Complications of Pregnancy</i> <ul style="list-style-type: none"> • Preexisting conditions • Placental abnormalities • Pregnancy specific conditions • Postpartum complications 	Anemia in pregnancy (all types) Barriers to family integration Bladder distention in the postpartum period Bleeding during pregnancy Breast engorgement Cardiovascular pre-existing conditions Cervical insufficiency (incompetent cervix) Childhood disease exposure complications Deep vein thrombosis Endometritis Environmental effects of pregnancy Gestational diabetes Gestational hypertension GI pre-existing conditions Headaches in pregnancy Hematologic pre-existing conditions Hyperemesis gravidarum Infections in pregnancy (STDs and other) Influenza in pregnancy Intimate partner violence Intrauterine fetal demise Intrauterine growth restriction Malpresentation Metabolic pre-existing conditions	Multiple gestation Nipple soreness Obesity effects in pregnancy Perinatal loss Placental disorders (previa, abruptio, etc.) Plugged ducts Postmaturity Postpartum depression and other psychiatric disorders Postpartum hemorrhage Postpartum lacerations Pre-existing psychiatric disorders in pregnancy Prematurity Preterm labor Renal pre-existing conditions Respiratory pre-existing conditions Rh immunization Sickle cell disease in pregnancy Spontaneous abortion Substance abuse in pregnancy Thromboembolism disorders Thrombophlebitis in the postpartum period Trauma in pregnancy Trophoblastic disease Urinary retention in the postpartum period
Pathophysiology Obstetrics (Code 2C) 2C	<i>Primary Care</i> <ul style="list-style-type: none"> • Recognition, basic management and/or referral of common health problems • Disorders by physiologic system 	Abnormal heart sounds Abuse (sexual, elder etc.) Addictive disorders AIDS Allergies Anemias (all types) Anxiety disorders Appendicitis Asthma Autoimmune diseases	Back pain Bronchitis Cardiac dysrhythmias Cholecystitis Colon cancer Constipation Depression Diabetes Diarrhea Eating disorders



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Core Competency Area

Core Competency Area	Content Topic	Keywords
Pathophysiology Obstetrics (Code 2C) (Continued) 2C	Primary Care <ul style="list-style-type: none"> • Recognition, basic management and/or referral of common health problems • Disorders by physiologic system 	Family violence Gastrointestinal reflux Headaches Hematuria Hemorrhoids HIV infection Hyperlipidemia Hypertension Irritable bowel disease Mitral valve prolapse Obesity adverse effects Obsessive compulsive disorders Osteoarthritis Osteoporosis Pneumonia Renal stones Sinusitis Skin cancer Skin disorders, e.g., dermatitis, psoriasis, vitiligo etc. Strains and sprains Strep throat Thromboembolic diseases Thyroid disorders Upper and lower respiratory infections Urinary tract infection
Physical Assessment & Diagnostic Tools (Code 3) 3	Health History <ul style="list-style-type: none"> • Risk assessment • Medical history • Social history • Family history Physical Assessment and Examination <ul style="list-style-type: none"> • General body system review • Physiology and anatomy of reproductive organs • Pelvic exam • Obstetric exam • Fetal Assessment Diagnostic Tests and Studies <ul style="list-style-type: none"> • Hematologic studies • Serologic studies • Kidney function studies • Lipid profile • Body fluids and excretion analyses • Endoscopic procedures • Imaging studies • Biopsies • Genetic screening and testing 	Amniocentesis Amniotic fluid index Anthropometric measurements Antibody screen Biophysical profile Blood glucose/ hemoglobin A1C Blood type Bone density testing Breast biopsy BUN and creatinine Cervical and vaginal cultures Cervical biopsy Chorionic villus sampling Colonoscopy Colposcopy Complete blood counts Contraction stress test Diagnostic studies and lab tests Dilatation and curettage Endometrial biopsy Family history Fecal testing Fertility awareness methods Fetal assessment Fetal heart auscultation Fetal lung maturation studies Fundal height measurements GBS culture Gene identification Genetic markers Genetic risk assessment Gynecologic physiology and anatomy Gynecology Health history Hormone studies Hysterosalpingogram Hysteroscopy Infectious disease screening Karyotyping Laparoscopy Leopold maneuvers Lipid profiles Liver function studies Mammograms Maternal serum markers Nonstress test Nonstress testing Ovulation testing Pap smear technique and interpretation Physical assessment - all systems Physical examination Preexisting condition complicating pregnancy Pregnancy testing



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<p>Physical Assessment & Diagnostic Tools (Code 3) <i>(Continued)</i></p> <p>3</p>	<p>Health History</p> <ul style="list-style-type: none"> • Risk assessment • Medical history • Social history • Family history <p>Physical Assessment and Examination</p> <ul style="list-style-type: none"> • General body system review • Physiology and anatomy of reproductive organs • Pelvic exam • Obstetric exam • Fetal Assessment <p>Diagnostic Tests and Studies</p> <ul style="list-style-type: none"> • Hematologic studies • Serologic studies • Kidney function studies • Lipid profile • Body fluids and excretion analyses • Endoscopic procedures • Imaging studies • Biopsies • Genetic screening and testing 	<p>Preterm birth risks Renal function testing Reproductive technologies Rh type and antibody screening Sickle cell screening Sigmoidoscopy Sperm count STD screening</p> <p>Testing for ruptured membranes Testosterone therapy Thyroid studies Ultrasound Urinalysis Vulvar biopsy Wet mount X-rays</p>
<p>Pharmacology (Code 4)</p> <p>4</p>	<p>Pharmacology</p> <ul style="list-style-type: none"> • Pharmacokinetics and pharmacodynamics • Drug interactions • Mechanisms of action <p>Pharmacotherapeutics (prescription and OTC)</p> <ul style="list-style-type: none"> • Drugs categories • Drug indications/contraindications • Side effects • Patient education 	<p>Complementary medicine for Ob/Gyn Drug therapy Drugs during lactation Herbal medicines in ob/gyn Mechanisms of drug action Over the counter (OTC) drugs Pharmacodynamics Pharmacokinetics</p> <p>Pharmacology - contraception Pharmacology - gynecologic disorders Pharmacology during pregnancy Pharmacotherapeutics</p>



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Core Competency Area

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Professional Practice (Code 5) 5	<p>Evidence Based Practice</p> <ul style="list-style-type: none"> • Research design • Application of research findings to clinical practice • Statistical evaluation of research studies • Ethical considerations in research <p>Legal/Ethical Issues</p> <ul style="list-style-type: none"> • Informed consent • Patient confidentiality • Risk management • Scope of practice • Ethical principles <p>Patient Safety</p> <ul style="list-style-type: none"> • Interprofessional communication • Medication errors • Preventive strategies to reduce medical errors • Documentation 	<p>Communication failure Ethical principles and theories Legal issues affecting Women's Health Medication errors Patient safety Professional practice standards Research Scope of practice</p>
Universal Hours (Code 9) 9	<p>Universal Hours</p> <ul style="list-style-type: none"> • Resuscitation and stabilization (mother and newborn) 	<p>ACLS AIDS and HIV infections NRP Resuscitation and stabilization (mother and newborn) S.T.A.B.L.E</p>