NCC Maintenance Requirements

The standard process for the NCC Professional Development Certification Maintenance Program makes use of a specialty assessment tool and resulting personal education plan:

- **Complete the specialty assessment tool** that reflects the current knowledge competencies aligned with your certification specialty at the beginning of each new certification maintenance cycle.

- **Earn CE as specified by the education plan developed from your specialty assessment.** Your education plan outlines the CE needed to maintain your NCC certification. Only CE earned after you have taken your specialty assessment can be used to maintain your certification. It must meet the CE needed in your educational plan.

NCC believes the individual certified nurse is the best person to determine the specialty code for their CE, as they have the specific content of the CE program.
CONTINUING COMPETENCY
SPECIALTY ASSESSMENT

The CE requirements for your NCC maintenance will be outlined in your education plan!

Your educational plan is derived from your specialty assessment and outlines for you the CE needed in each of your core competency areas. Each core area has a code and that code is provided for you as well. 

*Take the specialty assessment as soon as you can in the beginning of your maintenance cycle.*

The assessment may be taken early, up to 3 months prior to the start of your new maintenance cycle date. The start day for earning CE remains at the first day of the new maintenance cycle.

**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).**

YOUR CE AND NCC MAINTENANCE REQUIREMENTS

All CE must be earned during your current maintenance cycle and after you have taken the specialty assessment.

All CE used for NCC maintenance is defined by the individuals Education Plan.

All CE must be submitted online at NCCwebsite.org.

All CE must be coded to the applicable core content area. See listing in this brochure.

CE can be entered into the maintenance application any time after the assessment has been taken and on an ongoing basis. All activities will be saved until the application is submitted.

All CE must be accredited by an agency recognized by NCC.

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

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.

Once you meet or the CE requirements designated by your education plan 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. You can only use these hours for baseline hours and not hours designated in the education plan assigned to a specific competency area. Baseline hours are listed as hours that are assigned to any competency area and appear at the bottom of your plan.

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.

Do I have to submit a “Maintenance Pre-approval”?

Maintenance Pre-Approval is optional and not required. If you are unsure your continuing education activities will meet your NCC maintenance requirements, you can ask NCC to pre-approve your CE activities. There is a nonrefundable fee for this service. Complete details are in the maintenance section of NCCwebsite.org.
• Competency areas where 7.5 specialty index is achieved, no CE is needed.
• Competency areas where 7.5 specialty index is not achieved, the hours of CE needed will be listed.
• Every plan has a minimum of 15 CE hours - these are called baseline hours. Even if a specialty index above 7.5 is achieved in every competency, there is still a CE commitment of 15 hours. Education plans that need 45 hours, do not have any baseline hours because those hours are assigned to the specific core competencies.
• Every plan is composed of a maximum of 50 and a minimum of 15 CE hours.
• Missed keywords are intended to show what specific topics had knowledge gaps within that competency area. They are broad in scope and you are not required to cover all keywords or topics for your NCC certification maintenance
• Links to NCC CE modules are offered as a convenience. Use of NCC CE modules is optional – not required. NCC CE is provided as a way to provide affordable, easily accessible CE for those who may have limited CE options in their area or practice. Also CE earned for successful completion of any NCC CE modules will automatically be entered and coded into your online maintenance application
• 5 hours of credit is given for taking the assessment and may be applied to any CE need.
• The total number of hours needed will be listed in each specific core competency.
**NIC Core Competency Area**

**General Assessment (Code 1)**
*15 hours*

**General Assessment**
- Physical and gestational age assessment
- Maternal factors affecting neonatal outcomes
- Risk assessment
- Thermoregulation
- Fluids and electrolytes
- Nutrition and feeding
- Oxygenation and acid homeostasis
- Developmental care

**Physiology and Pathophysiology (Code 2)**
*20 hours*

**Physiology and Pathophysiology**
- Cardiac
- Respiratory
- Gastrointestinal (GI)
- Genitourinary (GU)
- Hematopoietic
- Neurologic
- Infectious Diseases
- Metabolic
- Genetics
- Head, ears, eyes, nose and throat
- Discharge planning and follow up
- Grieving process and family integration

**Pharmacology (Code 3)**
*10 hours*

**Pharmacology**
- Drug therapies
- Pharmacokinetic principles

**Professional Practice (Code 4)**
*5 hours*

**Patient Safety**
- Interprofessional communication
- Medication error prevention
- System error prevention

**Ethical Principles and Theories**

**Legal Issues Affecting Neonatal Care Nursing**
- Scope of practice
- Impaired nurse
- Legal terms
- Informed consent

**Professional Practice Standards**
- Evidence based practice

**Research**
- Terminology
- Incorporation into practice

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### Your education plan

<table>
<thead>
<tr>
<th>CORE COMPETENCY AREA</th>
<th>YOUR SPECIALTY INDEX</th>
<th>CE HOURS REQUIRED</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Assessment (Code 1)</td>
<td>6.34</td>
<td>15 hours</td>
</tr>
<tr>
<td>Physiology and Pathophysiology (Code 2)</td>
<td>7.74</td>
<td>Standard met</td>
</tr>
<tr>
<td>Pharmacology (Code 3)</td>
<td>6.67</td>
<td>10 hours</td>
</tr>
<tr>
<td>Professional Practice (Code 4)</td>
<td>10</td>
<td>Standard met</td>
</tr>
</tbody>
</table>

**Total hours required**

15 Continuing Education hours in any of your content specific specialty areas

Credit for taking this assessment *(may be applied to your total required hours)*

*Number of CE hours required if you do not achieve a specialty index of 7.5 or more in the content area.*
<table>
<thead>
<tr>
<th>Core Competency Area</th>
<th>Content Topic</th>
<th>Keywords</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Assessment (Code 1)</td>
<td><strong>General Assessment</strong>&lt;br&gt;- Physical and gestational age assessment&lt;br&gt;- Maternal factors affecting neonatal outcomes&lt;br&gt;- Risk assessment&lt;br&gt;- Thermoregulation&lt;br&gt;- Fluids and electrolytes&lt;br&gt;- Nutrition and feeding&lt;br&gt;- Oxygenation and acid homeostasis&lt;br&gt;- Developmental care&lt;br&gt;- Discharge plan&lt;br&gt;- Grieving&lt;br&gt;- X-ray review&lt;br&gt;- Behavior assessment</td>
<td>Airway management&lt;br&gt;Alkalosis&lt;br&gt;Alveolar-arterial oxygen gradient&lt;br&gt;Ambiencentesis&lt;br&gt;Anticipatory grief&lt;br&gt;Apgar scoring&lt;br&gt;Auditory brainstem response testing&lt;br&gt;Auscultation techniques&lt;br&gt;Bag and mask ventilation&lt;br&gt;Breastfeeding&lt;br&gt;Calorie calculations&lt;br&gt;Calorie expenditure&lt;br&gt;Central line management&lt;br&gt;Chest tube care&lt;br&gt;Circadian rhythms&lt;br&gt;Comfort care&lt;br&gt;Cultural practice&lt;br&gt;Dehydration&lt;br&gt;Delivery room emergencies&lt;br&gt;Developmental care&lt;br&gt;Dietary supplements&lt;br&gt;Discharge planning and follow up&lt;br&gt;Effects of cesarean delivery&lt;br&gt;Embryology&lt;br&gt;End of life care&lt;br&gt;Energy needs&lt;br&gt;Enteral feedings&lt;br&gt;Family integration&lt;br&gt;Feeding problems&lt;br&gt;Feeding techniques&lt;br&gt;Fetal and placental development&lt;br&gt;Fluid and electrolyte management&lt;br&gt;Fluid calculations&lt;br&gt;Formula composition&lt;br&gt;Gestational age assessment&lt;br&gt;Grief resolution&lt;br&gt;Heart sound evaluation&lt;br&gt;Heat loss mechanisms&lt;br&gt;High frequency ventilators&lt;br&gt;In utero drug exposure complications&lt;br&gt;In utero exposure to alcohol&lt;br&gt;Incubator management&lt;br&gt;Infusions&lt;br&gt;Insensible water loss&lt;br&gt;Intrapartal complications affecting the neonate&lt;br&gt;IV therapy&lt;br&gt;Kangaroo care&lt;br&gt;Lactation physiology&lt;br&gt;Maternal factors affecting the newborn&lt;br&gt;Maternal infant attachment&lt;br&gt;Mechanical ventilation&lt;br&gt;Mechanisms of heat loss&lt;br&gt;Monitoring devices&lt;br&gt;Muscle tone evaluation&lt;br&gt;Needle aspiration&lt;br&gt;Neonatal reflexes&lt;br&gt;Neonatal self regulatory behaviors&lt;br&gt;Neurobehavioral development&lt;br&gt;Neurodevelopmental delay&lt;br&gt;Neurological assessment&lt;br&gt;Neutral thermal environment regulation&lt;br&gt;Newborn care&lt;br&gt;NICU environmental management&lt;br&gt;Noise reduction strategies&lt;br&gt;Nonstress testing&lt;br&gt;Normal growth and development&lt;br&gt;NRP&lt;br&gt;Nutrient requirements&lt;br&gt;Nutrition management&lt;br&gt;Obstetric complications affecting the newborn&lt;br&gt;Optimal positioning of the neonate&lt;br&gt;Oral feedings&lt;br&gt;Oxygenation and homeostasis&lt;br&gt;Oxygenation disturbances&lt;br&gt;Pain assessment&lt;br&gt;Perinatal loss&lt;br&gt;Physical assessment&lt;br&gt;Physical examination&lt;br&gt;Physiologic monitoring&lt;br&gt;Promoting sensory development&lt;br&gt;Resuscitation and stabilization&lt;br&gt;Risk assessment&lt;br&gt;Sleep states&lt;br&gt;Sleep wake patterns&lt;br&gt;S.T.A.B.L.E.&lt;br&gt;Standard laboratory value interpretation&lt;br&gt;Supportive care&lt;br&gt;Thermoregulation&lt;br&gt;Total parenteral nutrition&lt;br&gt;Ventilator management</td>
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## Determining What Content Meets Each Specialty Code

<table>
<thead>
<tr>
<th>Core Competency Area</th>
<th>Content Topic</th>
<th>Keywords</th>
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</table>
| Physiology and Pathophysiology | physiological and pathophysiology                  | AIDS and HIV infections, Air leaks, Airway anomalies, Airway obstruction, Anemia, Anemia of prematurity, Apnea, Apnea monitors, Apnea of prematurity, Asphyxia, Aspiration, Bacterial disease, Barotrauma, Beckwith-Wiedemann syndrome, Biliary atresia, Bilirubin metabolism, Birth injuries, Bleeding disorders, Blood incompatibilities, Bradycardia, Brain development, Bronchopulmonary dysplasia, Bronze baby syndrome, Cafe au lait spots, Calcium metabolism, Cardiac, Cardiac diseases, Cardiac dysrhythmias, Cardiac physiology, Cephalohematoma, Cerebral palsy, Cerebrospinal fluid analysis, Chest x-ray interpretation, Choanal atresia, Chromosomal disorders, Chronic lung disease, Clotting studies, Coagulation disorders, Coarctation of the aorta, Common skin disorders/conditions, Complications from low birthweight, Congenital abnormalities, Congenital diaphragmatic hernia, Congenital heart disease, Congenital heart failure, Congenital lobar emphysema, Conjunctivitis, Copper deficiency, Craniosynostosis, Crigler Najjar syndrome, Cyanosis, Dandy Walker cyst, Diagnostic imaging, Dialysis, Diaper dermatitis, Disseminated intravascular coagulation, Ebstein’s anomaly, ECG findings and interpretation, Echocardiogram evaluation, ECMO, EEG evaluation, EENT, Encephalopathy, Endocardial cushion defect, Endocrine physiology, Endotracheal suctioning, Enzyme deficiency syndromes, Esophageal atresia, Essential fatty acid deficiency, Failure to thrive, Fractures, Gastroesophageal reflux, Genetic diseases, Genetic inheritance, Genetics, Genitourinary, Genitourinary physiology, GI, Head Trauma, Head, eyes, ears, nose and throat disorders, Hematologic physiology, Hematopoietic, Hemolytic disease, Hemorrhage, Hepatitis, Hydrocephalus, Hydronephrosis, Hyperbilirubinemia, Hyperglycemia, Hyperinsulinemia, Hyperkalemia, Hypernatremia, Hypertension, Hyperviscosity, Hypoglycemia, Hypokalemia, Hypospadias, Hypotension, Hypoxic ischemic encephalopathy, Immunizations, Inborn errors of metabolism, Infant of diabetic mother, Infection control, Infections.
### DETERMINING WHAT CONTENT MEETS EACH SPECIALTY CODE

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<td>Head, ears, eyes, nose and throat</td>
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<td><strong>Infectious diseases</strong></td>
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<td>Intraterine growth restriction</td>
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<td>Intraventricular hemorrhage</td>
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<td>Iron deficiency syndromes</td>
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<td>Jitteriness and tremors</td>
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<td>Kernicterus</td>
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<td>Meconium aspiration syndrome</td>
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<td>Meningitis</td>
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<td>Metabolic</td>
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<td>Mineral derangements</td>
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<td>Multifactorial disorders</td>
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<td>Necrotizing enterocolitis</td>
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<td>Nitric oxide therapy</td>
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<td>Omphalocoele</td>
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<td>Patterns of inheritance</td>
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<td>Peritoneal dialysis</td>
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<td>Periventricular leukomalacia</td>
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<td>Persistent pulmonary hypertension of the newborn</td>
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<td>Phototheraphy</td>
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<td>Pneumonia</td>
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<td>Pneumothorax</td>
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## Core Competency Area

### Pharmacology (Code 3)

#### Content Topic

- **Pharmacology**
  - Drug therapies
  - Pharmacokinetic principles

#### Keywords

- Analgesia
- Anesthetics
- Antibiotics and anti-infectives
- Anticoagulation therapy
- Anticonvulsant drugs
- Antifungal
- Biologics
- Cardiovascular agents
- CNS stimulants
- Corticosteroid therapy
- Diuretics
- Dosing calculations
- Drug complications
- Drug interactions
- and incompatibilities

- Drug mechanism of action
- Drug therapies
- Muscle relaxants
- Oxygen
- Pain management drugs
- Pharmacokinetics and pharmacodynamics
- Pharmacologic principles
- Surfactant replacement therapy

### Professional Practice (Code 4)

#### Content Topic

- **Patient Safety**
  - Interprofessional communication
  - Medication error prevention
  - System error prevention

- **Ethical Principles and Theories**

- **Legal Issues affecting Neonatal Intensive Care Nursing**
  - Scope of practice
  - Impaired nurse
  - Legal terms
  - Informed consent

- **Professional Practice Standards**
  - Evidence based practice

- **Research**
  - Terminology
  - Incorporation into practice

#### Keywords

- CE poster sessions (6 poster sessions equal 1 hour)
- Alarm fatigue
- Communication
- Compassion fatigue
- Documentation
- Ethical principles and theories
- Evidence based practice
- Interprofessional communication
- Lateral violence
- Legal issues
- Legal issues affecting neonatal intensive care nursing
- Medication error prevention
- Moral distress
- National standards of practice
- Patient safety
- Professional practice standards
- Quality improvement
- Research
- Safety fatigue
- Scope of practice
- Security/abduction precautions
- Standard of care
- System error prevention
DETERMINING WHAT CONTENT MEETS EACH SPECIALTY CODE

NCC “OTHER” CODES

You can only use these hours for baseline hours and not hours designated in the education plan assigned to a specific competency area. Baseline hours are listed as hours that are assigned to any competency area and appear at the bottom of your plan.

<table>
<thead>
<tr>
<th>NCC Pretest Participant</th>
<th>If you participated in the NCC sponsored pretest program</th>
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<tbody>
<tr>
<td>NCC Item Writer</td>
<td>If you are credentialed by NCC and have participated in the item writing program</td>
</tr>
<tr>
<td>NCC CE Reviewer or Author</td>
<td>If you reviewed or authored an NCC continuing education module</td>
</tr>
<tr>
<td>Presenter of a CE Course or Preceptor</td>
<td>Presenter of educational program can use the same amount of CE earned by the participants. Such CE presentation CANNOT be part of the individual's job responsibilities. If the activities was presented more than once you can only use the CE hours once. The maximum number of hours that can be earned for preceptorship activity is 10 hours per maintenance cycle. This is limited to preceptoring students in your same certification specialty area. Staff orientation is NOT considered a preceptor activity and cannot be used.</td>
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</tbody>
</table>
| Author of a Book Chapter or Journal Article | Rules for Using Publications for Maintenance  
  • The publication date of the article/book/module will determine its applicability for your current certification maintenance.  
  • You are limited to using one article, book authorship or service as an NCC continuing education reviewer or monograph author per certification maintenance cycle.  
  • Articles/books must be related to the certification specialty area.  
  • 5 contact hours will be awarded to those who have written a journal article or a chapter of a book.  
  • 15 contact hours will be awarded to those who are a primary or secondary author of a book. |