CBCN® Test Content Outline

Effective 2022

I. Care Continuum - 26%

- A. Breast health, screening, and early detection
 - 1. Issues related to special populations (culture, ethnicity, disability, elderly, sexual and gender minorities, healthcare disparities, male, pregnancy)
 - 2. Breast health
 - a. Breast anatomy
 - b. Hormonal influence
 - c. Breast development and changes
 - 3. Benign pathology
 - a. Anomalies (e.g., asymmetry, nipple deviation)
 - b. Conditions (e.g., mastodynia, fibroadenomas, infection, nipple discharge)
 - 4. Screening and early detection
 - a. Imaging modalities
 - b. Imaging results (e.g., Breast Imaging Reporting and Data System [BI-RADS], breast density)
 - c. Screening recommendations based on risk
 - 5. Elements of a clinical breast exam and lymph node examination
 - a. Abnormal physical findings
 - b. Education related to breast awareness
- B. Risk and predisposition assessment
 - 1. Risk assessment
 - a. Epidemiology (population based risk factors)
 - b. Breast cancer risk prediction models (e.g., Tyrer-Cuzick, Gail Model)
 - c. High-risk lesions (e.g., lobular carcinoma in situ [LCIS], atypical ductal hyperplasia [ADH])
 - d. Genetic testing
 - 2. Risk factors
 - a. Modifiable (e.g., lifestyle behaviors)
 - b. Non-modifiable (e.g., age, family history, prior radiation)
 - 3. Risk reduction
 - a. Interventions to modify risk (e.g., chemoprevention, prophylactic surgery, clinical trials)
 - b. Health promotion to reduce risk
- C. Patient navigation process
 - 1. Advocacy
 - 2. Barriers to care (e.g., financial, cognitive, language, transportation)
 - 3. Multidisciplinary collaboration
- D. Survivorship
 - 1. Familial risk assessment and implications for genetic counseling
 - 2. Survivorship care plan
 - 3. Physical issues
 - a. Bone health (e.g., fracture, bone density, bone modulating agents)
 - b. Breast/chest wall changes (e.g., cosmesis, skin changes, scarring, reconstruction complications)
 - c. Cardiopulmonary toxicity
 - d. Fatigue
 - e. Lymphedema
 - f. Neuropathy (e.g., peripheral, brachial, chest wall, breast)
 - g. Range of motion limitations
 - h. Sexual and reproductive issues (e.g., infertility, menopausal symptoms)

- i. Weight gain
- 4. Surveillance
 - a. Breast cancer screening (e.g., local recurrence, new primary)
 - b. Symptom-directed work-up
 - c. Physical examinations
 - d. Surveillance for subsequent malignancies

E. End-of-life care

- 1. Legal and ethical issues (e.g., advance directive, medical power of attorney, do-not-resuscitate order [DNR])
- 2. Philosophy of hospice care
- 3. End-of-life care principles (e.g., pathophysiology, symptom management, family and caregiver support, cultural variations, education)
- 4. Spirituality, grief, and bereavement

II. Diagnosis and Staging - 17%

- A. Process of carcinogenesis
- B. Diagnostic procedures and tests
 - 1. Imaging modalities
 - 2. Imaging results
 - 3. Biopsies (e.g., fine needle aspiration [FNA], core, surgical)
- C. Pathology
 - 1. Cellular (e.g., grade, histology)
 - 2. ER/PR receptor
 - 3. HER2 receptor
 - 4. Ki-67 (MIB or MIB-1) receptor
 - 5. Gene assay
 - 6. Prognostic features (e.g., lymphovascular invasion, extranodal extension)
- D. Staging criteria (AJCC)
 - 1. Clinical
 - 2. Pathologic
 - 3. Prognostic
 - 4. Additional studies (e.g., positron-emission tomography [PET], bone scan, computed tomography [CT] scan)

III. Treatment Modalities - 17%

- A. Surgery
 - 1. Treatment considerations (e.g., performance status, comorbidities)
 - 2. Breast (e.g., breast conservation, tumor localization, mastectomy)
 - 3. Axilla (e.g., sentinel lymph node biopsy, axillary lymph node dissection)
- B. Surgical reconstruction
 - 1. Autologous
 - 2. Implant
 - 3. Treatment considerations (e.g., delayed v. immediate, comorbidities, risk factors)
- C. Radiation therapy
 - 1. Treatment considerations (e.g., range of motion, wound healing, comorbidities, extent of disease)
 - 2. External beam
 - 3. Brachytherapy
- D. Systemic (e.g., hormonal, chemotherapy, targeted therapy)
 - 1. Treatment considerations (e.g., cardiac status, vascular access, bone health, fertility, comorbidities)

- 2. Neoadjuvant
- 3. Adjuvant
- 4. Metastatic
- E. Special treatment considerations for
 - 1. Triple negative disease
 - 2. HER2 receptor status
 - 3. Inflammatory breast cancer
 - 4. Paget disease
 - 5. Phyllodes tumor (malignant and benign)
 - 6. Targetable mutations (e.g., PI3K, PD-L1)
 - 7. Androgen receptor status
- F. Treatment consideration for special populations (e.g., culture, ethnicity, disability, elderly, healthcare disparities, male, young adult, fertility preservation)

IV. Nursing Practice - 30%

- A. Symptom management (assessment, risk factors, pathophysiology, prevention, education, and management)
 - 1. Surgical
 - a. Wound complications
 - b. Decreased range of motion
 - c. Cording
 - d. Lymphedema
 - e. Pain
 - f. Neurosensory changes
 - 2. Medical
 - a. Alopecia
 - b. Fatigue
 - c. Gastrointestinal complications
 - d. Myelosupression
 - e. Menopausal symptoms (e.g., vaginal dryness, hot flashes)
 - f. Cardiovascular complications
 - g. Peripheral neuropathy
 - h. Cognitive dysfunction
 - i. Skin and nail changes
 - j. Pulmonary complications
 - k. Musculoskeletal issues
 - I. Pain
 - m. Psychiatric concerns (e.g., anxiety, depression, sleep disturbances)
 - 3. Radiation
 - a. Skin and tissue changes
 - b. Pain
 - c. Fatigue
 - d. Range of motion
 - e. Cardiopulmonary issues
 - f. Lymphedema
 - g. Infection
 - h. Esophagitis
 - 4. Complementary and integrative modalities
 - a. Exercise (e.g., walking)

- b. Nutrition
- c. Rehabilitation (e.g., physical therapy, occupational therapy)
- d. Movement therapy (e.g., yoga, Tai Chi, aquatic therapy)
- e. Other modalities (herbs and supplements, mindfulness, hypnosis, massage, chiropractic treatment, acupuncture)
- B. Oncologic emergencies (anaphylaxis, extravasation, hypercalcemia, hypersensitivity, pleural effusion, sepsis, spinal cord compression, thromboembolic events)
- C. Palliative care
- D. Professional performance
 - 1. Professional practice guidelines (e.g., Oncology Nursing Society [ONS], National Comprehensive Cancer Network Clinical Practice Guidelines in Oncology [NCCN Guidelines[®]], American Society of Clinical Oncology [ASCO], American College of Radiology [ACRO])
 - 2. Teaching and learning principles (e.g., adult learning)
 - 3. Community needs assessment, program planning, and health promotion
 - 4. Accreditation standards (e.g., National Accreditation Program for Breast Centers)
 - 5. Advocacy and legislative issues impacting breast care delivery and access
 - 6. Patient resources (e.g., local, state, federal, institutional, and internet)
 - 7. Clinical trials (e.g., phases, accessing trials, elements of informed consent)
 - 8. Quality improvement process (e.g., evidence-based practice)
 - 9. Regulatory requirements (e.g., mammography standards, compliance issues)

V. Psychosocial Dimensions of Care - 10%

- A. Influence of culture, spirituality, gender/gender identity, sexual preference, age and healthcare disparities on psychosocial response across the continuum of breast care
- B. Family dynamics
- C. Altered body image
- D. Reproductive and sexual health
- E. Emotional state (e.g., anxiety, depression, fear, grief, stress, survivorship guilt)
- F. Socioeconomic considerations related to screening, diagnosis, treatment, and follow up
- G. Coping strategies
 - 1. Patient
 - 2. Family/caregiver
 - 3. Healthcare provider
- H. Crisis management (e.g., domestic violence, suicidal ideation)
- I. Psychosocial assessment (e.g., related to spirituality, sexuality, distress, coping, family function, relationship role changes, and quality of life)
- J. Communication strategies and issues (e.g., active listening, clarification, language barriers)
- K. Financial issues (e.g., benefits, insurance, reimbursement)
- L. Social support