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

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Neonatal Nurse Practitioner

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.***

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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**.

HOW TO READ THE EDUCATION PLAN

- 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.

NNP Core Competency Area

Physical Assessment (Code 1)
*5 hours

General Assessment

- Maternal factors affecting the newborn
- Physical examination
- Diagnostic procedures & laboratory evaluation
- Gestational age assessment

Physiology and Pathophysiology (Code 2)
*20 hours

Disease Management

- Cardiac
- Respiratory
- Gastrointestinal (GI)
- Renal
- Hematopoietic
- Neurological
- Infectious diseases
- Endocrine
- Musculoskeletal
- Skin
- Genetics
- Head, ears, eyes, nose and throat
- Intrauterine drug exposure

General Management (Code 3)
*10 hours

- Developmental care
- Fluids and electrolytes
- Nutrition
- Thermoregulation
- Resuscitation and stabilization
- Family integration
- Discharge planning and follow up

Pharmacology (Code 4)
*10 hours

Pharmacology

- Drug therapies
- Pharmacokinetic principles

Professional Practice (Code 5)
*5 hours

Professional Practice

- Patient safety
- Ethical principles and theories
- Legal issues affecting neonatal intensive care nursing
- Professional practice standards
- Research

EDUCATION PLAN

CORE COMPETENCY AREA	YOUR SPECIALTY INDEX	CE HOURS REQUIRED
Physical Assessment (Code 1)	**7.69**	*Standard met*
Physiology and Pathophysiology (Code 2)	**7.16**	20 hours
General Management (Code 3)	**8.33**	*Standard met*
Pharmacology (Code 4)	**7.92**	*Standard met*
Professional Practice (Code 5)	**6.67**	5 hours

Your education plan

CORE COMPETENCY AREA	CE HOURS
Physiology and Pathophysiology (Code 2) **Missed keywords:** Cardiac, EENT, Endocrine, Genetics, GI, Hematopoietic, Infectious Diseases, Intrauterine drug exposure, Musculoskeletal, Neurological, Renal, Respiratory, Skin, Thermoregulation Physiology and Pathophysiology (Code 2) Self Assessment modules »	20 hours
Professional Practice (Code 5) **Missed keywords:** Ethical Principles and Theories, Patient Safety, Research Professinal Practice (Code 5) Self Assessment modules »	5 hours
15 Continuing Education hours in any of your content specific specialty areas	15 hours
Credit for taking this assessment (may be applied to your total required hours)	-5 hours
Total hours required	**35 hours**

*Number of CE hours required if you do not achieve a specialty index of 7.5 or more in the content area.

DETERMINING WHAT CONTENT MEETS EACH SPECIALTY CODE

Core Competency Area	Content Topic	Keywords	
Physical Assessment (Code 1) 1	***General Assessment*** • Maternal factors affecting the newborn • Physical examination • Diagnostic procedures & laboratory evaluation • Gestational age assessment	Apgar scoring Amniocentesis Auditory brainstem response testing Auscultation techniques Bag and mask ventilation Behavioral assessment Biophysical profile Brazelton examination Caput succedaneum Cephalohematoma Cerebrospinal fluid analysis Chest x-ray interpretation Clotting studies Delivery room emergencies Developmental assessment Diagnostic imaging Diagnostic procedures Diagnostic studies ECG findings and interpretation Echocardiogram evaluation EEG evaluation Effects of cesarean delivery Embryology	Gestational age assessment Heart sound evaluation Intrauterine growth restriction Laboratory evaluation Maternal factors affecting the newborn Maternal infant attachment Monitoring devices Muscle tone evaluation Neonatal reflexes Neurological assessment Newborn care Nonstress testing NRP Obstetric complications affecting the newborn Physical assessment Physical examination Physiologic monitoring Shunt studies S.T.A.B.L.E. X-ray interpretation of neonatal disease
Physiology and Pathophysiology (Code 2) 2	***Disease Management*** • Cardiac • Respiratory • Gastrointestinal (GI) • Renal • Hematopoietic • Neurological • Infectious diseases • Endocrine • Musculoskeletal • Skin • Genetics • Head, ears, eyes, nose and throat • Intrauterine drug exposure	AIDS and HIV infections Air leaks Airway anomalies Airway management Airway obstruction Alkalosis Alveolar-arterial oxygen gradient Anemia Anemia of prematurity Anencephaly Apnea Apnea monitors Apnea of prematurity Asphyxia Aspiration Bacterial disease Barotrauma Beckwith-Wiedemann syndrome Biliary atresia Bilirubin metabolism Birth injuries Bleeding disorders Blood gas interpretation Blood incompatibilities Bradycardia Brain development Bronchopulmonary dysplasia Bronze baby syndrome Cafe au lait spots	Calcium metabolism Cardiac Cardiac dysrhythmias Cardiac physiology Cerebral palsy Choanal atresia Chromosomal disorders Chronic lung disease Circadian rhythms Coagulation disorders Coarctation of the aorta Common skin disorders/conditions Complications from low birthweight Congenital abnormalities Congenital diaphragmatic hernia Congenital heart disease Congenital lobar emphysema Congestive heart failure Conjunctivitis Copper deficiency Craniosynostosis Crigler Najjar syndrome Cyanosis Dandy Walker cyst Diagnostic procedures Dialysis

DETERMINING WHAT CONTENT MEETS EACH SPECIALTY CODE

Core Competency Area	Content Topic	Keywords
Physiology and Pathophysiology (Code 2) 2	***Disease Management*** • Cardiac • Respiratory • Gastrointestinal (GI) • Renal • Hematopoietic • Neurological • Infectious diseases • Endocrine • Musculoskeletal • Skin • Genetics • Head, ears, eyes, nose and throat • Intrauterine drug exposure	Diaper dermatitis Disseminated intravascular coagulation Ebstein's anomaly ECMO EENT Encephalopathy Endocardial cushion defect Endocrine Endocrine physiology Endotracheal suctioning Enzyme deficiency syndromes Esophageal atresia Essential fatty acid deficiency Failure to thrive Fractures Gastroesophageal reflux Genetics Genitourinary physiology GI HEENT Hematologic physiology Hematopoietic Hemolytic disease Hemorrhage Hepatitis High frequency ventilators Hydrocephalus Hydronephrosis Hyperbilirubinemia Hyperglycemia Hyperinsulinemia Hyperkalemia Hypernatremia Hypertension Hyperviscosity Hypoglycemia Hypokalemia Hypospadias Hypotension Hypoxia Hypoxic ischemic encephalopathy In utero exposure to alcohol Inborn errors of metabolism Infant of diabetic mother Infections Infectious diseases Insulin management Intestinal atresia Intrauterine drug exposure Intraventricular hemorrhage Iron deficiency syndromes Jitteriness and tremors Kernicterus Laboratory evaluation Language development Mechanical ventilation Meconium aspiration syndrome Meconium ileus Meconium plug Meconium staining Meningitis Mental retardation Mineral derangements Multifactorial disorders Multiple gestation Musculoskeletal Necrotizing enterocolitis Needle aspiration Neonatal abstinence syndrome Neural tube defects Neurodevelopmental disabilities Neurologic disorders Neurologic physiology Neurological Omphalocele Oxygen administration Oxygenation disturbances Pain assessment Pain management Patent ductus arteriosus Patterns of inheritance Peritoneal dialysis Periventricular leukomalacia Persistent pulmonary hypertension of the newborn Phototherapy Pneumonia Pneumothorax Polycythemia Prematurity Pulmonary edema Pulmonary hemorrhage Pulmonary hypoplasia Pulmonary interstitial emphysema Pulse oximetry Pyloric stenosis Renal Renal abnormalities and disease Renal physiology Respiratory Respiratory distress Respiratory distress syndrome Respiratory physiology Retinal damage Retinopathy of prematurity

DETERMINING WHAT CONTENT MEETS EACH SPECIALTY CODE

Core Competency Area	Content Topic	Keywords	
Physiology and Pathophysiology (Code 2) 2	***Disease Management*** • Cardiac • Respiratory • Gastrointestinal (GI) • Renal • Hematopoietic • Neurological • Infectious diseases • Endocrine • Musculoskeletal • Skin • Genetics • Head, ears, eyes, nose and throat • Intrauterine drug exposure	Rubella Seizure Sepsis Sexual transmitted infections Shock Shunts Skin Subdural hemorrhage Sudden infant death syndrome Surfactant deficiency Surfactant replacement therapy Thrombocytopenia Thrombosis Thyroid disorders	Tracheoesophagel fistula Transfusion therapy Transient tachypnea of the newborn Transposition of the vessels Tricuspid atresia Urea cycle disorders Urinary tract infections Ventilator management Ventricular septal defect Ventricular tachycardia
General Management (Code 3) 3	***General Management*** • Developmental care • Fluids and electrolytes • Nutrition • Thermoregulation • Resuscitation • Family integration	Anticipatory grief Breast milk Breastfeeding Calorie expenditure Catheter management Central line management Chest tube management Comfort care Cultural practice Dehydration Developmental care Discharge planning End of life care Energy needs Enteral feedings Family centered care Family crisis care Family integration Feeding problems Feeding techniques Fluid and electrolyte management Fluids and electrolytes Follow up care Formula composition	Grief resolution Incubator management Infection control Infections Insensible water loss IV therapy Kangaroo care Mechanisms of heat loss Neonatal transport Newborn screening Noise reduction strategies Nutrient requirements Nutrition management Optimal positioning of the neonate Oral feedings Palliative care Parent teaching Perinatal loss Resuscitation and stabilization Sleep states Sleep wake patterns Sodium metabolism Supportive care Thermoregulation Total parental nutrition
Pharmacology (Code 4) 4	***Pharmacology*** • Drug therapies • Pharmacokinetic principles	Anticoagulation therapy Corticosteriod therapy Drug therapies: antimicrobial,cardiovascular, respiratory, GI, biologics renal Drugs in breastfeeding Immunizations Maternal drug use Nitric oxide therapy Pharmacokinetic principles Pharmacological principles Placenta transfer	

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DETERMINING WHAT CONTENT MEETS EACH SPECIALTY CODE

Core Competency Area	Content Topic	Keywords
Professional Practice (Code 5) 5	*Professional Practice* • Patient safety • Ethical principles and theories • Legal issues affecting neonatal intensive care nursing • Professional practice standards • Research	CE poster sessions (6 posters equal 1 hour) Communication Evidence based practice Ethical principles and theories Legal issues affecting neonatal intensive care nursing Patient safety Professional practice standards Quality improvement Research

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.

NCC Pretest Participant	21	If you participated in the NCC sponsored pretest program
NCC Item Writer	22	If you are credentialed by NCC and have participated in the item writing program
NCC CE Reviewer or Author	23	If you reviewed or authored an NCC continuing education module
Presenter of a CE Course or Preceptor	24	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.
Author of a Book Chapter or Journal Article	25	**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.