

TASKS ADDRESSING PHYSIOLOGICAL NEEDS OF PERIANESTHESIA PATIENTS	KNOWLEDGE REQUIRED TO MEET <u>PHYSIOLOGICAL</u> NEEDS
Represents 57% of CPAN Exam and 50% of CAPA Exam	
<p>Assess, diagnose, plan, intervene, and evaluate in order to promote:</p> <ul style="list-style-type: none"> stability of the respiratory system stability of the cardiovascular and peripheral vascular systems stability of the neurological system stability of the musculoskeletal system stability of the gastrointestinal system stability of the renal system stability of the integumentary system stability of the endocrine system stability of the genito-urological and reproductive systems stability of the hematologic and immune systems stability of the ophthalmological system/ otorhinolaryngology stability of fluid and electrolyte levels maintenance of normothermia <p>An appropriate medication regimen (including, but not limited to, minimal interruption of normal medication regimen and preemptive interventions)</p> <p>Physiological comfort (including, but not limited to, relief from pain, shivering, nausea and vomiting; and appropriate positioning)</p> <p>A therapeutic environment (including, but not limited to, minimal interruption of normal regimen and preemptive interventions)</p>	<ul style="list-style-type: none"> Nursing process Evidence-based practice Anatomy and physiology of body systems Growth and development across the lifespan Pathophysiology Normal and abnormal diagnostic values Acceptable deviations from normal physiologic states Comorbidities/potential complications Airway management Vital signs/hemodynamic monitoring Fluid and electrolyte management Thermoregulation Acute and chronic pain assessment and management Post-operative nausea and vomiting (PONV) and post-discharge nausea and vomiting (PDNV) assessment and management Physical assessment Positioning Pharmacodynamics/pharmacokinetics Pharmacological interventions Anesthesia techniques (general, regional, moderate sedation, monitored anesthesia care (MAC), total intravenous anesthesia (TIVA)) Anesthetic and reversal agents Stages of anesthesia Perianesthesia Continuum of Care (preadmission, day of surgery/procedure, Phase I, Phase 2, extended observation) NEW Surgical and procedural interventions American Society Anesthesiologists (ASA) physical status classification system Normal and abnormal physical response to surgery/procedure/anesthesia Environmental factors affecting patient care (including, but not limited to, noise, temperature, air flow, latex, and equipment failure) Alternative and adjunctive treatment modalities Behavioral health considerations (including, but not limited to, addiction, autism spectrum disorders, depression, anxiety, bipolar disorder, and PTSD) Multidisciplinary collaboration and referral ACLS and PALS MHAUS guidelines/protocol ASPAN Standards Regulatory, legal, and ethical guidelines (for example, Patient Bill of Rights, advance directives, informed consent, HIPAA, and the Americans with Disabilities Act) Injury prevention Infection prevention and control

<p>TASKS ADDRESSING BEHAVIORAL HEALTH AND COGNITIVE NEEDS OF PERIANESTHESIA PATIENTS</p>	<p>KNOWLEDGE REQUIRED TO MEET BEHAVIORAL HEALTH AND COGNITIVE NEEDS</p>
<p align="center">Represents 18% of CPAN Exam and 21% of CAPA Exam</p>	
<p>Recognize and respect patient/family/significant other diversity (including, but not limited to, age, sex, race, religion, national origin, ethnicity, disability, marital status, sexual orientation, and gender identity)</p> <p>Provide and maintain patient privacy and confidentiality</p> <p>Provide psychosocial support to patient/family/significant other (for example, coping mechanisms, spiritual and emotional support)</p> <p>Assess patient/family/significant others ability to learn, learning style (for example, kinetic, auditory, visual), readiness to learn, and barriers to learning</p> <p>Provide patient/family/significant other education and evaluate understanding related to the perianesthesia/ procedural experience:</p> <ul style="list-style-type: none"> Admission procedures Advance directives, Patient Bill of Rights and informed consent Preparations for procedures/surgery Anesthesia expectations Post-anesthesia recovery settings Identifying, describing, and communicating pain perception/experience Postoperative pain control measures, including pharmacological and non-pharmacological interventions Discharge care (including, but not limited to, ambulation, diet, wound care, physical therapy, effects on sexuality, pain management, catheter care, equipment and medical devices, routine course, and/or potential complications) Medications (for example, when to discontinue or resume; interactions with prescriptions, over the counter medications, herbal supplements, alcohol, and/or illegal drugs) Impact of existing medical conditions (for example, diabetes, COPD, hypertension) on current surgery/procedure Measures to assist healing process (for example, appropriate adjunctive therapies, consults, and/ or referrals) Measures to prevent complications 	<p>Nursing process</p> <p>Evidence-based practice</p> <p>Growth and development across the lifespan</p> <p>Comorbidities/potential complications</p> <p>Acute and chronic pain assessment and management</p> <p>Pharmacological interventions</p> <p>Perianesthesia Continuum of Care (preadmission, day of surgery/procedure, Phase I, Phase 2, extended observation) NEW</p> <p>Surgical and procedural interventions</p> <p>Normal and abnormal physical response to surgery/ procedure/anesthesia</p> <p>Environmental factors affecting patient care (including, but not limited to, noise, temperature, air flow, latex, and equipment failure)</p> <p>Alternative and adjunctive treatment modalities</p> <p>Diversity (including but not limited to age, sex, race, religion, national origin, disability, marital status, sexual orientation, and gender identity)</p> <p>Psychosocial factors (including but not limited to coping styles, life situations, religious/spiritual, and culture)</p> <p>Teaching and learning theories</p> <p>Communication principles and techniques</p> <p>Behavioral health considerations (including, but not limited to, addiction, autism spectrum disorders, depression, anxiety, bipolar disorder, and PTSD)</p> <p>Multidisciplinary collaboration and referral</p> <p>ASPAN Standards</p> <p>Regulatory, legal, and ethical guidelines (for example, Patient Bill of Rights, advance directives, informed consent, HIPAA, and the Americans with Disabilities Act)</p> <p>Measures to maintain privacy and confidentiality</p>

TASKS ADDRESSING SAFETY NEEDS OF PERIANESTHESIA PATIENTS	KNOWLEDGE REQUIRED TO MEET SAFETY NEEDS
Represents 25% of CPAN Exam and 29% of CAPA Exam	
<p>Deliver, document, and communicate care based on accepted national standards of perianesthesia nursing practice and applicable laws, guidelines, and regulations</p> <p>Protect the patient from harm and take preventive measures related to:</p> <ul style="list-style-type: none"> immobility and/or positioning adverse environmental influences (including, but not limited to, latex and/or equipment failure) exposure to infectious diseases <p>Protect the patient from harm through the use of protective safety devices and equipment</p> <p>Facilitate patient access to appropriate resources and referrals (including, but not limited to, medical equipment, pharmaceutical care, spiritual services, nutritional education, physical/occupational therapy, case management/social services, and language services)</p> <p>Develop and implement effective multidisciplinary perianesthesia plan of care that addresses:</p> <ul style="list-style-type: none"> verbal and written instructions (including, but not limited to, preparations for procedures/surgery, potential complications, activity, diet, wound care, and post-discharge care) pain management medication reconciliation (including but not limited to, when to discontinue or resume; and interactions with prescriptions, over the counter medications, herbal supplements, alcohol, illicit drugs) existing medical conditions (including, but not limited to, diabetes, COPD, hypertension, and OSA) on the current surgery/procedure optimization of the healing process (including, but not limited to, nutrition, hydration, smoking cessation, and alternative therapies) prevention of infection measures to prevent complications the availability of resources for care in the home, including the presence of a responsible adult caregiver a safe home environment safe transport to the home or discharge care site <p>Perform post-discharge assessment (follow-up contact)</p>	<p>Nursing process</p> <p>Evidence-based practice</p> <p>Anatomy and physiology of body systems</p> <p>Growth and development across the lifespan</p> <p>Pathophysiology</p> <p>Normal and abnormal diagnostic values</p> <p>Acceptable deviations from normal physiologic states</p> <p>Comorbidities/potential complications</p> <p>Airway management</p> <p>Vital signs/hemodynamic monitoring</p> <p>Fluid and electrolyte management</p> <p>Thermoregulation</p> <p>Acute and chronic pain assessment and management</p> <p>Post-operative nausea and vomiting (PONV) and post-discharge nausea and vomiting (PDNV) assessment and management</p> <p>Physical assessment</p> <p>Positioning</p> <p>Pharmacodynamics/pharmacokinetics</p> <p>Pharmacological interventions</p> <p>Anesthesia techniques (general, regional, moderate sedation, monitored anesthesia care (MAC), total intravenous anesthesia (TIVA))</p> <p>Anesthetic and reversal agents</p> <p>Perianesthesia Continuum of Care (preadmission, day of surgery/procedure, Phase I, Phase 2, extended observation) NEW</p> <p>Surgical and procedural interventions</p> <p>American Society Anesthesiologists (ASA) physical status classification system</p> <p>Normal and abnormal physical response to surgery/procedure/anesthesia</p> <p>Environmental factors affecting patient care (including, but not limited to, noise, temperature, air flow, latex, and equipment failure)</p> <p>Alternative and adjunctive treatment modalities</p> <p>Discharge planning and criteria</p> <p>Diversity (including but not limited to age, sex, race, religion, national origin, disability, marital status, sexual orientation, and gender identity)</p> <p>Psychosocial factors (including but not limited to coping styles, life situations, religious/spiritual, and culture)</p> <p>Communication principles and techniques</p> <p>Behavioral health considerations (including, but not limited to, addiction, autism spectrum disorders, depression, anxiety, bipolar disorder, and PTSD)</p> <p>Multidisciplinary collaboration and referral</p> <p>ASPAN Standards</p> <p>Regulatory, legal, and ethical guidelines (for example, Patient Bill of Rights, advance directives, informed consent, HIPAA, and the Americans with Disabilities Act)</p> <p>Injury prevention</p> <p>Infection prevention and control</p> <p>Quality and risk management principles and guidelines</p>