

December 2025



ACHPN®

Candidate Handbook

Advanced Certified Hospice
and Palliative Nurse

The Hospice and Palliative Credentialing Center
400 Lydia Street, Suite 100, Carnegie, PA 15106
412.787.1057 | advancingexpertcare.org/hpcc

The Hospice and Palliative Credentialing Center (HPCC) provides specialty certification examinations for health care professionals: advanced practice registered nurses, registered nurses, pediatric registered nurses, licensed practical/vocational nurses, nursing assistants, and social workers. Information regarding the hospice and palliative registered nurse examination, testing policies and procedures and an application form can be found in this Candidate Handbook. Candidate Handbooks for other HPCC certification examinations are also available. HPCC certification exams are computer-based and offered at PSI Test Center locations and by live remote proctoring. Deadlines are firm and strictly enforced.

All inquiries regarding the certification program should be addressed to HPCC.

HPCC
400 Lydia Street, Suite 100
Carnegie, PA 15106
Telephone: 412-787-1057
Fax: 412-787-9305
Email: hpcc@gohpcc.org
Website: advancingexpertcare.org/certification

PSI is the professional testing company contracted by HPCC to assist in the development, administration, scoring and analysis of the HPCC certification examinations.

All inquiries regarding the application process, test administration and the reporting of scores should be addressed to PSI.

PSI
18000 W. 105th St.
Olathe, KS 66061-7543
Telephone: (Toll free) 833-256-1422
Fax: 913-895-4650
Email: ampExamServices@psionline.com
Website: <https://test-takers.psiexams.com/hpcc>

Your signature on the application certifies that you have read all portions of this Candidate Handbook and application.

HPCC Mission Statement

The Hospice and Palliative Credentialing Center advances expert care in serious illness through state-of-the art certification of continuing competency in hospice and palliative care.

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SECTION 1: GENERAL INFORMATION

ABOUT HPCC

The Hospice and Palliative Credentialing Center (HPCC) was incorporated in 1993 as the National Board for Certification of Hospice Nurses (NBCHN) to develop a program of certification for the specialty practice of hospice and palliative nursing. The HPCC has been affiliated with the Hospice Nurses Association (HNA), now Hospice and Palliative Nurses Association (HPNA), since its inception. The first certification examination for Hospice Nurses was given in 1994, and in 1998, initial certificants were required to renew their credential for the first time. HPCC has expanded its mission and now provides specialty exams for several members of the interdisciplinary team: advanced practice registered nurses, registered nurses, pediatric registered nurses, licensed practical/vocational nurses, nursing assistants, and social workers. Currently, there are over 14,000 individuals certified by HPCC.

The HPCC Board of Directors is a competency-based Board that oversees all aspects of the certification program. The composition of the Board includes Certified representatives from HPCC certification programs, which may include a certified nurse in a nursing specialty other than hospice and palliative care, and a public Board member. HPCC is responsible for the development, administration, and maintenance of the examinations in conjunction with a testing agency, PSI.

INCLUSIVE LANGUAGE IN EXAMINATIONS

Members of the HPCC Examination Development Committees (EDCs) regularly review pretest and exam questions for inclusive language to ensure they are free from stereotypes, overt and subtle discrimination, and negative messages.

The Exam Development Committee members use the HPCC DEIB Style Guide for inclusive language, which includes avoiding the use of gender-specific pronouns and other non-inclusive language. Ongoing review of language included in exam items enables HPCC to offer examinations that are culturally aware and inclusive. HPCC remains committed to allowing all stakeholders to participate fully in the certification process and develop a strong sense of community within its portfolio of certification programs.

CERTIFICATION

HPCC endorses the concept of voluntary, periodic certification for all hospice and palliative advanced practice registered nurses, registered nurses, pediatric registered nurses, licensed practical vocational nurses, nursing assistants, and social workers. It focuses specifically on the individual and is an indication of current competence in a specialized area of practice. Certification in hospice and palliative care is highly valued and provides formal recognition of competence.

The purpose of certification is to promote the delivery of comprehensive hospice and palliative care through the certification of qualified hospice and palliative professionals by:

1. Recognizing formally those individuals who meet the eligibility requirements for and pass an HPCC certification examination or complete the recertification process.
2. Encouraging continuing personal and professional growth in the practice of hospice and palliative care.
3. Establishing and measuring the level of knowledge required for certification in hospice and palliative care.
4. Providing a national standard of requisite knowledge required for certification, thereby assisting the employer, public, and members of the health professions in the assessment of hospice and palliative care.

TESTING AGENCY

PSI is the professional testing agency contracted by HPCC to assist in the development, administration, scoring, and analysis of the HPCC certification examinations. PSI is a leader in the testing industry, offering certification, licensing, talent assessment, and academic solutions.

HPCC PROCESSING AGREEMENT

HPCC agrees to process the application, subject to your agreement to the following terms and conditions:

1. To be bound by and comply with HPCC rules relating to eligibility, certification, renewal of certification, or reactivation, including, but not limited to, payment of applicable fees, demonstration of educational and experiential requirements, satisfaction of annual maintenance and recertification requirements, compliance with the HPCC Grounds for Sanctions and other standards, and compliance with all HPCC documentation and reporting requirements, as may be revised from time to time.
2. To hold HPCC harmless and to waive, release and exonerate HPCC, its officers, directors, employees, committee members, and agents from any claims that you may have against HPCC arising out of HPCC's review of your application, or eligibility for certification, renewal of certification, or reactivation, conduct of the examination, or issuance of a sanction or other decision.
3. To authorize HPCC to publish and/or release your certification status and any final or pending disciplinary decisions to state licensing boards or agencies, other healthcare organizations, professional associations, employers, or the public.
4. To only provide information in your application to HPCC that is true and accurate to the best of your knowledge.
5. To the denial of eligibility, revocation, or other limitation of your certification, if granted, should any statement made on this application or hereafter supplied to HPCC be found to be false, inaccurate, or if you violate any of the standards, rules, or regulations of HPCC.

EXAMINATION ADMINISTRATION

The HPCC examination is delivered by computer at approximately 500 PSI Test Centers geographically located throughout the United States and by Live Remote Proctoring. The examination is administered by appointment only. Candidates are scheduled on a first-come, first-served basis. Testers will be unable to schedule their exam on 12/25.

LIVE REMOTE PROCTORING (LRP)

HPCC offers candidates the option to take an examination through Live Remote Proctoring (LRP). LRP is a secure way for a candidate to take an examination outside of a test center, utilizing technology to connect with a live professional proctor. All exam windows and application deadlines remain the same for exams administered at a testing center or via LRP. For additional information and specifications for LRP, visit www.advancingexpertcare.org/hpcc/live-remote-proctoring. It is the tester's responsibility to ensure their computer meets the specified requirements to take the exam and that they can access their HPCC account.

If the tester is unable to take the LRP exam due to an account lockout that occurred outside of HPCC business hours, they must complete a transfer form, which will allow them to reschedule within the same testing window (if seats are available). If seats are unavailable, they must complete a transfer form to be transferred to the next testing window.

EXAMINATION WINDOWS AND APPLICATION DEADLINES

Transfer, reTEST, and Accommodation applications will not be processed until the testing window opens. Refer to the chart below to determine when to submit.

Testing Window Deadlines

Testing Window	Opens	Closes
March	December 1	February 15
June	March 1	May 15
September	June 1	August 15
December	September 1	November 15

Exam applications must be completed online. Incomplete applications will not be processed. PSI & HPCC make every effort to notify candidates of missing or incomplete documents. Failure to provide requested documents in a timely fashion will decrease the time frame available for a candidate to test in that window.

TEST CENTER LOCATIONS

A current listing of approximately 500 Test Centers with specific address information can be viewed at www.psiexams.com/test-takers.

APPLYING FOR AN EXAMINATION

THE APPLICATION PROCESS

Candidates must submit an online application through HPCC. [Click here](#) for application instructions.

Refer to the HPNA, ALLIANCE, SWHPN MEMBERSHIP BENEFIT section for membership information.

1. Complete the registration by visiting www.advancingexpertcare.org/hpcc
2. Select the credential to view the requirements and to begin the online application.
3. Follow the directions on the screen to continue the application process.
4. Testers will automatically be moved to the PSI website to complete the application.
5. Once the application has been submitted, eligibility will be confirmed or denied.
 - If additional eligibility information is needed, testers will be notified via email by PSI.
6. Eligible testers will receive an email from PSI with instructions on how to schedule the exam.
7. Click on “Available Tests”, choose the exam, and click “Continue Booking”.
8. Testers may choose to test via a Test Center or LRP, and on which day and time.
 - The selected day/time is not confirmed until payment is submitted.
9. Follow the on-screen directions to schedule the exam. Candidates may also contact PSI at (833) 256-1422 for scheduling assistance.

Note: HPCC is unable to assist with scheduling. All exams are scheduled through PSI.

If the tester does not receive a confirmation email within four weeks, contact PSI at (833) 256-1422.

When contacting PSI, be prepared to confirm the date and time of the exam, and whether testing will be conducted via a test center or LRP. You will be asked to provide your HPNA ID number, which was provided on your confirmation notice.

Once an exam is scheduled, a confirmation email with the report date and time will be sent to the email address on file. It is the tester's responsibility to ensure the email address on file is correct and to contact PSI or HPCC if the confirmation notice is not received.

Testers are only allowed to take the exam as scheduled. Unscheduled testers (walk-ins) will not be allowed to test.

NAME CHANGES & DISCREPANCIES

It is the tester's responsibility to ensure the name on the confirmation email is the same as what is on the legal identification. If the name on the legal identification does not match the name on the registration email, the tester must contact HPCC via email hpsc@gohpcc.org **at least five business days before the scheduled exam date**. Once HPCC processes the updated information, a new confirmation email will be sent.

Testers who need a name change **less than five days before the scheduled exam** should call HPCC at (412) 787-1057 for further instructions.

Name change requests made less than 24 hours before an exam will not be processed in time for the tester to sit for the scheduled exam. Testers may request a transfer to the next testing window if they are unable to sit for the scheduled exam. Refer to the Transfers section for detailed information. **Failure to notify HPCC of an edit or change to your name will result in the tester being unable to sit for the exam.**

EXAMINATION APPOINTMENT CHANGES

Testers may change from a test center to the LRP exam or change from LRP to a test center as many times as needed, as long as it is completed at least 24 hours before the start of the scheduled exam.

Testers may reschedule an exam in the same testing window at no charge by calling PSI at (833) 256- 1422 or rescheduling online at <https://test-takers.psiexams.com/hpcc>.

i.e., A tester has a test time for LRP at 10:00 AM on 06/04. On 06/02, the tester changed the LRP test appointment to 06/20 at 2 PM. On 06/15, the tester decides to take the exam at a test site, and the tester is permitted to change the test appointment again.

If your Examination is Scheduled on:	You must Contact PSI to Reschedule the Exam by 3:00 p.m. by the Previous:
Monday	Saturday
Tuesday	Sunday
Wednesday	Monday
Thursday	Tuesday
Friday	Wednesday
Saturday	Thursday
Sunday	Friday

Testers who miss a scheduled exam and do not cancel at least 24 hours before the start of the exam must submit a transfer application

Note: Refer to the Transfers section for detailed information.

REQUESTS FOR EXAMINATION ACCOMMODATIONS

HPCC and PSI comply with the Americans with Disabilities Act (ADA) and are committed to ensuring that individuals with disabilities or impairments are not deprived of the opportunity to take the examination solely because of a disability or impairment, as required and defined by the relevant provisions of the law.

Testing arrangements will be considered for these individuals, provided that an accommodation request is submitted to PSI by the application deadline and the request is approved.

To request accommodations, testers must complete the online [Test Accommodations Request](#) and submit the Documentation of Disability-Related Needs form. The form must be completed by an appropriately licensed professional. It may take up to 10 business days for the accommodation request to be reviewed and approved. Upon approval, testers will be sent a confirmation email and/or a call from PSI with information pertaining to scheduling the exam.

All questions regarding exam accommodations must be sent to the PSI Accommodations Department at (800) 367-1565 ext. 6750. HPCC does not review or approve accommodation requests.

Note: Accommodation forms are located in the back of the handbook.

HPNA, ALLIANCE, SWHPN MEMBERSHIP BENEFIT

Persons applying for the certification exam who are current HPNA, Social Work Hospice and Palliative Care Network (SWHPN), or National Alliance for Care at Home (ALLIANCE) members are eligible to receive membership pricing.

Please have any applicable memberships or HPNA Employer Partner Program agreements activated **before** submitting your exam application. All HPCC examination pricing is calculated at the time of submission.

Membership	Details
HPNA Members	HPNA member pricing will be automatically calculated at checkout. HPNA membership must be purchased at least two business days before applying for the exam to receive membership pricing.
SWHPN Members*	Find the member discount code within SWHPN's online member portal. Please contact info@swhpn.org for assistance.
National Alliance for Care at Home Members*	Utilize the following link to log in and obtain a member pricing code: https://allianceforcareathome.org/education/social-work-exam-certification

**Note: Membership pricing is only valid for the APHSW-C® certification. Special pricing cannot be combined with other membership-related pricing offers. All special pricing is subject to administrative review.*

FORFEITURE OF FEE

Examination fees may be forfeited for any tester who:

- Fails to cancel an examination less than 24 hours before the scheduled testing session;
- Fails to report for an examination appointment;
- Arrives less than 15 minutes **BEFORE** the start of the examination;
- Fails to provide proper identification that matches the confirmation email;
- Fails to submit the required audit documentation (if selected for audit);
- Fails to ensure access to their HPCC account after a prior account lockout;
- Fails to run the compatibility check and/or does not run the secure browser check before attempting to test via LRP;
- Fails to launch the LRP exam within 30 minutes of the appointed testing time;
- Fails to submit a transfer request for a missed exam within 30 days after the close of the testing window.

Testers who have forfeited the exam fee may submit a transfer application **within 30 days of the close of the original testing window** and will be required to pay a transfer fee.

Note: Refer to the Transfer section for further information.

AUDITS

To ensure the integrity of eligibility requirements, HPCC randomly audits a percentage of applications each year. Audit letters will be sent from PSI, and the date by which documentation must be received will be specified. Audit documents must be sent to PSI via email at ampexamservices@psionline.com or by mail to PSI at 18000 W. 105th Street, Olathe, KS 66061.

Questions about audited applications may be directed to PSI at (833) 256-1422. Once the audit is approved, PSI will send a confirmation email with instructions for scheduling the exam. The audit process may take up to 14 business days after receipt of all audit documents.

ACHPN® Candidates must provide the following information:

- A current, active copy of their professional license (license must have an expiration date **after** the selected testing window)
- A completed Practice Hours Verification form
- A completed Candidate Checklist form
- A copy of their academic transcript (transcripts may be unofficial copies)

Note: Incomplete applications will result in a delay in the ability to test.

APHSW-C® Candidates who are selected for audit must provide the following information:

- A copy of their academic transcript that shows they were granted a BSW or MSW degree by a CSWE accredited school or international equivalent. Transcripts may be unofficial copies (If applicable).
- A completed Practice Hours Verification Form (the form is included in the audit email sent from PSI)
- A copy of a current Social Worker License (if applicable)

CHPLN®, CHPN®, CHPNA®, and CHPPN® candidates who are selected for audit must provide the following information:

- A copy of your current nursing license issued in the United States, its territories, or the equivalent in Canada (if applicable)
- A completed Practice Hours Verification Form (the form is included in the audit email sent from PSI)

TRANSFERS

HPCC allows the transfer of Scheduled and Registered exams to the **next testing window only**. If a tester is unable to sit for a scheduled exam, the tester must cancel the exam at least 24 hours before the start of the exam by contacting PSI at (833) 256-1422.

Testers may transfer the scheduled exam or registration to the next testing window by completing a Transfer Application and submitting it to PSI at ampexamservices@psionline.com.

Transfer applications are only accepted during open application windows and may take up to 10 business days to be processed. Once processed, testers will receive an email with instructions on how to schedule their exam.

Testers who scheduled their exam, were absent, or unable to launch their exam via LRP, are eligible to transfer to the next testing window (only) by submitting a transfer application and must pay a \$110 transfer fee. Transfer forms submitted outside an open testing window will be processed once the window opens.

Testers who transfer an application to a different window, schedule an exam, and are absent **forfeit the exam fee**. Once processed, PSI will send a confirmation email with instructions on how to schedule the exam once the form is processed.

SCHEDULED EXAMS

Testers who scheduled their exam have 30 days from the close of the testing window in which they were scheduled to submit a transfer application. They must indicate they are transferring a scheduled exam. Further instructions are located on the transfer form. Once processed, PSI will send a confirmation email with instructions on how to schedule the test.

REGISTERED FOR AN EXAM - TRANSFER TO THE NEXT TESTING WINDOW

Testers who registered for an HPCC exam in the current testing window but have not scheduled or paid the exam fee may transfer their registration to the next testing window.

Testers must submit a transfer application to PSI indicating they are transferring a registration. Once processed, PSI will send a confirmation email with instructions on how to schedule the test.

LRP TESTERS-LOCKED OUT OF YOUR ACCOUNT

Testers scheduled for an LRP exam outside of HPCC’s regular office hours and are unable to log into their account will be permitted to reschedule the exam during the current testing window (if dates are available) or transfer to the next test window (only) at no charge.

Testers are allowed to reschedule or transfer due to a lockout once and are responsible for ensuring they have access to their HPCC account before the day of the exam. Testers who are locked out of the exam on the day of testing must submit a transfer form to PSI at ampexamservices@psionline.com, indicating they are transferring due to a lockout. Once processed, PSI will send a confirmation email with instructions on how to schedule the test.

Testers who are locked out of their account on subsequent attempts to test forfeit their exam fees.

Note: HPCC office hours are Monday-Friday from 8:00 am to 4:00 pm ET.

REFUNDS

Due to the nature of computer-based testing and the ability to reschedule an appointment within testing windows, refund requests are not allowed, and tester substitutions are not permitted.

ON THE DAY OF THE EXAMINATION (TEST CENTER)

On the day of the examination, report to the Test Center 15 minutes before the scheduled testing time. Look for the signs indicating the PSI Test Center check-in.

To gain admission to the Test Center, testers must present **two forms of identification**. Testers are required to sign a roster for verification of identity. The primary form **must meet the following requirements**:

- Match the name on the confirmation email;
- Be current and government-issued (expired)
- Identification will not be accepted);
- Include a photograph.

Note: Temporary identifications are not accepted

Examples of valid primary forms of identification are:

- Driver’s license with a photograph
- State identification card with photograph
- Passport with photograph
- Military identification card with photograph
(cannot be used for LRP testing)
- Green card
- Alien registration
- Permanent resident card
- National identification card

Employment, student, temporary, and social security cards are **NOT** acceptable as primary identification. They may be used as secondary identification if they include the tester’s name and signature. Testers are prohibited from misrepresenting their identities or falsifying information to obtain admission to the Test Center.

At the testing carrel, testers will be prompted to enter their unique identification number. The photograph taken before beginning the examination will remain on-screen throughout the examination session and will be printed on the score report.

ON THE DAY OF THE EXAMINATION (LIVE REMOTE PROCTORING)

When testing via Live Remote Proctoring (LRP), testers have the option to test in their home, office, or testing environment at the assigned exam time.

Testers must ensure the computer used for testing is compatible, meets all system requirements, and can download the secure testing browser. Failure to complete the following requirements may result in a forfeited exam and fees. Click [PSI - Online Proctoring Experience](#) to watch a video regarding the LRP experience.

Refer to the LRP-PRE Check & LRP CHECK-IN for detailed information on the LRP process.

LRP PRE-CHECK

Before launching the LRP exam, testers must complete the following steps. Testers who fail to meet the requirements below will be unable to test and may result in the forfeiture of exam fees.

1. Testers must access their HPCC account. If unable to access their HPCC account, testers must contact HPCC during regular business hours at (412) 787-1057 or email hpsc@gohpcc.org to request a password reset.
 - Failure to launch the exam within 30 minutes of the scheduled start will result in the inability to test. Testers must submit a transfer application and will be required to pay a transfer fee. Refer to the transfers section for further information.
2. The testing computer must meet all system requirements. [Click here](#) to view the system requirements.
3. A compatibility check must be run on the testing computer. [Click here](#) to run the Online Proctoring Compatibility Check.
4. The testing computer must complete the tutorial test.
5. Testers must launch the tutorial test found in the confirmation email received from PSI.
 - Testers have three opportunities to complete the exam tutorial and run the secure browser system check. The tutorial must be run at least 2 ½ hours before the start of the exam. **If the computer does not pass the tutorial test, it cannot be used for the LRP exam.**
6. Testers using an employer or organization-issued device must have administrative access to the computer and/or the ability to turn off restricted programs and firewalls to allow for remote access.
7. Testers must have a camera that is capable of completing a 360-degree room scan of the testing environment and work area.

LRP CHECK-IN

1. On the day of the exam, testers must log in to their account by clicking <https://test-takers.psiexams.com/hpcc>. Testers should arrive at least 30 minutes before the scheduled exam to begin the check in process.
2. Testers have 30 minutes after the scheduled appointment to launch the exam.
 - If unable to complete the check-in process during this time frame, the tester will not be able to test that day. Testers who are scheduled to test outside of HPCC's business hours and are locked out of their account may reschedule their exam. Refer to the **LRP - Locked Out** section under Transfer for further information.
3. Testers must show their government-issued ID once logged into the secure browser (see the full list of acceptable identification under the **On the Day of your Examination - Test Center** section).
 - The ID must match the name on the confirmation email. Any discrepancies between the two will result in the inability to test. Refer to the **Name Change** section for further information.

Testers are required to complete a room scan to ensure the testing room meets the requirements. Refer to the **Examination Restrictions** section for a list of prohibited items.

Note: Testers who are unable to launch the exam may be eligible to transfer to the next testing window. Refer to the Transfer section for detailed information.

SECURITY

PSI administration and security standards are designed to ensure all testers are provided the same opportunity to demonstrate their abilities. The Test Center and LRP are continuously monitored by audio and video surveillance equipment for security purposes.

The following security procedures apply during the examination:

- Examinations are proprietary.
- Cameras, notes, tape recorders, pagers, or cellular phones are not allowed in the testing room.
 - Possession of a cellular phone or other electronic devices is prohibited and will result in dismissal from the examination.
- Calculators are not allowed.
- Guests, visitors, or family members are not allowed in the testing room or reception areas.
- Test takers must undergo a metal detection wand inspection as part of the security check.

PERSONAL BELONGINGS

No personal items, valuables, or weapons are allowed in the Testing Center. Wallets and keys are permitted, but coats must be left outside the testing room. Testers will be provided a soft locker to store wallets and/or keys.

Testers will not have access to these items until after the examination is completed. The following items are not allowed in the testing room, except for those securely locked in the soft locker.

- Bracelets
- Hats/Headwear*
- Keys
- Oversized hoodies
- Wallets
- Watches
- Earplugs or ear pods

*Religious apparel is described as articles of clothing or headwear, worn as part of the doctrinal or traditional observance of the religious faith. Examples of religious apparel may include, but are not limited to the following items:

1. Habit: a garment worn by members of Christian religious orders (normally a tunic worn with scapular and cowl, hood, or veil).
2. Hijab: a head, face, or body covering worn by Muslim women, which may range from a head covering or scarf to a full burqa (burka) covering the entire body.
3. Kippah (or Yarmulke): a rounded skullcap worn by Jewish men and women.
4. Kufi (or Doppa): a rounded skullcap worn by Muslim men.
5. Turban: a headdress consisting of a long scarf wound around the head, worn by people of various cultures, often commonly worn by Muslims and Sikhs.

While this is certainly not a comprehensive list of religious apparel and headwear, please keep in mind that it may not always be immediately clear whether an item of clothing is considered religious apparel. There may be types of religious apparel that do not appear on this list.

Once testers have placed all items in the soft locker, they will be asked to pull out their pockets to ensure they are empty. Testers who are unable to fit all personal items into the soft locker will not be permitted to test and will forfeit their exam fee.

If personal items are observed in the testing room after the examination starts, the tester will be dismissed, and the exam and fee will be forfeited.

EXAMINATION RESTRICTIONS - TEST CENTER

- Pencils will be provided during check-in.
- Testers will be provided with one piece of scratch paper at a time to use during the examination. Testers must return the scratch paper to the supervisor after testing.
- Testers are prohibited from taking notes or removing documents from the test center.
- Testers are prohibited from asking questions regarding the content of the exam.
- Eating, drinking, or smoking is prohibited during testing.
- You may take a break whenever you wish, but you will not be allowed additional time to make up for time lost during breaks.
- Testers may request disposable earplugs from the test center staff.

EXAMINATION RESTRICTIONS - LRP

- Testers may have one pencil;
- Testers may have 1 blank sheet of paper;
 - *Testers will be asked to show the proctor both sides of the paper.*
- Testers must tear up the paper in view of the proctor at the end of the exam;
- Electronic devices are prohibited in the testing area;
- Testers are prohibited from asking questions regarding the content of the exam;
- Eating, drinking, or smoking is prohibited during testing;
- Guests, visitors, or family members are not allowed in the testing area;
- Candidates will be given the opportunity for a 10-minute break midway through the examination.
- If you take a break, you will be required to rescan the testing area, and you will not be allowed additional time to make up for time lost during breaks.

MISCONDUCT

If the tester engages in any of the following conduct during testing, the exam will be shut off, score reports will not be generated, and the exam and fees will be forfeited.

Examples of misconduct are:

- Creating a disturbance, being abusive, or otherwise uncooperative;
- Display and/or use electronic communications equipment such as cellular phones;
- Talk aloud to yourself or another person;
- Give or receive help or are suspected of doing so;
- Leaving the Test Center during testing;
- Attempt to record examination questions or take notes;
- Attempt to take the examination for someone else;
- Are observed with personal belongings, notes, books, or other aids.

COPYRIGHTED EXAMINATION QUESTIONS

All examination questions are the copyrighted property of HPCC. It is forbidden under federal copyright law to copy, reproduce, record, distribute, or display these examination questions by any means, in whole or in part. Doing so may subject you to severe civil and criminal penalties.

EXAM FUNCTIONALITY CHECK

Before attempting the timed examination, testers will be allowed to complete a practice question. The time used for the practice question will not be counted as part of the testing time. When ready, testers may quit the practice session and begin the timed examination.

TIMED EXAMINATION

Following the practice questions, testers will begin the timed examination. Instructions for taking the examination are provided on-screen. The image on the right is a sample of what the computer screen will look like.



A countdown digital clock displaying the amount of time allowed for the exam is available on the lower right-hand side of the screen. This feature may be turned off during testing.

The multiple-choice questions will appear one at a time, and the question number can be found in the lower right portion of the screen. Testers will select the response to the question by either entering the letter of the option they think is correct (A, B, C, or D) or clicking on the option using the mouse. To change your answer, enter a different option by entering in the letter in the response box or by clicking on the option using the mouse. You may change your answer as many times as you wish during the examination time limit.

Click on the forward arrow (>) in the lower right portion of the screen to move on to the next question. To review a previous question, click the backward arrow (<) or use the left arrow key to move backward through the examination.

Testers will answer a predetermined number of questions. The examination questions do not become increasingly more difficult based on answers to previous questions. Answer selections may be changed as many times as necessary during the allotted time.

Testers may skip a question or bookmark questions for later review. Click in the blank square to the right of the Time button. Click on the double arrows (>>) to advance to the next unanswered or bookmarked question on the examination. To identify all unanswered and bookmarked questions, repeatedly click on the double arrows (>>). When the examination is completed, the number of questions answered is reported. If all questions have not been answered and there is time remaining, return to the examination and answer those questions. Be sure to answer each question before ending the examination. **There is no penalty for guessing.**

CANDIDATE COMMENTS

Testers may skip a question or bookmark questions for later review. **Click the Comment button** located to the left of the Time button. This will open a dialogue box to enter comments. Testers will not receive individual replies about the content of questions, nor will they be permitted to review the questions after completing the examination. At the conclusion of the examination, testers are asked to complete a brief survey.

INCLEMENT WEATHER, EMERGENCY, OR TECHNICAL PROBLEMS

HPCC and PSI will determine whether inclement weather or unforeseen emergencies warrant the cancellation, and subsequent rescheduling, of an examination. If the Test Center can open, examinations will usually not be rescheduled.

To view a list of test center closures on the day of a scheduled exam, visit www.psonline.com/openings. PSI will make every attempt possible to administer the exams as scheduled; however, should an exam at a test center be canceled, scheduled testers will receive a notification regarding rescheduling.

If power to a Test Center is temporarily interrupted during testing, the exam will be restarted. Responses provided up to the point of interruption will be intact, but the remaining questions will be scrambled.

Testers who experience technical issues during an LRP exam must contact PSI Technical Support at (844) 267-1017. PSI may ask to access your computer remotely to help resolve technical problems. **HPCC is unable to assist with LRP technical issues.**

REPORT OF RESULTS

Upon completion of an exam at a testing center, testers will be asked to complete a brief survey and evaluation. Upon completion of an exam, testers will receive a message on the screen indicating “pass” or “fail.” PSI will email the score report within 24 hours.

Testers may access their score reports by logging into their PSI account at <https://test-takers.psiexams.com/hpcc/auth/loginlogging>. Click on the “Manage” tab, and then “Check for Score Report”. Testers may also request that their score report be sent to them by calling PSI at (833) 256-1422.

Score reports will indicate a “pass” or “fail.” Additional detail is provided as the percent correct in each major content category. The overall test score is reported as a scaled score, which is statistically derived from the raw score. The total score determines whether a tester passes or fails; it is reported as a scaled score ranging between 200 and 800.

The methodology used to set the minimum passing score for each examination is the Angoff method, applied during the performance of a Passing Point Study by a panel of content experts. The experts evaluated each question on the respective examination to determine how many correct answers are necessary to demonstrate the knowledge and skills required for the designation. The tester's ability to pass the examination depends on the knowledge and skill displayed during the examination, not on the performance of other testers.

The minimum scaled score needed to pass the examinations has been set at 500 scaled score units. The reason for reporting scaled scores is that different forms (or versions) of the examinations may vary in difficulty. As new forms of the examinations are introduced each year, a certain number of questions in each content area are replaced. These changes may cause one form of the examination to be slightly easier or harder than another form. To adjust for these differences in difficulty, a procedure called "equating" is used. The goal of equating is to ensure fairness to all testers.

In the equating process, the minimum raw score (number of correctly answered questions) required to equal the scaled passing score of 500 is statistically adjusted (or equated). For instance, if an examination is determined to be more difficult than the previous form of the examination, then the minimum raw passing score required to pass will be slightly lower than the original raw passing score. If the examination is easier than the previous form of the examination, then the minimum raw score will be higher. Equating helps to ensure that the scaled passing score of 500 represents the same level of competence, no matter which form of an examination the tester takes.

In addition to the tester's total scaled score and the scaled score required to pass, the percent correct is reported for the major categories on the content outline. Content categorical information is provided to assist testers in identifying areas of relative strength and weakness; however, passing or failing the examination is based only on the tester's total scaled score.

DUPLICATE SCORE REPORT

If you did not receive your score report, you may access it by clicking <https://test-takers.psiexams.com/hpcc/auth/loginlogging> to log into your PSI account.

Once logged in, click on the "Manage" tab and then "Check for Score Report".

You can also contact PSI at 833.256.1422 and request your score report to be emailed to you.

Note: It can take up to 24 hours after an exam is complete for the score report to become available.

CONFIDENTIALITY

Individual examination scores are released ONLY to the individual tester. **Testing results will not be given over the phone or via facsimile.**

RECOGNITION OF CERTIFICATION

Eligible testers who pass an HPCC certification examination are eligible to use the respective registered designation after their names.

- Advanced Certified Hospice and Palliative Nurse Examination: ACHPN®
- Advanced Palliative Hospice Social Worker Certified Examination: APHSW-C®
- Certified Hospice and Palliative Licensed Nurse Examination: CHPLN®
- Certified Hospice and Palliative Nurse Examination: CHPN®
- Certified Hospice and Palliative Nursing Assistant Examination: CHPNA®
- Certified Hospice and Palliative Pediatric Nurse Examination: CHPPN®

Each certification expires after a period of four years unless it is renewed. A registry of certified hospice and palliative certificants will be maintained by HPCC and may be used for:

- 1) employer, accrediting body, or public verification of an individual's credential;
- 2) publication;
- 3) special mailings or other activities.

RENEWAL OF CERTIFICATION

Attaining certification is an indication of a well-defined body of knowledge. Renewal of the certification is required every four years to maintain certified status. Initial certification or renewal of certification is valid for four years.

It is the certificant's responsibility to apply for renewal by the required application deadline, available [here](#). HPCC attempts to provide certificants with renewal notices, but failure to receive a notice does not relieve the certificant from the responsibility to apply for renewal by the application deadline. Certificants who do not renew before the expiration date of their credential will not be able to use the credential after that date.

Refer to **Section 2** of this handbook for specific information regarding renewal of certification.

ETHICAL CODE

HPCC has a responsibility to ensure the integrity of all processes and products of its certification programs to the public, the professionals, the employers, and its certificants. Therefore, HPCC considers the Hospice and Palliative Nurses Association (HPNA) Code of Ethics and the Code of Ethics of the National Association of Social Workers as the essential ethical frameworks for honoring human dignity and professional accountability for conduct.

HPCC upholds the high standards for credentialing agencies established by two national accreditation organizations, the Accreditation Board for Specialty Nursing Certification (ABSNC) and the National Commission for Certifying Agencies (NCCA).

Each HPCC certificant is expected to demonstrate a professional commitment to safe, ethical, and evidence-based care within hospice and palliative care in compliance with applicable laws and rules.

REPORTING SUSPECTED ETHICAL VIOLATION POLICY

Any member of the public can report a suspected ethical violation against an HPCC certificant. Alleged violations of certification rules by candidates and certificants require investigation and disciplinary action as appropriate, including reporting to appropriate authorities.

Common examples of violations include:

- Falsification of eligibility information
- Fraud
- Misrepresentation of holding the credential
- Cheating on the examination

If you suspect an individual has violated the HPCC ethical policy, you should report it to HPCC. Reports are kept confidential and may be reported anonymously.

Please provide as much information as possible so HPCC can conduct a thorough review of the suspected violation of the individual.

To report suspected misconduct, leave a voice message at (412) 787-1057 or email hpcc@gohpcc.org.

MISUSE OF CERTIFICATION CREDENTIALS

Please be advised that once certified, the designated credential may only be used by the certified individual during the four years designated on the certificate.

Failure to successfully recertify requires the individual to **stop using the credential immediately** after the credential has expired. Any other use, or use of the HPCC Trademark without permission from the HPCC Board of Directors, is fraudulent.

HPCC thoroughly investigates all reports of an individual or corporation fraudulently using an HPCC credential and/or any other HPCC trademarks. If proof is obtained that an unauthorized individual or corporation has used the credential or trademark, HPCC will notify the appropriate individual with documented proof and state that HPCC has no record of the individual's or corporation's authorization to use the credential or trademark. Immediate remediation will be requested of the appropriate individual. If corrective actions are not completed and fraudulent use continues after 30 days, a letter will be sent by the Director of Credentialing to the appropriate individual's employer.

Continued fraudulent use after 45 days of the first notification will be reported to nursing boards and/or published for professional or consumer notification at the discretion of the HPCC Board of Directors.

Failure to meet these standards may result in revocation. HPCC may deny, suspend, or revoke any individual's certification for due cause through disciplinary action.

GROUNDINGS FOR DISCIPLINARY ACTION

The following conditions or behaviors by applicants or certificants constitute grounds for disciplinary action by HPCC.

1. Ineligibility for certification, regardless of when the ineligibility is discovered.
2. Any violation of an HPCC rule or procedure, as may be revised from time to time, and any failure to provide information required or requested by HPCC, or to update (within thirty days) information previously provided to HPCC, including but not limited to, any failure to report to HPCC promptly an action, complaint, or charge that relates to rules 6-8 of these grounds for disciplinary action.
3. Unauthorized possession of, use of, distribution of, or access to:
 - HPCC examinations
 - Certificates
 - Logo of HPCC
 - Abbreviations related thereto
 - Any other HPCC documents and materials, including but not limited to misrepresentation of self, professional practice, or HPCC certification status, before or following the grant of certification by HPCC, if any.
4. Any examination irregularity, including but not limited to copying answers, permitting another to copy answers, disrupting the conduct of an examination, falsifying information or identification, education, or credentials, or providing and/or receiving unauthorized advice about examination content before, during, or following the examination. (Note: HPCC may refuse to release an examination score pending resolution of an examination irregularity.)
5. Obtaining or attempting to obtain certification or renewal of certification for oneself or another by a false or misleading statement, failure to make the required statement, fraud, or deceit in any communication to HPCC.
6. Gross or repeated negligence, incompetence, or malpractice in professional work that impairs competent professional performance or poses a substantial risk to patient health and safety.
7. Limitation, sanction, revocation, or suspension by a health care organization, professional organization, or other private or governmental body, relating to nursing practice, public health, safety, or nursing certification.
8. Any conviction of a felony or misdemeanor relating to nursing practice and/or public health and safety. An individual convicted of a felony related to nursing practice and/or public health and safety shall be ineligible to apply for HPCC certification or renewal of certification for a period of three (3) years from the exhaustion of appeals.

DUE PROCESS RELATED TO DISCIPLINARY ACTION

Procedures for disciplinary action will be coordinated by the CEO and national office staff in the following order.

1. Initial Evaluation by President
2. Disciplinary Review Committee
3. Disciplinary Hearing Committee
4. Appeals Committee Committee members are selected from the current or past HPCC Board of Directors when a disciplinary action is warranted. The selection of committee members when needed allows the selection of members who would not present as a conflict of interest.

REVOCACTION OF CERTIFICATION

Admittance to the examination will be denied or certification will be revoked for any of the following reasons:

1. Falsification of an application or documentation provided with the application.
2. Failure to pay the required fee.
3. Revocation or expiration of current nursing license.
4. Misrepresentation, misuse, or fraudulent use of the HPCC credential.
5. Unauthorized possession of, use of, distribution of, or access to HPCC exams.
6. Any examination irregularity, including but not limited to copying answers, permitting another to copy answers, disrupting the conduct of an examination, falsifying information or identification, education or credentials, or providing and/or receiving unauthorized advice about exam content before, during, or following the examination.
7. Gross repeated negligence, incompetence, or malpractice in professional work.
8. Limitation, sanction, revocation, or suspension by a health care organization, professional organization, or other private or governmental body, relating to nursing practice, public health or safety, or nursing certification.
9. Any conviction of a felony or misdemeanor relating to nursing practice and/or public health and safety.

HPCC employs its vendor (PSI) to conduct data forensics on HPCC examinations. In addition, PSI conducts additional security measures, including web crawling, to secure HPCC examinations.

QUESTIONS AND APPEALS

HPCC provides an opportunity for testers to question any aspect of the certification program. Testers may call HPCC at (412) 787-1057 or send an email to hpcc@gohpcc.org for any questions.

In addition, HPCC has an appeals policy to provide a review mechanism for challenging an adverse decision, such as the denial of eligibility for the examination or revocation of certification.

It is the responsibility of the individual to initiate the appeal process by written request to the HPCC President within 30 calendar days of the circumstance leading to the appeal.

HPCC President
c/o HPCC Chief Executive Officer
400 Lydia Street, Suite 100
Carnegie, PA 15106

RE-EXAMINATION

Unsuccessful testers may repeat the certification exam provided they meet HPCC's eligibility criteria at the time they apply for re-examination.

Testers who do not pass the HPCC certification examination may reapply by submitting a new application during an open testing window. Unlimited testing is allowed for unsuccessful testers.

reTEST ASSURED PROGRAM

Testers who are unsuccessful on the initial exam may utilize the reTEST Assured program, which allows a tester to sit for the same exam again for \$135.00.

Testers may choose one of the next three test windows to retake the exam.

To Apply:

1. Complete the reTEST Application (in the back of this handbook) and email the form to PSI at ampexamservices@psionline.com.
2. reTEST applications received after the testing window deadline or outside the three test windows following the initial exam will not be processed.
3. Once PSI processes the reTEST form, testers will receive a notification from PSI with instructions regarding scheduling and payment for the exam.
 - Applications will only be processed during open testing windows. Refer to the testing window schedule to determine when to submit the reTEST form.

Note: It may take up to 10 business days for PSI to process reTEST applications.

Please complete the form that is associated with your profession. Those working in the nursing field will complete the Nurse form, and Social workers will complete the APHSW-C® form.

- [HPCC Nurse reTEST Assured Form](#)
- [HPCC APHSW-C® reTEST Assured Form](#)

Testers may only use the reTEST program once after an unsuccessful attempt. Testers who do not pass the exam after using the reTEST program must submit an initial application and fee to sit for the same exam again.

Testers may not apply for the reTEST program before the initial examination.

CERTIFICATION EXAM SCHEDULE

Testing Window Deadlines

Testing Window	Opens	Closes
March	December 1	February 15
June	March 1	May 15
September	June 1	August 15
December	September 1	November 15

NON-DISCRIMINATION STATEMENT

HPCC does not discriminate on the basis of race/ethnicity, religion, gender, gender identity, or expression, sexual orientation, national origin, age, marital status, disability, or any other protected status in any of our programs, activities, or employment practices.

Exam Contacts

Subject	Phone	Email	Website
Accommodations	(800) 367-1565 ext. 6750		Test Accommodations Request
Applying for an exam	(412) 787-1057	hpcc@gohpcc.org	HPCC
Employer Partner Program (EPP)	(412) 282-8206	eppartnership@hpna.org	About EPP EPP Application
Exam Information	"PSI: (833) 256-1422 HPCC: (412) 787-1057"	hpcc@gohpcc.org	Certification Information
Exam Vouchers (Purchased through EPP)	(412) 282-8206	eppartnership@hpna.org	
Exam Vouchers (Purchased through PSI)	(833) 256-1422		PSI Exam Vouchers
HPAR Application Audits	(412) 787-1057	hpcc@gohpcc.org	HPAR
HPCC (Certification)	(412) 787-1057	hpcc@gohpcc.org	HPCC
HPCC Account Access	(412) 787-1057	hpcc@gohpcc.org	HPCC Account Page
HPNA (Membership)	(412) 787-9301	info@hpna.org	HPNA
Initial Exam Application Audits	"PSI: (833) 256-1422 HPCC: (412) 787-1057"	hpcc@gohpcc.org	PSI Exam Application
Live Remote Proctoring (LRP) Tech Support	(844) 267-1017		PSI Web Delivery - Online Proctored
LRP Account Access	(412) 787-1057	hpcc@gohpcc.org	LRP Exam Login Page
LRP Secure Browser System Requirements	(855) 414-7953		Online Proctoring Compatibility Check
Name change	(412) 787-1057	hpcc@gohpcc.org	
National Alliance for Care at Home	(571) 317-7176		Social Work Exam & Certification
Online Proctoring Compatibility Check	(844) 267-1017		LRP Compatibility Check
PSI	(833) 256-1422	certificationcs@psionline.com	PSI
PSI Exam Tech Support	(833) 256-1422		PSI Test Taker Support
PSI Test Center Regulations	(833) 256-1422		PSI Test Center Regulations
Scheduling/Rescheduling an Exam	"PSI: (833) 256-1422 HPCC: (412) 787-1057"	examschedule@psionline.com	PSI Exam Application
Situational Judgment Exercise (SJE) Purchasing	"PSI: (866) 589-3088 HPCC: (412) 787-1057"	portalsupport@psionline.com	SJE Purchasing
SJE Tech Support	"PSI: (866) 589-3088 HPCC: (412) 787-1057"	portalsupport@psionline.com	
Social Work Hospice & Palliative Care Network (SWHPN)	(412) 850-3375	info@swhpn.org	SWPHN

SECTION 2: CERTIFICATION EXAMINATION FOR HOSPICE AND PALLIATIVE ADVANCED PRACTICE REGISTERED NURSES

ACCREDITATION OF THE CERTIFICATION EXAMINATION

The HPCC Advanced Certified Hospice and Palliative Nurse (ACHPN®) exam has fulfilled the accreditation requirements of the Accreditation Board for Specialty Nursing Certification (ABSNC). ABSNC grants accreditation through a process of peer review and determination that a specialty nursing certification organization has the essential components and meets the high standards established by ABSNC. More information about accreditation can be found at www.advancingexpertcare.org/hpcc.

CMS (Centers for Medicare & Medicaid Services) has added the Hospice and Palliative Credentialing Center (HPCC) to the list of recognized national certifying bodies for NPs and CNSs at the advanced practice level.

Note: Because of state-to-state variations, we advise APRN potential applicants to check with their state board of nursing and the Centers for Medicare and Medicaid Services (CMS) to determine requirements for licensure and billing prior to exam application.

EXAMINATION

The Certification Examination for the Hospice and Palliative Advanced Practice Registered Nurses consists of 175 multiple choice items, of which 150 have equal weight for scoring. The examination includes 25 nonscored “pretest” or “trial” items that are interspersed throughout the examination. Performance on the pretest questions does not affect your score. The examination presents each question with four response alternatives (A, B, C, D). One of those represents the best response. You will be permitted three and one-half hours to complete this examination. Candidates achieving a passing score on this examination will be awarded the **Advanced Certified Hospice and Palliative Nurse (ACHPN®)** credential.

HPCC, with the advice and assistance of PSI, prepares the examinations. Individuals with expertise in hospice and palliative nursing assistant practice write the questions and review them for relevancy, consistency, accuracy, and appropriateness.

DEFINITION OF HOSPICE AND PALLIATIVE CARE

Hospice and palliative care is the provision of care for the patient with serious illness and their family with the emphasis on their physical, psychosocial, emotional and spiritual needs. This is accomplished in collaboration with an interdisciplinary team in diverse settings including: inpatient, home, or residential hospice; acute care hospitals or palliative care units; long-term care facilities; rehabilitation facilities; home settings; ambulatory or outpatient palliative care primary care or specialty clinics; veterans’ facilities; correctional facilities; homeless shelters; and mental health settings.

Hospice and palliative interdisciplinary team members serve in a variety of roles including: expert clinicians, educators, researchers, administrators, consultants, case managers, program developers/coordinators, and/or policymakers.

Moreover, hospice and palliative care includes holistic assessment of the patient and family, offering information to allow more informed decision-making, meticulous pain and symptom management, determination and optimization of functional status, and support of coping patterns.

ELIGIBILITY REQUIREMENTS

To be eligible for the ACHPN® Examination, an applicant must fulfill the following requirements before submission of an application:

- Hold a current, active APRN license or APRN certification in the United States, its territories, or the equivalent in Canada.
- Completion of an accredited graduate, postgraduate, or doctoral Nurse Practitioner (NP) or Clinical Nurse Specialist (CNS) educational program from a U.S. school or Canadian province NP or CNS educational programs approved by the Canadian Council of Registered Nurse Regulators (CCRNRR).
- An official or unofficial academic record/transcript showing graduate degree and date conferred is required as part of the application process. The transcript must demonstrate the key elements of APRN preparation which includes completion of three separate comprehensive graduate-level courses in advanced pathophysiology, advanced health assessment, and advanced pharmacology as well as a clinical practicum of at least 500 hours.
- Is functioning as an NP or CNS with hospice and palliative advanced nursing practice of 500 hours in the most recent 12 months or 1,000 hours in the most recent 24 months before applying for the exam.

EXAMINATION FEES

All exam fees remain the same for taking an examination at a Test Center or by live remote proctoring.

APPLICATION SUBMISSION REQUIREMENTS

All ACHPN® applications are audited by PSI and HPCC. Failure to provide the following documents or submitting incomplete forms will result in a delay in your application.

1. A current copy of the state APRN license that clearly shows the expiration date (certificates are not accepted as proof of certification).
2. Practice Hours Verification Form.
3. Candidate Checklist
4. A copy (official or unofficial) of the academic record/ transcript showing the graduate degree and date conferred is required as part of the application process. The transcript must demonstrate the key elements of APRN preparation, which include completion of three separate comprehensive graduate-level courses in advanced pathophysiology, advanced health assessment, and advanced pharmacology, as well as a clinical practicum of at least 500 hours.

Candidates may upload the required documents during the registration process or may email them to PSI at ampexamservices@psionline.com. Applications that do not include the submission requirements will be considered incomplete and will not be approved for scheduling.

Note: It may take 10-14 business days for ACHPN® applications to be reviewed and approved.

INITIAL CERTIFICATION

- Non-Member Fee \$515.00
- Member Fee* \$355.00*

**See HPNA, ALLIANCE, SWHPN Membership Benefit for detailed information.*

To secure the selected testing date, fees must be paid at the time of scheduling. Only online payments using the following credit cards are accepted: Visa, MasterCard, Discover, or American Express.

TRANSFER SCHEDULED EXAM

Flat Fee \$110.00

Refer to the Transfers section for detailed information.

RETEST ASSURED

Flat Fee \$135.00

**Refer to the reTEST Assured Program section for detailed information.*

RENEWAL OR REACTIVATION OF CERTIFICATION RENEWAL

The Advanced Certified Hospice and Palliative Nurse certificant (Nurse Practitioner or Clinical Nurse Specialist) must submit the Advanced Certified Hospice and Palliative Nurse Hospice and Palliative Accrual for Recertification (ACHPN® HPAR) application for renewal of certification. The ACHPN® HPAR may be submitted at any time during the final year of certification. The ACHPN® HPAR requires renewal of certification by completion of the Situational Judgment Exercise, fulfilling practice hour requirements, and accumulating the required points through various professional development activities.

REACTIVATION

Candidates who miss the deadline for recertification and are within three years of the expiration date must reactivate their expired credentials using the ACHPN® HPAR process. **Testing to reactivate within three years of expiration is not allowed.** To reactivate, you must contact the National Office at (412) 787-1057 or send an email to hpcc@gohpcc.org with your intent to reactivate.

To reactivate a certification that has expired for three years or more, candidates must sit for the exam. For more information, visit www.advancingexpertcare.org/hpcc/recertification/how-to-recertify-achpn/.

RENEWAL/REACTIVATION FEES

HPAR application fees may be reduced if renewal is completed two months before your expiration date.

	Renewal Fee (Early Bird) <i>Renewal through ACHPN® HPAR only</i>	Renewal Fee (Standard)	Reactivation Fee
Non-Member	\$480.00	\$590.00	\$750.00
Member*	\$320.00	\$430.00	\$590.00

**Refer to the HPNA, ALLIANCE, SWHPN Membership Benefit section for detailed information.*

RECEIPTS

Exam receipts come from PSI. You may click <https://test-takers.psiexams.com/hpcc> to access your account and print a receipt. After entering your login information, select “manage” and then “print confirmation” to print off the order summary.

Receipts may be requested by emailing PSI at ampexamsservices@psionline.com, or calling (833) 256-1422.

EXAMINATION CONTENT

To begin your preparation in an informed and organized manner, you should know what to expect from the actual examination in terms of the content. Information regarding the content of the examination is presented in this handbook. The content outline will give you a general impression of the examination and, with closer inspection, can give you specific study direction by revealing the relative importance given to each category on the examination.

The content of the examination is directly linked to a national job analysis completed in 2021 that identified the activities performed by hospice and palliative advanced practice registered nurses. Only those activities that were judged by hospice and palliative advanced practice registered nurses to be important to practice for a nurse engaged in advanced practice hospice and palliative care are included on the examination content outline. Each question on the examination is linked to the examination content outline and task statements.

The HPCC advanced practice registered nurse certification examination requires the ability to apply the nursing process (i.e., assess, plan, intervene, and evaluate) at the advanced practice level in helping patients and their families (defined as including all persons identified by the patient) toward the goal of maintaining optimal functioning and quality of life within the limits of the disease process. The examination includes questions distributed across four domains of practice as shown in the detailed content outline that follows.

DETAILED CONTENT OUTLINE INFORMATION

The Detailed Content Outline (DCO) and task statements provide information that MAY be tested. Each task listed for a given content area is not tested on any one form of the examination. Rather, these tasks serve as a representative sample of critical knowledge and skills identified in the job analysis.

DRUG NAMES

Generic drug names are used throughout the examination except in individual situations as determined by the examination development committee.

DETAILED CONTENT OUTLINE

1. Assessment and Data Collection

44 Questions

- A. Medical history and review of systems
- B. Physical examination
- C. Functional assessment
- D. Psychosocial and spiritual assessment
- E. Standardized assessment and prognostic tools
- F. Signs and symptoms of serious illness
- G. Advance care planning
- H. Disease progression and prognostication
- I. Signs of imminent death
- J. Unique needs of specific populations

2. Intervention and Management

32 Questions

- A. Diagnostic tests and procedures
- B. Pharmacologic therapies
- C. Non-pharmacologic interventions
- D. Complementary and alternative interventions
- E. Disease process and plan of care
- F. Hospice and palliative care emergencies
- G. Palliative sedation
- H. Life support devices

3. Education and Communication

36 Questions

- A. Age-appropriate teaching methods
- B. Communication theory and principles within the context of hospice and palliative care
- C. Strategies to overcome communication barriers
- D. Cultural and spiritual competence
- E. Grief, loss, and bereavement

4. Professionalism and Practice

38 Questions

- A. Principles of biomedical ethics
- B. Professional boundaries
- C. Scope of practice
- D. Opioid stewardship
- E. National hospice and palliative care standards and guidelines
- F. Self-care (burnout, compassion fatigue, moral distress)
- G. Clinical decision making
- H. Continuous quality improvement
- I. Hospice criteria
- J. Professional development

TASK STATEMENTS

1. Nursing Process in Caring for Patients and Families

A. Assessment

1. Conduct a comprehensive patient assessment in the context of serious illness including functional and nutritional status, patient/caregiver knowledge, emotions and coping strategies, support systems, resources/needs, and environmental factors
2. Collect patient information (e.g., medical & psychosocial history, spiritual & cultural preferences, comprehensive review of systems, advance care planning documents, medical decisionmakers)
3. Perform a systems-based physical examination
4. Identify past and present goals of care and expectations in the context of health beliefs, values, and practices

B. Diagnosis and Planning

1. Formulate and prioritize differential diagnoses and apply findings to develop the plan of care
2. Identify expected outcomes in relation to patient/caregiver goals of care, prognosis, and the improvement of quality of life
3. Develop interventions based on patient/caregiver values, goals, and preferences, prognosis, level of care, available resources, and expected risks and benefits
4. Establish safe, multimodal pain management plans

C. Intervention and Evaluation

1. Collaborate with the interdisciplinary team to develop, implement, evaluate, and modify the plan of care based on changing functional status, illness trajectory, care system, and patient/caregiver goals
2. Communicate diagnoses, progression of disease, expected prognosis, and plan of care with the patient/caregiver and interdisciplinary

health care team

3. Recommend strategies to address psychosocial needs (minimize caregiver burden, patient/caregiver vulnerability, coping, bereavement, emotional and spiritual health)
4. Implement pharmacologic therapies and facilitate nonpharmacologic interventions (e.g., palliative surgery, procedures, radiation, counseling, psychological therapy, complementary and alternative interventions)
5. Facilitate advance care planning and care coordination with inpatient and outpatient teams

2. Biomedical, Clinical, and Psychosocial-Behavioral Knowledge

A. Disease Process

1. Explain the disease process and understand evidence-based palliative management for serious diseases and conditions
2. Recognize hospice and palliative care emergencies (e.g., spinal cord compression, hemorrhage, seizures, superior vena cava syndrome) and provide evidence-based management
3. Identify signs and symptoms associated with serious diseases and conditions and provide evidence-based management
4. Understand psychosocial, emotional, and spiritual needs and provide evidence-based management
5. Determine prognosis using evidence-based tools and comprehensive patient assessment

B. Serious Illness, Loss, Dying, Grief, and Bereavement

1. Identify common tenets of major religions and cultures in relation to serious illness, dying, and death
2. Address issues related to loss, bereavement, grief, and mourning in the context of culture, ethnicity, race, and other factors

TASK STATEMENTS

3. Education and Communication

A. Education (Patients, Caregivers, Health Care Communities)

1. Establish a therapeutic environment and apply age appropriate teaching methods tailored to the needs of the patient, family, and other caregivers
2. Develop, implement, and evaluate formal and informal education

B. Communication

1. Analyze own communication (verbal and nonverbal) and possible interpretations
2. Recognize and incorporate cultural differences when discussing hospice and palliative care
3. Create an environment for effective communication and demonstrate therapeutic presence while maintaining professional boundaries
4. Use appropriate principles and techniques to communicate serious news
5. Initiate and facilitate conferences among patient, family, caregivers, medical and interdisciplinary team members, and other key stakeholders

4. Professionalism

A. Ethics

1. Promote principles of biomedical ethics
2. Address ethical issues related to withholding or withdrawing treatment, and non-beneficial treatment
3. Address ethical issues related to palliative sedation, medical aid in dying, and suicide

B. Scope, Standards and Guidelines

1. Identify and resolve issues related to scope of practice and practice protocols
2. Incorporate national hospice and palliative standards and guidelines into advanced nursing practice

C. Leadership and Self-Development

1. Share knowledge through publications, presentations, precepting, and mentoring
2. Educate local, state, and national organizations, institutions, and individuals about hospice and palliative care (e.g., differentiate palliative care from hospice care)
3. Develop practice guidelines to advance hospice and palliative care
4. Identify and address burnout, compassion fatigue, and moral distress in self and others

5. Systems Issues

A. Resource Access, Utilization, and Continuum of Care

1. Advocate for timely access to palliative care and hospice services
2. Develop hospice and palliative care programs and services
3. Identify potential barriers and resources to promote continuity of care across all settings
4. Maintain current knowledge of trends in legislation, policy, health care delivery, and reimbursement as they impact hospice and palliative care

B. Quality Improvement

1. Participate in continuous quality improvement
2. Provide value-based, quality care

SAMPLE QUESTIONS

1. A patient has lung cancer with multiple sites of bone metastases. They have decided not to have any more treatment. They are not yet eligible for hospice but is seen by the palliative care service. They present to the clinic today reporting that they have been hearing voices in the last twenty four hours. An irregular heart rate is noticed during the physical exam that was not present at their clinic visit two weeks ago. Which lab test does the advanced practice nurse order?

- A. albumin level
- B. calcium level
- C. phosphorus
- D. platelet count

2. A patient's adult child tells the advanced practice registered nurse that they do not wish their parent to die in their home because of their 11-year-old child, who is very attached to their grandparent. The adult child tells the nurse that if their parent must come to their home, they will have to send their young child to live with relatives so they won't be traumatized by the death. What is the nurse's best initial response to the adult child?

- A. Explore what the grandchild knows about the patient's condition and their fears about home death.
- B. Encourage the adult child to get grief counseling for their child.
- C. Counsel the adult child about children and grief behaviors.
- D. Talk with the patient about where they would like to go and follow their wishes.

3. A patient with a history of small cell lung cancer reports inability to move their right arm without experiencing deep, aching, shooting pain. The patient could not tolerate a physical examination of their neck, right supraclavicular area, right shoulder, or right axilla. Their right hand showed muscle atrophy typical of the C7-T1 distribution. The diagnosis is

- A. vertebral lesions.
- B. radiation fibrosis.
- C. post-thoracotomy pain syndrome.
- D. brachial plexus infiltration of tumor.

4. According to the SPIKES communication tool, the FIRST step when breaking bad news to a patient is

- A. reviewing the current situation.
- B. exploring what the patient already knows.
- C. creating a comfortable and private environment.
- D. asking how much information the patient wants to hear.

5. What symptom complex needs to be present for a patient with Alzheimer's disease to be considered to have a life expectancy of less than 6 months?

- A. new onset of fever
- B. needs help with dressing
- C. disoriented to time, place and person
- D. bedbound and incontinent

6. An APRN is using the Karnofsky Performance Scale (KPS) to assess a hospice patient with lung cancer. Death is not imminent, but the patient is dependent in all ADLs, is completely bedbound, and lives in a nursing home. The KPS score is

- A. 10.
- B. 30.
- C. 70.
- D. 90.

SAMPLE QUESTIONS

7. A patient with Acquired Immune Deficiency Syndrome (AIDS) is requesting hospice care. Which diagnostic test result supports the appropriateness of hospice care?

- A. CD4 count below 25 cells/mcL during a period free of acute illness
- B. Human Immunodeficiency Virus (HIV) viral load of
- C. <10,000 copies/ml
- D. persistent serum albumin <5.0 gm/dL
- E. serum creatinine level of 1.5 mg/dL

8. An APRN is asked to attend a family meeting at which discontinuation of life-prolonging therapies is being discussed. The patient is nonresponsive and, therefore, cannot participate. There is disagreement among the patient's children as to the best plan of care. There is no written advance directive. The APRN should

FIRST

- A. consult the hospital ethics committee.
- B. help the family reach a consensus on the plan of care.
- C. ascertain whether an oral advance directive was ever stated.
- D. acknowledge the patient's preferences cannot be considered because they were not written down.

9. A patient whose pain is well controlled with sustained release oxycodone 20 mg by mouth every 12 hours presents with new onset confusion. The advanced practice registered nurse recognizes that

- A. an intraspinal infusion of opioids is warranted.
- B. confusion attributable to opioids alone is uncommon.
- C. the opioid dosage should be lowered.
- D. opioid rotation is recommended.

10. A 65-year-old patient with end stage gastric cancer repeatedly verbalizes their desire to stop tube feedings. Their physician's refusal to comply with their decision is

- A. a violation of the patient's autonomy.
- B. an example of beneficence.
- C. mandated by the law.
- D. surrogate decision-making.

ANSWER KEY

QUESTION	ANSWER	CONTENT AREA
1	B	1B
2	A	1C
3	D	1A
4	C	3B
5	D	1E
6	B	1E
7	A	2A
8	C	4A
9	B	1B
10	A	4A

SUGGESTED REFERENCES

HPCC has prepared a list of references that may be helpful in preparing for the Certification Examination for Hospice and Palliative Advanced Practice Registered Nurses. The reference lists contain textbooks that include information of significance to hospice and palliative nursing practice. Inclusion of certain textbooks on the lists does not constitute an endorsement by HPCC of specific professional literature which, if used, will guarantee candidates successful passing of the certification examination. Test candidates are not required to purchase or review these resources. HPCC does not endorse specific resources and does not receive compensation from the sale or use of any resources.

To prepare for the examination, review the Detailed Content Outline and develop a study plan based on your individual knowledge strengths and weaknesses. It is good practice to use a current, general resource for overall review, and supplement with resources on specific topics to address your individual needs.

CONVERSION ITEMS

Conversion items use the Equianalgesic Opioid Dosing conversion table (Table 1-1) from the book McPherson, M. L. (2018) *Demystifying Opioid Conversion Calculations: A Guide for Effective Dosing*, (2nd Ed.). Bethesda, MD: American Society of Health-Systems Pharmacists.

The table is included in the items.

Primary Reference List

(Used for ACHPN® exam item validation)

Coats, H., and Ferrell, B. (Eds.) (2024). *Core Curriculum for the Hospice and Palliative APRN* (4th Ed.). Pittsburgh, PA: Hospice and Palliative Nurses Association.

Dahlin, CM., and Coyne, PJ. (Eds.) (2023). *Advanced Practice Palliative Nursing* (2nd Ed.). New York, NY: Oxford University Press.

Fast Facts and Concepts. <https://www.mypcnow.org/fast-facts/>

Ferrell, BR., and Paice, J. (Eds.) (2019). *Oxford Textbook of Palliative Nursing* (5th Ed.). New York, NY: Oxford University Press.

Paniagua, M. and Shega, JW. (Eds.) (2017). *Essentials (formerly known as UNIPAC) Essential Practices in Hospice and Palliative Medicine (5th Ed.) U1 Medical Care of People with Serious Illness; U2 Psychiatric, Psychological, and Spiritual Care; U3 Pain Assessment and Management; U4 Nonpain Symptom Management; U5 Communication and Teamwork; U6 Ethical and Legal Practice; U8 COPD, Heart Failure, and Renal Disease; U9 HIV, Dementia, and Neurological Conditions.* Chicago, IL: American Academy of Hospice and Palliative Medicine.

Quill, TE. et al. (2019). *Primer of Palliative Care* (7th Ed.). Chicago, IL: American Academy of Hospice and Palliative Medicine.

Secondary Reference List

Berger, A., and O'Neill, JF. (2022). *Principles & Practice of Palliative Care and Supportive Oncology* (5th Ed.). Waltham, MA: Wolters Kluwer Health.

CMS Medicare Hospice Center, <https://www.cms.gov/Center/Provider-Type/Hospice-Center>

Matzo, M., and Sherman, DW. (Eds.) (2018). *Palliative Care Nursing: Quality Care to the End of Life* (5th Ed.). New York, NY: Springer Publishing Company, LLC.

Dahlin, CM. (Ed.) (2021). *Palliative Nursing: Scope and Standards of Practice* (6th Ed.). Pittsburgh, PA: Hospice and Palliative Nurses Association.



RETEST ASSURED PROGRAM

ACHPN® | CHPLN® | CHPN® | CHPNA® | CHPPN®

Testers who are unsuccessful in their initial exam may retake the same HPCC exam for \$135.00. To use the reTEST program, testers may choose one of the **next three test windows** and must submit the reTEST application for the test window they would like to test in.

Please refer to the certification schedule at www.advancingexpertcare.org/hpcc to determine when to submit the application. Candidates must also meet the eligibility requirements at the time of submission.

Directions: Email this form to PSI at ampexamservices@psionline.com. Applications are accepted during open testing windows. Applications received outside an open window will not be processed until the window opens. Testers will receive an email with scheduling instructions once processed. Refer to the reTEST Assured Program section of the handbook for more information.

Note: It may take up to 7-10 business days for PSI to process the reTEST application.

Section I: Select the statement below that applies to you.

I am a reTEST Assured program candidate who was unsuccessful on my first attempt to sit for the exam and must retest in one of the next three windows.

Note: Candidates can use the reTEST Assured program once after a non-passing score. Do not submit the reTEST Assured registration form until you are ready to take the test.

I am a reTEST Assured program candidate who has already submitted and has been approved for **Special Examination Accommodations**. I understand that once eligible, I will only be able to schedule the exam by contacting PSI exam accommodation at 800.367.1565 ext. 6750.

Section II:

Candidate ID #

Last Name

First Name

MI

Home Street Address or PO Box

City

State

Zip Code

Home Phone

Work Phone

Cell Phone

Email Address (required)

Section IV:

Check below to confirm that you currently meet the eligibility requirements for the examination you are registering for:

ADVANCED PRACTICE REGISTERED NURSE EXAMINATION

I am currently licensed as an advanced practice registered nurse in the United States, its territories, or the equivalent in Canada.

Nurse Practitioner Clinical Nurse Specialist

I have worked as an advanced practice registered nurse in hospice and palliative care for at least 500 hours in the most recent 12 months or 1,000 hours in the most recent 24 months before submission of this application.

Licensure: State _____ APRN License Number _____

License Expiration _____

Completion of an accredited graduate, postgraduate, or doctoral Nurse Practitioner (NP) or Clinical Nurse Specialist (CNS) educational program from a U.S. school or Canadian province NP or CNS educational programs approved by the Canadian Council of Registered Nurse Regulators (CCRNRR).

Completion of three separate comprehensive graduate-level courses in advanced pathophysiology, advanced health assessment, and advanced pharmacology.

REGISTERED NURSE EXAMINATION

I am currently licensed as a registered nurse in the United States, its territories, or the equivalent in Canada.

Licensure: State _____ RN License Number _____

License Expiration _____

PEDIATRIC REGISTERED NURSE EXAMINATION

I am currently licensed as a registered nurse in the United States, its territories, or the equivalent in Canada.

I have worked as a pediatric registered nurse in hospice and palliative care for at least 500 hours in the most recent 12 months or 1,000 hours in the most recent 24 months before submission of this application.

Licensure: State _____ RN License Number _____

License Expiration _____

LICENSED PRACTICAL/VOCATIONAL NURSE EXAMINATION

I am currently licensed as a licensed practical/vocational nurse in the United States, its territories, or the equivalent in Canada.

I have worked as a licensed practical/vocational nurse under the supervision of a registered nurse in hospice and palliative care for at least 500 hours in the most recent 12 months or 1,000 hours in the most recent 24 months before submission of this application.

Licensure: State _____ LPN/LVN License Number _____

License Expiration _____

NURSING ASSISTANT EXAMINATION

I have worked as a nursing assistant under the supervision of a registered nurse in hospice and palliative care for at least 500 hours in the most recent 12 months or 1,000 hours in the most recent 24 months before submission of this application.

Within the last five (5) years:

YES NO

Have you ever been sued by a patient?

Have you ever been found to have committed negligence or malpractice in your professional work?

Have you ever had a complaint filed against you before a governmental regulatory board or professional organization?

Have you ever been subjected to discipline, certificate or license revocation, or other sanctions by a governmental regulatory board or professional organization?

Have you ever been the subject of an investigation by law enforcement?

Have you ever been convicted of, pled guilty to, or pled nolo contendere to a felony or misdemeanor, or are any such charges pending against you?



RETEST ASSURED PROGRAM

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I further affirm that no licensing authority has taken any disciplinary action in relation to my license to practice in the aforementioned or any other state, and that my license to practice has not been suspended or revoked by any state or jurisdiction. **I understand that no refunds will be issued once payment is processed.**

Name (Please Print)

Signature

Date

Nursing Practice Verification

The following is contact information for my clinical supervisor or a professional colleague (RN or physician) who can verify that I have met the clinical hour eligibility requirements:

Verifier's Name (Last)

First

Facility Name

Verifier's Phone Number

Verifier's Email Address

You may not list yourself or a relative as your verifier.

HPCC reserves the right to contact you for further information as deemed necessary



ADVANCED CERTIFIED HOSPICE AND PALLIATIVE NURSE CANDIDATE PRACTICE HOURS VERIFICATION FORM

Applicant Information

The following is contact information for my clinical supervisor or a professional colleague (RN or physician) who can verify that I have met the clinical hour eligibility requirements:

Last Name	First Name	MI
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By signing below, I hereby attest that this information is true, accurate, and complete to the best of my knowledge, and I understand that any falsification may result in the inability to sit for the ACHPN® exam.

Name (Please Print)	Signature	Date
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PLEASE NOTE THE FOLLOWING:

- Verification of a minimum of 500 hours in the most recent 12 months or 1000 hours in the most recent 24 months
- Individuals verifying practice may be contacted; multiple forms are required if verification is needed from more than one individual.
- Returned forms must be re-signed by the collaborating individual.
- **Verifiers must complete Part A or B.** Failure to do so will result in a delay in processing the application.

PART A: SUPERVISED PALLIATIVE CARE PRACTICE HOURS WITHIN AN ADVANCED HOSPICE AND/OR PRACTICE PALLIATIVE NURSING EDUCATION PROGRAM

Use this section to certify that the applicant has completed supervised clinical practice in advanced practice hospice and/or palliative care nursing within an education program

I verify that the applicant completed at least 500 practice hours in the most recent 12 months as part of their educational program.

I verify that the applicant completed at least 1,000 practice hours in the most recent 24 months as part of their educational program.

I verify that the applicant completed at least 500 practice hours in the most recent 12 months as part of their fellowship program.

I verify that the applicant completed at least 1,000 practice hours in the most recent 24 months as part of their fellowship program.

Select the nursing program the applicant used to complete the practice hours above.

Master's

Post-Master's

Doctor of Nursing Practice

Fellowship Program



ADVANCED CERTIFIED HOSPICE AND PALLIATIVE NURSE CANDIDATE PRACTICE HOURS VERIFICATION FORM

Indicate the Verifier's Role

Physician Preceptor

Nurse Practitioner Preceptor

CNS Preceptor

Faculty Member

Other (list) _____

PART B: OBSERVED HOSPICE AND/OR PALLIATIVE CARE PRACTICE HOURS AFTER GRADUATION FROM AN ADVANCED PRACTICE NURSING EDUCATION PROGRAM IN THE MOST RECENT 12 OR 24 MONTHS

Use this section to certify that the applicant has completed clinical practice in advanced practice hospice and/or palliative care nursing.

I verify the applicant completed a minimum of 500 practice hours in the most recent 12 months.

I verify the applicant completed a minimum of 1,000 practice hours in the most recent 24 months.

Select the applicant's role in which you have observed and/or supervised them to complete the practice hours above.

Clinical Nurse Specialist (CNS)

Nurse Practitioner (NP)

Fellowship Program

Indicate the Verifier's role:

Supervisor

Collaborating Advanced Practice Nurse

Collaborating Physician

Collaborating Clinical Nurse Specialist

Other

VERIFIER INFORMATION (this section must be signed and dated by the individual verifying the practice hours)

Name (Print)

Title and Credentials

Address

City, State, Zip

Email Address

Daytime Phone Number

Facility/Organization Name (where supervised practice took place)

Clinical Setting (Clinic, Inpatient Unit, etc.)

Verifier's Signature

Date



ADVANCED CERTIFIED HOSPICE AND PALLIATIVE NURSE (ACHPN®) CANDIDATE CHECKLIST

Applicant Information

The following is contact information for my clinical supervisor or a professional colleague (RN or physician) who can verify that I have met the clinical hour eligibility requirements:

Last Name	First Name	MI
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PLEASE NOTE THE FOLLOWING:

- Copies of advanced practice education (transcripts) will be accepted.
- Required documents must be uploaded to your ACHPN® application before submission
- APRN licenses or verification documents must list an expiration date and the level of certification.
- Failure to complete each section will result in a delay in processing the application.

SECTION I: ADVANCED PRACTICE NURSING LICENSE

Eligible testers must hold a current, unrestricted active APRN license or APRN certification in the United States, its territories, or its equivalent in Canada. A copy of your APRN license must be submitted and is required as part of the application process.

Advanced Practice Credential (NP, CNS, etc.): _____

State(s) licensed to practice in: _____

Advanced Practice License Number: _____

SECTION II: ADVANCED PRACTICE DEGREE

Eligible testers must show proof of completion of one of the following:

- An accredited graduate, postgraduate, or doctoral Nurse Practitioner or Clinical Nurse Specialist educational program from a U.S. school or Canadian province
- An NP or CNS educational program approved by the Canadian Council of Registered Nurse Regulators (CCRN).

Name of Degree Awarded: _____

Year Degree Awarded: _____

Name of the College or University that awarded the above degree: _____



ADVANCED CERTIFIED HOSPICE AND PALLIATIVE NURSE (ACHPN®) CANDIDATE CHECKLIST

SECTION III: ADVANCED PRACTICE EDUCATION

A copy of your academic record/transcript showing the graduate degree and date conferred is required. The transcript must demonstrate the key elements of APRN preparation, including completion of three separate comprehensive graduate-level courses in advanced pathophysiology, advanced health assessment, and advanced pharmacology, as well as a clinical practicum of at least 500 hours.

By checking this box, I certify that I completed 500 hours of clinical practicum as part of my APRN degree or as part of a fellowship program.

Use the chart below to list where you completed the required courses, completion year, course number, and name. If your educational institution did not offer the course(s) below but was incorporated across the curriculum, please note this in the “Other” column.

Required Course	School	Year	Course #	Course Name	Other
Advanced Pathophysiology					
Advanced Health Assessment					
Advanced Pharmacology					

SECTION IV:

By signing below, I hereby attest that this information is true, accurate, and complete to the best of my knowledge, and I understand that any falsification may result in the inability to sit for the ACHPN® exam.

Signature

Date



TRANSFER APPLICATION

Directions: This form is to be used to transfer scheduled, registered, absent, or locked-out exams. Indicate below what type of transfer is being requested. Email the completed form to PSI at ampexamservices@psionline.com.

Applications are accepted during open testing windows. Applications received outside an open window will not be processed until the window opens. Testers will receive an email with scheduling instructions once processed. Refer to the Transfers section in the candidate handbook for further details. **Note: It may take 7-10 business days for PSI to process the transfer application.**

SCHEDULED EXAM

I scheduled an HPCC exam in the current testing window and paid the initial application fee. I understand I must complete this application and **pay a \$110 transfer fee for a (one-time) transfer to the next testing window.** I acknowledge that I will only be allowed to transfer my application once.

REGISTERED FOR EXAM

I registered for an HPCC exam in the current testing window **and have not scheduled or paid the exam fee.** I am applying to transfer my application to the next testing window. I understand that my application will only move to the **next testing window, and I will still be responsible for paying the initial examination fee.**

LRP TESTERS- LOCKED OUT OF ACCOUNT

I was scheduled to take an LRP exam outside of HPCC’s regular office hours (8:00 am – 4:00 pm EST) and was unable to access my exam due to the inability to log in. I would like to reschedule my exam for the current testing window (if dates are available) or transfer to the next test window. I understand that my application will **only move to the next testing window, and I may only transfer my scheduled exam once.** Further, I understand I am responsible for ensuring I have access to my HPCC account **before the day of the exam,** and if I have a second lockout on the day of my exam, resulting in my inability to test, my exam and fees will be forfeited.

ABSENT FOR EXAM

I was unable to launch or was absent from the scheduled exam. I understand that I must complete this application, and I will be required to pay the **\$110 transfer fee for a (one-time) transfer to the next testing window.** I acknowledge that I will only be allowed to transfer my application once.

Candidate ID #

Last Name

First Name

MI

Home Street Address or PO Box

City

State

Zip Code

Phone

Email Address (required)

Note: The \$110 transfer fee will be reflected on the “payment” screen as the last step when scheduling the exam. If the incorrect exam fee is applied, please clear the browser’s cache and cookies or contact PSI Customer Service at (833) 256-1422.



REQUEST FOR SPECIAL EXAMINATION ACCOMMODATIONS

If you have a disability covered by the Americans with Disabilities Act, please **complete this form and provide the Documentation of Disability-Related Needs on the next page at least 45 days before your requested examination date.** The information you provide and any documentation regarding your disability and your need for accommodation in testing will be treated with strict confidentiality.

Candidate ID #

Last Name

First Name

MI

Home Street Address or PO Box

City

State

Zip Code

Home Phone

Work Phone

Cell Phone

Email Address (required)

Special Accommodations: I request special accommodation for the examination below:

Advanced Certified Hospice and Palliative Nurse (ACHPN®)

Certified Hospice and Palliative Nursing Assistant (CHPNA®)

Certified Hospice and Palliative Nurse (CHPN®)

Certified Hospice and Palliative Licensed Nurse (CHPLN®)

Advanced Palliative Hospice Social Worker – Certified (APHSW-C®)

Certified Hospice and Palliative Pediatric Nurse (CHPPN®)

Please Provide (Check All That Apply):

Reader

Reduced Distraction Environment

Extended Testing Time (Time and a Half)

Please specify below if other special accommodations are needed.

Comments: _____

PLEASE READ AND SIGN: I give my permission for my diagnosing professional to discuss my records and history with PSI staff as they relate to the requested accommodation.

Signature

Date

Submit your accommodation request online [here](#). If you have questions, call Candidate Services at 800-367-1565 ext. 6750.



DOCUMENTATION OF DISABILITY-RELATED NEEDS

Please have this section completed by an appropriate professional who is qualified to diagnose the conditions (education professional, physician, psychologist, psychiatrist) to ensure that our testing administrator, PSI, can provide the required accommodations.

Professional Documentation

I have known _____ since _____ in my capacity
Candidate Name *MM/DD/YYYY*
as a _____.
My Professional Title.

The candidate discussed with me the nature of the test to be administered. It is my opinion that, because of this candidate's disability described below, they should be accommodated by providing the special arrangements listed on the Request for Special Examination Accommodations form.

Description of Disability:

Signed

Title

Printed Name

Address

City

State

Zip Code

Telephone Number

Email Address (required)

Date

License Number (If Applicable)