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Pediatric Primary Care Mental Health Specialist Certification Exam



Detailed Content Outline

Description of the Specialty

The Pediatric Primary Care Mental Health Specialist (PMHS) builds upon the Advanced Practice Registered Nurse (APRN) role to provide advanced assessment, evaluation, diagnosis, treatment and management of common developmental, behavioral and mental health problems in children, adolescents, and young adults. Practice settings may include pediatric primary care, school-based clinics, developmental behavioral pediatric programs, and other specialty services. Therapeutic services include early recognition, intervention and active monitoring as well as appropriate referral for complex disorders. Healthcare services are evidence-based and include the use of developmental, behavioral, and mental health screening tools, psychotherapeutic, educational, and psychopharmacologic interventions. The PMHS coordinates care and collaborates with other professionals to enhance quality mental health services for children, adolescents, young adults, and their families.

Credential

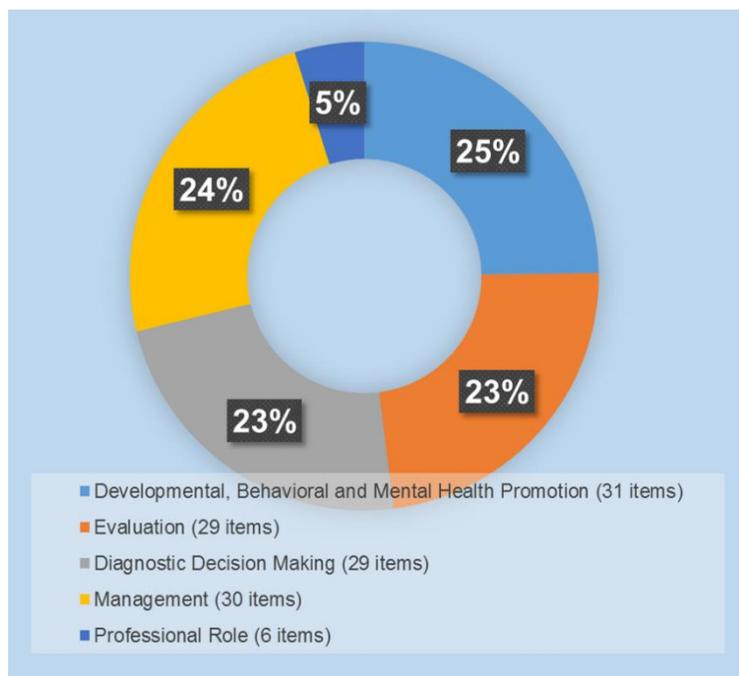
Candidates successfully passing this exam will earn the certification credential Pediatric Primary Care Mental Health Specialist (PMHS).

Exam Details

This exam is based on US standards of practice. See www.pncb.org for nurse eligibility requirements. The exam has a 125 scored and 25 unscored items (included to determine statistical performance). The 125 scored items are distributed among 5 content areas (see chart).

How to use this Content Outline

The PMHS exam content outline (also known as a test blueprint) is an essential tool as you study for your exam. It describes all of the subject areas covered by the exam and the number of questions per category. PNCB certification exams are comprehensive exams, so be sure to study all areas of the content outline, including areas with which you may not be familiar. This exam tests your ability to apply knowledge and use critical thinking skills to determine one best answer among answer choices.



PMHS CONTENT OUTLINE

Total**I. Developmental, Behavioral and Mental Health Promotion****25%**
(31 items)**A. Health Promotion and Anticipatory Guidance**

1. Promote positive parenting and attachment
2. Provide education on lifestyle modification and risk reduction
3. Promote social, emotional, and academic functioning
4. Provide guidance regarding the impact of individual temperament on development and behavior
5. Provide guidance regarding resiliency and healthy coping
6. Promote optimal developmental progression
7. Provide education about the connection between physical, spiritual, environmental, and psychological determinants of health

B. Developmental, Behavioral and Mental Health Screening

1. Use and interpret evidence-based universal screening tools
2. Use and interpret evidence-based screening tools for populations at high risk
3. Provide surveillance for risks associated with:
 - a) bullying and victimization
 - b) environmental factors
 - c) family systems
 - d) delayed developmental milestones
 - e) behavioral and emotional disorders

II. Evaluation**23%**
(29 items)

- A. Obtain a comprehensive developmental, behavioral and health history
- B. Obtain a comprehensive multigenerational family history
- C. Review information/data and/or complete an assessment of academic performance and social competence
- D. Administer evidence-based developmental, behavioral and mental health assessment tools
- E. Seek information and corroboration from a variety of resources
- F. Perform physical examination and evaluate behavior
- G. Order relevant diagnostic and laboratory tests

III. Diagnostic Decision Making**23%**
(29 items)

- A. Interpret assessment and diagnostic findings
- B. Synthesize the data to determine differential diagnoses
- C. Recognize and differentiate the impact of:
 1. typical pediatric developmental stages vs. developmental or behavioral disorders
 2. genetic influences and syndromes
 3. psychosocial stressors
 4. medical, behavioral and/or psychiatric co-morbidities
- D. When developing a list of differential diagnoses, consider:
 1. psychiatric, neurologic and/or behavioral manifestations of medical disorders
 2. typical vs. atypical presentation of psychiatric disorders
 3. early signs and symptoms of complex developmental, behavioral, and psychiatric disorders
- E. Use DSM criteria and taxonomy in diagnostic decision making
- F. Engage child/adolescent and family in discussions regarding diagnostic impression
- G. Initiate referral and/or consultation in the diagnosis of behavioral, mental health and psychiatric problems as needed

PMHS CONTENT OUTLINE

Total

IV. Management

23%
(30 items)

A. Initial Management

1. Incorporate psychoeducation in the discussion of:
 - a) etiology
 - b) diagnosis and treatment options
 - c) indications, benefits and risks of pharmacological therapies
 - d) indications, benefits and risks of nonpharmacological therapies
 - e) benefits and risks of complementary and alternative therapies
 - f) appropriate safety and crisis management planning
2. Establish treatment goals and objectives through collaborative problem solving with the child/adolescent, family, and other team members
3. Obtain and document informed consent and assent for treatment
4. Provide counseling to introduce evidence-based practices, including:
 - a) behavioral and cognitive strategies
 - b) symptom self-monitoring
 - c) coping skills
 - d) parenting techniques
 - e) environmental accommodations and adaptations
5. Provide evidence-based management of developmental, behavioral, and mental health problems through:
 - a) pharmacological therapies
 - b) nonpharmacological therapies
6. Initiate treatment while awaiting mental health services at a higher level of care
7. Initiate referrals to specialty providers of service
8. Initiate referrals to public and community resources
9. Collaborate with schools in the provision of care to optimize function
10. Refer patients with complex psychiatric disorders to appropriate provider(s)
11. Consult and collaborate with multidisciplinary team regarding treatment and management

B. Ongoing Management

1. Provide active support, monitoring, and counseling to maximize functioning by:
 - a) identifying environmental stressors
 - b) assessing for high risk behaviors
 - c) enhancing family interactions
 - d) promoting social and academic functioning
 - e) encouraging self-monitoring
 - f) decreasing the risk of complications related to medications
 - g) enhancing adherence with treatment plan
2. Evaluate treatment outcomes related to pharmacological interventions
3. Evaluate treatment outcomes related to nonpharmacological interventions
4. Identify and manage new diagnoses and/or comorbidities
5. Facilitate interprofessional communication, collaboration and care coordination
6. Advocate for the child and family
7. Support transition of services
8. Conclude services appropriately

V. Professional Role

5%
(6 items)

- A. Incorporate knowledge of diversity and culture in the provision of care
- B. Maintain confidentiality and privacy according to current regulations and policies
- C. Maintain current knowledge of the following related to developmental, behavioral, and mental health care:
 1. Federal and state laws
 2. Ethical considerations
 3. Practice standards and guidelines
 4. Quality indicators
- D. Promote models of integrated care and innovative methods of healthcare delivery
- E. Demonstrate accuracy in documentation to assure quality of care and support appropriate reimbursement

Exam Content: DIAGNOSES

Items which address specific neurodevelopmental, mental health, and regulatory disorders will be represented within the exam, by volume, according to the following *prioritized listing*:

Diagnosis	
1	ADHD
2	Anxiety Disorders
3	Learning Disorders
4	Depressive Disorders - Mild
5	Behavioral Sleep Disorders
6	Disruptive, Impulse-control, and Conduct Disorders
7	Developmental Delay
8	Depressive Disorders - Moderate
9	Communication Disorders
10	Autism Spectrum Disorders
11	Trauma- and Stressor-related Disorders (e.g., PTSD, reactive attachment disorders)
12	Intellectual Disability
13	Mental and Developmental Disorders Related to Medical Conditions (e.g., TBI, concussion, obesity, diabetes)
14	Abuse and Neglect
15	Somatic Symptoms and Related Disorders
16	Feeding and Eating Disorders
17	Elimination Disorders (encopresis and enuresis)
18	Bipolar and Related Disorders
19	Neurosensory Impairments
20	Depressive Disorders - Severe
21	Obsessive-compulsive and Related Disorders
22	Substance Use and Addictive Disorders
23	Motor Disorders
24	Seizure Disorders
25	Genetic Disorders
26	Other Neurodevelopmental Disorders (e.g., cerebral palsy, spina bifida)
27	Tic Disorders
28	Breathing-related Sleep Disorders
29	Gender Dysphoria
30	Medication Induced Movement Disorders

Neurodevelopmental Disorder

Mental Health Disorder

Regulatory Disorder

Exam Content: PHARMACOLOGIC AND NON-PHARMACOLOGIC MANAGEMENT

Exam content will include a focus on the following pharmacologic agents (*listed in 'most prescribed' order*) and non-pharmacologic interventions (*listed in 'most performed' order*):

Pharmacologic Agents	
1	ADHD Medication – Stimulant
2	ADHD Medication – Non-stimulant
3	Antidepressant Medications
4	Anti-anxiety Medications
5	Sleep Medications
6	Over-the-counter Medications
7	Supplements (non-prescription)
8	Mood Stabilizers
9	Antipsychotic Medications (e.g. for children with autism and aggression)
10	Antiepileptic Medications (e.g. for mood modulation)

Non-pharmacologic Interventions	
1	Motivational interviewing
2	Diet and nutritional approaches
3	Collaborative problem solving
4	Behavioral interventions
5	Educational support services
6	Cognitive behavioral techniques

Exam Content: SCREENING AND ASSESSMENT TOOLS

Exam content will include, but not be limited to, a focus on the following Screening and Assessment Tools (*listed in 'most administered' order*):

Screening and Assessment Tools	
1	Vanderbilt Assessment Scales
2	Modified Checklist for Autism in Toddlers - Revised (M-CHAT-R)
3	Patient Health Questionnaire (PHQ, PHQ-9, PHQ-Brief, PHQ-SADS)
4	Ages & Stages Questionnaire (ASQ)
5	Home environment, Education and employment, Eating, peer-related Activities, Drugs, Sexuality, Suicide/depression, and Safety from injury and violence
6	CRAFFT Alcohol and Substance Screening Tool
7	Pediatric Symptom Checklist (PSC)
8	Conners Scales for ADHD
9	Screen for Child Anxiety Related Emotional Disorders (SCARED)
10	Ages & Stages Questionnaire: Social-Emotional (ASQ-SE)
11	Child Behavior Checklist (CBCL)
12	Conners Comprehensive Behavior Rating Scales



As an exam candidate, you agree not to share information about test questions and answers in any way.

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Below are examples of acceptable and prohibited (unethical) discussions/behaviors. Because PNCB offers multiple certification exam types (CPN, CPNP-AC, CPNP-PC, PMHS), the content topic areas below may not represent your exam.

Acceptable	Unethical
<i>“Make sure you brush up on growth and development since you work in a hospital now.”</i>	<i>“Make sure you remember when a baby starts pointing at objects.”</i>
<i>“Expect a lot of respiratory content. It’s the number 1 clinical problem on the exam content outline.”</i>	<i>“What kinds of respiratory issues were on your exam?”</i>
<i>“Renal issues are a clinical problem listed on the content outline. Be prepared for those since we don’t see that on our unit.”</i>	<i>“I had a question about acute renal failure, potassium levels, and arrhythmias. Make sure you look that up.”</i>
<i>“I forgot skin, wounds, and/or burns would be on the exam.”</i>	<i>“I didn’t expect a burn question asking about fluid replacement. I think the right answer had to do with capillary refill.”</i>

If in doubt, don’t discuss.

Discussing exam questions can lead to serious consequences such as:

- Prohibiting future exam attempts for the people involved
- Stopping an in-progress exam
- Suspending an exam for all testers
- Delaying release of score results beyond advertised timeframe
- Invalidating exam scores
- Suspending or revoke certification
- Taking legal action against individuals

Learn more from PNCB’s [Ethics in Testing: A Personal Responsibility Toolkit](#).