

American Academy of Chiropractic Physicians®

and the

American Chiropractic Physicians Credentialing Center

**Core Mid-Level Practitioner Skills Testing
for the Chiropractic Physician**

Component Requisites for the

Advanced Clinical Examination (ACE)

Content Outline

There are 250 questions on this examination. Of these, 200 are scored questions and 50 are pretest questions that are not scored. Pretest questions are used to determine how well these questions will perform before they are used on the scored portion of the examination. The pretest questions cannot be distinguished from those that will be scored, so it is important for a candidate to answer all the questions. A candidate's score, however, is based solely on the 200 scored questions. Performance on pretest questions does not affect a candidate's score.

This Test Content Outline identifies the areas that may be included on the examination. The percentage and number of questions in each of the major categories of the second portion of the examination are also shown.

Category	Domains of Practice	No. of Questions	Percent
I	Clinical Management	66	33
II	Professional Role and Policy	14	7
III	Chiropractic Physician and Patient Relationship	22	11
IV	Assessment of Acute and Chronic Illness	52	26
V	Research	4	2
VI	Health Promotion and Disease Prevention	42	21
	Total	200	100

Please note that various categories and subcategories throughout this test content outline are associated with major life span/problem areas as indicated in the following notes:

Note 1: Life Span Areas

1. Non-age-specific
2. Aging adult (65 and older)
3. Adult (18-64)
4. Adolescent (11-21)
5. Child (12 months – 10)
6. Infant (birth – 12 months)
7. Child-bearing woman

Note 2: Problem Areas

1. Head, eyes, ears, nose, and throat
2. Respiratory
3. Cardiovascular
4. Gastrointestinal
5. Renal
6. Male reproductive
7. Female reproductive
8. Musculoskeletal
9. Neurologic
10. Endocrine
11. Hematopoietic
12. Immune
13. Integumentary
14. Lymphatic
15. Allergies
16. Psychosocial
17. Communicable/Infectious disease
18. Emergencies
19. Functional limitations
20. Normal and abnormal development
21. Learning disabilities
22. Nutrition
23. Oncology
24. Victims of violence
25. Dependency
26. Occupational Health
27. Trauma, Injury and Sports Medicine
28. Functional Medicine
29. Environmental Health

Test content outline

- I. Clinical Management (34%)
 - a. Standards of advanced chiropractic practice
Standards provide a broad framework for advanced chiropractic practice. Standards are authoritative statements by which the chiropractic profession describes the responsibilities for which its practitioners are accountable. Standards reflect the values and priorities of the profession and provide direction for professional practice.
 - b. Clinical guidelines – Guidelines are systematically developed statements based on available scientific evidence and expert opinion. (e.g. NIH NHLB Expert Panel Report: Guidelines for the Diagnosis and Management of Asthma: Report of the Joint National Committee on Detection, Evaluation, and Treatment of High Blood Pressure; American Diabetes Association Clinical Practice Recommendations; NIH Report of the National Cholesterol Education Program Expert Panel on Detection, Evaluation, and Treatment of High Blood Cholesterol in Adults, Mercy Guidelines, et al.).
 - c. Chiropractic Pharmacotherapeutics and Nutritional Medicine
 1. Prioritize (e.g., cost, availability, interaction)
 2. Plan (e.g., metabolism, half-life, pharmacotherapeutics)
 3. Prescribe (e.g., dosing, scheduling, pharmacogenosy, toxicology))

- 4. Education (e.g., patient, family)
 - 5. Evaluation (e.g., effectiveness of vitamins, mineral, botanical and homeopathic medicines, and glandular extracts)
- d. Clinical therapeutics (e.g., non-pharmacologic modalities, diet, exercise, advanced therapies, best practices and evidence based medicine)
 - 1. Management
 - 2. Diagnostic testing (diagnostic imaging and laboratory medicine)
 - 3. Consultation/collaboration
 - 4. Referrals
 - 5. Collaborative Therapeutics and Interventions
 - e. Documentation
 - f. Safety
 - g. Theory application – this area reflects knowledge of theoretical frameworks and models (e.g., health belief model, theory of reasoned action, theory of planned behavior, stress appraisal theory, coping, family system theory, Integral and transtheoretical models, teaching/learning models, pathophysiologic theories)
- II. Professional Role and Policy (6%)
- a. Health care/Public policy (e.g., Medicaid, Medicare)
 - 1. Reimbursement
 - 2. Laws and Regulations
 - b. Ethics
 - 1. Consent (e.g., Minority vs. Majority age)
 - 2. Advocacy
 - c. Scope of Practice (e.g., Chiropractic Practice Acts)
 - 1. Regulation of Practice
 - 2. Management of Care
 - 3. Consultation/Collaboration
 - d. Access to care
 - e. Coordination of Care
- III. Chiropractic Practitioner and Patient Relationship (11%)
- a. Cultural Competence
 - b. Therapeutic Communication
 - c. Teaching/Coaching
 - d. Patient Advocacy
- IV. Assessment of Acute and Chronic Illness (26%)
- a. Epidemiology/disease control (reportable diseases to state or local authorities)
 - b. Anatomy/Anatomical Variants
 - c. Physiology
 - d. Pathophysiology
 - e. Biopsychosocial
 - f. Diagnostic reasoning
 - 1. Analyze clinical data
 - 2. Establish diagnosis
- V. Research (2%)
- a. Research Process/Utilization
 - b. Continuous process improvement/Outcomes evaluation

VI. Health Promotion and Disease Prevention (6%)

- a. Epidemiology/risk analysis
 - 1. Psychosocial and physiological risk factors
 - 2. Environmental
- b. Genetics
 - 1. Genetic predisposition
- c. Risk Reduction and Health Behavior Guidelines
 - 1. Education and Counseling regarding risk factors
 - 2. Lifestyle modifications
- d. Growth and development across the lifespan
- e. Screening (history, physical, labs)
 - 1. Clinical guidelines
 - 2. Risk, benefits, and costs
- f. Wellness Assessment
 - 1. Violence, Abuse and Neglect
 - 2. Substance use
 - 3. Nutrition
 - 4. Exercise
 - 5. Tobacco
 - 6. Alcohol

VII. Emergency Medicine (3%)

VIII. Minor Surgery and Anesthesia (3%)

IX. Orthopedics and Sports Medicine (6%)

Sponsoring Organization:

American Academy of Chiropractic Physicians® www.aacp.net

and its credentialing center the

American Chiropractic Physician Credentialing Center www.acpcc.org

Strategic Alliances:

- Development of the Advanced Clinical Examination (ACE) within the context of the above referenced outline for use in the identification of core primary care clinical skills and for use by the Center to determine and qualify applicants for the APC-C certification mark.
- The American Chiropractic Physician Credentialing Center provides this collaborative service for state licensing boards by defining advanced practice chiropractic and when applicable scopes of practice.
- The initial development of this examination has been accomplished by the American Chiropractic Physician Credentialing Center. To ensure the ongoing process of public protection and to ensure that core competencies have been met within the context of midlevel healthcare delivery, ACPCC, continues to work with the chiropractic colleges, the National Board of Chiropractic Examiners and the Federation of Chiropractic Licensing Boards to develop this specialty examination within the context of test development guidelines and criteria.

Purpose:

To provide a psychometrically, valid competency examination, ensure public safety and welfare through testing of those chiropractic physicians with advanced training who have specifically met core mid-level didactic, clinical skills and competencies.

Cost: \$600

Contact Information for Test Scheduling and Availability:

American Chiropractic Physician Credentialing Center

Attn: Advanced Clinical Examination (ACE)

www.acpcc.org