Most nurses are confident in their belief that they provide excellent care; however, many find the idea of taking an examination to demonstrate their knowledge frightening. Earning a specialty certification is one of the most important accomplishments a nurse can achieve for oneself, one's patients, and one's employer, as it signifies knowledge and practice competency in the specialty (Oncology Nursing Certification Corporation [ONCC], 2008c). This column explains the benefits of certification and solutions to potential barriers to obtaining certification for oncology nurses who are contemplating certification.

Certification is a voluntary personal and professional accomplishment that is recognized by patients, their families, peers, other health professionals, and employers. Specialty certification is not limited to health professions; it exists in other occupations such as business, accounting, and information technology. Obtaining a formal credential—Oncology Certified Nurse (OCN®), Certified Breast Care Nurse (CBCN), Certified Pediatric Oncology Nurse (CPON®), Advanced Oncology Clinical Nurse Specialist (AOCNS®), or Advanced Oncology Certified Nurse Practitioner (AOCNP®)—is not only an achievement, but a validation of the nurse's clinical experience and knowledge.

More than 2.9 million people in the United States are RNs (American Nurses Association, 2008). More than 500,000 nurses worldwide are certified in their specialty areas, including advanced practice nurses who have more than one specialty credential (American Board of Nursing Specialties, 2005). ONCC was established in 1984 to develop and administer a certification program in oncology nursing. It currently offers five certification examinations (ONCC, 2008c) (see Table 1). Currently, more than 27,000 nurses are certified, including 23,378 nurses with the OCN® credential, 1,731 CPON®, 1,225 AOCN®, 541 AOCNP®, and 220 AOCNS® (ONCC, 2008c).

Since the 1990s, healthcare organizations have placed a higher value on specialty certification for nurses. Many employers now provide and pay for review courses for their employees. Some employers even reimburse their staff for the cost of successful completion of the credentialing examination. The increase in the number of healthcare organizations supporting nurses’ professional development via specialty certification may be partly because of the criteria for Magnet recognition from the American Nurses Credentialing Center (2008), which strongly encourages specialty certification to validate specialty nursing knowledge.

Personal and Professional Benefits of Certification

Earning specialty certification is a personal achievement that is positively associated with greater nurse job satisfaction, a higher degree of accountability, and increased confidence in decision making (Stromborg et al., 2005). In a survey of nurse managers conducted by the American Board of Nursing Specialties, 86% of nurse managers preferred to hire certified nurses over noncertified nurses when everything else was equal (Stromborg et al.). The nurse managers believed that certified nurses have a validated knowledge in their specialty areas and a greater professional commitment to learning. Many respondents also viewed certified nurses as informal and formal leaders, better preceptors and mentors for others, and more likely to serve on unit- and/or hospitalwide committees.

Certification is a desired characteristic for many employers. Certification increases one’s marketability and helps one to move toward his or her professional goals. Obtaining specialty certification can position one to apply for clinical and leadership positions that can move one toward personal and professional excellence (Stromborg et al., 2005).

Leak and Spruill (2008) surveyed nurses at an academic medical center and information technology. Obtaining a formal credential—Oncology Certified Nurse (OCN®), Certified Breast Care Nurse (CBCN), Certified Pediatric Oncology Nurse (CPON®), Advanced Oncology Clinical Nurse Specialist (AOCNS®), or Advanced Oncology Certified Nurse Practitioner (AOCNP®)—is not only an achievement, but a validation of the nurse's clinical experience and knowledge.

“Certification has been a personal challenge for me. It has helped validate my skills and knowledge in care of oncology patients. It was worth my time and energy to take the test” (Leak and Spruill, 2008).
**Table 1. Five Oncology Nursing Certification Examinations Offered by the Oncology Nursing Certification Corporation**

<table>
<thead>
<tr>
<th>EXAMINATION</th>
<th>DEFINITION</th>
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<tbody>
<tr>
<td>Oncology Certified Nurse (OCN®)</td>
<td>Basic-level certification that focuses on adult care</td>
</tr>
<tr>
<td>Certified Breast Care Nurse (CBCN)</td>
<td>Specialty certification in breast care nursing</td>
</tr>
<tr>
<td>Certified Pediatric Oncology Nurse (CPON®)</td>
<td>Basic-level certification in pediatric oncology nursing</td>
</tr>
<tr>
<td>Advanced Oncology Certified Nurse Practitioner (AOCNP®)</td>
<td>A role-specific advanced certification for oncology nurse practitioners</td>
</tr>
<tr>
<td>Advanced Oncology Certified Clinical Nurse Specialist (AOCNS®)</td>
<td>A role-specific advanced certification for oncology clinical nurse specialists</td>
</tr>
</tbody>
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*Note. Based on information from Oncology Nursing Certification Corporation, 2008c.*

asking why they sought oncology nursing certification. Responses included increased sense of pride, increased self-esteem, professional growth, and peer recognition. Another study suggested that certification has a positive effect on certified nurses’ sense of empowerment and may lead to improved patient outcomes (Piazza, Donahue, Dyes, Griffin, & Fitzpatrick, 2006).

**Overcoming Barriers to Getting Certified**

Leak and Spruill (2008) asked nurses (N = 35) about their perceived barriers to taking the certification examination (see Figure 1). Cost was the most common barrier reported; many nurses stated that they were unable to pay for a review course and the certification examination. Nurses who are unable to pay for the cost of the examination are encouraged to seek financial support through their nurse manager or healthcare organization, local Oncology Nursing Society (ONS) chapter, or ONCC. Annually, ONCC offers 75 Roberta Scofield Memorial Certification Awards (ONCC, 2008a), which award a free oncology nursing certification examination or renewal by the Oncology Nursing Certification Points Renewal Option (ONC-PRO). ONC-PRO is a renewal method for certified nurses who are due to renew and meet eligibility criteria for renewal (ONCC, 2008b). Information about the awards is available on the ONCC award and recognition Web site (www.oncc.org/awards/scofield.shtml). In addition, ONS members receive discounts on books, conferences (e.g., ONS Congress, Institutes of Learning), and oncology nursing certification examinations.

The second major barrier cited by the nurses at the academic medical center was a lack of pay increase following certification (Leak & Spruill, 2008). This may be a misperception because Mee (2007) noted that certified nurses earn $9,200 on average more annually than noncertified nurses. Those nurses earn more money annually related to certification and job performance.

Another barrier to certification cited by Leak and Spruill (2008) was lack of written materials, books, and computer tests. ONCC (2008d) offers a variety of free Web-based tests reflecting the oncology content, format, and style of the actual test. Several tools are available to nurses to assist with preparation for the certification examination. These include the ONCC examination blueprints (found at www.oncc.org) and review courses. Review courses often are offered at local hospitals, through ONS chapters, by nurse educators, and at oncology conferences, as well as online. A listing of some available review courses by state can be found on the ONCC Web site (ONCC, 2008d). Some nurses have cosponsored a review course with another healthcare organization to increase the number of nurses attending the course. Forming a study group is another useful way to prepare for the examination and creates a sense of teamwork when becoming certified with peers.

**Conclusion**

Certification is a way to be recognized for one’s experience and comprehensive knowledge of care of patients with cancer. Certification validates the oncology nurse’s commitment to and knowledge about care of patients with cancer. So, if you are not certified, consider experiencing the benefits that certification has for you and your career.

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**References**


CJONEditor@ons.org.
Differences in perceptions of empowerment among nationally certified and noncertified nurses. *Journal of Nursing Administration, 36*(5), 277–283.


**Correction**

In the August 2008 issue of the *Clinical Journal of Oncology Nursing*, the article titled, “Cardiovascular Toxicity Associated With Cancer Treatment,” by Pamela Hallquist Viale, RN, MS, CS, ANP, AOCNP®, and Deanna Sanchez Yamamoto, RN, MS, CS, ANP, AOCNP®, contained an incorrect dosage in the sentence “In addition, doses greater than 1.5 mg/m² per day are known for an increased risk of cardiotoxicity, with a reported incidence of 25%–28% at higher doses.” The correct dosage is 1.5 g/m².

**Do You Have an Interesting Topic to Share?**

Professional Issues provides readers with brief summaries of nonclinical issues relevant to oncology nurses. Length should be no more than 1,000–1,500 words, exclusive of tables, figures, insets, and references. If interested, contact Associate Editor JeanAnne Johnson Talbert, APRN, BC, FNP, MSN, AOCN®, at jeanne.talbert@mountainstarhealth.com.