

BOARD CERTIFICATION
AS A
SPECIALIST IN PEDIATRIC AND
RENAL NUTRITION

EXAM DEVELOPMENT PROCESS

Commission on Dietetic Registration
the Credentialing Agency for
the Academy of Nutrition and Dietetics (formerly the American Dietetic Association)

CDR

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BACKGROUND: EXAMINATION FORMAT

The examination consists of 150 multiple choice and scenario based questions. (130 questions scored questions and 20 pretest questions). Pretesting is done to see how well items perform before they are used in the scored portion of the examination. The pretest questions cannot be distinguished from those that will be scored, so it is important that all questions are answered. Candidates will have three hours to complete the examination.

The examination for Board Certified Specialist in Pediatric Nutrition is developed and administered by the Commission on Dietetic Registration. Subject matter experts contribute to the development and review of each specialty examination prior to its use. These examinations are administered by computers at designated testing locations.

STEPS IN TEST DEVELOPMENT AND ADMINISTRATION

Examination development and test administration consist of several steps, including: practice analysis, development of test specifications, item writing and review, test assembly, examination administration, scoring and reporting of results.

CDR currently contracts with Applied Measurement Professionals, Inc. (AMP) for certification examination consulting, test development and administration of the

pediatric, renal and sports dietetics specialty examinations.

Role Delineation or and Practice Analysis

A role delineation or practice analysis study describes the tasks performed at an identified level of practice and the knowledge and skills necessary to perform those tasks. It serves as the basis for test specification development. Using a role delineation study is among the most desirable methods for test specification development, because it documents that the certification test is job-related, representative of practice, and geared to the appropriate responsibility level.

The foundation for the research for the specialty exam was created by the 1989 ADA Role Delineation Study that suggested that specialty-level examinations in renal and pediatric nutrition would be appropriate. In 1991 ADA conducted a Dietetics Practice Study to determine the test specifications and operational definitions of the specialty practice areas. The results of the study established the empirical basis for the specialty practice credentials in the three specialty areas. Every five years, Renal and Pediatric Practice Audits were conducted for the purpose of identifying changes in practice and for ensuring that the test specifications for the Board Certification as a Specialist in Pediatric and Renal nutrition examinations remain current and relevant.

Item Writing

New items are prepared by board certified specialists in pediatric and renal nutrition who are selected from diverse practice areas and population subgroups, and who are trained in the specifics of patient management problem development.

Criteria applied to writing test questions or items are:

(1) relevance and criticality to specialty level practice; (2) accuracy, currency and clarity; (3) a lack of regional and institutional differences; and (4) conformity with test specifications.

Item Review

Experienced item reviewers (specialty examination workgroup (SEW), appointed by the Specialty Certification Panel review test items to verify appropriate classification and conformance with item writing and minimum passing level criteria and test specifications. All test items are reviewed by professional test editors to eliminate technical flaws, ambiguities, and potential bias.

Test Assembly

A draft test is assembled by the testing agency staff according to the test specifications. SEW members, review items for content accuracy, currency, and relevance to specialty practice.

The assembled test undergoes final review by the SEW members. Only test items that have survived content, measurement and editorial review are suitable for inclusion on the certification test.

Test Administration

Eligibility requirements were established by the Specialty Certification Panel. In 2002, the paper/latent image format was replaced by a computerized format. The testing agency administers the examinations at over 100 test sites around the country, which was a significant increase over the 25 examination sites for the paper examination. Specialty testing needs, such as those for religious observance and physical handicaps, are accommodated under the Americans with Disabilities Act under standardized secure conditions.

Test Item Analysis

After each exam has been administered and items have been scored, psychometricians review performance statistics on each item in order to identify any with questionable performance. Exam items that appear problematic, exam data and candidate comments are reviewed by experienced item writers prior to final scoring and score reporting in order to revise scoring if needed for any flawed questions.

CANDIDATE RESOURCES

Several resources are available to candidates to assist them in preparing for the specialty examinations.

References

Pediatric and renal references are listed in the *Eligibility Application, Candidate Handbook* and on CDR's web site at www.cdrnet.org. The references are updated annually. Most of the publications are available in medical libraries or through ADA.



Content Outline

The pediatric and renal content outlines describe the areas to be assessed on each examination. Content outlines are listed in the *Eligibility Application, Candidate Handbook* and on CDR's web site (www.cdrnet.org).

SPECIALTY CERTIFICATION ARTICLES

If you would like more information about specialty certification, refer to the following articles:

Bogle, ML, Balogun L, Cassell J, Catakis A, Holler HJ, Flynn C. Achieving excellence in dietetics practice: certification of specialists and advanced-level practitioners. *J Am Diet Assoc.* 1993;93:149-150.

Bradley R, Young W, Ebbs P. Characteristics of advance-level dietetics practice: a model and empirical results. *J Am Diet Assoc.* 1993; 93: 196-202.

Bradley RT, Young WY, Ebbs P and Martin J. Specialty practice in dietetics: empirical models and results. *J Am Diet Assoc.* 1993;98: 1339-1353.

Leonberg B, Stivers Rops M. The current state of specialty practice in pediatric and renal nutrition. *J Am Diet Assoc.* 1998; 98: 1339-1353.