

ABCN Written Examination

Applicants whose credentials are approved become "candidates" for ABPP certification in Clinical Neuropsychology and are eligible to register for the ABCN Written Examination. The Written Examination consists of multiple-choice questions covering content areas identified by Section VI of the Houston Conference guidelines as the foundational and functional/practice core knowledge bases for neuropsychologists. These include: General Psychology (including statistics and methodology), Clinical Psychology, Psychopathology, Neuroanatomy/Neuropathology, Brain-Behavior Relationships, and the professional practice of Clinical Neuropsychology. Please refer to the Houston Conference for further detail.

The ABCN Written Examination assesses specialty-specific knowledge within a framework of competencies for independent practice of clinical neuropsychology, as identified through a job task analysis derived from the input of 300 board-certified neuropsychologists. These domains are shown in Table 1 and are consistent with the functional and foundational competencies assessed by ABCN throughout the board certification process. ABCN Written Examination questions will continue to emphasize application of clinical knowledge over rote memory of facts. The exam must be completed in 2.5 hours.

The ABCN written exam is typically administered electronically at PSI Centers across North America in two-week windows, four times per year. The schedule of examinations and registration deadlines for the Written Examination are posted on the [ABCN website](#). Candidates should complete the online [Written Examination Registration](#) and submit the examination fee prior to the stated deadline for the examination window they choose. Once processed, candidates will receive confirmation of registration from the ABCN Executive Assistant and instructions on how to proceed.

The entire certification process must be completed within seven years of the date on the applicant's credential review decision letter. The candidate may take the written examination up to three times during their seven-year period of candidacy. Candidates who do not pass the Written Examination on their first or second attempt are informed that they may take the examination again within their seven-year candidacy period without prejudice, upon resubmission of the then current examination fee. Candidates may not take the written examination during two consecutive exam windows but instead will be eligible to take the written exam again during or after the second window following that of the failed attempt. Candidates who do not pass the Written Examination on their third attempt are not eligible to take it again under the 7-year candidacy period associated with their initial credential review. Candidates who wish to continue pursuit of board certification following their third failure of the written examination must reinitiate the application and credential review process, with appropriate fees.

For information regarding registration deadlines and the schedule of upcoming examinations, please visit the [ABCN website](#).

Table 1. New Written Exam Content Outline – Effective June 2018

Domains and Objective (Estimated Number of Items per Domain)
1. Professional Standards (7)
1.01 - Understand and apply ethical and professional standards. 1.02 - Demonstrate knowledge of the impact of diversity on neuropsychology
2. Record review and research (15)
2.01 - Determine diagnostic information needed 2.02 - Apply knowledge of research methods and statistics
3. Assessment Methods (43)
3.01 - Apply assessment methods and normative group comparators for diverse examinee populations. 3.02 - Evaluate assessment tools to ensure they remain valid for their intended use 3.03 - Apply knowledge of psychometric and patient characteristics 3.04 - Interpret examinee neuropsychological assessment performance.
4. Case Formulation (25)
4.01 - Apply knowledge of contextual factors 4.02 - Understand developmental factors (lifespan) that influence cognitive outcomes and apply them to the case formulation.
5. Intervention and Clinical Management (10)
5.01 - Translate findings and conceptualization into recommendations that are practical and usable by providers