



Certified Bariatric Nurse (CBN)
Certification Examination and Recertification

HANDBOOK

2025-2026



2026 CBN Examination Windows

2026 Test Window 1

Early Online Registration Opens: October 13, 2025
Early Registration Deadline: December 8, 2025
Regular Registration Deadline: January 5, 2026
Exam Administration: January 12, 2026 – March 9, 2026

2026 Test Window 2

Early Online Registration Opens: April 13, 2026
Early Registration Deadline: June 8, 2026
Regular Registration Deadline: July 6, 2026
Exam Administration: July 13, 2026 – September 7, 2026

CONTACT INFORMATION

American Society for Metabolic and Bariatric Surgery (ASMBS)

- **Address:** 14260 W. Newberry Rd #418, Newberry, FL 32669
- **Phone:** 352.331.4900 x 121
- **Email:** cbn@asmbs.org

For Testing Questions or Scheduling Assistance

- **Hotline:** 888-519-9901
- **Email:** examschedule@psionline.com

ADDITIONAL RESOURCES

For additional information, visit our website:

- [About the CBN Credential](#)
- [CBN Examination Information](#)
- [CBN Re-Certification](#)
- [Preparing for the CBN Exam](#)
- *Please retain this handbook until you have received your examination score report.*

General Policies

- **Non-Discrimination Policy:** ASMBS does not discriminate against any individual because of race, ethnicity, gender, age, creed, disability, or national origin.
- **Certification Mark:** Certified Bariatric Nurse (CBN) is a certification mark of the ASMBS. Unauthorized use or display of the CBN certification mark or logo without prior written permission from the CBN Accreditation Council is strictly prohibited.

October 1, 2025 Version

© 2025 ASMBS. All rights reserved.

Table of Contents

2026 CBN Examination Windows.....	1
CONTACT INFORMATION.....	1
ADDITIONAL RESOURCES.....	1
Table of Contents.....	2
Introduction.....	4
MISSION.....	5
VISION.....	5
Standards of Conduct.....	6
Administrative Policies and Rules for Examination.....	7
ELIGIBILITY REQUIREMENTS.....	7
INTERNATIONAL CANDIDATES.....	8
LICENSE AND PROFESSIONAL EXPERIENCE VERIFICATION.....	8
SUSPENDED / REVOKED ELIGIBILITY.....	8
Applying for and Scheduling an Examination.....	9
EXAMINATION APPLICATION AND SCHEDULING DEADLINES.....	9
EXAMINATION FEES.....	9
RESCHEDULING AND EXAMINATION.....	10
MISSED APPOINTMENTS AND FORFEITURES.....	10
WITHDRAWAL FROM EXAMINATION & REFUND OF FEES.....	10
ASSESSMENT CENTER LOCATIONS.....	11
SPECIAL EXAMINATION ACCOMMODATIONS.....	11
SPECIAL EXAMINATION ACCOMMODATIONS.....	11
Taking the Examination.....	12
IDENTIFICATION.....	12
SECURITY.....	12
PERSONAL BELONGINGS.....	12
EXAMINATION RESTRICTIONS.....	13
MISCONDUCT.....	13
INCLEMENT WEATHER, POWER FAILURE, EMERGENCY OR OTHER TESTING SITE ISSUES.....	13
COMPUTER LOGIN.....	14
PRACTICE EXAMINATION.....	14
EXAMINATION OVERVIEW AND INSTRUCTIONS.....	14
CANDIDATE COMMENTS.....	15
FOLLOWING THE EXAMINATION.....	15

Test Scoring and Score Reporting.....	15
PASSING SCORE.....	15
SCORE PROCESSING.....	15
SCORE REPORTING.....	16
CANCELLATION OF SCORES.....	16
CONFIDENTIALITY.....	16
DUPLICATE SCORE REPORT.....	16
Additional Policies & Procedures.....	17
USAGE OF THE CREDENTIAL.....	17
RE-EXAMINATION.....	18
RE-EXAMINATION DISCOUNTED FEES.....	18
DISCIPLINARY ACTION & APPEALS.....	18
CANDIDATE GRIEVANCES.....	18
VERIFICATION OF CREDENTIALS.....	19
CBN CERTIFICATES & PINS.....	19
Recertification.....	20
TIMELINE FOR RECERTIFICATION.....	20
ELIGIBILITY CRITERIA.....	22
OPTION ONE: Re-Testing Recertification.....	22
OPTION TWO: Continuing Education / Professional Development Recertification.....	23
RECERTIFICATION POINTS.....	23
AUDIT.....	27
RECERTIFICATION FEES.....	28
RETIRED STATUS (CBN-Ret).....	28
Frequently Asked Questions.....	29
Examination Preparation Information.....	31
PREPARATION FOR THE EXAMINATION.....	31
EXAMINATION CONTENT.....	31
EXAMINATION CONTENT OUTLINE.....	33
KNOWLEDGE STATEMENTS (Topics).....	37
EXAMINATION OVERVIEW & TEST SPECIFICATIONS.....	40
EXAMINATION OVERVIEW & TEST SPECIFICATIONS.....	40
DOMAINS.....	40
Reference List.....	41
CLINICAL GUIDELINES.....	41
TEXTBOOKS.....	44
JOURNALS.....	45

Introduction

The Certified Bariatric Nurse (CBN) Examination is designed to assess the professional competence of practitioners of Metabolic and Bariatric Surgery (MBS) Nursing. Achievement of a passing score on the examination is required for an individual to earn the CBN credential and designation. This requires each candidate to demonstrate competence in all technical aspects of MBS Nursing commensurate with the standards established by the American Society for Metabolic and Bariatric Surgery (ASMBS) for effective and safe patient care. All candidates and CBN certificants are expected to observe the CBN Standards of Conduct.

In 2006, a committee of the ASMBS completed a practice analysis to identify the specific set of knowledge, tasks, and skills that distinguish nurses working the specialty field of metabolic and bariatric surgery from nurses working in other specialties.

The practice analysis has been subsequently reviewed and updated in 2016² and 2022 to assure the task and knowledge areas being tested for certification reflect current evidence-based practice. The 2022 practice analysis provided the exam specifications (content outline) for which the CBN Examination Development Subcommittee used to create the current CBN examination.

The CBN Accreditation Council of the ASMBS has developed this Candidate Handbook to describe all aspects of the credentialing process and assist so that you may prepare for the examination. This handbook contains an overview of the examination, the admission policies, rules for the examination, and other pertinent facts you should know about the administrative policies governing the examination. It also describes the content and procedures for all parts of the examination. Sample questions are provided to help you become more familiar with the types of questions appearing on the comprehensive multiple-choice examination.

ASMBS adheres to principles of fairness and due process and endorses the principles of equal opportunity. In administering the certification program, ASMBS does not discriminate or deny opportunity to anyone on the basis of race, color, creed, age, sex, gender identity, national origin, religion, disability, marital status, parental status, ancestry, sexual orientation, military discharge status, source of income, or any other status protected by applicable law. All candidates for certification will be judged solely on the published eligibility and recertification criteria determined by the CBN Accreditation Council.

The CBN Accreditation Council of the ASMBS has selected a national testing agency, PSI to assist with examination preparation and administration.

ASMBS candidates should contact the ASMBS Test Taker Services hotline at 888-519-9901 or email examschedule@psionline.com for scheduling-related questions and any other testing concerns.

1 Berger, NK, Carr, JJ, Erickson, J, Gourash, WF, Muenzen, P, Smolenak, L, Tea, CG, & Thomas, K (Practice Analysis Writing Group). Path to bariatric nurse certification: the practice analysis. *Surgery for Obesity and Related Diseases*, 2010, 6: 399- 407. 2 Gourash W, Moore J, Tompkins S, Fraker T, Dugan S, Davis R, Breidenbach DH. *Bariatric Nursing Practice Analysis. Surgery for Obesity and Related Disease* 2017, 13(10), S35. 3. Practice Analysis Report – American Society for Metabolic and Bariatric Surgery Certified Bariatric Nurse (CBN) – December 2022.

MISSION

The mission of the CBN Accreditation Council and CBN Certification Committee of the ASMBS is to enhance and promote patient health and safety by validating competence and ensuring life-long learning in metabolic and bariatric surgery through credentialing. This certification program is based on a distinct and well-defined field of nursing practice. Metabolic and bariatric surgery nursing is a specialty and is national in scope.¹⁻⁷

VISION

The vision of the CBN Certification Program is to provide the premier credential to professional nurses caring for patients affected by severe obesity, and the metabolic and bariatric surgical patient.

OBJECTIVES

- Ongoing development and administration of a nationally recognized RN professional practice certification that validates advanced clinical expertise and leadership in metabolic and bariatric (MBS) surgery care, through rigorous criteria, a fair, valid, and reliable examination and recertification process, and equitable access across diverse healthcare settings.
- Foster a culture of excellence and lifelong learning by continuously evaluating and enhancing the CBN certification through ongoing evaluation, evidence-based updates, stakeholder input, and evolving standards of care.
- Effectively communicate the value and professional relevance of the CBN credential to the public and all stakeholders by promoting patient-centered care, improving clinical outcomes, and advancing specialized nursing expertise within the field of MBS care.

VALUES

In pursuit of our Vision and Mission statements and collaboration with the ASMBS, we commit to the following values:

- Patient safety
- Evidence-based practice
- Optimal patient outcomes
- Professional collaboration
- Quality of care
- Competency
- Stewardship

1. American Board of Nursing Specialties. Standards, rationale, criteria, required documentation. 2002 Standards, updated 6-2012
2. Report of Practice Analysis of Bariatric Nursing (2007)
3. Berger, NK, Carr, JJ, Erickson, J, Gourash, WF, Muenzen, P, Smolenak, L, Tea, CG, & Thomas, K (Practice Analysis Writing Group). Path to bariatric nurse certification: the practice analysis. *Surgery for Obesity and Related Diseases*, 2010, 6: 399-407.
4. National Practice Analysis of the Bariatric Nurse (December 2016)
5. Gourash W, Moore J, Tompkins S, Fraker T, Dugan S, Davis R, Breidenbach DH. Bariatric Nursing Practice Analysis. *Surgery for Obesity and Related Disease* 2017, 13(10): S35.
6. Gourash W, Story N, Apfel A, Moore J, Carr J, Forryan N, Ivins T. The Perceived Value of Bariatric Nurse Certification. *Surgery for Obesity and Related Diseases*, 2016., 12(7): S43-4.
7. Practice Analysis Report – American Society for Metabolic and Bariatric Surgery Certified Bariatric Nurse (CBN) – December 2022.

STANDARDS OF CONDUCT

PREAMBLE

The American Society for Metabolic and Bariatric Surgery (ASMBS) is a nonprofit Medical Society that provides certification for Certified Bariatric Nurses (CBN). The CBN Accreditation Council has coordinated the development, administration, and maintenance of this certification. These groups, and the multiple additional developmental task forces, include a diverse group of experts in Metabolic and Bariatric Nursing, are national in scope, and are represented by Professional Nurses of different geographical regions, multiple metabolic and bariatric nursing experiential levels and roles, with a familiarity of the full range of metabolic and bariatric surgical procedures, academic and community environments, and the full range of working program sizes, for the purpose of establishing rigorous standards which have a basis in real world practice.

The ASMBS seeks to encourage, establish and maintain the highest standards, traditions and principles of Bariatric Nursing. Individuals who hold the CBN credential should recognize their responsibilities, not only to their patients, but also to society, to other health care professionals and to themselves. All candidates for CBN certification, and all CBN certificants, shall abide by [ASMBS Code of Ethics](#) and the CBN Standards of Conduct. Individuals who fail to meet these requirements may have their credential suspended or revoked or be declared ineligible for certification.

STANDARDS OF CONDUCT

Certified Bariatric Nurses, as health care professionals, must strive as individuals and as a group to maintain the highest of professional and ethical standards. The following statements are standards to guide those individuals holding the CBN credential in their professional activities.

Certified Bariatric Nurses shall:

- Do everything within their scope of authority and practice to ensure compliance with all currently accepted professional standards.
- Always keep the health and safety of the patient in mind and act in the best interest of each patient.
- Provide care without discrimination on any basis, respecting the rights and dignity of all individuals.
- Respect and protect the legal and personal rights of the patients that they treat.
- Comply with governmental rules and regulations applicable to their scope and standard of practice.
- Divulge no confidential information regarding any patient or family except where disclosure is required for responsible performance of duty or as required by law.
- Refuse to participate in unethical or illegal acts; and refuse to conceal illegal, unethical or incompetent acts of others.
- Follow the principles of ethical business behavior by avoiding any form of conduct that creates an impermissible conflict of interest.
- Actively maintain, accurately represent, and continually improve their professional competence.
- Demonstrate behavior that reflects integrity, supports objectivity, and maintain a positive public image of the profession and its professionals.
- Maintain current CBN certification as defined by the CBN Accreditation Council.

Administrative Policies and Rules for Examination

ELIGIBILITY REQUIREMENTS

In order for candidates to sit for the CBN examination they must satisfy the following eligibility criteria:

- 1. Be currently licensed as a Professional Nurse (RN) in one of the 50 United States, the District of Columbia or Puerto Rico.**
 - a. A valid license number (in good standing and unencumbered) must be entered when applying online.
 - b. Licensed Practical Nurses (LPNs) and Licensed Vocational Nurses (LVNs) are not eligible to sit for the examination, or
- 2. Be currently licensed as a Professional Nurse outside of the 50 United States, District of Columbia, and U.S. Territories.**
 - a. Candidates must hold a nursing license equivalent to a Registered Nurse. International licensure will be reviewed individually by the CBN Accreditation Council, and applicants must submit an English copy to cbn@asmbs.org for license verification prior to registering for the CBN exam.
 - b. The examination is based on the most current practice analysis of nursing care of patients with severe obesity and metabolic and bariatric surgical patients in the United States of America.
 - c. Passing the CBN examination does not indicate that the certification will be accepted outside of the 50 United States, the District of Columbia or Puerto Rico.
 - d. The examination will only be offered in the English language.
 - e. The examination will be offered in test centers around the world. Test center information will be available at <http://schedule.psiexams.com/>.
- 3. Complete a minimum of 24 months (within the past 4 years) of nursing practice related to the care of patients with severe obesity and those undergoing MBS surgery, primarily involving delivery of nursing care within the MBS surgical process.**
 - a. This may include an RN who serves in a practice role that includes but is not limited to educational, administrative, leadership, quality, or advanced practice serving the metabolic and bariatric population.
 - b. The CBN Accreditation Council will review eligibility when there is a question.
- 4. Adhere to the CBN Certification Standards of Conduct.** Candidates are required to confirm acceptance of a statement on the application form that they understand violations of the CBN Standards of Conduct may result in loss of eligibility for the CBN certification.
- 5. Adhere to the ASMBS Code of Ethics.** Eligibility for the CBN examination requires adherence to the [ASMBS Code of Ethics](#). Candidates are required to confirm acceptance of a statement on the application form that they understand violations of the [ASMBS Code of Ethics](#) may result in loss of eligibility for the CBN certification.

INTERNATIONAL CANDIDATES

International candidates must be registered nurses or their country's equivalent in order to sit for the exam.

International candidates will be required to provide an English copy of their nursing licenses prior to taking the CBN exam. The nursing license must be equivalent to a Registered Nursing degree. This will be reviewed by the CBN Committee for appropriateness. Examination scores will not be released until this document has been submitted.

The CBN examination is administered exclusively in English and is developed based on comprehensive practice analysis of professional nursing care within the United States. The exam content reflects the clinical responsibilities and competencies required for the care of patients diagnosed with obesity and metabolic disorders, including those undergoing metabolic and bariatric surgical treatment. For more information on the type of material covered in the examination please see the Content Outline included in this handbook.

The examination will be offered in test centers around the world. Test center information will be available at <http://schedule.psiexams.com/>. International candidates are advised to contact PSI for scheduling following completion of their online application at examschedule@psionline.com and to contact cbn@asmbs.org for license verification.

LICENSE AND PROFESSIONAL EXPERIENCE VERIFICATION

In order to sit for the CBN examination, each candidate's license will be verified. Candidates whose name, as given upon examination registration, differs from the name on their nursing license must submit legal documentation verifying the name change (e.g., marriage certificate, divorce decree, or court order).

Five (5) percent of candidates sitting for the CBN examination will be audited for verification of their required professional experience. If your application is selected for audit, download the [CBN Examination Audit Form for Clinical Practice Verification](#) from the CBN Examination Information webpage, complete the form and submit it to cbn@asmbs.org.

SUSPENDED / REVOKED ELIGIBILITY

All Candidates will be governed by the policies current at the time of application for the examination. Eligibility for the CBN Examination may be suspended or revoked for any of the following:

1. Obtaining or attempting to obtain credentialing by fraud, deception, or artifice.
2. Knowingly assisting another person or other persons in obtaining or attempting to obtain credentialing by fraud, deception, or artifice.
3. Illegal use of a CBN certificate or falsification of credentials.
4. Unauthorized possession and/or distribution of any official testing or examination materials.
5. Violation of the [ASMBS Code of Ethics](#).

Applying for and Scheduling an Examination

Candidates must register online at <https://test-takers.psiexams.com/asmbs>. If payment is being made by company, check, or money order, please use the link for the submission form and follow the instructions at the top of the form. For debit or credit card payments, please continue to Register for the Exam. "The computer will guide you through the process. After submitting your application and payment, you'll be prompted to schedule an examination appointment or provide additional eligibility information.

When you schedule your examination, be prepared to confirm a location and a preferred date and time for testing. You will be notified of the time to report to the Assessment Center, and you will be sent an email confirmation notice.

If special accommodations are being requested, please use the following link to submit a request at least 45 days prior to the desired examination date: <https://psi-cdexp.zendesk.com/hc/en-us>

Incomplete applications will not be processed. Candidates will not be considered for admission to the examination until their examination application is complete. ASMBS candidates should contact the ASMBS Test Taker Services hotline at 888-519-9901 or email examschedule@psionline.com for scheduling-related questions and any other testing concerns.

EXAMINATION APPLICATION AND SCHEDULING DEADLINES

Examination Date	Registration Opens	Early Registration Deadline	Registration Deadline
January 12 through March 6, 2026	October 13, 2025	December 8, 2025	January 5, 2026
July 13 through September 7, 2026	April 13, 2026	June 8, 2026	July 6, 2026

*11:59 PM CST for each registration date

EXAMINATION FEES

Registration	ASMBS Member*	IFSO Member* (through any chapter outside of the US)	ASMBS NonMember
Early Registration	\$250	\$300	\$350
Regular Registration	\$300	\$350	\$400

* ASMBS or IFSO member number required when registering to receive discount

RESCHEDULING AND EXAMINATION

Candidates may reschedule their appointment ONCE at no charge by calling ASMBS Test Taker Services at 888-519-9901 at least two business days prior to their scheduled appointment. International candidates may email examschedule@psionline.com for rescheduling options. The following schedule applies:

If the Examination is scheduled on:	PSI must be contacted by 3:00 PM Central Time to reschedule the examination the previous:
Monday	Wednesday
Tuesday	Thursday
Wednesday	Friday
Thursday	Monday
Friday / Saturday	Tuesday

MISSED APPOINTMENTS AND FORFEITURES

Candidates will forfeit their examination registration and all fees paid under the following circumstances:

- Failure to contact PSI at least two business days prior to the scheduled testing session to reschedule an examination.
- Rescheduling a second time in the same testing window.
- Appearing more than 15 minutes late for an examination.
- Failure to report for an examination appointment.

A new, complete application and examination fee are required to reapply for the examination.

WITHDRAWAL FROM EXAMINATION & REFUND OF FEES

Candidates who submit a written request asking to be withdrawn from an examination postmarked no later than 30 business days prior to the scheduled examination are eligible to receive reimbursement of application fees, less a \$50.00 processing fee.

Candidates who submit a written request asking to be withdrawn from an examination postmarked no later than 20 business days prior to the scheduled examination are eligible to receive reimbursement of one-half of their application fee, less a \$50.00 processing fee.

Candidates who do not withdraw at least 20 days in advance of the examination, or who fail to appear for the examination, will forfeit the full amount of the fee. However, the ASMBS may consider unusual circumstances if they can be documented, and supportive evidence is provided within 30 business days after the examination date (see Candidate Grievances section).

Unusual circumstances may include death in the family with proper documentation, accident or illness with a physician's letter. (ASMBS to determine what constitutes an emergency).

ASSESSMENT CENTER LOCATIONS

PSI Assessment Centers have been selected to provide accessibility to the most candidates in all states and major metropolitan areas. A current listing of PSI Assessment Centers, including addresses and driving directions, may be viewed at PSI's website located at <https://test-takers.psiexams.com/asmbs>. Specific address information will be provided when you schedule an examination appointment.

SPECIAL EXAMINATION ACCOMMODATIONS

PSI complies with the Americans with Disabilities Act and strives to ensure that no individual with a disability (as defined by the ADA as a person who has a physical or mental impairment that substantially limits one or more major life activities, a person who has a history or record of such an impairment, or a person who is perceived by others as having such an impairment) is deprived of the opportunity to take the examination solely by reason of that disability. PSI will provide reasonable accommodations for candidates with disabilities. Candidates requesting special accommodations must call PSI at 800-367-1565, ext. 6750 to schedule their examination.

1. Wheelchair access is available at all established Assessment Centers. Candidates must advise PSI at the time of scheduling that wheelchair access is necessary.
2. Candidates with visual, sensory, physical or learning disabilities that would prevent them from taking the examination under standard conditions may request special accommodations and arrangements.

Verification of the disability and a statement of the specific type of assistance needed **MUST BE MADE IN WRITING** TO PSI at least 45 calendar days prior to your desired examination date by submitting the request to the following link: <https://psi-cdexp.zendesk.com/hc/en-us>. PSI will review the submitted form and will contact you regarding the decision for accommodations.

SPECIAL EXAMINATION ACCOMMODATIONS

Examinations are delivered by computer at more than 190 PSI Assessment Centers located throughout the United States. Computer examinations are administered by appointment only Monday through Friday at 9:00 a.m. and 1:30 p.m. Saturday appointments may be scheduled based on availability. Available dates will be indicated when scheduling your examination. Candidates are scheduled on a first-come, first-served basis.

If there is a religious holiday during the testing window and special accommodations need to be made, please send a request via email to cbn@asmbs.org.

Taking the Examination

Your examination will be given via computer at a PSI Assessment Center. You do not need any computer experience or typing skills to take the computer examination. On the day of your examination appointment, report to the Assessment Center no later than your scheduled testing time. IF YOU ARRIVE MORE THAN 15 MINUTES AFTER THE SCHEDULED TESTING TIME, YOU WILL NOT BE ADMITTED.

IDENTIFICATION

To gain admission to the assessment center, you must present two forms of identification. The primary form must be government issued, current and include your name, signature and photograph. No form of temporary identification will be accepted. You will also be required to sign a roster for verification of identity.

- Examples of valid primary forms of identification are: driver's license with photograph; state identification card with photograph; passport; military identification card with photograph.
- The secondary form of identification must display your name and signature for signature verification (e.g., credit card with signature, social security card with signature, employment/student ID card with signature).
- If your name on your registration is different than it appears on your identification, you must bring proof of your name change (e.g., marriage license, divorce decree or court order).

You must have proper identification to gain admission to the Assessment Center. Failure to provide appropriate identification at the time of the examination is considered a missed appointment. There will be no refund of your examination fees.

SECURITY

PSI administration and security standards are designed to ensure all candidates are provided the same opportunity to demonstrate their abilities. The Assessment Center is continuously monitored by audio and video surveillance equipment for security purposes. The following security procedures apply to you during the examination:

- Examinations are the copyrighted property of ASMBS. You are not allowed to bring cameras, notes, tape recorders, pagers, or cellular/smartphones into the testing room. Possession of a cellular/smartphone or other electronic device is strictly prohibited and will result in your dismissal from the examination.
- No calculators are allowed.
- Guests, visitors, or family members are not allowed in the testing room or reception areas.
- You may be subjected to a metal detection scan upon entering the examination room.

PERSONAL BELONGINGS

Please do not bring personal items, valuables, or weapons to the Assessment Center. You are only permitted to bring wallets and keys. Large coats and jackets must be left outside the testing room. You will be given a soft locker to store your wallet and/or keys while you are in the testing room, which the proctor will lock before you enter. You will not be able to access these items until after the examination is completed. Please note that watches and hats are not allowed in the testing room unless they are securely locked in the soft locker.

Once you have placed your personal belongings into the soft locker, you will be asked to pull out your pockets to ensure they are empty. If you bring personal items that will not fit in the soft locker, you will not be able to test. The site will not store or be responsible for your personal belongings.

If any personal items are observed or heard (e.g., cellular/smart phones, alarms) in the testing room after the examination is started, you will be dismissed, and the administration will be forfeited.

EXAMINATION RESTRICTIONS

- You will be provided with one piece of scratch paper at a time to use during the examination, unless noted on the sign-in roster for a particular candidate. You must return the scratch paper to the proctor at the completion of testing, or you will not receive your score report.
- Do not remove any documents or notes of any kind from the Assessment Center.
- You may not ask questions concerning the content of the examination during the examination.
- Eating, drinking, or smoking is not permitted in the Assessment Center.
- You may take a break whenever you wish, but you will not be allowed additional time to make up for time lost during breaks.

MISCONDUCT

Any of the following conduct during the examination may result in dismissal, non-reporting of scores, and forfeiture of examination fees. Examples of misconduct include:

- Creating a disturbance, being abusive, or otherwise uncooperative;
- Displaying and/or using electronic communications devices such as pagers or cellular/smartphones;
- Talking or participating in conversation with other examination candidates;
- Giving or receiving help or being suspected of doing so;
- Leaving the Assessment Center during the administration;
- Attempting to record examination questions or make notes;
- Attempting to take the examination for someone else;
- Possessing personal belongings or unauthorized notes, books, or other aids not listed on the roster.

INCLEMENT WEATHER, POWER FAILURE, EMERGENCY OR OTHER TESTING SITE ISSUES

In the event of inclement weather or unforeseen emergencies on the day of an examination, PSI will determine whether circumstances warrant the cancellation, and subsequent rescheduling of an examination. The examination will usually not be rescheduled if the Assessment Center personnel are able to open the Assessment Center.

You may visit PSI's website at <https://test-takers.psiexams.com/asmb> prior to the examination to determine if PSI has been advised that any Assessment Centers are closed. Every attempt is made to administer the examination as scheduled; however, should an examination be canceled at an Assessment Center, all scheduled candidates will receive notification following the examination regarding rescheduling or reapplication procedures.

If power to an Assessment Center is temporarily interrupted during an administration, your examination will be restarted. The responses provided up to the point of interruption will be intact, but for security reasons the questions will be scrambled.

If an unexpected delay arises at a scheduled testing center contact ASMBS Test Taker Services hotline at 888-519-9901 or email examschedule@psionline.com.

COMPUTER LOGIN

After your identification has been confirmed, you will be escorted to the examination room. Upon entering the examination room, you may be subjected to a metal detection scan and will then be directed to a testing carrel. You will be instructed on-screen to enter your identification number. You will take your photograph which will remain on-screen throughout your examination session. This photograph will also print on your score report.

PRACTICE EXAMINATION

Prior to attempting the examination, you will be given the opportunity to practice taking an examination on the computer. The time you use for this practice examination is NOT counted as part of your examination time or score. When you are comfortable with the computer testing process, you may quit the practice session and begin the timed examination.

EXAMINATION OVERVIEW AND INSTRUCTIONS

Following the practice examination, you will begin the timed examination. Before beginning, instructions for taking the examination are provided on-screen.

The computer monitors the time you spend on the examination. The examination will terminate if you exceed the time allowed. You may click on the "Time" box in the lower menu bar on the screen to monitor your time. A digital clock indicates the time remaining for you to complete the examination. The Time feature may be turned off during the examination.

Only one examination question is presented at a time. The question number appears in the lower right of the screen. Choices of answers to the examination question are identified as A, B, C or D. You must indicate your choice by either typing in the letter in the response box in the lower left portion of the computer screen or clicking on the option using the mouse. To change your answer, enter a different option by typing in the letter in the response box or by clicking on the option using the mouse. You may change your answer as many times as you wish during the examination time limit.

To move to the next question, click on the forward arrow (>) in the lower right portion of the screen. This action will move you forward through the examination question by question. If you wish to review any question(s), click the backward arrow (<) or use the left arrow key to move backward through the examination.

An examination question may be left unanswered for return later in the examination session. Questions may also be bookmarked for later review by clicking in the blank square to the right of the Time button. To identify all unanswered and/or bookmarked questions, click on the hand icon. When the examination is completed, the number of examination questions answered is reported. If not all questions have been answered and there is time remaining, you may return to the examination and answer those questions. Be sure to provide an answer for each examination question before exiting the examination. There is no penalty for guessing.

CANDIDATE COMMENTS

During the examination, you may make comments for any question by clicking on the button displaying an exclamation point (!) to the left of the Time button. This opens a dialogue box where comments may be entered. Comments will be reviewed, but individual responses will not be provided.

FOLLOWING THE EXAMINATION

After completing the exam, candidates will receive an immediate pass/fail result along with a detailed score report from the testing vendor, PSI. The score report will include the candidate's **raw score** (the total number of items answered correctly) and the **minimum raw passing score**. The report also provides a detailed breakdown of a candidate's performance by domain, offering diagnostic feedback to help them understand their strengths and weaknesses. This domain-level information is for the candidate's guidance only and is not used to determine a final pass or fail status.

Following the exam, please complete a brief evaluation and report to the proctor to receive your score. If an international candidate does not receive an immediate score report, they should contact CBN@asmbs.org.

TEST SECURITY

All examination questions are the copyrighted property of ASMBS. It is forbidden under federal copyright law to copy, reproduce, record, distribute or display these examination questions by any means, in whole or in part. Doing so may subject you to severe civil and criminal penalties.

Test Scoring and Score Reporting

PASSING SCORE

To ensure the integrity and security of the examination, every form of the CBN Examination consists of a unique combination of items. Although different forms of the examination conform to the same content outline, they may not be precisely equivalent in difficulty. The CBN Certification Program uses a criterion-referenced standard-setting procedure, such as the Angoff method, to determine the passing score. Score reports present the candidate's raw score, which is the number of items answered correctly, and the minimum raw passing score. This ensures that candidates of comparable proficiency will be equally likely to pass the examination, regardless of any minor fluctuations in overall difficulty across different examination forms. Equating ensures that passing scores reflect the same level of knowledge across different exam forms, maintaining fairness and consistency for all candidates.

SCORE PROCESSING

The CBN Certification Program employs a series of automated psychometric procedures to ensure the accuracy of all scores. Upon completing the examination, candidates' responses are recorded and scored automatically by the testing vendor (PSI).

Following the examination administration, the program's psychometric team conducts a post-administration analysis of each exam form. This review includes evaluating items with unexpected statistics, such as very high or low p-values or negative point-biserial correlations, to ensure the content validity of the examination.

The program also evaluates items and examination forms to ensure that scores are sufficiently reliable and accurate for pass/fail decisions.

All scoring and equating procedures are thoroughly documented to ensure accuracy and consistency in the scoring process.

SCORE REPORTING

The CBN Certification Program provides candidates with an immediate pass/fail result upon completing the examination via automated scoring, provided by the testing vendor (PSI). This includes a detailed score report, which is available to the candidate upon completion of the exam. The report provides the overall pass/fail result, the candidate's total raw score, and a summary of the candidate's performance in each domain area. This diagnostic feedback is intended to help candidates, both passing and failing, identify areas for improvement. The pass/fail decision is based solely on the overall total score, as the domain-level data is for diagnostic purposes only and should not be used to determine a pass or fail outcome.

Neither CBN nor PSI will release individual score information to anyone without the examinee's written authorization to do so. The name and registration status of individuals who successfully complete the CBN examination may be published and released upon request to employers and other interested parties.

CANCELLATION OF SCORES

The CBN Accreditation Council is concerned with reporting only valid scores. On rare occasions, circumstances may make a subset of test scores invalid. The CBN Accreditation Council reserves the right to cancel or withhold test scores if there is any reason to question their validity. Scores declared invalid and canceled may be grouped into two categories:

1. Doubts may be raised about the validity of candidates' scores because of suspected misconduct; in such circumstances, candidates are to cooperate in the investigation of their scores. Such candidates will be notified of procedures to ensure fair treatment.
2. Some scores may be rendered invalid because of circumstances beyond candidates' control, such as faulty test materials or mistiming. In this event, re-testing will be arranged.

In addition to the reasons listed above, the CBN Accreditation Council may cancel or invalidate examination results if, upon investigation, violations of the CBN program's certification or ethics policies are found to have been committed.

CONFIDENTIALITY

The CBN Certification Program is committed to protecting the privacy of all candidates. All information related to applicants and certificants, including personal data and examination results, is treated as confidential. Strict protocols are maintained to ensure the secure storage and handling of this sensitive information. Individual scores and records will not be released to any third party without the candidate's written authorization, unless disclosure is required by law. This commitment to confidentiality is an essential component of maintaining the security and integrity of the certification process.

DUPLICATE SCORE REPORT

You may purchase additional copies of your results at a cost of \$25 per copy. Requests must be submitted to PSI in writing at PSI, 18000 W 105th Street, Olathe, KS 66061. The request must include your name, identification number, mailing address, telephone number, date of examination and examination taken. Submit this information with the required fee payable to PSI in the form of a money order or cashier's check. Duplicate

score reports will be mailed within approximately five business days after receipt of the request and fee. Requests must be submitted within one year of your examination to be processed.

Additional Policies & Procedures

USAGE OF THE CREDENTIAL

This section outlines the official policy for how you, as a Certified Bariatric Nurse (CBN), can use the CBN credential and logo. Adhering to these guidelines is crucial for protecting the value and integrity of your certification.

Ownership and Rights

The **CBN logo** and the **Certified Bariatric Nurse** name are the official marks of the ASMBS Certified Bariatric Nurse (CBN) Program. These marks are protected and their use is governed by this policy. They may be used only in accordance with these guidelines and only by individuals who hold a **current, active certification**. Unauthorized use may result in disciplinary action.

Acceptable Uses

If you are a CBN in good standing, you are welcome to use the CBN logo and/or name to indicate your credentialed status. Acceptable uses include:

- **Personal Professional Materials:** This includes your resume, CV, business cards, letterhead, and email signature.
- **Presentations and Publications:** You can use the credential in professional presentations, posters, or other materials where you are referencing your certification.
- **Official Merchandise:** You may use the logo on items like clothing, pins, or accessories that are officially produced by ASMBS.

Conditions and Prohibited Uses

To maintain the integrity of the CBN credential, you must follow these important conditions:

- **No Endorsement:** Your use of the credential must **not** imply any organizational endorsement by the ASMBS.
- **No Commercial Use:** The CBN logo cannot be used to promote, market, or endorse commercial products, services, or events without prior approval from ASMBS.
- **Expiration of Credential:** You must immediately **cease all use** of the logo and credential upon the expiration, suspension, or revocation of your certification.
- **No Alterations:** The logo must always be used in its original format and proportions. Do not alter, recolor, stretch, or overlay it with other graphics or text.
- **Proper Abbreviation:** The credential abbreviation "CBN" may be used after your name (e.g., Jane Doe, RN, CBN) but should never be pluralized (e.g., CBNs) or made possessive (e.g., CBN's).
- **Prohibited Public Use:** The logo cannot be used on external signage, billboards, pricing lists, or any materials that imply ASMBS endorsement of services.

RE-EXAMINATION

Candidates who do not pass the CBN Certification Examination are required to wait at least one full examination window before attempting the exam again. As the exam is administered twice per year, this means candidates must skip the next available testing window following an unsuccessful attempt. A new application form and corresponding fee must be submitted for each examination attempt. Candidates must continue to meet the eligibility criteria as established by the CBN Accreditation Council and deadlines in effect at the time of the subsequent application.

The rationale for this required waiting period includes:

- Ensuring candidates have adequate time to prepare for the examination.
- Increasing the security of the exam administration process by limiting candidate exposure to items.

RE-EXAMINATION DISCOUNTED FEES

A one-time discount of 25% on the retake fee is available for candidates who choose to retake the exam in the second testing window after their failed attempt. This discount applies only to that next testing window and cannot be used for subsequent attempts. To obtain this discount please contact cbn@asmbs.org.

DISCIPLINARY ACTION & APPEALS

The CBN Certification Program is committed to upholding the integrity of the credential and protecting the public trust in certified professionals. To ensure compliance with the CBN Standards of Conduct and the [ASMBS Code of Ethics](#), the CBN Accreditation Council has established a fair and transparent disciplinary process for addressing alleged violations. If a candidate or certificant is alleged to have committed a violation, they are afforded due process. This includes being notified of the allegation and given a full opportunity to respond and present their side of the situation. Disciplinary actions, which may include suspension or revocation of certification, are determined based on a careful review of all available evidence. A formal appeals process is in place, allowing individuals to submit a written appeal of a disciplinary decision based on documented grounds. For detailed information on the disciplinary and appeals process, please contact the ASMBS Director of Certification and Credentialing at cbn@asmbs.org.

CANDIDATE GRIEVANCES

The CBN Certification Program is committed to a fair and transparent process for evaluating candidate concerns. If you have a grievance related to your exam experience, including test results, application procedures, or testing conditions, please follow this two-step process:

1. **Initial Grievance:** First, please submit your complaint in writing to the testing vendor, PSI, at examschedule@psionline.com.
2. **Formal Grievance (if needed):** If your issue is not resolved by PSI, you may submit a formal, written grievance to the **ASMBS Management Office within 30 calendar days** of your examination date. The ASMBS staff will coordinate with the testing vendor as needed and present the issue to the CBN Accreditation Council for review. The final decision will be provided to you in writing.

For information on how to submit a formal grievance, please contact the ASMBS Management Office at cbn@asmbs.org.

VERIFICATION OF CREDENTIALS

The CBN Certification Program provides an official verification of a credentialed nurse's certification status upon request. This verification may be requested in one of two ways:

- **Primary Source Verification:** Sent directly from ASMBS to an authorized individual or institution (e.g., an employer). This type of request must be accompanied by the CBN's signed authorization.
- **Credentialed Provider Verification:** Provided directly to the credentialed nurse.

All verification documents are provided on ASMBS letterhead in PDF format via email. The document includes the certification type, credential holder's name and certification number, and the initial certification and expiration dates. It may also confirm whether the certificant is in good standing without disclosing other confidential information.

To request a verification of credentials, please download and complete the **CBN Credential Verification Request Form** available on our website: <https://asmbs.org/professional-development/cbn/>. Once completed, submit the form to cbn@asmbs.org.

CBN CERTIFICATES & PINS

Initial Certification & Recertification: Upon successful completion of the exam, initial certificates and pins are mailed within four (4) weeks of the exam window closing to the home address on file with PSI. For recertification, certificates are mailed within four (4) weeks of approval to the address on file in LearningBuilder. To ensure your certificate is correct, please confirm your name and home address are accurate in your account.

Address Recommendation: You may list either a home or work address in PSI and LearningBuilder; however, certificates mailed to employer addresses are often lost. To ensure reliable delivery—and avoid a \$25 replacement fee—we strongly recommend using your home address.

Additional or Replacement Certificates, Name & Address Changes

You may request additional printed copies of your certificate. For corrections to certificates after initial printing (e.g., name changes) or replacements for lost or damaged certificates, please submit your request through our website. All requests must be accompanied by a \$25.00 fee.

- To request a corrected or replacement certificate, please use the linked form on our website: <https://asmbs.org/professional-development/cbn/>.
- A notarized copy of official documentation supporting the request (e.g., marriage license, divorce decree or court order) must also be included. Requests submitted without appropriate documentation will not be processed.
- **Digital copies** of your certificate are available at no charge.

Please allow up to three weeks for processing. If your certificate has not arrived within four weeks, contact cbn@asmbs.org. Candidates with a change in their mailing address can also update their information online prior to the administration.

Replacement Pins: Proudly display your CBN credential with the official CBN pin. Wearing the pin highlights your professional achievement, raises awareness of CBN certification, and inspires others in your workplace. A replacement pin costs \$5 and can be requested by visiting <https://asmbs.org/professional-development/cbn/>.

Recertification

Credential Duration

Candidates who pass the CBN Examination are awarded a time-limited credential valid for four years.

Purpose of Recertification

Recertification is a critical component of validating and maintaining continuing competence. Competence encompasses both knowledge and behaviors and is defined as the ongoing ability to integrate and apply knowledge, skills, judgment, and values to practice safely, effectively, and ethically in a designated role.

Recertification Requirements

All education and professional development activities required for recertification must be completed during the 48-month certification period. Recertification requirements must be completed before the credential's expiration date. If requirements are not met, the credential will expire, the registry number will be retired, and the individual will be removed from the list of Certified Bariatric Nurses. If the recertification requirements are completed prior to the end 48 month certification period, the certification expiration remains the same. Maintaining a valid credential is the sole responsibility of the CBN certificant.

Successful Recertification and Grace Year

All education and professional development activities required for recertification must be completed during the 48-month certification period. If recertification requirements are completed before expiration, the credential and registry number are renewed for another four-year period. Certificants whose credentials have expired may still complete recertification application within one year ("grace year") without retaking the examination. In this case, the four-year certification cycle continues from the original expiration date. After the grace year, recertification can only be achieved by retaking and passing the examination.

Use of the CBN Designation

The CBN designation may only be used while certification is active. Certificants whose credentials have expired—including those in the one-year grace period—may **not use the CBN designation** until recertification is officially completed.

TIMELINE FOR RECERTIFICATION

Recertification is a detailed process, and candidates should allow sufficient time to enter their professional development and continuing education activities online for committee review. Application reviews generally take six weeks but may take longer.

Certificants may begin submitting recertification activity documentation at any time during their recertification window. To streamline the process, we encourage you to enter activities into the LearningBuilder recertification platform (<https://cbn.learningbuilder.com/Account/Login>) as you complete them. The table below outlines key dates in the final year of certification.

Recertification	CBNs who tested in the July window	CBNs who tested in the February window
Early Recertification Registration (Begins 1 year prior to Certification Expiration)	September 1 – April 30	March 1 – October 31
Regular Recertification Registration (Submitting within 3 months of your due date may result in an interruption of certification status)	May 1 – August 31	November 1 – February 28

The process of recertification may be accomplished in one of two ways:

1. **Re-testing Recertification Option:** CBN certificants may choose to retake the CBN examination within their current four-year certification period, before the credential expires.
2. **Continuing Education/Professional Development Recertification Option:** CBN certificants must demonstrate participation in continuing education relevant to bariatric nursing and aligned with the CBN Examination Content Outline, Knowledge Statements, and Domains. Certificants may also fulfill requirements through other approved professional development activities. (See the sections on Continuing Education/Professional Development and Examination Content Outline, Knowledge Statements, and Domains below.)

The CBN utilizes the **LearningBuilder** online certification management platform to administer the recertification process. LearningBuilder offers flexibility in selecting professional development and continuing education activities, streamlines documentation and submission, and facilitates timely communication and application review. Newly certified individuals will receive instructions for accessing and using the platform shortly after the close of their examination window.

All recertification applications must be submitted online at cbn.learningbuilder.com and are reviewed for approval by the CBN Recertification Subcommittee. In some cases, applications may require additional review by the CBN Accreditation Council for clarification. These reviews are conducted quarterly. To avoid a lapse in certification, it is strongly recommended that applications be submitted as early as possible.

Applications submitted under Option Two will be reviewed and assigned one of three statuses: Approved, Not Approved, or Incomplete. Incomplete applications usually lack information or need clarification. Common reasons for non-approval include duplicate entries, miscalculated contact hours, or activities unrelated to bariatric nursing.”

Applicants whose submissions are not approved will receive an electronic notification outlining the issues and the steps required to correct and resubmit their application. To avoid delays, carefully review your online application for accuracy and completeness before submitting.

ELIGIBILITY CRITERIA

Before applying for the CBN Recertification, the following eligibility criteria must be satisfied:

- **Be currently licensed as a Professional Nurse (RN) in one of the 50 United States, the District of Columbia or Puerto Rico.**
 - A valid license number must be entered when applying online.
 - Licensed Practical Nurses (LPNs) and Licensed Vocational Nurses (LVNs) are not eligible to sit for the examination.
- Applicants must have at least 1,000 hours of bariatric nursing practice within the past 4 years, primarily involving delivery of nursing care of patients with severe obesity and metabolic and bariatric surgery patients, predominantly in the metabolic and bariatric surgery process. This experience should focus on one or more phases of the surgical process, including pre-operative, peri-operative, or post-operative/follow-up care.
 - Eligible roles may include clinical, educational, administrative, leadership, quality, or advanced practice functions serving the bariatric population.
 - The CBN Certification Committee will review cases with eligibility questions.
- **Adhere to the CBN Certification Standards of Conduct.**
 - Candidates are required to confirm acceptance of a statement on the application form that they understand violations of the CBN Standards of Conduct may result in loss of eligibility for the CBN certification.
- **Adhere to the ASMBS Code of Ethics.**
 - Eligibility for the CBN Examination requires adherence to the [ASMBS Code of Ethics](#). Candidates are required to confirm acceptance of a statement on the application form that they understand violations of the [ASMBS Code of Ethics](#) may result in loss of eligibility for the CBN certification.

You must upload a copy of your license verification with your application. Verification of professional practice is required upon request and will be audited on 5% of applicants.

OPTION ONE: Re-Testing Recertification

Candidates for recertification of the CBN credential must pass the CBN Examination prior to the expiration date of their current certification. The content of the examination will be based on the most current role delineation (practice analysis) survey conducted by the CBN Practice Analysis Subcommittee of the CBN Accreditation Council.

Candidates who do not pass the CBN Certification Examination are required to wait at least one full examination window before attempting the exam again. As the exam is administered twice per year, this means candidates must skip the next available testing window following an unsuccessful attempt. Certificants whose credential expires may be eligible to apply for the examination as a new candidate if they meet all requirements for eligibility at the time of application. See Re-Examination section for additional information.

OPTION TWO: Continuing Education / Professional Development Recertification

The CBN Accreditation Council recognizes that not all sources or types of continuing education contribute equally to professional development. To ensure the quality and relevance of continuing education for certificants, the Council provides a detailed list of acceptable Continuing Education and Professional Development Activities. This list helps certificants engage in meaningful, high-quality activities that are directly related to their roles and aligned with the Examination Content Outline. The CBN Accreditation Council encourages certificants to maintain and enhance their knowledge and skills in nursing practice for individuals with severe obesity or those undergoing metabolic and bariatric surgery, including related health conditions and best practices, as outlined in the CBN Examination Content Outline, Knowledge Statements, and Domains, as defined in the CBN Practice Analysis. The CBN recertification process uses a **Professional Development Points** system to recognize a broad range of professional development activities. Individuals seeking to recertify their CBN credential through this method must earn **80 points** of continuing education and professional development activities within the 48 months preceding their certification's expiration. At least **40 points** (half) must come from continuing education contact hours, while the remaining points can be fulfilled through other approved professional development activities, allowing for a flexible mix of activities.

RECERTIFICATION POINTS

(A) Earn 80 points through 80 contact hours of continuing education, all of which must be related to the care of the metabolic bariatric surgery patient.

(B) Earn at least 40 points through contact hours of continuing education and up to 40 points through a combination of the following professional development activities:

1. **Additional Continuing Education:** 1 contact hour = 1 point; 1 CEU/CME = 1 contact hour = 1 point
2. **Presentations:** 1 hour of presentation time = 20 points
3. **Academic Credits** (up to 40 points):
 - a. 1 quarter credit = 67 points
 - b. 1 semester credit = 10 points
4. **Primary Preceptor** for student nurse refresher course or internship program: 60 hours of preceptorship = 40 points
5. **Authorship/Publications** (must be related to certification specialty):
 - a. Peer-reviewed journal article = 40 points
 - b. Non-peer-reviewed journal article = 10 points
 - c. E-Learning/media publication = 40 points
 - d. Grant proposal = 40 points
 - e. Book chapter = 40 points
 - f. Abstract submitted and accepted for poster or presentation = 20 points
6. **Peer Review for Journal:** 10 points per review
7. **Professional Organization Service:** 2 years on an international, national, or state committee/task force/board = 40 points (or 20 points per year)

Reminder: All activities must be completed prior to submitting the recertification application.

Overview of Acceptable Continuing Education and Professional Development Activities

A. 80 Contact Hours of Continuing Education (80 Points)

- **Accepted Credits:** Credits offered by a certified or accredited provider of nursing continuing education will be accepted. The content of continuing education programs should be relevant to one or more of the five domains of the CBN Examination Content Outline, as well as aligned with the corresponding Knowledge Statements.
- **Content Requirements:** Continuing education hours must be applicable to the nursing care of patients with obesity or those undergoing bariatric surgery. Examples include:
 - Workshops, study modules, or grand rounds offered by your place of employment
 - Local, state, or national nursing or professional organization–sponsored conferencesWhen submitting, you will be asked to designate the Clinical Domain of the test blueprint that the education addresses. For example, a perioperative bariatric course would be classified under “Clinical Management: Perioperative (Hospital).” If a course covers multiple domains, select the one you feel is most applicable.
- **Independent Study and E-Learning:** Approved independent study or e-learning programs may count toward the required continuing education hours. Examples include:
 - Independent study programs
 - Online courses
 - Articles from professional journals
- **CME Credits:** Continuing Medical Education (CME) credits may be applied if the program is formally approved for CME hours. The content must be applicable to severe obesity or bariatric surgery and relevant to one or more of the CBN Examination domains and Knowledge Statements. Examples include:
 - Presentations on comorbid medical conditions of obesity
 - Metabolic and bariatric surgical procedures
 - Nutritional aspects of obesity/bariatric surgery
 - Epidemiological or psychosocial aspects of severe obesity
- **Equivalency:** 1 CEU/CME = 1 contact hour = 1 point
- **Documentation Requirements:** Official certificates for each claimed session must be uploaded into the LearningBuilder application. Acceptable formats include photos taken with a smartphone or scanned PDFs. Course brochures or agendas are not acceptable.
- **Tips for Success:** When submitting activities, include details for any sessions whose titles do not clearly indicate a focus on the metabolic and bariatric population. For example, if you attend a Conference on Pain Management or an Advanced Practitioner/Staff Development Conference, specify sessions that directly relate to care of individuals with obesity or undergoing bariatric surgery. Please note that activities related solely to employment requirements—such as BLS, PALS, or ACLS—are not acceptable, nor are general continuing education topics unrelated to bariatric nursing, such as nursing ethics, unless they specifically pertain to obesity or metabolic and bariatric surgery/nursing.

B. 40 hours of Continuing Education (40 points) and any combination of the listed acceptable continuing education or professional development activities that add up to an additional 40 points.

Additional Contact Hours of Continuing Education (*same as described under Section A above.*)

Presentations (one hour of presentation time = 20 points)

- Must be the primary presenter of a first-time, original educational presentation related to bariatric care.
- Presentation time must total at least 1 clock hour. (Multiple different presentations may be combined to meet the 1-hour minimum.)
- Must be delivered in a structured educational setting, such as:
 - Professional conferences, webinars, grand rounds, in-services, seminars
 - Patient or public education sessions not part of your routine job duties
- Formats may include in-person, virtual, or e-learning delivery.

Not Accepted:

- Repeat presentations or modified versions of the same material
- Routine patient education that is part of your regular job responsibilities (e.g., standard pre-op classes, ongoing program information sessions)

Documentation Required:

Submit one of the following:

- Brochure, flyer, or notice of your presentation, OR
- Presentation file (e.g., PowerPoint in PDF) that includes objectives and an outline

Academic Credits

- Complete four semester credits (1 credit = 10 points) or six quarter credits (3 credits = 20 points).
- Courses must be nursing-related or address the biopsychosocial knowledge base of human services, such as:
 - Nursing, nutrition, psychology, epidemiology, physiology, pharmacology
- Thesis or dissertation work related to bariatric nursing is acceptable.
- Credits must be awarded by an accredited college or university.

Not Accepted:

- Courses unrelated to nursing or the biopsychosocial knowledge base of human services
- Non-accredited programs

Documentation Required: Submit an unofficial transcript from the academic institution showing completed credits.

Preceptor Hours (40 Points):

- Complete a minimum of 60 hours as a primary preceptor providing direct clinical supervision and/or teaching related to the care of metabolic and bariatric surgery patients.
- Eligible preceptees include:
 - RN nursing students enrolled in an academic program, OR
 - Registered nurses in a formal RN refresher or internship program

Not Accepted:

- Supervision of advanced practice students (e.g., NP or PA)
- Orientation preceptor hours for new RN hires
- Oversight of students when faculty are onsite
- Faculty supervision of students in their own educational program

Documentation Required: Provide a record of preceptor hours, including the names of students or nurses supervised, dates, and description of supervision/teaching activities

Authorship / Publication (10–40 Points)**Peer-Reviewed Journal Article (40 points):**

- Author, co-author, editor, or co-editor of an article related to your certification specialty
- Submission and disposition must be documented

Non-Peer-Reviewed Journal Article (10 points):

- Author or co-author of an article related to your certification specialty

E-Learning / Media Publication (40 points):

- Primary author or co-author of content related to your certification specialty

Book Chapter (40 points):

- Primary author or co-author of a book or book chapter related to your certification specialty

Grant Writing (40 points):

- Primary grant writer for a federal, state, or national project related to your certification specialty
- Grant writing cannot be a primary employment responsibility

Abstract Submission (20 points):

- Abstract accepted as a poster or presentation at a local, state, or national conference related to obesity, bariatric surgery, nursing, or related comorbid conditions
- Only counts once if accepted as both poster and presentation

Not Accepted:

- Activities unrelated to the certification specialty
- Duplicate credit for the same work (e.g., poster and presentation counted twice)
- Grant writing if it is part of your primary job responsibilities

Documentation Required:

- **Peer-Reviewed or Non-Peer-Reviewed Articles:** Published article citation or acceptance notice
- **E-Learning / Media Publication:** Link to online material or explanation if unavailable
- **Book Chapter:** Chapter or book cover showing your role
- **Grant Writing:** Documentation showing grant results (accepted/rejected, score)
- **Abstract Submission:** Abstract and official acceptance notification confirming your participation

Peer Review of a Journal Article (10 Points)

- Reviewed an article for a peer-reviewed journal related to your certification specialty

Not Accepted: Reviews for journals unrelated to your certification specialty

Documentation Required:

Provide submission verification, including:

- Journal name
- Date of review
- Article disposition (accepted, rejected, or revisions requested)

Professional Organization Service (40 Points)

- Volunteer service with an international, national, or state healthcare-related organization during the certification period
- Acceptable roles include:
 - Boards, committees, editorial boards, review boards, or task forces
- **Points:**
 - 20 points per year of service
 - Maximum of 40 points (two or more years)

Not Accepted: Service unrelated to healthcare or outside recognized professional organizations

Documentation Required: Letter from a Board Chair, Committee Chair/Co-Chair, Task Force Leader, or equivalent confirming your service and duration

Guidelines for Acceptable Continuing Education and Professional Development

- Content must be relevant to one or more of the six domains of bariatric nursing practice or the topics listed in the *CBN Examination Content Outline* section of the *CBN Handbook*.
- For each continuing education (CE) or professional development activity, indicate which domain of the CBN test blueprint the activity addresses (e.g., a perioperative bariatric course would fall under “Clinical Management: Perioperative [Hospital]”). If an activity spans multiple domains, select the most applicable one.
- If the activity title does not clearly indicate relevance to bariatric care, provide specific content details. For example, attending a general Pain Management or Staff Development conference requires listing the specific sessions or topics related to bariatric care.
- Activities that are required as part of employment (e.g., BLS, PALS, ACLS, or unrelated licensure education) are not acceptable unless the content is clearly tied to obesity or metabolic/bariatric nursing.

AUDIT

If your certification record is selected for audit, you may be required to submit additional documentation.

Maintain supporting documentation for the entire four-year certification cycle. Candidates found to have provided fraudulent information are subject to disciplinary action, which may include loss of eligibility for recertification and revocation of their CBN credential.

RECERTIFICATION FEES

After completing your documentation and continuing education requirements, you will be asked to verify your contact and demographic information and complete an Attestation. Once this is complete, the recertification fee must be paid by credit card only. All fees are listed in U.S. dollars. The table below outlines the fees for CBN recertification based on early, regular, and late registration periods.

Fees	Early Application (up to 120 days before expiration)	Regular Application	Late Application (up to 365 days after CBN expiration)
ASMBS/IFSO Members*	\$250	\$350	\$450
Non-Members	\$350	\$450	\$550

RETIRED STATUS (CBN-Ret)

The Retired Status designation (CBN-Ret) recognizes certified bariatric nurses who are retiring or have retired from nursing practice, honoring their contributions to the field. This designation does **not** represent active certification, does not require continuing education or renewal, and is intended solely for recognition of past achievement.

Eligibility Requirements:

To qualify for Retired Status, applicants must:

- Hold a current CBN certification in good standing with the CBN Certification Program.
- Hold a current, unrestricted RN license at the time of retirement.
- Be fully retired from nursing practice, including teaching roles requiring an active RN license, with no plans to return to practice or renew certification.
- Submit the Retired Status application online via the LearningBuilder platform at least 30 days prior to, or within one year of, the expiration of their most recent CBN certification.

Use of Designation:

- Retired nurses may use **CBN (Ret)** on a curriculum vitae, resume, or business card, listed directly after their name and other credentials (e.g., C. Bauer, MSN, RN, CBN-Ret).
- The designation **must not** be used on patient charts, clinical documentation, or in any context that could imply active practice.
- Retired nurses may not present themselves as actively certified CBN holders.

Forfeiture of Status:

- If a nurse returns to any form of nursing practice, including teaching, Retired Status is forfeited.
- The nurse is responsible for notifying the CBN Accreditation Council of any change in employment status that affects eligibility.
- If a CBN wishes to re-certify after obtaining Retired Status, they must meet all current certification eligibility requirements in effect at the time of application.

Submit the Retired Status application online via your CBN LearningBuilder account at least 30 days prior to one year after expiration of your current certification. <https://cbn.learningbuilder.com/Account/Login>

Frequently Asked Questions

I've heard the examination is geared toward certain areas of MBS nursing. Will the examination be too hard for me if I only work in one setting (e.g., the OR, a bariatric floor, a bariatric office)?

The most recent practice analysis included input from more than 300 nurses representing diverse geographic regions and practice settings. Examination specifications are based on this nationwide survey and cover the following domains of MBS nursing care:

- **Clinical Management** (preoperative, perioperative, and long-term follow-up phases)
- **Professional and Community Collaboration**
- **Program Quality**

The content outline (which includes domain weighting and the number of related exam questions) reflects the relative emphasis placed on each area. If you primarily work in one setting, you may need to concentrate your preparation on areas with which you are less familiar. For example:

- Office nurses may need to review perioperative and in-hospital care.
- Hospital-based nurses may need to review preoperative screening and long-term follow-up.

In addition, all candidates should review the major MBS procedures and related nursing care, even if those procedures are not performed in their current practice environment.

How do I prepare for the Certified Bariatric Nurse exam?

You may prepare in any of the following ways. First, review the Examination Content Outline, Knowledge Statements, and Domains found in the below. Determine what areas of knowledge you will need to increase or attain. Then, choose one or more of the following methods:

- **Self-Study:** Use the Candidate Handbook and reference list to strengthen your knowledge.
- **Group Study:** Some candidates form study groups, engaging different members of their metabolic and bariatric surgery teams to present lectures and lead discussions based on the Content Outline.
- **ASMBS Review Course:** ASMBS offers a CBN Examination Review Course, available year-round through the ASMBS Learning Management System (LMS). The course may also be offered in person at the ASMBS Annual and Weekend Meetings.

Course content is presented by faculty who hold the Certified Bariatric Nurse (CBN) credential. Faculty and course directors are strictly prohibited from participating in any aspect of CBN examination development or discussing specific exam content.

Participation in the [ASMBS CBN Review Course](#) does not guarantee a passing score on the CBN Examination. The CBN Accreditation Council does not endorse any specific review course or materials, and candidates are encouraged to explore all reasonably available resources in preparation for the exam.

- **Visit the** Preparing for the CBN Exam [webpage](#) for additional information and resources on preparing for the exam. These resources are provided as references to help identify and strengthen areas where additional study may be needed. It is not expected that candidates purchase every resource listed.
 - **Review of Procedures:** All candidates are strongly encouraged to review the full range of metabolic and bariatric procedures, particularly those not performed in their own practice setting.
-

Is there any collaboration between the exam developers and the CBN Review Course instructors?

No. To protect the integrity of the CBN examination there is a strict separation between exam development and educational activities:

- **Examination Item Writers and SMEs:** Individuals who write or review CBN exam questions, or who have access to examination content, are prohibited from participating in, consulting on, or delivering any CBN Review Course or preparatory materials.
 - **CBN Review Course Instructors:** Faculty who teach or develop content for CBN Review Courses do not have access to actual exam items or participate in exam construction.
Optional Participation: Review courses and preparatory materials are entirely optional. Candidates are not required to attend, and the program does not imply that these courses or materials are the only or preferred route to certification.
 - **Impartiality:** This separation ensures that all candidates have a fair opportunity to succeed, without any advantage given to participants of review courses, and maintains the credibility and objectivity of the certification process.
-

Is the CBN certification program accredited?

ASMBS and the CBN Accreditation Council are actively pursuing accreditation through the National Commission for Certifying Agencies (NCCA), a Magnet Recognition Program approved accreditation authority. The process is comprehensive and ongoing, with a dedicated team working towards meeting all necessary criteria for accreditation. While ASMBS is making significant progress and prioritizing this effort, a specific timeline for completion is not yet available. However, ASMBS is committed to keeping candidates informed and will share updates as soon as they become available. Please visit the [CBN Program webpage](#) for additional information.

Can the CBN be used as a professional nursing certification in submissions to the Magnet Recognition Program®?

Not at this time. The CBN credential cannot be used as a professional nursing certification in Magnet submissions until it becomes accredited.

How do you know the examination really represents actual metabolic and bariatric surgery nursing practice?

A practice analysis is conducted every 5–7 years to review and update the tasks and knowledge that define the practice of nurses working in the specialty of metabolic and bariatric surgery (i.e., bariatric nurses).

Components include:

- Review of current literature
- Input from subject-matter experts
- A nationwide survey of bariatric nurses across the U.S. and Territories

Statistical analysis is used to ensure geographic and practice-related diversity is represented. The most recent practice analysis was completed in 2022. For more information on the practice analysis process, see:

- Berger NK, Carr JJ, Erickson J, Gourash WF, Muenzen P, Smolenak L, Tea CG, & Thomas K. *Path to bariatric nurse certification: the practice analysis*. SOARD. 2010; 6: 399–407.
- Gourash W, Moore J, Tompkins S, Fraker T, Dugan S, Davis R, Breidenbach DH. *Bariatric Nursing Practice Analysis*. SOARD. 2017; 13(10), S35.

The CBN Examination is built using systematic test development procedures based on this practice analysis. The Exam Development Subcommittee, Item Writers, and Exam Construction Task Forces are composed of practicing bariatric nurses from diverse practice types, areas, surgical procedures and geographic distribution.

Examination Preparation Information

PREPARATION FOR THE EXAMINATION

The following guidelines are provided to help you become familiar with the directions and expectations for taking the examination.

- **Candidates should read and follow all instructions carefully.**
- **Timed examination:** The exam will be timed, and a timer on the computer screen will track your official time. For best results, periodically check your progress and pace yourself. This allows you to make adjustments as needed and maximize your performance.
- **Answer every question:** Record an answer for each question, even if you are unsure. Leaving questions unanswered reduces your chances of passing. There is no penalty for guessing, and all questions carry equal weight.

EXAMINATION CONTENT

For effective preparation, it is important for a candidate to understand the structure, content areas, and performance expectations of the CBN Examination.

As described in the **Introduction** to this handbook, a role delineation (practice analysis) survey was conducted to determine the appropriate content for the CBN Examination in accordance with the 2014 *Standards for Educational and Psychological Testing*.

The practice analysis involved a nationally diverse group of nursing professionals in metabolic and bariatric surgery, representing a range of geographic locations, practice settings, and years of experience. Each task and knowledge statement was rated for both **importance to the job role** (from not relevant to critically important) and **frequency of use** (from not relevant/rarely to very frequently). Scores were combined to reflect overall significance. Even tasks performed infrequently were included if they were deemed critically important to the role.

Content Outline Structure

The content outline reflects the minimum knowledge and skills needed by nurses working in the MBS specialty. The Content Outline for the examination is organized into:

- **5 Domains**
- **5 Task Statements**
- **8 Knowledge Topics**

Task Statements

Define what the nursing professional does in a performance-based context.

Knowledge Statements (Topics)

Define the knowledge required to perform the tasks, including factual and procedural information. Knowledge Statements represent organized bodies of information which, when applied, make performance of the tasks possible.

Domains

The role delineation survey results were used to construct the content outline, which identifies five principal domains. Each domain:

- Represents a major area of responsibility within the bariatric nursing role and may include a brief behavioral description.
- Contains one or more **task statements**, describing specific goal-directed activities with a common objective.
- Includes **knowledge statements**, representing the organized bodies of information necessary to perform the tasks effectively.

The content outline defines the topics from which examination questions may be drawn and serves as a guide for informed, organized preparation for the CBN Examination.

EXAMINATION CONTENT OUTLINE

1: Clinical Management: Preoperative (Pre-facility) - 32 Questions

1A. Assess a patient/support person's knowledge of

1. disease of obesity and obesity-related conditions
2. treatment options and alternatives
3. risks and benefits of treatment options

1B. Education a patient/support persons about

1. disease of obesity and obesity-related conditions
2. treatment options and alternatives
3. risks and benefits of treatment options

1C. Identify risks and unique needs of the patient by reviewing medical, surgical, psychosocial, religious, cultural, family, and weight history

1D. Identify unique age-related needs for

1. Adolescence (13-18 years)
2. Geriatric (70 years or over)

1E. Identify unique gender-related needs (e.g., pregnancy, fertility, vitamin requirements, transgender considerations)

1F. Assist patient/support persons in making an informed decision regarding bariatric treatment options

1G. Discuss and establish goals and expected outcomes with the patient/support persons

1H. Educate patient/support persons about

1. steps in the bariatric surgical process (preoperative preparation, perioperative, follow-up care)
2. lifestyle changes after surgery (e.g., physical activity, nutrition and
3. supplementation, psychosocial support)
4. expected clinical outcomes
5. short and long-term complications
6. reporting of signs and symptoms of complications
7. measures to prevent complications

1I. Evaluate the effectiveness of education for patients/support persons

1J. Utilize various modalities while in the perioperative phase (e.g., telehealth visits, telemedicine, patient portals, social media)

2: Clinical Management: Perioperative (Facility Stay) - 38 Questions

2A. Assess patient/support person's understanding of preoperative education and provide reinforcement

2B. Utilize size and weight-appropriate equipment

2C. Implement patient care protocols (e.g., airway, positioning, medications, pain management, enhanced recovery)

2D. Practice safe bariatric patient handling

2E. Implement preventative measures for complications

2F. Monitor for abnormal signs, symptoms, and diagnostic tests

2G. Respond to early and late warning signs for complications

2H. Implement discharge plan and review instructions for immediate post-operative period

1. reporting signs and symptoms of complications
2. nutrition and diet progression
3. physical activity/limitations
4. vitamin and mineral supplementation
5. fluid/hydration management
6. medication management
7. pain management
8. follow-up care

3: Clinical Management: Follow-up (Post-discharge and long term) -38 Questions

3A. Assess the patient for:

1. short-and long-term complications
2. short-and long term weight change
3. adherence to plan of care and lifestyle changes (e.g., medications, nutrition and vitamin supplementation, diet, physical activity, self-care, smoking cessation)
4. psychosocial adjustments (e.g., substance abuse, alcohol use, body image)
5. need for additional bariatric education

3B. Evaluate and report improvement, remission, or resolution of obesity-related conditions

3C. Assess for quality of life changes from preoperative levels

3D. Identify barriers to recommended lifestyle changes

3E. Offer tools or resources to help patients manage barriers to recommended lifestyle changes

3F. Address secondary effects of surgery (e.g., dumping, reactive hypoglycemia, redundant skin)

3G. Provide additional education or referrals as needed

3H. Reinforce long-term healthy behaviors

3I. Encourage participation in support group(s) and other available psychological support

3J. Utilize various modalities while in the follow-up phase (e.g., telehealth visits, telemedicine, patient portals, social media)

4: Professional and Community Collaboration - 22 Questions

4A. Assess the multidisciplinary team's knowledge related to the care of bariatric surgical patients

4B. Implement formal and informal multidisciplinary team education related to the unique needs of metabolic and bariatric surgery patients

4C. Evaluate the effectiveness of multidisciplinary team education

4D. Collaborate with the multidisciplinary team to provide patient-centered education

4E. Collaborate with the multidisciplinary team to ensure successful progression of patient through continuum of care

4F. Evaluate patient care protocols with the multidisciplinary team

4G. Coordinate pre- and postoperative referrals

4H. Foster sensitivity within the multidisciplinary team towards patients with obesity

4I. Promote understanding of surgical complications within the multidisciplinary team

4J. Promote safe patient handling within the multidisciplinary team

4K. Provide education to the community on the disease of obesity and associated treatments using various modalities (e.g., web sites, webinars, social media, newsletters, informational presentations)

4L. Promote obesity awareness within the healthcare community through educational outreach (e.g., role modeling, precepting, teaching, mentoring)

4M. Foster advocacy and access related to individuals and associated treatments

5: Program Quality - 20 Questions

5A. Advocate for patient safety involving furniture, patient transport/transfer systems, medical and surgical equipment

5B. Integrate the use of bariatric ergonomic protocols to decrease the risk of patient and staff injury

5C. Evaluate innovations in technology and advances in care through benchmark studies, literature reviews, evidence-based practice, or research

5D. Facilitate incorporation of innovations in technology and advances in care into practice

5E. Participate in the quality improvement process including: Planning, Data Collection, Analysis, Implementation, Documentation, and Evaluation

5F. Participate in updating patient care practices (e.g., policies, protocols, clinical pathways)

5G. Develop and/or update patient education programs, materials, and tools using multiple modalities

5H. Promote compliance with current best practice guidelines and recommendations

5I. Promote optimization of the patient experience including sensitivity

5J. Identify specific competencies necessary for delivery of patient care (e.g., safe patient handling, early recognition of complications, sensitivity training)

5K. Facilitate staff training to optimize the delivery of patient care (e.g., safe patient handling, early recognition of complications, sensitivity training)

5L. Contribute to the profession through presentations, publications, research, or involvement of professional organizations

KNOWLEDGE STATEMENTS (Topics)

Severe obesity

1. Epidemiology (trends, incidents, prevalence)
2. Sensitivity issues or weight bias issues (e.g., people-first language)
3. Etiology (e.g., biology, medications, environment, genetics, lifestyle)
4. Obesity related medical conditions
 - a. Endocrine (e.g., Type 2 diabetes, metabolic syndrome, polycystic ovarian syndrome)
 - b. Cardiovascular (e.g., hypertension, dyslipidemia, stroke, cardiovascular disease, congestive heart failure)
 - c. Musculoskeletal (e.g., degenerative joint disease, back pain)
 - d. Gastrointestinal (e.g., gastroesophageal reflux disease, fatty liver disease)
 - e. Pulmonary (e.g., obstructive sleep apnea, asthma, Pickwickian syndrome)
 - f. Urinary/gynecological (e.g., incontinence, infertility)
 - g. Neurological (e.g., pseudotumor cerebri / idiopathic intracranial hypertension)
 - h. Cancer (e.g., breast, uterus, cervix)
5. Normal anatomy and physiology of the gastrointestinal system
6. Physiology and mechanisms of weight loss and weight gain

Considerations for metabolic and bariatric surgery patients

1. Criteria for metabolic and bariatric surgery candidacy
2. Contraindications for surgery candidacy
3. Socio-economic issues
4. Age-related considerations (e.g., adolescent, geriatric)
5. Ethnicity, gender, religious, and cultural considerations
6. Patients with high-risk conditions (e.g., severe medical condition, multiple major abdominal surgeries, prior metabolic and bariatric surgeries)
7. Abnormal eating behaviors and disorders
8. Psychological or cognitive disorders (e.g., depression, anxiety, addiction, schizophrenia, obsessive-compulsive disorder, bipolar disorder, brain injury)
9. Substance use (e.g., nicotine, alcohol, marijuana, opioids)
10. Pharmacological history (e.g., non-steroidal, psychiatric medication, immunosuppressants)

Metabolic and bariatric surgery procedures

1. Evolution of metabolic and bariatric surgical procedures including historical procedures
2. Types of primary metabolic and bariatric procedures
 - a. Adjustable gastric band
 - b. Sleeve gastrectomy
 - c. Roux-en-Y gastric bypass
 - d. Biliopancreatic diversion-duodenal switch
 - e. Single anastomosis duodeno-ileostomy with sleeve (SADI/SADI-S)
 - f. Endoscopic therapy (e.g., balloon, stent, aspiration)
 - g. Other emerging procedures, technologies, or treatments
3. Types of non-primary metabolic and bariatric procedures

- a. Revision
 - b. Conversion
 - c. Reversal
- 4. Procedure-specific considerations
 - a. Anatomical and physiological changes
 - b. Risks and benefits
 - c. Preoperative process
 - d. postoperative process
 - e. Weight change expectations
 - f. Obesity-related disease improvement, remission, and/or resolution
 - g. Secondary effects (e.g., dumping syndrome, hypoglycemia, redundant skin)
- 5. Surgical/Procedural Approaches
 - a. Open
 - b. Laparoscopic
 - c. Endoscopic
 - d. Robotic-assist
- 6. Intraoperative process (e.g., draping, positioning, anesthesia, procedure-specific considerations)

Surgical complications

- 1. Types of complications (e.g., bleed, leak, venous thromboembolism, bowel obstruction, internal hernia, stenosis, band complications, gastro-gastric fistula, rhabdomyolysis)
- 2. Prevention of complications (e.g., venous thromboembolism, Pneumonia, pressure injuries/rhabdomyolysis)
- 3. Intraoperative complications (e.g., loss of airway, intraoperative leak, liver laceration, nerve damage)
- 4. Clinical presentation of postoperative complications (e.g., early, late, long-term)
- 5. Treatment of complications
- 6. Emergency interventions (e.g., rapid response activation, failure to rescue, notification of the surgeon)
- 7. Unique considerations (e.g., diagnostic testing, risk of nasogastric tube insertion)

Patient management across the continuum of care

- 1. Skin, nail, and hair integrity/care
- 2. Adequate dentition
- 3. Fluid and electrolyte management
- 4. Pain management
- 5. Laboratory and diagnostic testing and results
- 6. Medical weight management modalities
 - a. Preoperative
 - b. Postoperative
- 7. Bariatric safe patient handling
- 8. Specialized equipment needs
- 9. Implications of metabolic and bariatric surgery on
 - a. Fertility and pregnancy
 - b. Alcohol metabolism and effects
 - c. Medication management
 - d. Psychosocial adjustments
- 10. Discharge planning process
- 11. Long term follow-up

Nutritional considerations

1. Procedure-specific nutrition and supplementation guidelines
2. Types of nutritional deficiencies (e.g., thiamine, Vitamin B12, Vitamin D, fat soluble vitamins, iron, calcium, protein)
3. Prevention of nutritional deficiencies
4. Identification of nutritional deficiencies
5. Treatment of nutritional deficiencies
6. Adaptive and maladaptive eating behaviors and recommendations
7. Dietary progression following surgery

Lifestyle changes

1. Physical activity/exercise
2. Behavior-modification counseling
3. Risks of substance use (e.g., nicotine, alcohol, marijuana, opioids)
4. Modalities to improve patient adherence
5. Role of support groups for patients/support persons

Professional Practice

1. Fundamental research principles and quality improvement
2. Risk management
3. Professional organization and government agency guidelines and recommendations
4. Informational resources related to the disease of obesity, metabolic and bariatric surgery
5. Professional associations (e.g., ASMBS, TOS, OAC, SAGES, OMA, ACS)
6. Metabolic and bariatric surgical program accreditation

EXAMINATION OVERVIEW & TEST SPECIFICATIONS

EXAMINATION OVERVIEW & TEST SPECIFICATIONS

The CBN Examination is developed and administered in accordance with the *Standards for Educational and Psychological Testing* (American Educational Research Association, American Psychological Association, & National Council on Measurement in Education, 2014).

- **Number of Questions:** 175 multiple-choice items
 - **Scored:** 150
 - **Pretest (not scored):** 25, used for future exam development
- **Answer Format:** Each question has four options (A, B, C, D), with one best answer.
- **Time Limit:** 3 hours (180 minutes)

TEST QUESTION FORMAT

- All questions are multiple-choice and **carry equal weight**.
- Candidates are expected to select the **single best response** that answers the question or completes the statement.
- Questions are positively worded and presented with four options (A, B, C, D).
- You are to select the one best option as your answer.
- Credit is awarded only for selecting the correct response.

DOMAINS

The test specifications were determined by the CBN Practice Analysis Task Force based on input from survey respondents, statistical analysis, and subject-matter expertise. The table below lists the content weighting for each task domain and the associated number of questions for the CBN examination.

Domain	Percentage	# of Items
1. Clinical Management: Preoperative (Pre-hospital)	21.3%	32
2. Clinical Management: Perioperative (Hospital)	25.3%	38
3. Clinical Management: Follow-up (Post-discharge & longer term)	25.3%	38
4. Professional and Community Collaboration	14.7%	22
5. Program Quality	13.3%	20
Total	100%	150

Reference List

This list is provided as a resource to identify appropriate material that may be useful in preparing for the CBN Examination. This list is not intended to be inclusive of all potentially useful resources nor does it constitute an endorsement by the ASMBS or any officers or representatives of the ASMBS. To assist in locating the listed publications, the web addresses of the publishers are listed when available.

CLINICAL GUIDELINES

Clinical guidelines regarding metabolic and bariatric surgery published by medical and nursing organizations are good resources to study from. Examples of this type of guideline include:

American Society for Metabolic and Bariatric Surgery (ASMBS) (2024). American Society for Metabolic and Bariatric Surgery Consensus Statement on Obesity as a Disease
<https://asmbs.org/resources/consensus-statement-on-obesity-as-a-disease/>

American Society for Metabolic and Bariatric Surgery (ASMBS) Clinical Issues Committee (2012). Perioperative management of obstructive sleep apnea. *Surgery for Obesity and Related Diseases*, 8(3), e27-e32.

Aminian, A., Chang, J., Brethauer, S. A., Kim, J. J., & American Society for Metabolic and Bariatric Surgery Clinical Issues Committee (2018). ASMBS updated position statement on bariatric surgery in class I obesity (BMI 30-35 kg/m²). *Surgery for obesity and related diseases : official journal of the American Society for Bariatric Surgery*, 14(8), 1071–1087. doi: 10.1016/j.soard.2018.05.025

Aminian, A., Vosburg, R. W., Altieri, M. S., Hinojosa, M. W., Khorgami, Z., & American Society for Metabolic and Bariatric Surgery Clinical Issues Committee (2022). The American Society for Metabolic and Bariatric Surgery (ASMBS) updated position statement on perioperative venous thromboembolism prophylaxis in bariatric surgery. *Surgery for obesity and related diseases : official journal of the American Society for Bariatric Surgery*, 18(2), 165–174. doi: 10.1016/j.soard.2021.10.023

Chapmon, K., Stoklossa, C.J., and Benson-Davies, S. (2022). Nutrition For Pregnancy After Metabolic And Bariatric Surgery: Literature Review And Practical Guide. *Surgery for Obesity and Related Diseases*, 18(6), 820-830. doi: 10.1016/j.soard.2022.02.019.

Davies, P., et al. (2012). Gastric band adjustment credentialing guidelines for physician extenders. *Surgery for Obesity and Related Diseases*, 8(6), e69-e71.

Docimo, S., et.al. (2023). Endoscopic sleeve gastroplasty and its role in the treatment of obesity: a systematic review. *Surgery for Obesity and Related Diseases*, 19(11), 1205-1218. doi: [10.1016/j.soard.2023.08.02](https://doi.org/10.1016/j.soard.2023.08.02)

- Eisenberg, D., Shikora, S. A., Aarts, E., Aminian, A., Angrisani, L., Cohen, R. V., De Luca, M., Faria, S. L., Goodpaster, K. P. S., Haddad, A., Himpens, J. M., Kow, L., Kurian, M., Loi, K., Mahawar, K., Nimeri, A., O'Kane, M., Papasavas, P. K., Ponce, J., Pratt, J. S. A., ... Kothari, S. N. (2022). 2022 American Society for Metabolic and Bariatric Surgery (ASMBS) and International Federation for the Surgery of Obesity and Metabolic Disorders (IFSO): Indications for Metabolic and Bariatric Surgery. *Surgery for obesity and related diseases*, 18(12), 1345–1356. doi: 10.1016/j.soard.2022.08.013
- Ghiassi, S., El Chaar, M., Aleassa, E. M., Moustarah, F., El Djouzi, S., Birriel, T. J., Rogers, A. M., & American Society for Metabolic and Bariatric Surgery Clinical Issues Committee (2020). ASMBS position statement on the relationship between obesity and cancer, and the role of bariatric surgery: risk, timing of treatment, effects on disease biology, and qualification for surgery. *Surgery for obesity and related diseases : official journal of the American Society for Bariatric Surgery*, 16(6), 713–724. doi: 10.1016/j.soard.2020.03.019
- Ghiassi, S., Nimeri, A., Aleassa, E. M., Grover, B. T., Eisenberg, D., Carter, J., & American Society for Metabolic and Bariatric Surgery Clinical Issues Committee (2024). American Society for Metabolic and Bariatric Surgery position statement on one-anastomosis gastric bypass. *Surgery for obesity and related diseases : official journal of the American Society for Bariatric Surgery*, 20(4), 319–335. doi: 10.1016/j.soard.2023.11.003
- Groller, K., Teel, C., Stegenga, K., & El Chaar, M. (2018). Patient Perspectives About Bariatric Surgery Unveil Experiences, Education, Satisfaction, and Recommendations for Improvement. *Surgery for Obesity and Related Diseases*, 14(3), 785-796. doi: 10.1016/j.soard.2018.02.016
- Groller, K. (2017). Systematic review of patient education practices in weight loss surgery. *Surgery for Obesity and Related Diseases*, 13, 1072-1087. doi:10.1016/j.soard.2017.01.008
- Heber, D., Greenway, F. L., Kaplan, L. M., Livingston, E., Salvador, J., Still, C., & Endocrine Society (2010). Endocrine and nutritional management of the post-bariatric surgery patient: an Endocrine Society Clinical Practice Guideline. *The Journal of clinical endocrinology and metabolism*, 95(11), 4823–4843. doi: 10.1210/jc.2009-2128
- Holsworth C, Gallagher S. (2017). Managing Care of Critically Ill Bariatric Patients. *AACN Advanced Critical Care Journal*, 28(3): 275-283.
- Kindel, T. L., Ganga, R. R., Baker, J. W., Noria, S. F., Jones, D. B., Omotosho, P., Volckmann, E. T., Williams, N. N., Telem, D. A., Petrick, A. T., Gould, J. C., & ASMBS Quality Improvement and Patient Safety Committee (2021). American Society for Metabolic and Bariatric Surgery: Preoperative Care Pathway for Laparoscopic Roux-en-Y Gastric Bypass. *Surgery for obesity and related diseases : official journal of the American Society for Bariatric Surgery*, 17(9), 1529–1540. doi: 10.1016/j.soard.2021.05.011

- Kominiarek, M. A., Jungheim, E. S., Hoeger, K. M., Rogers, A. M., Kahan, S., & Kim, J. J. (2017). American Society for Metabolic and Bariatric Surgery position statement on the impact of obesity and obesity treatment on fertility and fertility therapy Endorsed by the American College of Obstetricians and Gynecologists and the Obesity Society. *Surgery for obesity and related diseases : official journal of the American Society for Bariatric Surgery*, 13(5), 750–757. doi: 10.1016/j.soard.2017.02.006
- Lin, H., Baker, J. W., Meister, K., Lak, K. L., Martin Del Campo, S. E., Smith, A., Needleman, B., Nadzam, G., Ying, L. D., Varban, O., Reyes, A. M., Breckenbridge, J., Tabone, L., Gentles, C., Echeverri, C., Jones, S. B., Gould, J., Vosburg, W., Jones, D. B., Edwards, M., ... Petrick, A. (2024). American society for metabolic and bariatric surgery: intra-operative care pathway for minimally invasive Roux-en-Y gastric bypass. *Surgery for obesity and related diseases*, Advanced Online Publication. doi: 10.1016/j.soard.2024.06.002
- Mechanick, J. I., Apovian, C., Brethauer, S., Garvey, W. T., Joffe, A. M., Kim, J., Kushner, R. F., Lindquist, R., Pessah-Pollack, R., Seger, J., Urman, R. D., Adams, S., Cleek, J. B., Correa, R., Figaro, M. K., Flanders, K., Grams, J., Hurley, D. L., Kothari, S., Seger, M. V., ... Still, C. D. (2020). Clinical practice guidelines for the perioperative nutrition, metabolic, and nonsurgical support of patients undergoing bariatric procedures - 2019 update: cosponsored by American Association of Clinical Endocrinologists/American College of Endocrinology, The Obesity Society, American Society for Metabolic & Bariatric Surgery, Obesity Medicine Association, and American Society of Anesthesiologists. *Surgery for obesity and related diseases : official journal of the American Society for Bariatric Surgery*, 16(2), 175–247. doi: 10.1016/j.soard.2019.10.025
- Patil R., Melander, S.. (2015).Postoperative Complications and Emergency Care for Patients Following Bariatric Surgery. *Med/Surg Nursing*, 24(4):243-248, 265.
- Pediatric Metabolic and Bariatric Surgery: Evidence, Barriers, and Best Practices (2019) *Pediatrics* 144(6)
- Pratt, J. S. A., Browne, A., Browne, N. T., Bruzoni, M., Cohen, M., Desai, A., Inge, T., Linden, B. C., Mattar, S. G., Michalsky, M., Podkameni, D., Reichard, K. W., Stanford, F. C., Zeller, M. H., & Zitsman, J. (2018). ASMBS pediatric metabolic and bariatric surgery guidelines, 2018. *Surgery for obesity and related diseases : official journal of the American Society for Bariatric Surgery*, 14(7), 882–901. doi: 10.1016/j.soard.2018.03.019
- Schumman, R., et al. (2021). Postoperative nausea and vomiting in bariatric surgery: a position statement endorsed by the ASMBS and the ISPCOP. *Surgery for Obesity and Related Diseases*, 17(11), 1829-1833.
- Telem, D. A., Gould, J., Pesta, C., Powers, K., Majid, S., Greenberg, J. A., Teixeira, A., Brounts, L., Lin, H., DeMaria, E., & Rosenthal, R. (2017). American Society for Metabolic and Bariatric Surgery: care pathway for laparoscopic sleeve gastrectomy. *Surgery for obesity and related diseases*, 13(5), 742–749. doi: 10.1016/j.soard.2017.01.027

TEXTBOOKS

This is a listing of current scholarly texts related to the topic of metabolic and bariatric surgery. Inclusion on this list is not a recommendation of any specific text.

Alvarez A., Brodsky, J. B., Lemmens, H. J. M., & Morton, J. M., (Eds.). (2010). *Morbid Obesity: Perioperative Management* (2nd ed.). Cambridge: Cambridge University Press. doi: [10.1017/CBO9780511676307](https://doi.org/10.1017/CBO9780511676307)

Andrés, A. & Saldaña, C. (2013). *A Multidisciplinary Approach to Bariatric Surgery*. Nova Science Publishers Inc.

Bray, G.A., & Bouchard, C., (Eds.). (2014). *Handbook of Obesity, Clinical Applications*, (4th ed.). Informa Healthcare. doi: [10.1201/b16472](https://doi.org/10.1201/b16472)

Brethauer, S. A., Schauer, P.R, Schirmer, B. D., (Eds.). (2015) *Minimally Invasive Bariatric Surgery*. (2nd Ed.). Springer.

Buchwald, H., Cowan, G.S.M., Pories, W.J. (2007). *Surgical Management of Obesity*. Elsevier. doi: 10.1016/B978-1-4160-0089-1.X5001-8

Choi, S. H, & Kazunori, K. (Eds.). (2014). *Bariatric and Metabolic Surgery*. Berlin, Springer. doi: 10.1007/978-3-642-35591-2

Forse, R. A., Apovian, C. M., editors, *Bariatric Surgery What Every Provider Needs to Know*. (2016) Slack, Inc

Gallagher S. (2005). *The Challenges of Caring for the Obese Patient*. Matrix Medical Communications.

Gillespie T, Lane S. (2018). Moving the Bariatric Patient. *Critical Care Nursing Quarterly*, 41(3):297-301.

Groller, K. (2022). Chapter 42: Assessment and Management of Patients with Obesity. In Hinkle, J. & Cheever, K. *Brunner & Suddarth's Textbook of Medical- Surgical Nursing* (15th ed.). Philadelphia, PA: Wolters-Kluwer. Printed-October 2021.

Hakim, N., Favretti, F., Segato, G., & Dillemans, B., (Eds.). (2011). *Bariatric Surgery*. World Scientific Publishing.

Iavazzo, C. R. (2013). *Bariatric Surgery, From Indications to Postoperative Care*. Nova Science. <https://novapublishers.com/shop/bariatric-surgery-from-indications-to-postoperative-care/>

Inabnet W. B., Demaria, E.J., and Ikramuddin, S. (2005). *Laparoscopic Bariatric Surgery*. Lippincott Williams and Wilkins.

Jacques J. (2006). *Micronutrition for the Weight Loss Surgery Patient*. Matrix Medical Communications.

Kothari, S. (2011). Bariatric and Metabolic Surgery, an issue of Surgical Clinics. *Surgical Clinics of North America*, 91(6), 1139-1408. [https://www.surgical.theclinics.com/issue/S0039-6109\(11\)X0006-3](https://www.surgical.theclinics.com/issue/S0039-6109(11)X0006-3)

- Mitchell, J. E., & de Zwaan, M., (Eds.). (2012). *Psychosocial Assessment and Treatment of Bariatric Surgery Patients*. Taylor and Francis. doi: [10.4324/9780203801505](https://doi.org/10.4324/9780203801505)
- Nguyen, N. T., Blackstone, R. P., Morton, J. M., et., (Eds.). (2020). *The ASMBS Textbook of Bariatric Surgery: Volume 1: Bariatric Surgery*. Springer.
- Nguyen, N. T., DeMaria, E., Ikramuddin, S., & Hutter, M. M., (Eds.). (2008). *The SAGES Manual, A Practical Guide to Bariatric Surgery*. Springer.
- Patel, N., & Koche, L. S., editors. (2007). Bariatric Surgery Primer for the Internist, an issue of Medical Clinics. *Medical Clinics of North America*, 91(3), 353-381. doi: 10.1016/j.mcna.2007.02.004
- Pitombo, C., Jones, K., Higa, K., and Pareja, J, editors. (2008). *Obesity Surgery, Principles and Practices*. New York: McGraw Hill.
- Rogula, T. G., Schauer, P.R., Fouse T. S., (Eds.). (2018). *Prevention and Management of Complications in Bariatric Surgery*. New York: Oxford University Press.
- Shahzeer, K., Birch, D. W., (Eds.). (2013). *The Fundamentals of Bariatric Surgery*. Nova Science.
- Still, C., Sarwer, D. B., Blankenship, J., editors. (2014). *The ASMBS Textbook of Bariatric Surgery: Volume 2: Integrated Health*. New York: Springer. doi: 10.1007/978-1-4939-1197-4

JOURNALS

This is a listing of journals related to the topic of metabolic and bariatric surgery. Inclusion on this list is not a recommendation of any specific journal.

Annals of Surgery

Bariatric Surgical Practice and Patient Care, previously Bariatric Nursing and Surgical Patient Care, Mary Ann Liebert Inc.

Journal of the American Medical Association (JAMA)

Obesity Management

Obesity Surgery, Springer

Surgery for Obesity and Related Diseases (SOARD), Elsevier