WHAT IS MSNICB?

The MULTIPLE SCLEROSIS NURSES INTERNATIONAL CERTIFICATION BOARD (MSNICB) was established by the International Organization of Multiple Sclerosis Nurses (IOMSN) to develop criteria for certification and re-certification and administer the Certification Examination for Multiple Sclerosis Nurses.

WHAT IS CERTIFICATION?

The IOMSN endorses the concept of voluntary certification by examination for nursing professionals providing care in multiple sclerosis. Those who work or have worked in this specialty and meet eligibility requirements may be candidates to take this examination. Certification focuses specifically on the individual and is an indication of knowledge and skills in MS practice. MS nursing certification provides normal recognition of a level of knowledge in the field and promotes delivery of safe and effective practice in the domains of Clinical Practice (disease course and epidemiology of MS, pathology, diagnosis, pharmacologic therapies, nonpharmacologic therapies, psychosocial assessment and interventions), Advocacy.
ABOUT MSNICB
Written by Administrator

(ethical practice, negotiating the healthcare system, empowerment, knowledge of the community resources, patient rights, consultation expertise);

Education
(principles of teaching/learning, health promotion and change theory, special populations professional development); and

Research
(evidence based practice, protection of human subjects, research terminology and process).

WHO IS ELIGIBLE FOR CERTIFICATION?

It is recommended that candidates have at least two years of experience in multiple sclerosis nursing. Candidates must meet the following requirements:

1. Currently registered as a Registered Nurse, or the equivalent in other countries.
2. Completion and filing of an Application for the Multiple Sclerosis Nursing International Certification Examination.
3. Payment of required fee.

WHAT CONTENT IS COVERED IN THE EXAMINATIONS?

1. Basic concepts of MS (disease course classification, neuroanatomy, pathophysiology of MS, diagnostic process and tools).
3. Symptom management.
4. Psychosocial intervention.
5. Research and education initiatives.
6. Patient advocacy.