

**Arizona State Board of Nursing  
Policy and Procedure**

**POLICY NAME**                      **Special Accommodation Request for NCLEX®**

**EFFECTIVE DATE:**                **July 2008**

*Greg Ridenour R.N. M.N. J.A.N.*  
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Signature

**REVISION DATE(s)**                **November 2011; July 2008; January 2016; July 2017; August 2018**

**CANCELLATION DATE**

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- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Administration       | <input type="checkbox"/> Hearing                | <input type="checkbox"/> Monitoring            |
| <input type="checkbox"/> CANDO                | <input type="checkbox"/> Information Technology | <input type="checkbox"/> Multi-state Licensure |
| <input checked="" type="checkbox"/> Education | <input type="checkbox"/> Investigations         |  |
| <input type="checkbox"/> Fiscal Services      | <input type="checkbox"/> Licensing              |  |
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**Reference:**    **Special Accommodation Request for NCLEX®**

**Purpose:**        To comply with the Americans with Disabilities Act and its amendments, and provide fair and reasonable accommodation to qualified applicants for NCLEX

**Policy:**

**Requirements for Applicants**

Consistent with NCLEX Member Board Manual May, 2017 (Chapter 3) an applicant requesting special testing accommodations must provide the following information prior to or with the application for licensure:

- A letter requesting accommodations that includes the specific type of accommodation requested and includes applicant's contact information (phone, e-mail);
- Documentation including recent\* reports, test results, evaluations and assessments of the candidate's need for accommodations due to a disability (physical or mental impairment) that substantially limits one or more major life activities. Major life activities include walking, seeing, hearing, speaking, breathing, learning, thinking, working, caring for one's self and performing manual tasks. Mental impairment includes any mental or psychological disorder, such as organic brain syndrome, emotional or mental illness and specific learning disabilities, which are protected under the Americans with Disabilities Act (ADA). Appropriate documentation supporting the request for accommodations, including results of appropriate diagnostic testing, must be submitted by a qualified professional with expertise in the areas of the diagnosed disability. Documentation includes:
  - A history of the disability and any past accommodation(s) granted to the candidate, as well as a description of its impact on the individual's functioning;
  - Identification of the specific standardized and professionally recognized test/assessments given (e.g., Woodcock-Johnson, Weschler Adult Intelligence Scale);
  - The scores resulting from testing, interpretation of the scores and evaluations; and
  - Recommendations for testing accommodations with a stated rationale as to why the requested accommodations are necessary and appropriate for the diagnosed disability.

## **Board Review Process**

The request for accommodations is reviewed by either the Executive Director or designee. Board staff members shall critically review the documentation to ensure that the:

- Documentation is complete as requested,
- Documentation supports the requested accommodation, and
- Accommodation requested is reasonable, can be provided by NSCBN/Pearson VUE, and does not compromise the intent of the exam (e.g. a request for a paper/pencil test cannot be provided)

During the course of the review, Board staff may communicate with the applicant to clarify the request or suggest available alternatives if the accommodation is not feasible (e.g. a paper/pencil test). The decision to recommend or not recommend the accommodation is conveyed to the licensing technician and the applicant, who is then instructed to apply for the exam. While the Board may recommend an accommodation, NSCBN reviews all requests and either grants or denies the request. If the request is denied, the applicant may submit additional information to support their request.

## **Denial and Appeal Process; Transfer of Information; Record of Request**

If staff does not have sufficient evidence to grant the accommodation, the applicant will be informed of the requirements and advised as to the evidence needed to grant the request. The applicant may appeal staff findings to the Board by submitting a written request within 10 days of the notification of insufficient evidence to grant the accommodation.

If there is information in the accommodation request that indicates the applicant's condition poses a risk to the health, safety and welfare of patients or the public, that information will be provided to the investigations department and an investigation may be conducted.

All requests for accommodation are maintained and filed in the applicant's licensing file and are not considered public records.

*\*Recent means in the last 4 years unless the disability is documented by the professional as stable and permanent or a condition known to be stable and permanent.*

Please direct inquiries to:  
NCLEX Accommodations  
Arizona State Board of Nursing  
1740 W Adams Street, Suite 2000  
Phoenix, AZ 85007

E-mail: [lledbetter@azbn.gov](mailto:lledbetter@azbn.gov)

Phone: 602-771-7856

For quicker results please [click here](#) to submit your accommodation request.

**PLEASE include your contact e-mail address and phone number in ALL CORRESPONDENCE.**

## **Available NCLEX® Accommodations—any accommodation requested must be supported by the evaluation**

**Adjustable Contrast.** The display of the contrast on the monitor can be adjusted so that the exam questions are displayed in a higher or lower contrast via different colors for text and background. **Adjustable Font Size.** The candidate can adjust the size of the text displayed on the screen. If a large font is selected the candidate may need to scroll within the test question.

**Aid.** Candidate is permitted to bring a particular aid to the testing center and use it during the exam. The candidate provides the aid.

**Equipment.** The candidate is permitted to use specific equipment during the exam. The testing center provides the equipment. *Note: “Personal Item” refers to approved items the candidate brings to the test center.*

*“Equipment” refers to items provided by Pearson VUE at the testing center*

**Extra Time – 2 hours.** The Candidate is given 2 additional hours to complete the exam. An RN candidate will be given a total of 8 hours to complete the exam over 1 day. A PN candidate will be given a total of 7 hours to complete the exam over 1 day. Scheduled, optional breaks will be offered after 2 hours, 4 hours, and 6 hours of exam time. Scheduled and optional breaks are counted in the exam time.

**Extra Time--3 hours.** The Candidate is given 3 additional hours to complete the exam. An RN candidate will be given a total of 9 hours to complete the exam over 1 day. A PN candidate will be given a total of 8 hours to complete the exam over 1 day. Scheduled, optional breaks will be offered after 2 hours, 4 hours, and 6 hours of exam time. Scheduled and optional breaks are counted in the exam time.

**Extra Time - double time 2 days.** The candidate is given double the exam time to complete the exam over two days. An RN candidate is allotted 12 hours over 2 days, 6 hours of exam time on each day. A PN candidate is allotted 10 hours over 2 days, 5 hours of exam time on each day. Scheduled, optional breaks will be offered after 2 hours and 3.5 hours of exam time on each day.

**Extra Time—other.** The candidate is given a customized amount of possible extra testing time; scheduled, optional breaks will occur as indicated by the testing time. The BON must specify in minutes the additional time being requested. No more than nine hours of testing is allowed in a day.

**Other** A non-standard accommodation is requested.

**Separate Room** The exam must be delivered in a private room.

**Separate Room & Reader** A reader may assist the candidate. The exam must be delivered in a private room.

**Separate Room & Recorder** A recorder may assist the candidate. The exam must be delivered in a private room.

**Separate Room & Sign Language Interpreter.** A sign language interpreter may assist the candidate with communicating with the Test Administrator (TA) only. The exam must be delivered in a private room. The actual exam is taken without the assistance of a sign language interpreter.

### **Comfort aids that must be provided by the test center and do not require an accommodation request**

Earplugs

Noise Canceling Headphones

Tissues/Kleenex

### **Medicine and Medical Devices (provided by the candidate) allowed without an accommodation request. These will be visually inspected at the test center.**

Auto-injectors; such as EpiPen, Bandages, Braces (neck, back, wrist, leg, ankle), Casts/slings including slings for broken/sprained arms and other injury-related items that cannot be removed., Cough drops (unwrapped and not in a bottle/container), Eye drops, Eye patches, Eyeglasses (without the case) – must be removed for visual inspection  
Glucose Tablets (does not include hard candy) - must be unwrapped and not in a bottle/container, Handheld (non-electronic) magnifying glass (without the case), Hearing aids/Cochlear implant, Inhaler, Medical alert bracelet (including those with USB ports), Medical device attached to a person’s body (Examples include but are not limited to: Insulin pump, TENS unit, Spinal cord stimulator), Medical/surgical face mask, Oxygen Tank, Pillow/cushion, Pills (must be unwrapped, not in a bottle or container—may be in the packaging if the packaging states they MUST remain in the packaging (e.g. nitro glycerin pills).

### **Mobility Devices provided by the candidate that do not require an accommodation**

Canes, Crutches, Motorized Scooters/chairs, Walkers, Wheelchairs.

For more information regarding NCLEX test accommodations please visit:

<https://home.pearsonvue.com/test-taker/test-accommodations.aspx#b>

*Note: Applicants must apply for testing accommodations PRIOR to registering for the NCLEX exam.*