Next Gen NCLEX: Clinical Judgment

The six NCJMM steps, NGN item types and partial-credit scoring on the 2026 NCLEX-RN and NCLEX-PN

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THE SIX CLINICAL JUDGMENT STEPS

NCSBN's Clinical Judgment Measurement Model (NCJMM) is a testing framework, not a replacement for the nursing process. Each case follows its six steps in order.

STEP	WHAT IT ASKS	TYPICAL ITEM
1. Recognize cues	Which data matter right now?	Highlight findings that need follow-up
2. Analyze cues	What do the cues point to?	Matrix: finding fits condition A, B or C
3. Prioritize hypotheses	Which problem is most urgent or likely?	Drop-down: most at risk for ___ because of ___
4. Generate solutions	Which interventions reach the goal?	Matrix: indicated, nonessential or contraindicated
5. Take action	What do you do now, and first?	Select all, or drop-down table of actions
6. Evaluate outcomes	Is the plan working?	Matrix: improved, no change or declined

EXAM TIP Items never name their step, but stem wording often hints: follow-up needed (recognize), consistent with (analyze), highest risk (prioritize), indicated (generate), implement (take action), improved or effective (evaluate).

EXAM FORMAT (2026 TEST PLANS)

- 85 to 150 items in 5 hours; the intro screen and all breaks count
- Minimum length: 52 Client Needs items, 18 case items (3 cases × 6), 15 unscored pretest items
- About 10% stand-alone clinical judgment items; any item type can stand alone
- After 85 items it stops once 95% sure you are above or below passing; otherwise at 150 or time-out
- No skipping, no going back; length does not predict the result
- Classic formats remain: multiple choice, select all, calculation, ordered response, exhibit and graphic
- In effect April 1, 2026 to March 31, 2029

EXAM TIP Run-out-of-time rule: fewer than 85 answered items at time-out is a fail. Pace near 2 minutes per item; NCSBN expected cases to take no extra time.

NCLEX-PN: SAME MODEL, LPN/VN SCOPE

The NCLEX-PN uses the same steps, item types, scoring, length and time; Management of Care is Coordinated Care. The keyed action changes:

- Collect data; recognize and report changes to the supervisor or provider
- Reinforce education
- Contribute to the plan of care
- Clients with common problems and predictable outcomes

THREE SCORING RULES

RULE	USED WHEN	HOW IT SCORES
0/1	Set number to pick, or one per row or blank	+1 per correct; wrong picks cost nothing
+/–	Free to pick any number (select all, highlight)	+1 per correct, –1 per wrong; floor 0
Rationale	Linked cause and effect	1 point per cause-effect pair, both halves right

ITEM TYPE	WHAT YOU DO	SCORING
Select all that apply	Pick every correct option (at least 1)	+/–
Select N	Pick exactly N	0/1
Multiple response grouping	Select all within each group	+/– per group, floor 0
Matrix multiple choice	One choice per row	0/1 per row
Matrix multiple response	Any boxes per row; at least 1 per column	+/– per column, floor 0
Cloze: drop-down, drag-and-drop or table	Fill each blank	0/1 per blank
Rationale: drop-down or drag-and-drop	Cause plus 1 or 2 effects	Dyad 1 pt; triad up to 2
Highlight: text or table	Pick phrases or rows that answer the stem	+/–
Bow-tie	1 condition, 2 actions, 2 parameters; pair order is free	0/1; 5 pts
Trend (NCSBN 2021 term)	Data across time points; any format but bow-tie	Its format's rule

EXAM TIP In select-all, highlight, grouping and matrix multiple-response items, a wrong pick cancels a right one within that group or column. Judge each option true or false on its own; never aim for a count.

CASE STUDY STRUCTURE

- One client, six items, data that unfold over time
- Chart tabs (notes, vitals, labs, orders) can change as the case unfolds; open every tab, since nothing prompts you
- Items run in step order and are scored one by one; a miss does not carry forward
- Labs show reference ranges; units mix SI and imperial
- An extra case may be unscored pretest; you cannot tell which
- Answer from the current screen: if the client changed, so may the best action

STRATEGIES BY ITEM TYPE

- Highlight: mark only what the stem asks for; expected findings are usually distractors
- Matrix: treat every row as its own question
- Cloze and rationale: choose the condition first, then its evidence; reread the sentence
- Bow-tie: condition first, then actions that treat it and parameters that track it
- Trend: compare time points; direction of change outweighs one value
- Select N: fill every slot; wrong picks cost nothing

Sources (17) are listed with links at rnbasics.com/sheets/ngn-clinical-judgment.html. For education and exam preparation only. Not medical advice; follow current guidelines and your institution's protocols. RN Basics is an independent study aid not affiliated with any certifying body.