ACSM Certified Clinical Exercise Physiologist® (ACSM-CEP®)

2024 Job Task Analysis, Public Summary

Purpose of the Job Task Analysis

A job task analysis (JTA) is a systematic study that identifies the tasks, knowledge, and skills required for competent performance of a job. ACSM conducts JTAs so that its certification exams reflect current professional practice, which supports the content validity of each exam. A JTA defines what an exam measures. It is not the exam, a curriculum, or a scope-of-practice document.

The 2024 study reviewed and updated the content outline for the ACSM-CEP, which had last been updated through a JTA in 2017. ACSM contracted ACS Ventures, LLC to conduct the study in line with the *Standards for Educational and Psychological Testing* and the NCCA *Standards for the Accreditation of Certification Programs*.

ACSM Policy and Oversight

ACSM policy requires a JTA for each certification program at intervals not to exceed seven years. Each JTA is based on input from a representative sample of the profession and follows accepted psychometric and industry standards. The results are used to establish and update the exam content outline, including its domain structure and weighting.

The CCRB Executive Council holds sole authority over examination content. It is informed of JTA results and reviews and approves substantive changes to the content outline. Subject matter experts (SMEs) are selected for their education, professional experience, and current practice, and they collectively represent the breadth of settings and roles in the profession. They complete required training and agree to confidentiality and conflict-of-interest requirements before they participate.

Methodology

The study had three phases:

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Movement for all.

Phase 1: SME Focus Groups.

A committee of 22 SMEs met over three days. Members had 5 to 40 years of experience (average of 15.5). All held the ACSM-CEP, all held at least a bachelor's degree, and all were currently working or had recently worked as clinical exercise physiologists or educators.

The committee:

- discussed how the profession has changed since 2017, including the patients ACSM-CEPs work with, the facilities where they are employed, and the scope of their responsibilities;
- defined the minimally qualified candidate, meaning an entry-level professional who is just qualified to practice;
- reviewed and revised the job tasks and the related knowledge and skill statements;
- assigned a cognitive level to each task;
- reviewed the wording of the survey.

Phase 2: Validation Survey.

The survey was open for about eight weeks. ACSM invited all 3,185 currently certified clinical exercise physiologists by email and also posted the link on social media. Of those invited, 539 completed at least part of the survey. For each task, respondents rated how often an entry-level ACSM-CEP would perform it and the risk to the client if it were not performed safely. For each knowledge or skill statement, they indicated whether an entry-level ACSM-CEP would use it. They could also suggest additional content. Respondents came from all four U.S. Census regions and from outside the United States. The SME committee judged the sample to be representative of the profession based on state, age, employment status, and years of experience.

Phase 3: Analysis and Finalization.

ACS Ventures presented the results to the SME committee, including:

- how respondents compared with the credentialed population;
- average ratings for each task and statement;
- comparisons by region and years of experience;
- respondent comments.

Content with low ratings was flagged for discussion. The committee reviewed the additional content respondents suggested and revised the wording of several statements to better reflect their intent. It then finalized the content outline and set the domain weights by consensus.

Results and Findings

The final outline has six performance domains.

Performance domain	Survey-derived importance	Final exam weight	Scored items
I. Patient Assessment	18.9%	18%	18
II. Exercise Testing	18.4%	18%	18
III. Exercise Prescription	15.6%	22%	22
IV. Exercise Training and Leadership	27.2%	24%	24
V. Education and Behavior Change	12.3%	13%	13
VI. Legal and Professional Responsibilities	7.6%	5%	5
Total		**100%**	**100**

Survey-derived importance is based on the aggregated task importance ratings, which combine frequency and risk to the client. The committee treated the survey as the primary basis for its decisions and also considered the prior outline's weights and changes in the field of clinical exercise physiology.

- **Domains I, II, and V:** The panel kept values closely aligned with the survey results.
- **Domain III:** The panel raised the weight above the survey result. The domain's lower survey-derived weight reflected the number of statements under it, and the panel judged that, based on the tasks performed in practice, it should carry a weight closer to Domain IV.
- **Domain VI:** The panel judged that this content is important to safe and effective practice but not well suited to multiple-choice measurement. A weight above 5% would produce items that test recall of regulatory or procedural information rather than candidate competency. It would also not support a defensible number of high-quality items on each form.

The exam has 115 items: 100 scored and 15 unscored pretest items.

Cognitive Levels

Each job task was assigned one of three cognitive levels.

- **Recall:** recognizing information such as concepts, principles, facts, or procedures that can be found in a manual, textbook, or other resource.
- **Application:** applying knowledge that depends on the situation, including basic calculations and identifying relationships between concepts ("if… then").
- **Analysis:** considering and evaluating several pieces of information or variables to reach an answer, which typically takes several steps, such as complex calculations or identifying patterns in data.

Domain	Tasks	Recall	Application	Analysis
I	5	1	2	2
II	5	1	3	1
III	4	2	0	2
IV	7	1	3	3
V	4	0	2	2
VI	2	2	0	0
Total	**27**	**7**	**10**	**10**

The table counts tasks, not exam items.

Application of Results

The JTA findings are published as the ACSM-CEP Exam Content Outline, effective July 10, 2025. Exam forms are built to the outline's domains and weights, and every exam item is linked to the outline. ACSM compares its item bank with the outline, identifies gaps, and works with the ACSM-CEP Credentialing Subcommittee to create and review new items. Each exam also includes 15 pretest items that do not count toward a candidate's score.

The detailed tasks, knowledge and skill statements, and weights are in the [ACSM-CEP Exam Content Outline — here].