

NCLEX Time to Test Maryland Schools of Nursing Comparison

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Abstract

Background: Reduced time to test has been associated with improved first-time pass rates for the NCLEX-RN among nursing graduates. The purpose of this study was to examine the relationship between time from graduation to NCLEX-RN testing and first-time pass rates across Maryland nursing programs. **Methods:** A retrospective descriptive analysis was conducted using data from the Maryland Board of Nursing (MBON). **Results:** Data showed that those nursing programs with higher pass rates also had a lower time to test. **Conclusion:** Nursing programs should encourage students to take the NCLEX-RN Exam within 60 days of graduation.

Introduction

In 2022, the U.S. Bureau of Labor Statistics estimated that “healthcare employment accounts for 9.3% of total employment” in the U.S (para. 1). Of that, more than 1 in every 5 healthcare workers are registered nurses (U.S. Bureau of Labor Statistics, 2025). The profession is projected to grow 5% from 2024-2034 (U.S. Bureau of Labor Statistics, 2025). In 2025, the average NCLEX-RN pass rate for first-time US education candidates was 86.7% (NCSBN, 2026a).

The NCLEX-RN is a standardized exam developed by the National Council for State Boards of Nursing (NCSBN, 2026b). The exam is used to measure the competencies required for safe entry-level nursing care. Kaminski-Ozturk et al. (2022) identified an association between longer time-to-test from graduation and a higher chance of failing the NCLEX on the first attempt. Looking at 30-day increments, those testing within 60 days of graduation have a higher chance of passing than those

who tested >60 days. This is consistent with other studies that associate delayed testing with a lower NCLEX pass rate (Rogers et al., 2025; Eich & O'Neill, 2007; Woo et al., 2009). Despite existing evidence linking delayed testing to lower pass rates, limited state-level analyses have examined this relationship across nursing programs. This study aims to address that gap using Maryland-specific data.

Methodology

This study is a retrospective descriptive design. Prior to initiating this study, Institutional Review Board approval was obtained in January 2025 as exempt under category #4. Data were requested from the MBON for nurses who obtained an RN license by examination from April 1, 2022, through April 30, 2025. Data returned included: First name, middle name, last name, license type, license number, issue date, expiration date, license status, method, graduation date, school, exam pass date, and demographic variable (age and ethnicity) which were not included in the present analysis.

No inferential statistical testing was conducted; analyses were limited to descriptive statistics. Data analysis was conducted using Excel. Missing data were excluded based on predefined criteria. The unique identifier was the RN License number. Exclusion criteria included: Nursing education outside of the United States, graduation date >365 days from NCLEX pass date, incomplete data, and duplicate data.

Data was broken out by nursing school. The time from graduation date to NCLEX pass date was calculated. The count (n), mean (M), median (Mdn), and mode were calculated for each school and then compared. The median was selected as the

primary measure of central tendency due to variability and skewness in time-to-test data. Each school was assigned a number to de-identify the school. First time NCLEX pass rates were obtained for the national, state, and each school of nursing, for the following years: 7/1/2022-6/30/2023, 7/1/2023-6/30/2024, and 7/1/2024-6/30/2025.

Results

Data was analyzed to observe trends in program first-time pass rates related to the time between student graduation and when they successfully passed the NCLEX. The median was determined to be the most accurate and reflective data point for evaluation. Average pass rates per program were then calculated for the 90-, 60-, and 30-day post-graduation periods. This analysis is presented in (Table) Interpretation of the <30-day category should be approached with caution due to small sample size across programs.

Across all nursing programs, average pass rates over a three-year period were generally higher than the national average. Programs with a graduation-to-NCLEX pass median of ≤90 days demonstrated a wide range in performance, with average first-time pass rates over a three-year period ranging from 64-100% (M=88.72%). When the median time from graduation to NCLEX passing decreased to ≤60 days, the variability in first-time pass rates narrowed, and overall performance improved to an average pass rate of 91.43%. The highest average pass rates were observed among programs with a median testing time ≤30 days, which achieved the highest overall three-year average pass rate of 93.85%. It should be noted that no BSN/MSN pro-

Table 1: Time to pass NCLEX after graduation

School Type (N)	Metric	Median <90 days	Median <60 days	Median <30 days
SON Overall (26)	High Average	100%	100%	100%
	Low Average	64%	82.55%	85.73%
	3-Year Average (N)	88.72% (24)	91.43% (18)	93.85% (4)
AA degree programs (15)	High Average	100%	100%	100%
	Low Average	85.53%	85.53%	85.73%
	3-Year Average (N)	91.74% (14)	92.36% (12)	93.85% (4)
BSN + MSN programs (11)	High Average	93.25%	93.25%	-
	Low Average	64%	82.55%	-
	3-Year Average (N)	84% (10)	90% (6)	(0)

grams in the dataset had a median time-to-test of <30 days; therefore, this figure represents associate degree (AA) program performance only. These findings should be interpreted with caution given the limited sample sizes in this category.

Discussion

The results of this data analysis project suggest that testing closer to graduation may support higher NCLEX-RN first-time pass rates. Programs with a shorter median time to test tend to demonstrate higher and more consistent pass rates across all program types. This relationship was most pronounced in BSN/MSN programs, which demonstrated the greatest improvement in both mean performance and variability as the time between graduation and NCLEX passing decreased.

There could be multiple explanations as to why the pass rates decline as the time to test increases. Knowledge retention can diminish after graduation. Graduates may overestimate the amount of studying they will do after graduation. Confidence in taking the exam may lapse as time passes.

While this pattern has been suggested in the literature and observed in practice, there is limited data to support the ideal NCLEX testing timeframe post-graduation (Rogers et al, 2025; Eich & O'Neill, 2007; Woo et al., 2009). The analysis of this Maryland-specific data from the last three years suggests that while testing 90 days or less after graduation generally achieves a passing rate higher than the national aver-

age, testing at 60 days or less consistently achieves higher first-time pass rates. This information is extremely valuable to programs aiming to improve or maintain their first-time NCLEX pass rates, as well as for individual nursing students preparing to graduate and enter the workforce.

Nursing programs should evaluate internal processes for validating graduating students and submitting required information to the MBON to expedite the authorization-to-test process. Additionally, students should be informed about the ideal time to test. By encouraging graduates to prioritize the timely completion of MBON applications and NCLEX registration, students can be more actively involved, reducing the time between graduation and testing. Finally, programs can use this information to inform their NCLEX preparation activities, thereby better optimizing student readiness throughout the program, especially in the 60 days post-graduation.

Limitations

There are some limitations to consider. First, many factors affect a program's NCLEX first-time pass rate, including admission procedures, attrition rates, resources, and advancement policies. These factors can vary greatly from year to year or even semester to semester, creating fluctuations in the NCLEX pass rate data that limit the ability to fully understand the true impact of the time between graduation and NCLEX passing. Another key limitation is the effect of program remediation efforts

on the pass rates. Over the three years of data analysis, several programs fell below the Maryland benchmark, prompting remediation that then improved subsequent pass rates. It is unknown what these remediation plans entailed, including whether reducing the time to test was implemented. Finally, the revised NCLEX Next-Gen was implemented in April 2023; therefore, some data in this analysis reflect the old NCLEX. It is possible the change in the NCLEX format impacted first-time pass rates, positively or negatively.

Conclusion

Despite these limitations, the results of this data analysis are important to faculty and leadership at Maryland nursing programs, as well as to individual nursing students. While the full impact of time from graduation to NCLEX passing cannot be determined, a positive consistent trend emerged, with programs achieving higher pass rates when students test within 60 days of graduation. While causality cannot be established, these findings provide actionable insights for programs and students. Efforts to reduce delays in testing may support improved outcomes overall and a faster entry into the workforce. ■

References online:
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