



D&S Diversified Technologies LLP

Headmaster LLP

Arizona Nursing Assistant Candidate Handbook

EFFECTIVE: March 1, 2019 (change to testing attempts 3/1/2019)

Version 18



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Contact Information

Questions regarding testing process, test scheduling and eligibility to test: (800) 393-8664		
Questions about Nursing Assistant certification, renewals or Registry: (602) 771-7800		
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Arizona State Board of Nursing 1740 W. Adams Street, Suite 2000 Phoenix, AZ 85007-2607 Email: Arizona@azbn.gov Web Site: www.azbn.gov	Monday through Friday 8:00 AM – 5:00 PM	Phone #: (602) 771-7800

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Introduction

In 1987, the Nursing Home Reform Act was adopted by Congress as part of the Omnibus Budget Reconciliation Act (OBRA '87). It was designed to improve the quality of care in long-term health care facilities and to define training and evaluation standards for Nursing Assistants who work in such facilities. Each state is responsible for following the terms of this federal law.

As defined in the OBRA regulations, a Nursing Assistant competency evaluation program provides specific standards for Nursing Assistant related knowledge and skills. The purpose of a Nursing Assistant competency evaluation program is to ensure that candidates who are seeking to be Nursing Assistants understand these standards and can competently and safely perform the job of an entry-level Nursing Assistant.

This handbook describes the process of taking the Nursing Assistant competency examination and is designed to help prepare candidates for testing. There are two parts to the Nursing Assistant competency examination—a multiple-choice, knowledge test and a skill test. Exam candidates must be registered, complete approved training, pass both parts of the exam and meet all other requirements of the Arizona Board of Nursing (AZBN) for certification in Arizona.

Arizona has approved D&S Diversified Technologies-Headmaster LLP to provide tests and scoring services for Nursing Assistant Testing. For question not answered in this handbook please contact Headmaster at toll free 800-393-8664 or go to www.hdmaster.com. The information in this handbook will help you prepare for your examination.

Proof of Legal Presence in the United States

Every Arizona Nursing Assistant student will need to have proof of legal presence in the United States on file with the Arizona State Board of Nursing. For instructions on submitting your proof of legal presence documents, refer to the Arizona State Board of Nursing website at: www.azbn.gov. A comprehensive list of documents acceptable for proof of legal presence is available on our website at www.hdmaster.com and on the Arizona State Board of Nursing website at: www.azbn.gov.

Certified Nursing Assistant (CNA) | Licensed Nursing Assistant (LNA)

The Arizona State Board of Nursing (Board) has 2 levels of nursing assistant:

Certified Nursing Assistant (CNA)

Upon passing the required knowledge and skill competency exam components, in order to be placed on the CNA Registry as a certified nursing assistant (CNA), candidates will need to go to AZBN's website at www.azbn.gov, click on "Apply for an Arizona License or Certificate" and complete the on-line application, which will include the uploading of your citizenship documents (proof of legal residence) and certificate of completion from your training program.

Licensed Nursing Assistant (LNA)

In addition to the requirements to be on the CNA Registry (see paragraph above), an LNA applicant must complete the on-line application and also submit their fingerprints and pay a \$100 fee to AZBN (\$50 for the application and \$50 for a one-time fingerprint background check). If the applicant meets Board requirements, the Board will license the applicant as an LNA and the applicant can use the initials "LNA". The on-line application process for LNA's is available on the Board's website: www.azbn.gov, click on "Apply for an Arizona License or Certificate".

Americans with Disabilities Act (ADA)

ADA Compliance

If you have a qualified disability, you may request special accommodations for examination. Accommodations must be approved by the Arizona State Board of Nursing (AZBN) in advance of examination. The request for ADA Accommodation Form 1404AZ is available on the Arizona page of the Headmaster website under the Candidate Forms column at www.hdmaster.com. This form must be submitted to Headmaster with required documentation listed on the second page of the ADA application in order to be reviewed for a special accommodation.

The Arizona Nurse Aide Competency Exam

Payment Information

Exam Description	Price
Knowledge Test or Retake	\$30
Oral Knowledge Test or Retake	\$40
Skill Test or Retake	\$88

Schedule an Exam

In order to schedule an examination date, candidates must have successfully completed an Arizona Board of Nursing (AZBN) approved, nursing assistant (NA) training program or have an AZBN-approved NA Education Waiver. In addition, all nursing assistant certification exam candidates must be registered with D&S Diversified Technologies – Headmaster LLP by their training program, unless a waiver is granted by the AZBN. Your registration information will be transmitted to the AZBN upon passing both portions of the CNA exam.

Nursing Assistant Training Program Candidates

Your training program will enter your initial training information into the WebETest© database. Your training program instructor/program will verify the name entered into WebETest© against the identification you will present when you sign in at a test event. Your ID must be a US government issued, photo bearing ID. You should receive a verification form during your training to sign, attesting to the fact that there is an exact match. If you discover your ID name doesn't match your name as listed in WebETest©, please call HEADMASTER at 800-393-8664. Once your instructor or training program enters the date you successfully complete training into WebETest©, you may schedule your exam date online at www.hdmaster.com (click on Arizona, click on Schedule under "now available", click on Select Test Event/Reschedule and then log-in with your secure Test ID# and Pin# provided to you by your training program or from Headmaster at 800-393-8664.

Securely processed Visa or MasterCard credit card or debit card information is required when scheduling online. After paying, you will be able to schedule and/or reschedule up to 1 full business day prior to a scheduled test date of your choice and receive your test confirmation notification online or on the screen while you are logged in. You may login with any Internet connected device. You will be scheduled to take your initial knowledge and skill tests on the same day. To change or reschedule your test date, login to WebETest© at www.hdmaster.com, choose Arizona CNA, to update no less than 1 full business day before your scheduled test date. If you are unable to schedule/reschedule on-line, please call Headmaster at 800-393-8664 for assistance.

Candidates who self-schedule online, or those scheduled by their training programs, will receive their test confirmation at the time they are scheduled online.

You may also schedule a test date by mailing to HEADMASTER a paper Scheduling and Payment Form 1402AZ indicating your test date choices along with your payment (money order, cashier's check, facility check, Visa or MasterCard). No personal checks or cash are accepted.

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Complete your Scheduling and Payment Form 1402 by including first and second date choices for your testing. Please keep in mind we need lead time to prepare and ship tests. Therefore, we cannot schedule you for a test date if we do not receive your form at least eight business days prior to your requested test date. Saturdays, Sundays and Holidays are not counted as business days. All Headmaster forms can be found on the Arizona NA page of our website at www.hdmaster.com

Please note: Forms with missing information, payment or signatures will be returned to the candidate.

If you fax your Headmaster forms, a credit card payment is required and a \$5 Priority Fax Service Fee applies. If we are able to schedule you to test within 8 business days of your requested test date a \$15 Express Service Fee and/or a \$39.50 Overnight Express Shipping Fee per candidate may apply. We do not accept personal checks or cash for testing fees. We accept Money Orders, Cashier's Checks, Facility Checks, MasterCard or Visa cards.

Candidates can also view their confirmation notice any time by logging into their WebETest© account at www.hdmaster.com and choose Arizona CNA.

HEADMASTER does not send postal mail test confirmation letters to candidates.

You will be scheduled to take your knowledge and skill tests on the same day. You must schedule a test **within two years of your date of training program completion**. After two years, you must complete another AZBN approved training program in order to be eligible to schedule testing.

Many training programs host and pre-schedule in-facility test dates for their graduating students. Your program/instructor will have informed you if this is the case. Prior to scheduling a test, verify with your instructor if the training program where you trained has already scheduled your test. Regional test seats are open to all candidates. Regional test dates are posted on the AZ NA page of our website, www.hdmaster.com under the "Candidate Forms" column. Click on the button "Three Month Test Schedule". Be sure to read the important notes at the top of the first calendar.

If you have any questions regarding your test scheduling, call Headmaster at 800-393-8664, Monday through Friday 8 am to 6 pm Mountain Standard time.

Education Waivers for Military, Foreign Graduate or Nursing Student

If you have an AZBN-approved NA Education Waiver (military, foreign graduate or nursing student), Headmaster will complete your registration and scheduling upon receipt of your application. Complete the Headmaster NA Application Form 1101AZ, and the Headmaster Scheduling and Payment Form 1402AZ (both forms can be found on the AZ NA page of our website www.hdmaster.com), and mail these forms to Headmaster at the address shown on the forms along with your payment: money order, cashier's check, facility check made out to **HEADMASTER**; Visa or MasterCard – *no personal checks or cash*.

A copy of your AZBN NA Education Waiver or your Certificate of Completion of Training (your name on your Certificate of Completion of Training must exactly match the FIRST AND LAST names on your application or your forms will be returned).

For information on NA Education Waivers visit the AZBN website www.azbn.gov then click on Applications & Forms and scroll down to "Other Form Downloads".

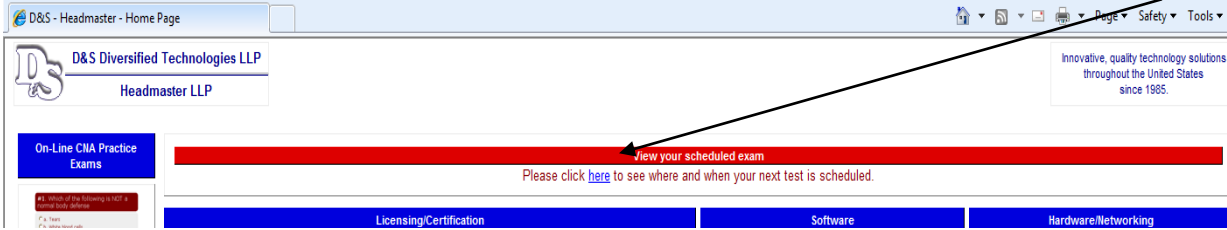
Please print neatly, double-check your address, phone number, email address and social security number before signing the Headmaster testing application. Unsigned applications will be returned to you, which will delay testing.

When a candidate is scheduled by Headmaster, we will notify the candidate via email of their test date and time. If you do not hear from Headmaster within 5 business days of sending us your scheduling request and payment, call us immediately or leave us a message on the answering machine at 800-393-8664.

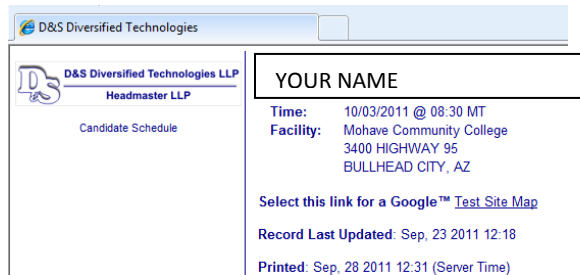
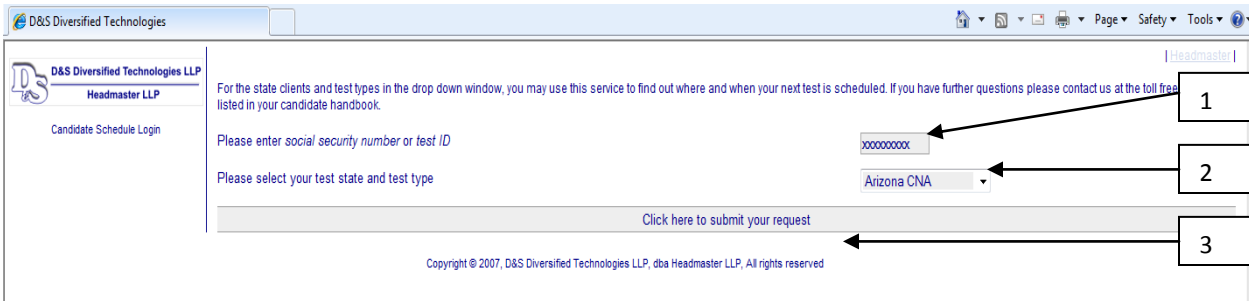
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You may also verify your test date on-line by going to our home page at www.hdmaster.com and clicking here:



- 1) Type in your social security number
- 2) Choose Arizona CNA from the drop down box
- 3) Click on "Click here to submit your request"



Exam Check-In

You should arrive at your confirmed test site between twenty and thirty (20-30) minutes before your exam is scheduled to start. (For example: if your test start time is 8:00 a.m. – you need to be at the test site for check-in no later than 7:30 to 7:40 a.m.)

Testing Attire

You must be in full clinical attire (scrubs- which consists of: a scrubs top and scrub pants, scrub skirt (long, loose-fitting) or scrub dress (long, loose-fitting)). No opened toed shoes are allowed. Scrubs and shoes can be any color/design.

You may bring a standard watch with a second hand. No smart watches or fitness monitors are allowed.

Long hair must be pulled back.

Please note: You will not be admitted for testing if you are not wearing scrubs attire and the appropriate shoes. You will be considered a NO SHOW. You will forfeit your testing fees and have to pay for another exam date.

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Identification

You must bring a **US GOVERNMENT ISSUED, PHOTO-BEARING FORM OF IDENTIFICATION**. Examples of the forms of US government issued, photo ID's that are acceptable are:

- Driver's License (*Arizona Driver's License must be issued January 1, 1997 and later*)
- State issued Identification Card (*Arizona State ID must be issued January 1, 1997 and later*)
- US Passport (Foreign Passports *are not* acceptable)
- Military Identification
- Alien Registration Card
- Tribal Identification Card
- Work Authorization Card

Please note: *A driver's license or state-issued ID card that has a hole punched in it is NOT VALID and will not be accepted as an acceptable form of ID. You will not be admitted for testing and you will be considered a NO SHOW. You will forfeit your testing fees and have to pay for another exam date.*

The **FIRST** and **LAST** names listed on the ID presented to the RN Test Observer during sign-in at your test event **MUST EXACTLY MATCH** the FIRST and LAST names that were entered in the AZ nurse aide database by your training program. You may call Headmaster at 800-393-8664 to confirm that your name of record matches your US government issued ID, or log in to the AZ NA webpage at www.hdmaster.com using your Test ID# and PIN# to check on or change your demographic information.

It is recommended that you print out, read and bring your test confirmation notice with you on your test day, although it is not required for test admission.

Please note: You will not be admitted for testing if you do not bring proper ID, your ID is invalid (*see note above) or if your FIRST and LAST printed names on your US government issued photo ID do not match your current name of record. You will be considered a NO SHOW. You will forfeit your testing fees and have to pay for another exam date.

You will be required to re-present your ID when you enter the knowledge test room and when you enter the skills lab for your skills exam. Please keep your ID with you during the entire exam day.

Instructions for the Knowledge and Skill Tests

Test instructions for the knowledge and skill tests will be provided in written and oral format in the waiting area when you sign-in for your test. Oral and PDF versions are also available anytime from your smart phone via the link on Headmaster's Arizona website at www.hdmaster.com. These instructions detail the process and what you can expect during your exams. Please read through the instructions (or listen to them on your smart phone) **before** entering the knowledge test room or skill demonstration lab. The instructions will be left in the waiting area during testing for you to refer to throughout your time at the test site. The RN Test Observer and Knowledge Test Proctor will ask you questions about the instructions you read when you enter the knowledge test room and/or skill test lab.

Testing Policies

The following policies are observed at each test site—

- Plan to be at the test site up to five (5) hours.
- If you arrive late for your confirmed exam (you need to be at the test site to check in at least 20-30 minutes before your scheduled start time – if you test start time is 8:00a.m., you need to be at the test site by 7:40a.m. at the latest), you will not be admitted to the exam and any exam fees paid *will NOT be refunded*.
- If you do not bring valid and appropriate US government issued, photo ID, you will not be admitted to the exam and any exam fees paid *will NOT be refunded*.
- If the FIRST and LAST printed names on your ID do not match your current name of record, you will not be admitted to the exam and any exam fees paid *will NOT be refunded*.
- If you do not wear scrubs and the appropriate shoes and conform to all testing policies, you will not be admitted to the exam and any exam fees paid *will NOT be refunded*.

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- If you NO SHOW for your exam day, any test fees paid *will NOT be refunded*. You must re-pay your testing fees on-line in your own record using your ID and PIN# or submit Form 1402AZ (Scheduling and Payment Form) to schedule another exam date. If your exam is paid for by a US government funded facility, that facility will be charged a No Show fee.
- Cell phones, smart watches, fitness monitors, electronic recording devices and personal items (such as briefcases, large bags, study materials, extra books, or papers) are not permitted to be on or near you in either testing room. You will be informed by the testing team of the designated area to place your personal items and electronic devices in the designated area and you are to collect these items when you complete your test(s). All electronic devices must be **turned off**. Any smart watches or fitness monitors must be removed from our wrist. Anyone caught using any type of electronic recording device during testing will be removed, forfeit all testing fees and will not be permitted to test for 6 months.
- You may, however, use personal devices during your free time in the waiting area.
- You are encouraged to bring a jacket, snack, drink or study material to have while waiting to test.
- No translation dictionaries are allowed, either paper format or electronic.
- You may not take any notes or other materials from the testing room.
- You are not permitted to eat, drink, or smoke during the exam.
- You are not allowed to leave the testing room (knowledge test room or skills lab) once the exam has begun **for any reason**. If you do leave during your test event, you will not be allowed back into the testing room to finish your exam.
- If you are discovered causing a disturbance of any kind, engaging in any kind of misconduct or try to take any notes or testing materials from the testing room, you will be dismissed from the exam and reported to your training program and the Arizona State Board of Nursing.
- No visitors, guests, pets (including companion animals) or children are allowed.
- You may not test if you have any type of physical limitation (excluding pre-arranged ADA's) that would prevent you from performing your duties as a nursing assistant. (examples: cast, arm/leg braces, crutches, etc.) Call Headmaster immediately if you are on doctor's orders. You must fax a doctor's order **within 5 business days** of your scheduled exam day to qualify for a free reschedule.

Candidate Feedback – Exit Survey

You will receive an email of your test results on the day your test is official scored, and in this email, you will be provided a link to SurveyMonkey to complete the exit survey. A link is also available when you log in to your record to get your results. The survey is confidential and will not have any bearing on the outcome of any test. You are encouraged to complete the survey questions with honest feedback regarding the examination process to help improve the testing process.

Security

If you refuse to follow directions, use abusive language or disrupt the examination environment, your test will be stopped and scored as a failure. You will be dismissed from the testing room and will forfeit any testing fees paid and a report of your behavior will be given to the AZBN. You will not be allowed to retest for a minimum period of six (6) months.

Anyone who removes or tries to remove test material or takes notes or information from the test site will be reported to AZBN and is subject to prosecution to the full extent of the law. Your test will be scored as a test failure and you will forfeit any testing fees paid. You will not be allowed to retest for a minimum period of six (6) months. You will need to obtain permission from AZBN in order to be eligible to test again.

If you give or receive help from anyone during testing (which also includes the use of any electronic recording devices such as cell phones, smart watches, etc.), your test will be stopped and scored as a failure. You will be dismissed from the testing room and will forfeit any testing fees paid. You will be considered a No Show status and your name will be reported to AZBN and you may need to obtain permission from AZBN in order to be eligible to test again.

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Reschedules

All candidates are entitled to one free reschedule any time up until **one (1) business day** preceding a scheduled test day, **excluding** Saturdays, Sundays and Holidays. Additional reschedules are subject to a \$35 fee that must be paid in full prior to a reschedule taking place.

- Example: If you are scheduled to take your exam on a Saturday, Sunday or Monday, you would need to reschedule by close of business (Headmaster is open until 6:00pm Mountain time) the Thursday before your scheduled exam. The Friday before a scheduled test date on a Saturday, Sunday or Monday is considered the business day before your scheduled exam and a reschedule would not be granted on the Friday.

Scheduled test date is on a:	Reschedule by 6 pm Mountain Standard Time on the previous:
Monday	Thursday
Tuesday	Friday
Wednesday	Monday
Thursday	Tuesday
Friday	Wednesday
Saturday	Thursday
Sunday	Thursday

Please note: Reschedules will not be granted less than one (1) full business day prior to a scheduled test date.

Cancellations

Cancellation requests must be made within six (6) months of payment of testing fees with Headmaster. A request must be made *in writing* to cancel an exam any time up until one (1) full business day preceding a scheduled exam, **excluding** Saturdays, Sundays, and Holidays, and qualify for a full refund of any testing fees paid minus a \$28 cancellation fee. We accept faxed (406-442-3357) or emailed (hdmaster@hdmaster.com) requests for cancellation.

- Example: If you are scheduled to take your exam on a Saturday, Sunday or Monday, you would need to submit a written cancellation request by close of business (Headmaster is open until 6:00pm Mountain time) the Thursday before your scheduled exam. The Friday before a scheduled test date on a Saturday, Sunday or Monday is considered the business day before your scheduled exam and a cancellation would not be granted on the Friday.

No Shows

If you are scheduled for your exam and do not show up without notifying Headmaster at least one (1) full business day prior to your scheduled testing event, **excluding** Saturdays, Sunday, and Holidays, OR if you are turned away for lack of proper identification, proper attire, or any other reason to deem you ineligible to test, you will be considered a **NO SHOW**. You will forfeit all fees paid and must submit a new testing fee to schedule yourself into a new test event.

These fees partially offset Headmaster cost incurred for services requested and resulting work that is performed. If a reschedule or cancellation request is not received before the one (1) full business day preceding a scheduled test event, excluding Saturdays, Sundays, and Holidays (see examples under Reschedules and Cancellations), a NO SHOW status will exist and you will forfeit your testing fees and must repay the full testing fee to secure a new test event.

No Show Exceptions

Exceptions to the No Show status exist. If you are a No Show for any test component for any of the following reasons, test fees will be refunded or a free reschedule will be authorized to the remitter of record **with appropriate documentation provided within the required time frame.**

- **Car breakdown:** Headmaster must be contacted within one business day via phone call, fax or email and a tow bill or other appropriate documentation must be submitted within **2 business days** of the exam date, if we do not receive proof within the 2 business day time frame you will have to pay as though you were a No Show.

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- **Medical emergency:** Headmaster must be contacted within one business day via phone call, fax or email and a doctor's note must be submitted within **5 business days** of the missed exam date, if we do not receive proof within the 5 business days time frame you will have to pay as though you were a No Show.
- **Death in the family:** Headmaster must be contacted and an obituary for **immediate family only** submitted within **14 business days** from a missed exam date. (Immediate family is parents, grand and great-grand parents, siblings, children or spouse.)

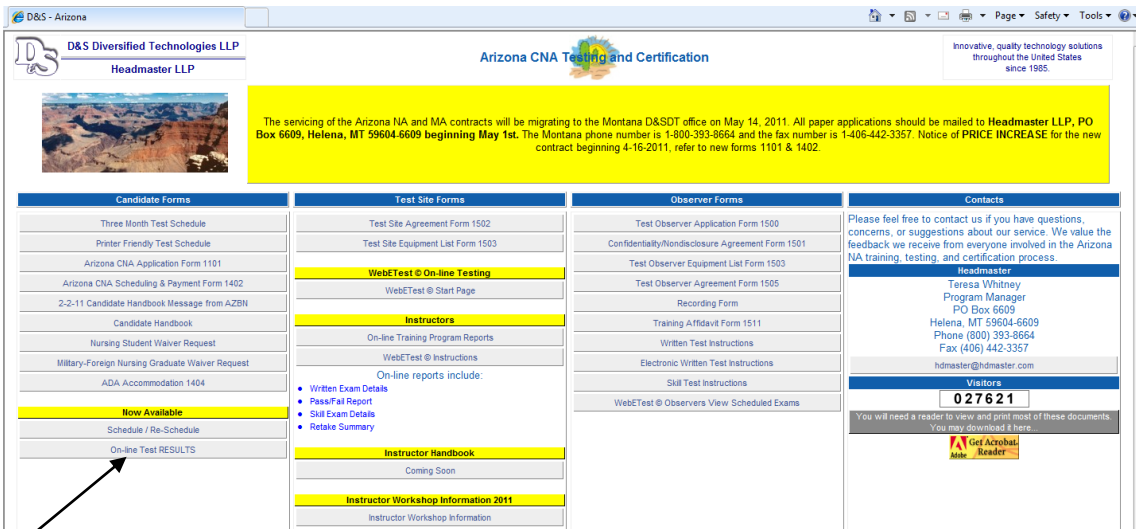
Test Results

After you have completed both the Knowledge Test and Skill Test components of the competency exam, your test results will be officially scored and double checked. Official test results are available to you after 6pm Mountain Standard time the day tests are scored. You will be able to access your test results online at www.hdmaster.com.

You will be emailed your test results to the email in your record and/or a copy of your test results can be printed from Headmaster's website any time after your test has been officially scored. Your device must have an RTF reader to open emailed test results.

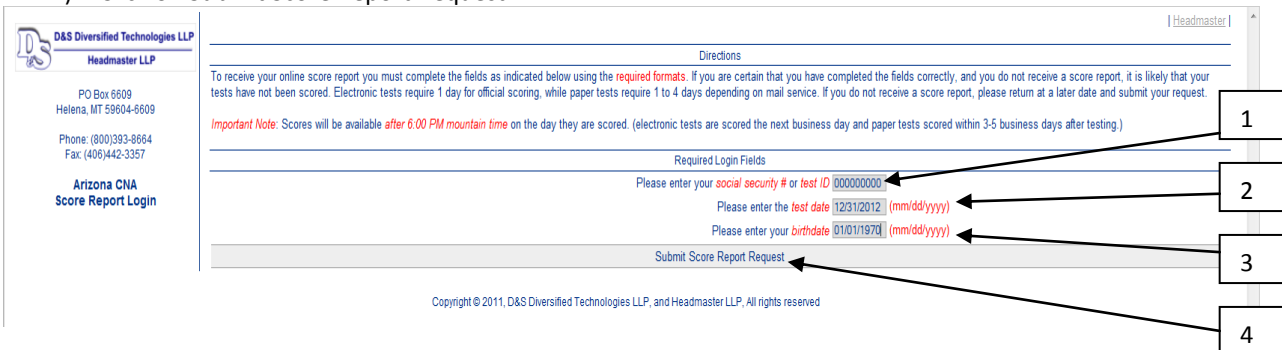
HEADMASTER does not send postal mail test result letters to candidates.

To check your test results on-line, go to www.hdmaster.com, click on ARIZONA and click on On-Line Test Results.



The screenshot shows the Headmaster website interface. A yellow banner at the top contains a notice about the migration of Arizona NA and MA contracts to the Montana D&S office on May 14, 2011. Below the banner, there are four main columns of links: Candidate Forms, Test Site Forms, Observer Forms, and Contacts. In the 'Candidate Forms' column, the 'On-Line Test RESULTS' link is highlighted in yellow. An arrow points from this link to the numbered list below.

- 1) Type in your social security number
- 2) Type in your test date
- 3) Type in your birth date
- 4) Click on Submit Score Report Request



The screenshot shows the 'Arizona CNA Score Report Login' form. The form includes a 'Directions' section with instructions on how to use the required fields. Below the instructions, there are four numbered callouts pointing to specific fields: 1 points to the 'Required Login Fields' header, 2 points to the 'social security # or test ID' field, 3 points to the 'test date' field, and 4 points to the 'Submit Score Report Request' button. The form also includes a 'Important Note' about when scores will be available.

Test Attempts

You have **unlimited attempts** (effective March 1, 2019) to pass the knowledge and skill test portions of the exam within two (2) years from your date of nursing assistant training program completion. If you do not complete testing within two years from completion of training, you must complete a new AZBN approved training program in order to become eligible to further attempt Arizona nursing assistant examinations.

- An attempt means checking in for the competency evaluation and receiving the knowledge test booklet or the skill test instructions including the skills that are to be performed. If a candidate decides to not complete the test after receiving the knowledge test booklet or the skill test instructions, the attempt will be scored as a failure.
- Per the Arizona Board of Nursing, effective March 1, 2019, any candidate who fails their knowledge exam for the third time, or any subsequent knowledge exam, **will be required to wait 45 days before scheduling a retest**. This does not apply to failed attempts on the manual skill test.

Applying for an Arizona License or Certificate

After you have successfully passed both the Knowledge Test and Skill Test components of the nursing assistant exam, your test results will be sent electronically to the Arizona Board of Nursing by Headmaster. You will be certified by the Board only after you complete the AZBN (CNA or LNA) application process on-line, which includes uploading your citizenship documents (proof of lawful residence) and completion of training certificate from your training program, and meet all Board requirements (see the additional requirements needed to apply for LNA licensure at the AZBN website). For information on completing your on-line application for certification with the Arizona State Board of Nursing, go to AZBN's website at: www.azbn.gov and click on "Apply for an Arizona License or Certificate".

Retaking the Nursing Assistant Test

In the event that your test results inform you that you failed the knowledge and/or skill portion of the examination and when you want to apply for a retest, you will need to repay for the portion that you failed before you can schedule an exam date:

You can schedule a test or re-test on-line at www.hdmaster.com with a VISA or MASTERCARD (click on Arizona CNA, click on Schedule/Reschedule and then log-in with your secure Test ID# and Pin#), you will need to pay with a VISA or MASTERCARD first and then will be able to schedule. Call Headmaster at 800-393-8664 if assistance is needed or to get your ID# and Pin#.

You may schedule a re-test by completing the Scheduling and Payment Form 1402AZ available on our website:

- Fill out Exam types and Fee payment on a new Scheduling and Payment Form 1402AZ and choose test dates from the Three Month Test Schedule (Form 1700) and write them on the Scheduling and Payment Form 1402AZ under Option 1 (Regional Test Site Schedule).
- You will need to submit your Scheduling and Payment Form 1402AZ to Headmaster either by fax (\$5.00 extra fax fee applies), email (scan or image and attach) or mail.

If you need assistance scheduling your re-test, please call Headmaster at 1-800-393-8664. We are able to assist you in scheduling a test or re-test date as long as your fees have been paid first.

- Per the Arizona Board of Nursing, a failing candidate may only take the skill test twice with the same observer to reduce any perception of bias and lessen the chance of over-familiarity between candidate and observer. If an alternate observer is not available at your facility of choice you have the option of testing with the same test observer for a third attempt by letting Headmaster know that is your wish, or you may choose another facility to test at.

Test Review Requests

You may request a review of your test results or dispute any other condition of your testing. **There is a \$25 test review deposit fee.** To request a review, you must submit the Scheduling and Payment Form 1402AZ, check the Test Review Fee of \$25 (cashier's check, money order, credit or debit card with expiration date) and a detailed explanation of why you feel your dispute is valid via email, fax or mail **within 10 business days** of your test date (excluding Saturdays, Sundays and Holidays). Late requests or requests missing review fees will be returned and will not be considered. Since one qualification for certification as a nursing assistant in Arizona is demonstration by examination of minimum nursing assistant knowledge and skills, the likely outcome of your review will determine who pays for your re-test. If the results of the review are in your favor, Headmaster will pay for your re-test fee and refund your review fee. Headmaster will review your detailed recollection, your knowledge test markings and any skill task measurements you recorded at the time of your test, in addition to reviewing markings, notations and measurements recorded by the RN Test Observer at the time of your test. Headmaster will re-check the scoring of your test and may contact you and/or the RN Test Observer for any additional recollection of your test(s). Headmaster will complete your review request within 10 business days of the receipt of your timely review request and will email or mail the review results to your email address or physical address of record and to the Arizona Board of Nursing.

The Knowledge/Oral Test

You will be required to re-present your ID when you enter the knowledge test room and when you enter the skills lab for your skills exam. Please keep your ID with you during the entire exam day.

The Knowledge Test Proctor will hand out materials and give instructions for taking the Knowledge Test. You will have a maximum of ninety (90) minutes to complete the 75 question Knowledge Test. You will be told when fifteen (15) minutes remain. You may not ask questions about the content of the Knowledge Test (such as "What does this question mean?") For paper tests, fill in only one (1) oval on the answer sheet for each question. Do not mark in the testing booklet. Marks in the test booklet will not be accepted as answers. Your answers must appear on the separate scan form answer sheet. **You must have a score of 75% or better to pass the knowledge portion of the exam.**

- For paper Knowledge tests, you must bring several sharpened Number 2 pencils with erasers. Do not bring or use ink pens.

Electronic testing called WebEtest© using Internet connected computers is utilized at several sites in Arizona. For electronic tests, the Knowledge test portion of your exam will be displayed on a computer screen for you to read and key in your answers. Testing online with WebEtest© allows next business day scoring of tests and eliminates examination material shipping time so test results are available days sooner than with traditional paper and pencil testing.

An audio (Oral) version of the knowledge test is available. However, you must request an Oral test before you submit your testing fee payment. There is an additional charge for an Oral Test. The questions are read to you, in a neutral manner, from an MP3 player, with control buttons for play, rewind, pause, etc., in addition to having the knowledge test and scan form for the paper test. For WebEtest© you will hear the questions on the computer headphones and have control buttons on the computer screen (play, rewind, pause etc.).

Please note: On the Oral Knowledge Test, only the first 63 questions will be read orally, the remaining questions will have to be answered without oral assistance to assess English reading comprehension.

Per the Arizona State Board of Nursing, translation dictionaries are not allowed during testing.

All test materials must be left in the testing room. Anyone who takes or tries to take materials, notes or information from the testing room is subject to prosecution and will be reported to the Arizona Board of Nursing.

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Knowledge Test Content

The Knowledge Test consists of 75 multiple-choice questions. Questions are selected from subject areas based on the AZBN approved Arizona test plan and include questions from all the required categories as defined in OBRA regulations. The subject areas are as follows:

Safety (7)	Communication (7)
Infection Control (8)	Data Collection (7)
Personal Care (9)	Basic Nursing Skills (9)
Mental Health (4)	Role and Responsibility (7)
Care Impaired (4)	Disease Process (4)
Resident Rights (5)	Older Adult Growth & Development (4)

Knowledge Practice Test

Headmaster offers a free knowledge test question of the day and a ten question on-line static practice test available on our web site at www.hdmaster.com. Candidates may also purchase complete practice tests that are randomly generated, based on the state test plan. A mastery learning method is used and each practice test taken will be unique. This means candidates must get the question they are attempting correct before they may move onto the next question. A first attempt percentage score and vocabulary feedback are supplied upon completion of the practice test. A list of vocabulary words to study is provided at the end of each test. Single or group purchase plans are available.

The following are a sample of the kinds of questions that you will find on the Knowledge/Oral test.

1. Clean linens that touch the floor should be:
(A) Picked up quickly and placed back on the clean linen cart
(B) Used immediately on the next resident bed
(C) Considered dirty and placed in the soiled linen hamper
(D) Used only in the room with the floor the linen fell on
 2. A soft, synthetic fleece pad placed beneath the resident:
(A) Takes pressure off the back
(B) Provides warmth for the resident
(C) Gives the resident a sense of security
(D) Should only be used with bedridden residents
 3. A resident's psychological needs:
(A) Should be given minor consideration
(B) Make the resident withdrawn and secretive
(C) Are nurtured by doing everything for the resident
(D) Are nurtured when residents are treated like individuals
- ANSWERS: 1-C 2-A 3-D

The Manual Skill Test

- The purpose of the Skill Test is to evaluate your performance when demonstrating Arizona approved nursing assistant skill tasks. You will find a complete list of skill tasks in this handbook.
- You will be asked to re-present your ID that you showed the RN Test Observer at sign-in.
- Be sure you understand all instructions you read while in the waiting area before your begin your skill task demonstrations. You may not ask questions once the Skill Test begins and the timer starts. Once the Skill Test begins, the RN Test Observer may not answer questions.
- Each of your randomly selected three (3) or four (4) tasks will have scenarios associated with them. The scenarios will be read to you by the RN Test Observer immediately before you are asked to do each task.
- You will be allowed a maximum of **forty (40) minutes** to complete your three (3) or four (4) tasks. After 25 minutes have elapsed, you will be alerted that 15 minutes remain.

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- Listen carefully to all instructions given by the RN Test Observer. You may request to have any of the scenarios repeated **at any time** during your Skill Test up until you run out of time or tell the RN Test Observer that you are finished with your skill task demonstrations.
- You must correctly perform all of the **key** steps (in bold font) and 80% of all non-key steps on each task assigned in order to pass the Skill Test. Steps marked with an * are weighted more than steps without an * when your percentage score is calculated. If you believe you made a mistake while performing a task, say so. You will need to demonstrate the step or steps on the task you believe you performed incorrectly for the correction to be noted for the step. You may repeat or correct **any step** or **steps** on any task you believe you have performed incorrectly at **any time** during your allotted forty (40) minutes or until you tell the RN Test Observer you are finished with the Skill Test.
- At any time during any skill, you may direct the RN Test Observer to move anywhere needed to assist in providing safety for the resident.
- The skill task steps are generally not order dependent, unless the words BEFORE or AFTER are used in a step.
- When you finish each task, verbally tell the RN Test Observer you are finished and move to the designated “relaxation area.” When the RN Test Observer and actor have set up and are ready for your next skill task demonstration, the RN Test Observer will read the scenario for your next task.
- **All steps must actually be demonstrated. Steps that are only verbalized WILL NOT COUNT.**

Skill Test Recording Form

The RN test observer will provide a recording form similar to the one displayed below if your skill test includes a skill task which requires recording a count or measurement.

Candidate's Name: _____	
PLEASE PRINT	
TEMP: _____	PULSE: _____
RESP: _____	
BP: _____ / _____	PULSE OX: _____ %
HEIGHT: _____	WEIGHT: _____
GLASS 1: _____	FOOD INTAKE: _____ %
GLASS 2: _____	FLUID INTAKE: _____ ml
GLASS 3: _____	URINARY OUTPUT: _____ ml
Total Intake: _____ ml	
Candidate's Signature: _____	

Skill Test Tasks

You will be assigned one of the following mandatory tasks as your first task:

- Bedpan and Output with Hand Washing
- Donning an Isolation Gown and Gloves then Emptying a Urinary Drainage Bag with Hand Washing
- Perineal Care of a Female with Hand Washing
- Perineal Care of a Male and Changing A Soiled Brief with Hand Washing

Please note: Hand washing is embedded in each of the mandatory tasks and must be demonstrated at the end of each mandatory task.

You will also receive an additional two (2) or three (3) randomly selected tasks from the Skill Task listing below. These selected tasks will make up your personalized and unique skill test. Each skill test randomly assigned by the WebETest©

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skill test assignment algorithm will be comparable in overall difficulty. That is why some skill tests will have a differing number of tasks.

Skill Tasks Listing

Every step must actually be performed and demonstrated during your skill test demonstration in order to receive credit.

The steps that are listed for each task are the steps required for a nursing assistant candidate to successfully demonstrate minimum proficiency of the skill task for the RN Test Observer. The steps will be performed on a live resident actor for most of the tasks (the perineal care tasks will be done on a mannequin). You will be scored only on the steps listed. You must have a score of 80% on each task without missing any key steps (the Bolded steps) to pass the skill component of your competency evaluation. Steps marked with an * are weighted more than steps without an * when your percentage score is calculated. If you fail the Skill Test, one of the tasks on your retest will be a task you previously failed. There will always be only one of the four mandatory tasks to start each Skill Test. The other tasks included on your Skill Test are randomly chosen so that every Skill Test is comparable in difficulty and average length of time to complete. The RN Test Observer will observe your demonstrations of your skill tasks and record what she/he sees you do. Headmaster scoring teams will officially score and double check your test.

Please note: The skill task steps included in this handbook are offered as guidelines to help prepare candidates for the Arizona nursing assistant skill test and the steps included herein are not intended to be used to provide complete care that would be all inclusive of best care practiced in an actual work setting.

Bedpan and Output with Hand Washing

(One of the possible mandatory first tasks)

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Explains the procedure to resident.
- 4) Provides privacy for resident, pulls privacy curtain.
- 5) Raises bed to a comfortable working height.
- 6) Candidate puts on gloves and positions resident on bedpan correctly using correct body mechanics.
- 7) Raises head of bed to comfortable level.
- 8) Leaves call light and tissue within reach of resident.
- 9) Lowers bed.
- 10) Candidate steps away to a private area of room away from resident.
- 11) When signaled by the RN Test Observer, the candidate returns.
- 12) Raises bed to a comfortable working height.
- 13) Washes/assists resident to wash hands using a wet wash cloth with soap.
- 14) Assists resident to dry hands.
- 15) Lowers head of the bed.
- 16) Discards soiled linen in appropriate container.
- 17) Candidate gently removes bedpan and holds while the Observer adds a known quantity of fluid.
- 18) Candidate measures output.
- 19) Lowers bed.
- 20) Empties, rinses and dries bedpan and graduate.
- 21) Removes and disposes of gloves properly.
- 22) Records output on provided recording form.
- 23) Candidate's recorded output is within 30ml of RN Test Observer's recorded output.**
- 24) Washes Hands: Begins by wetting hands.
- 25) Applies soap to hands.
- 26) Rubs hands together using friction for at least 20 seconds with soap.

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- 27) Interlaces fingers pointing downward with soap.
- 28) Lathers all surfaces of hands and wrists with soap.
- 29) Rinses hands thoroughly under running water with fingers pointed downward.
- 30) Dries hands on clean paper towel(s).
- 31) Turns off faucet with a clean dry paper towel(s).
- 32) Discards paper towels into trash container.
- 33) Does not re-contaminate hands at any point by touching the faucet or sink during/after the procedure.
- 34) Maintains respectful, courteous interpersonal interactions at all times.
- 35) Leaves call light or signaling device and water within easy reach of the resident.

Donning an Isolation Gown and Gloves , then Emptying a Urinary Drainage Bag with Hand Washing

(One of the possible mandatory first tasks)

- 1) Performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Candidate faces the back opening of the gown.
- 3) Candidate unfolds the gown.
- 4) Candidate places arms through each sleeve.
- 5) Candidate fastens the neck opening.
- 6) Candidate fastens the waist.
- 7) Candidate makes sure that the back flaps cover clothing as completely as possible.
- 8) Candidate puts on gloves.
- 9) Gloves overlap sleeves at the wrist.
- 10) Greets resident by name.
- 11) Introduces self by name.
- 12) Explains the procedure to resident.
- 13) Provides privacy – pulls privacy curtain for resident.
- 14) Places a barrier on the floor under the drainage bag.
- 15) Places the graduate on the previously placed barrier.
- 16) Opens the drain to allow the urine to flow into the graduate.
- 17) Completely empties drainage bag.
- 18) Avoids touching the graduate with any part of the tubing.
- 19) Closes the drain.
- 20) Wipes the drain with alcohol wipe AFTER emptying the drainage bag.
- 21) Replaces drain in holder.
- 22) Places graduate on level, flat surface.
- 23) With graduate at eye level, reads output.
- 24) Empties graduate.
- 25) Rinses graduate.
- 26) Dries graduate.
- 27) Records output on the provided recording form.
- 28) Candidate's measured output reading is within 30ml of RN Test Observer's output reading.**
- 29) Leaves call light or signaling device within reach of the resident.
- 30) Leaves water within reach of the resident.
- 31) Maintains respectful, courteous interpersonal interactions at all times.
- 32) Removes gloves, turning inside out.
- 33) Removes gloves BEFORE removing gown.**
- 34) Disposes of the gloves in the provided biohazard container (bag).
- 35) Unfastens gown at the waist.
- 36) Unfastens gown at the neck.
- 37) Removes gown by slipping hands underneath gown at the neck and shoulder and always folds/rolls soiled area to soiled area.

- 38) Disposes of gown in the provided biohazard container (bag).
- 39) Washes hands: Begins by wetting hands.
- 40) Applies soap to hands.
- 41) Rubs hands together using friction with soap.
- 42) Rubs hands together for at least twenty seconds with soap.
- 43) Interlaces fingers pointing downward with soap.
- 44) Lathers all surfaces of hands with soap.
- 45) Lathers wrists with soap.
- 46) Rinses hands thoroughly under running water with fingers pointed downward.
- 47) Dries hands on clean paper towel(s).
- 48) Turns off faucet with a clean, dry paper towel.
- 49) Discards paper towels to trash container.
- 50) Does not re-contaminate hands at any point by touching the faucet or sink during/after the procedure.

Perineal Care of a Female with Hand Washing

(One of the possible mandatory first tasks)

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Explains procedure to the resident/mannequin.
- 4) Provides privacy for resident, pulls privacy curtain.**
- 5) Removes covers from resident.
- 6) Fills basin with comfortably warm water.
- 7) Raises the bed to a comfortable working height.
- 8) Directs RN Test Observer to stand on the opposite side of the bed to provide for safety. (*)
- 9) Turns resident toward observer or raises resident's hips and places water proof pad under buttocks.
- 10) Puts on gloves.
- 11) Lifts resident's gown to expose perineum only.
- 12) Separates labia. (Candidate must also verbalize separating.)
- 13) Uses water and soapy wash cloth.
- 14) Cleans one side of labia from top to bottom. (*)
- 15) Using a clean portion of a wash cloth, cleans other side of labia from top to bottom.
- 16) Using a clean portion of a wash cloth, cleans the vaginal area from top to bottom.
- 17) Using a clean portion of a wash cloth, rinses one side of labia from top to bottom.
- 18) Using a clean portion of a wash cloth, rinses the other side of labia from top to bottom.
- 19) Using a clean portion of a wash cloth, rinses the vaginal area from top to bottom.
- 20) Dries the area.
- 21) Covers the exposed area with the resident's gown.
- 22) Assists resident to turn onto side away from the candidate.
- 23) With a clean wash cloth, cleans the rectal area.
- 24) Uses water, wash cloth and soap.
- 25) Cleans area from vagina to rectal area. (*)
- 26) Uses a clean portion of a wash cloth with any stroke.
- 27) Using a clean portion of a wash cloth, rinses the rectal area from vagina to rectal area.
- 28) Uses a clean portion of a wash cloth with any stroke.
- 29) Dries area.
- 30) Turns resident toward observer or raises hips and removes water proof pad from under buttocks.
- 31) Positions resident (mannequin) on her back.
- 32) Disposes of soiled linen in an appropriate container.
- 33) Lowers bed.
- 34) Empties, rinses and dries equipment.
- 35) Returns equipment to storage.

- 36) Removes and disposes of gloves properly.
- 37) Washes Hands: Begins by wetting hands.
- 38) Applies soap to hands.
- 39) Rubs hands together using friction for at least 20 seconds with soap.
- 40) Interlaces fingers pointing downward with soap.
- 41) Lathers all surfaces of hands and wrists with soap.
- 42) Rinses hands thoroughly under running water with fingers pointed downward.
- 43) Dries hands on clean paper towel(s).
- 44) Turns off faucet with a clean dry paper towel(s).
- 45) Discards paper towels into trash container.
- 46) Does not re-contaminate hands at any point by touching the faucet or sink during/after the procedure.
- 47) Maintains respectful, courteous interpersonal interactions at all times.
- 48) Leaves call light or signaling device and water within easy reach of the resident.

Perineal Care of a Male and Changing a Soiled Brief with Hand Washing

(One of the possible mandatory first tasks)

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Explains procedure to the resident/mannequin.
- 4) Provides privacy for resident, pulls privacy curtain.**
- 5) Removes covers from resident.
- 6) Obtains new brief.
- 7) Marks date and time on brief.
- 8) Initials brief.
- 9) Fills basin with comfortably warm water.
- 10) Raises the bed to a comfortable working height.
- 11) Directs RN Test Observer to stand on the opposite side of the bed to provide for safety.
- 12) Puts on gloves.
- 13) Turns resident toward observer or raises resident's hips and places water proof pad under buttocks.
- 14) Lifts resident's gown to expose perineum only.
- 15) Removes soiled brief from front to back.
- 16) Dispose of soiled brief by placing soiled brief into plastic bag – ties/seals bag and places in trash.
- 17) Gently grasps penis.
- 18) Uses water and soapy wash cloth.
- 19) Using a clean portion of a wash cloth, cleans tip of penis starting at the urethral opening working away with a circular motion.
- 20) Using a clean portion of a wash cloth for each stroke, cleans the shaft of the penis with firm downward motion.
- 21) Using a clean portion of a wash cloth, cleans scrotum.
- 22) Using a clean wash cloth, rinses.
- 23) Using a clean portion of wash cloth for each stroke, rinses penis.
- 24) Using a clean portion of wash cloth with each stroke, rinses scrotum.
- 25) Dries area.
- 26) Covers the exposed area with the resident's gown.
- 27) Assists resident (mannequin) to turn onto side away from the candidate.
- 28) Uses a clean wash cloth with water and soap to clean the rectal area.
- 29) Using a clean portion of the wash cloth for each stroke, cleans area from scrotum to rectal area.
- 30) Using a clean portion of the wash cloth for each stroke rinses area from scrotum to rectal area.
- 31) Dries the area.
- 32) Turns resident (mannequin) toward observer or raises hips and removes water proof pad from under buttocks.
- 33) Positions resident (mannequin) on his back.
- 34) Correctly applies brief.

- 35) Disposes of soiled linen in an appropriate container.
- 36) Lowers bed.
- 37) Empties, rinses and dries equipment.
- 38) Returns equipment to storage.
- 39) Removes and disposes of gloves properly.
- 40) Washes Hands: Begin by wetting hands.
- 41) Applies soap to hands.
- 42) Rubs hands together using friction for at least 20 seconds with soap.
- 43) Interlaces fingers pointing downward with soap.
- 44) Lathers all surfaces of hands and wrists with soap.
- 45) Rinses hands thoroughly under running water with fingers pointed downward.
- 46) Dries hands on clean paper towel(s).
- 47) Turns off faucet with a clean dry paper towel.
- 48) Discards paper towels into trash container.
- 49) Does not re-contaminate hands at any point by touching the faucet or sink during/after the procedure.
- 50) Maintains respectful courteous interpersonal interactions at all times.
- 51) Leaves call light or signaling device and water within easy reach of resident.

Ambulation with a Gait Belt

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Explains procedure to be performed to the resident and obtains gait belt.
- 4) **Locks bed brakes to ensure resident's safety.**
- 5) **Locks wheelchair brakes to ensure resident's safety.**
- 6) Brings resident to sitting position and places gait belt around waist to stabilize trunk. Tightens gait belt. Checks gait belt by slipping fingers between gait belt and resident.
- 7) Assists resident to put on non-skid slippers/shoes. (No non-skid socks)
- 8) Brings resident to standing position, using proper body mechanics.
- 9) With one hand grasping gait belt and the other stabilizing resident by holding forearm, shoulder, or using other appropriate method to stabilize, ambulates resident at least 10 steps to the wheelchair.
- 10) Assists resident to turn and sit in the wheelchair in a controlled manner that ensures safety.
- 11) Removes gait belt.
- 12) Performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 13) Maintains respectful, courteous interpersonal interactions at all times.
- 14) Places resident within easy reach of the call light or signaling device and water.

Ambulation with a Walker

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Explains procedure to resident.
- 4) **Locks bed brakes to ensure resident's safety.**
- 5) **Locks wheelchair brakes to ensure resident's safety.**
- 6) Brings resident to sitting position. Places gait belt around waist to stabilize trunk.
- 7) Tightens gait belt. Checks gait belt by slipping fingers between gait belt and resident.
- 8) Assists resident to put on non-skid slippers/shoes. (No non-skid socks)
- 9) Positions walker in front of resident.
- 10) Assists resident to stand and ensures resident has stabilized walker.

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- 11) Positions self behind and slightly to side of resident.
- 12) Safely ambulates resident at least 10 steps to wheelchair.
- 13) Assists resident to turn and sit in wheelchair, using correct body mechanics.
- 14) Removes gait belt.
- 15) Performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer
 - b. Hands rubbed together until hands are completely dry.
- 16) Maintains respectful, courteous interpersonal interactions at all times.
- 17) Places resident within easy reach of the call light or signaling device and water.

Applying an Anti-Emboloc Stocking to One Leg

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Explains procedure to resident.
- 4) Provides for resident's privacy by only exposing one leg.
- 5) Gathers or turns stocking down inside out to the heel.
- 6) Places stocking over the toes, foot, and heel and rolls OR pulls up the leg.
- 7) Checks toes for possible pressure from stocking and adjusts as needed. (*)
- 8) Leaves resident with stocking that is smooth and wrinkle free. (*)
- 9) Leaves resident with stocking that is properly placed without restriction.**
- 10) Performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 11) Maintains respectful, courteous interpersonal interactions at all times.
- 12) Leaves call light or signal calling device and water within easy reach of the resident.

Bed Bath- Whole Face and One Arm, Hand and Underarm

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Explains procedure to the resident.
- 4) Provides privacy for resident, pulls privacy curtain. Raises bed to a comfortable working height.
- 5) Prepares resident for a complete bath, even though will be demonstrating a partial bed bath.
- 6) Covers resident with a bath blanket.
- 7) Removes top bed linens to foot of bed.
- 8) Removes resident's gown without exposing resident.
- 9) Fills basin with comfortably warm water.
- 10) Washes and dries face WITHOUT SOAP.
- 11) Uses clean portion of wash cloth and wipes eyes gently from the inner to the outer using a clean portion of the wash cloth with each stroke.
- 12) Places towel under arm, only expose one arm.
- 13) Washes arm, hand and underarm using soap and water.
- 14) Rinses arm, hand, and underarm and dries entire area.
- 15) Assists resident to put on a clean gown.
- 16) Lowers bed.
- 17) Empties rinses and dries equipment and returns to storage.
- 18) Disposes of soiled linen in appropriate container.
- 19) Performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer
 - b. Hands rubbed together until hands are completely dry.

- 20) Maintains respectful, courteous interpersonal interactions at all times.
- 21) Leaves call light or signaling device and water within easy reach of the resident.

Blood Pressure

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Explains procedure to resident. Provides privacy for resident, pulls privacy curtain.
- 4) Assists resident into a comfortable sitting or recumbent position with forearm relaxed and supported in a palm-up position.
- 5) Rolls resident's sleeve up about 5 inches above the elbow.
- 6) Applies the cuff around the upper arm just above the elbow and lines cuff arrows up with brachial artery.
- 7) Cleans earpieces of stethoscope appropriately and places in ears.
- 8) Cleans diaphragm of the stethoscope.
- 9) Places stethoscope over brachial artery.
- 10) Holds stethoscope snugly in place.
- 11) Inflates cuff to 30mmHG above RN Test Observer provided loss of pulse number.
- 12) Slowly releases air from cuff to disappearance of pulsations. Removes cuff.
- 13) Candidate has 2 attempts to take blood pressure (additional attempts will count against the candidate's score).
- 14) Records reading on provided recording form.
- 15) **Candidate's recorded systolic blood pressure is within 6mmHg of the RN Test Observer's recorded systolic blood pressure.**
- 16) **Candidate's recorded diastolic blood pressure is within 8mmHg of the RN Test Observer's recorded diastolic blood pressure.**
- 17) Performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 18) Maintains respectful, courteous interpersonal interactions at all times.
- 19) Leaves call light or signaling device and water within easy reach of the resident.

Denture Care

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Explains procedure to resident.
- 4) Lines sink with a protective lining that would help prevent damage to the dentures. (Use cloth towel or washcloth, do not use paper towels.)
- 5) Puts on gloves and removes dentures from cup.
- 6) Places dirty dentures in emesis basin.
- 7) Handles dentures carefully to avoid damage. Never places dentures in/on a contaminated surface.
- 8) Rinses denture cup.
- 9) Applies denture cleanser and thoroughly brushes dentures including the inner, outer, and chewing surfaces of upper and lower dentures as well as the denture groove and/or plate that will touch any gum surface. (Only one plate is used during testing.)
- 10) Rinses dentures using clean cool water.
- 11) Places dentures in denture cup.
- 12) Adds cool clean water to denture cup.
- 13) Empties, rinses and dries (with a clean, dry paper towel) equipment and returns to storage.
- 14) Discards protective lining in an appropriate container.
- 15) Removes and disposes of gloves properly.

- 16) Performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 17) Maintains respectful, courteous interpersonal interactions at all times.
- 18) Leaves call light or signaling device and water within easy reach of the resident.

Dressing a Bedridden Resident

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Explains the procedure to the resident.
- 4) Provides privacy for resident, pulls privacy curtain.
- 5) Keeps resident covered while removing gown.
- 6) Resident always remains lying in bed.
- 7) Removes gown from unaffected side first.
- 8) Places used gown in laundry hamper.
- 9) From the weak side first, dress the resident in a shirt or blouse, the candidate inserts their hand through the sleeve of the shirt or blouse and grasps the weak hand of the resident. (*) Candidate is free to position resident in a manner acceptable to dress the resident but never sits the resident on the side of the bed.
- 10) From the weak side first, dress the resident in pants, the candidate assists the resident to raise their buttocks or turns resident from side to side and draws the pants over the buttocks and up to the resident's waist. (*)
- 11) When putting on the resident's socks, the candidate draws the socks up the resident's foot until they are smooth.
- 12) Leaves the resident in correct body alignment and properly dressed.
- 13) Performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 14) Maintains respectful, courteous interpersonal interactions at all times.
- 15) Leaves call light or signaling device and water within easy reach of the resident.

Feeding a Dependent Resident

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Explains procedure to the resident.
- 4) Candidate looks at (picks up) diet card and indicates that resident has received the correct tray.
- 5) **Positions the resident in an upright position. *At least 45 degrees.***
- 6) Provides hand hygiene for the resident before feeding. (Candidate may use hand sanitizer on the resident covering all surfaces of the resident's hands and rubbing the sanitizer in until dry –or– wash and dry the resident's hands using a wet wash cloth with soap.)
- 7) Protects clothing from soiling by using napkin, clothing protector, or towel.
- 8) Discards soiled linen appropriately.
- 9) Remains at eye level or below while feeding resident.
- 10) Describes the foods being offered to the resident.
- 11) Offers water or other fluid frequently.
- 12) Offers food in small amounts at a reasonable rate, allowing resident to chew and swallow.
- 13) Wipes resident's hands and face during meal as needed.
- 14) Leaves resident clean and in a position of comfort.
- 15) Records intake in percentage of total solid food eaten on provided recording form.
- 16) Records intake of fluid in ml on provided recording form.

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- 17) Candidate's recorded consumed food intake is within 25 percentage points of the RN Test Observer's recorded food intake.
- 18) Candidate's recorded consumed fluid intake is within 30ml of the RN Test Observer's recorded fluid intake.
- 19) Performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 20) Maintains respectful, courteous interpersonal interactions at all times.
- 21) Leaves call light or signaling device and water within easy reach of the resident.

Fluid Intake

- 1) Candidate observes dinner tray. Three known capacity containers will have varying fluid levels.
- 2) Candidate may use supplied paper and pencil or calculator, if needed, to arrive at the number of ml consumed.
- 3) Candidate decides on ml of fluid consumed from each container.
- 4) Candidate obtains total fluid consumed in ml.
- 5) Candidate records total fluid consumed on provided recording form.
- 6) **Candidate's total recorded fluid consumed must be within 30ml of correct total.**

Mouth Care—Brushing Teeth

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Explains procedure to the resident.
- 4) Provides privacy for resident, pulls privacy curtain.
- 5) Drapes the chest with towel to prevent soiling.
- 6) Candidate puts on gloves.
- 7) Applies toothpaste to toothbrush.
- 8) **Brushes resident's teeth, including the inner, outer, and chewing surfaces of all upper and lower teeth.**
- 9) Cleans tongue.
- 10) Assists resident in rinsing mouth.
- 11) Wipes resident's mouth.
- 12) Removes soiled linen.
- 13) Places soiled linen in hamper or equivalent.
- 14) Empties emesis basin.
- 15) Rinses and dries emesis basin with a clean, dry paper towel.
- 16) Rinses toothbrush.
- 17) Returns emesis basin and toothbrush to storage.
- 18) Removes gloves and disposes properly.
- 19) Leaves resident in position of comfort.
- 20) Performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 21) Leaves call light or signaling device and water within easy reach of the resident.
- 22) Maintains respectful, courteous interpersonal interactions at all times.

Mouth Care of Comatose Resident

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Provides privacy for resident, pulls privacy curtain.

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- 4) **Turns resident to a side lying position to avoid choking or aspiration.** *(If the resident is too large for the candidate to turn on his/her own, the candidate may ask the RN Test Observer for assistance with turning the resident.)*
- 5) Drapes chest/bed as needed to protect from soiling.
- 6) Puts on gloves, uses swabs and cleaning solution. (May not use toothbrush or toothpaste.)
- 7) Gently and thoroughly cleans the inner, outer, and chewing surfaces of all upper and lower teeth.
- 8) Gently and thoroughly cleans the gums and tongue.
- 9) Wipes resident's mouth.
- 10) Returns resident to position of comfort and safety.
- 11) Discards disposable items [swab(s)] in trash.
- 12) Discards towel and/or washcloth in linen hamper. Removes gloves and disposes properly.
- 13) Performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 14) Maintains respectful courteous, interpersonal interactions at all times.
- 15) Leaves call light or signaling device and water within easy reach of the resident.

Making an Occupied Bed

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Gathers linen.
- 4) Transports linen correctly without touching uniform.
- 5) Places linen on a clean barrier, such as a cloth towel or chux pad. May place linen on the over-bed table, seat of the chair, on night stand or over the end of the bed.
- 6) Explains procedure to resident.
- 7) Provides privacy for resident, pulls privacy curtain.
- 8) Directs observer to stand on opposite side of bed to provide for safety. (*)
- 9) Raises bed to a comfortable working height.
- 10) Resident is to remain covered at all times.
- 11) Assists resident to roll onto side toward observer. Candidate instructs observer to remain standing on opposite side of the bed.
- 12) Rolls or fan folds soiled linen, soiled side inside, to the center of the bed.
- 13) Places clean bottom sheet along the center of the bed and rolls or fan folds linen against resident's back and unfolds remaining half.
- 14) Secures two fitted corners.
- 15) Candidate directs the observer to stand on the opposite side of bed. (*)
- 16) Assists the resident to roll over the bottom linen, preventing trauma and avoidable pain to resident.
- 17) Removes soiled linen without shaking.
- 18) Avoids placing dirty linen on the over bed table, chair or floor.
- 19) Avoids touching linen to uniform.
- 20) Disposes of soiled linen in hamper or equivalent.
- 21) Pulls through and smooths out the clean bottom linen.
- 22) Secures the other two fitted corners.
- 23) Resident's body never touches the bare mattress. (*)
- 24) Places clean top linen and blanket or bed spread over covered resident.
- 25) Removes used linen keeping resident unexposed at all times.
- 26) Tucks in top linen and blanket or bedspread at the foot of bed.
- 27) Makes mitered corners at the foot of the bed.
- 28) Applies clean pillow case, with zippers and/or tags to inside.
- 29) Gently lifts resident's head while replacing the pillow.

- 30) Lowers bed.
- 31) Performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 32) Maintains respectful, courteous interpersonal interactions at all times.
- 33) Leaves call light or signaling device and water within easy reach of the resident.

Position Resident on Side

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Explains procedure to resident.
- 4) Provides privacy for resident, pulls privacy curtain.
- 5) Positions bed flat. Raises bed to a comfortable working height.
- 6) Ensures that the resident's face never becomes obstructed by the pillow. (*)
- 7) Candidate directs RN Test Observer to stand on the opposite side of the bed to provide for safety, or always turns resident towards self. (*)
- 8) From the working side of the bed, Candidate moves head, hips and legs toward self to provide room on the bed that will be used to safely turn the resident on his/her side.
- 9) Candidate may remain on the working side of the bed and turns the resident toward the previously positioned observer, or if the observer wasn't directed to side opposite the working side of the bed, candidate moves to opposite side of the bed and turns the resident toward self.
- 10) Assists/turns resident on his/her side.
- 11) Resident is placed on the correct RN Test Observer stated side.
- 12) Check to be sure resident is not lying on his/her arm.
- 13) Maintains correct body alignment.
- 14) Places support devices such as pillows, wedges, blankets, etc., to maintain correct body alignment and protect bony prominences- under the head, the upside arm, behind the back and between the knees. (*)
- 15) Lowers bed.
- 16) Performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 17) Maintains respectful, courteous interpersonal interactions at all times.
- 18) Leaves call light or signaling device and water within easy reach of the resident.

Range of Motion for Hip & Knee

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Explains procedure to the resident.
- 4) Provides privacy for resident, pulls privacy curtain.
- 5) Positions bed flat.
- 6) **Positions resident supine.**
- 7) Positions resident in good body alignment.
- 8) Correctly supports joints at all times by placing one hand under the knee and the other hand under the ankle.
- 9) Moves the entire leg away from the body. (abduction)
- 10) Moves the entire leg back toward the body. (adduction)
- 11) Completes abduction and adduction of the hip three times.
- 12) Continue to correctly support joints by placing one hand under the resident's knee and the other hand under the resident's ankle. Bends the resident's knee and hip toward the resident's trunk. (flexion of hip and knee at the same time)

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- 13) Straighten the knee and hip. (extension of knee and hip at the same time)
- 14) Complete flexion and extension of knee and hip three times.
- 15) **Does not cause discomfort or pain and does not force any joint beyond the point of free movement. Candidate must ask if they are causing any pain or discomfort.**
- 16) Leaves resident in a comfortable position.
- 17) Performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 18) Maintains respectful, courteous interpersonal interactions at all times.
- 19) Leaves call light or signaling device and water within easy reach of the resident.

Range of Motion for Shoulder

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Explains procedure to the resident.
- 4) Provides privacy for resident, pulls privacy curtain.
- 5) **Positions resident supine.**
- 6) Positions resident in good body alignment.
- 7) Correctly supports the resident's joint by placing one hand under their elbow and the other hand under the resident's wrist.
- 8) Raises resident's arm up and over the resident's head. (flexion)
- 9) Brings the resident's arm back down to the resident's side. (extension)
- 10) Completes full range of motion for shoulder through flexion and extension three times.
- 11) Continue supporting joints correctly and move the resident's entire arm out away from the body. (abduction)
- 12) Return the resident's arm to the middle of the resident's body. (adduction)
- 13) Complete full range of motion for shoulder through abduction and adduction three times.
- 14) **Does not cause discomfort or pain and does not force any joint beyond the point of free movement. Candidate must ask if they are causing any pain or discomfort.**
- 15) Leaves resident in a comfortable position.
- 16) Performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 17) Maintains respectful, courteous interpersonal interactions at all times.
- 18) Leaves call light or signaling device and water within easy reach of the resident.

Pivot-Transfer a Weight Bearing, Non-Ambulatory Resident from Bed to Wheelchair using a Gait Belt

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Explains the procedure to be performed to the resident and obtains a gait belt.
- 4) Positions wheelchair at the foot or head of the bed.
- 5) **Locks wheelchair brakes to ensure resident's safety.**
- 6) **Locks bed brakes to ensure resident's safety.**
- 7) Assists resident to sitting position (on the edge of the bed) using proper body mechanics and places gait belt around the resident, below the rib cage and above their waist, to stabilize trunk. Tightens gait belt.
- 8) Checks gait belt by slipping fingers between gait belt and resident.
- 9) Assist in putting on non-skid slippers/shoes. (No non-skid socks)

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- 10) Adjust bed so that resident's feet are comfortably flat on the floor.
- 11) Grasps the gait belt with both hands to stabilize the resident.
- 12) Brings resident to a standing position using proper body mechanics.
- 13) Does not attempt to ambulate resident.**
- 14) Assist resident to pivot and sit in a controlled manner that ensures safety.
- 15) Removes gait belt.
- 16) Performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 17) Maintains respectful, courteous interpersonal interactions at all times.
- 18) Places resident within easy reach of the call light or signaling device and water.

Pivot-Transfer a Weight Bearing, Non-Ambulatory Resident from Wheelchair to Bed using a Gait Belt

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Explains procedure to be performed to the resident.
- 4) Positions wheelchair at foot or head of bed.
- 5) Adjust bed so that resident's feet will be comfortably flat on the floor when sitting on the bed.
- 6) Ensures resident's safety. Locks wheelchair brakes.**
- 7) Ensures resident's safety. Locks bed brakes.**
- 8) Places gait belt around the resident, below the rib cage and above their waist, to stabilize trunk.
- 9) Tightens gait belt so that fingers of candidate's hand can be comfortably slipped between gait belt and resident.
- 10) Grasps the gait belt with both hands to stabilize the resident.
- 11) Brings resident to standing position using proper body mechanics.
- 12) Does not attempt to ambulate resident.**
- 13) Assists resident to pivot and sit on bed in a controlled manner that ensures safety.
- 14) Removes gait belt.
- 15) Assists resident in removing non-skid slippers.
- 16) Assists resident to move to center of bed, supporting extremities as necessary.
- 17) Makes sure resident is comfortable and in good body alignment.
- 18) Performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 19) Maintains respectful, courteous interpersonal interactions at all times.
- 20) Leaves call light or signaling device and water within easy reach of the resident.

Vital Signs - Temperature, Pulse and Respirations

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self by name.
- 3) Explains procedure to resident.
- 4) Correctly turns on digital oral thermometer and places sheath on thermometer.
- 5) Gently inserts bulb end of thermometer in mouth under tongue.
- 6) Leaves thermometer in place for appropriate length of time.
- 7) Removes thermometer and candidate reads and records the temperature reading on provided recording form.
- 8) Candidate's and RN Test Observer's recorded temperature recordings match.**
- 9) Candidate discards sheath appropriately.

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- 10) Locates the radial pulse by placing tips of fingers on thumb side of the resident's wrist.
- 11) *Counts pulse for 60 seconds or 30x2 and records pulse rate on the provided recording form.*
- 12) Candidate's recorded pulse rate is within 4 beats of RN Test Observer's recorded pulse rate.**
- 13) *Candidate counts respirations for 60 seconds or 30x2 and records respirations on provided recording form.*
- 14) Candidate's recorded respiratory rate is within 2 breaths of the RN Test Observer's recorded respiratory rate.**
- 15) Performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 16) Maintains respectful, courteous interpersonal interactions at all times.
- 17) Leaves call light or signaling device and water within easy reach of the resident.

Vital Signs - Temperature, Respirations, Pulse Oximetry and Electronic Blood Pressure

- 1) Greets resident by name and performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 2) Introduces self to resident.
- 3) Explains procedure to resident.
- 4) Correctly turns on digital oral thermometer and places sheath on thermometer.
- 5) Gently inserts bulb end of thermometer in mouth under tongue.
- 6) Leaves thermometer in place for appropriate length of time.
- 7) Removes thermometer and candidate *reads* and *records the temperature reading* on provided recording form.
- 8) Candidate's and RN Test Observer's recorded temperature recordings match.**
- 9) Candidate discards sheath appropriately.
- 10) *Candidate counts respirations for 60 seconds or 30x2 and records respirations on provided recording form.*
- 11) Candidate's recorded respiratory rate is within 2 breaths of RN Test Observer's recorded respiratory rate.**
- 12) Candidate obtains pulse oximeter and clips the pulse oximeter on the top and bottom of the resident's finger.
- 13) Candidate turns on pulse oximeter and leaves pulse oximeter in place, for the appropriate length of time, while oxygen level reading is being taken.
- 14) Removes pulse oximeter and candidate *reads* and *records the oxygen reading* on provided recording form.
- 15) Candidate's recorded pulse oxygen percentage is within 1 percentage point of the RN Test Observer's recorded percentage.**
- 16) Candidate obtains electronic blood pressure cuff.
- 17) Places blood pressure cuff on resident's arm with brachial marker in correct position.**
- 18) Aligns arrow on cuff over brachial artery.
- 19) Candidate turns on electronic blood pressure monitor and leaves electronic blood pressure cuff in place, for the appropriate length of time, while blood pressure reading is being taken.
- 20) Removes electronic blood pressure cuff and candidate *reads* and *records the blood pressure reading* on provided recording form.
- 21) Candidate's and RN Test Observer's recorded blood pressure recordings match.**
- 22) Performs hand hygiene.
 - a. Covers all surfaces of hands with hand sanitizer.
 - b. Hands rubbed together until hands are completely dry.
- 23) Maintains respectful, courteous interpersonal interactions at all times.
- 24) Leaves call light or signal calling device and water within easy reach of the resident.

Knowledge Test Vocabulary List

abandonment	absorption	activities
abbreviations	abuse	acute
abdominal thrust	accidents	adaptive
abduction	accountability	adaptive devices
abductor wedge	accountable	adduction

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ADL	BPH (benign prostatic hyperplasia)	converting measures
ADLs	breathing	COPD
admission	breathing rates	Coronary Artery Disease
admitting resident	broken equipment	CVA
afebrile	burnout	cyanotic
affected side	call light	dangling
aggressive resident	call signal	death
aging process	cancer	death and dying
AIDS	cardiac arrest	decubitus ulcer
alarms	cardiopulmonary resuscitation	deeper tissue
alternating pressure mattress	cardiovascular system	defamation
Alzheimer's	care impaired	dehydration
ambulation	care plan	delegation
amputees	cares	delusions
anatomy	cast	dementia
anger	cataracts	denture care
angina	catheter	dependability
anterior	catheter care	depression
antibacterial	cc's in an ounce	developmental disability
antibiotics	cell phones	diabetes
antiembolitic	central nervous system	dialysis
anxiety	cerebral vascular accident	diastolic
aphasia	certification renewal	diet
apical	chain of command	dietitian
apnea	charge nurse	digestion
appropriate response	chemical restraint	digestive system
arteries	chemotherapy	discharging resident
arthritis	choking	disease
aseptic	chronic	disinfection
aspiration	circulation	disoriented
assistive device	circulatory system	disrespect
atrophy	clarification	disrespectful treatment
axillary temperature	cleaning	dizziness
bargaining	cleaning spills	DNR
basic needs	clear liquid diet	documentation
basic nutrition	clergy	domestic abuse
basic rights	cold application	dorsiflexion
bathing	colostomy	dressing
bed cradle	combative resident	droplets
bed height	communication	drowsy
bed making	compression	dying
bedrest	confidentiality	dysphagia
behavior	conflict	dysphasia
beliefs	conflict resolution	dyspnea
biohazard	confused resident	edema
bladder training	congestive heart failure	elastic
blindness	constipation	elastic stockings
blood pressure	constrict	elevate head
body mechanics	contact isolation	elopement
body system	contamination	emesis
body temperature	continuity	emotional needs
bowel program	contracture	emotional stress

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emotional support	HIV	medical record
empathy	hoarding	medications
emphysema	holistic care	memory
epilepsy	hormones	memory loss
ethics	hospice	mental health
etiquette	hospice care	mental illness
evacuation	hydration	microorganism
evacuation procedures	hyperglycemia	microorganisms
extension	hypertension	military time
extremity	hyperventilation	misconduct
eye glasses	hypoglycemia	mites
falls	I&O (input and output)	morning care
fecal impaction	ileostomy	mouth care
feces	immobility	moving
feeding	immune	mucous membrane
feeding tubes	impairment	musculoskeletal
fire	indwelling catheter	musculoskeletal system
fire safety	infection	nail care
first aid	infection control	nausea and vomiting
flatus	in-house transfer	needles
flexion	initial observations	neglect
fluid	input and output	negligence
fluid imbalance	insomnia	non-contagious disease
Foley catheter	insulin	nonverbal communication
foot board	intake	nosocomial
foot care	intake and output	nothing by mouth (formerly NPO)
foot drop	integumentary system	nurse's station
Fowler's position	inter-generational care	nursing assistant's role
fractures	interpersonal skills	nutrients
frayed cord	invasion of privacy	nutrition
gait belt	isolation	objective
geriatrics	isolation precautions	objective data
germ transmission	IV care	OBRA
gerontology	job description	observation
gifts	kidney failure	ombudsman
gloves	lateral position	open-ended questions
grieving process	legal ethics	oral care
hair care	legal responsibilities	oral hygiene
hallucination	life support	oral temperature
hand tremors	lift/draw sheet	orientation
hand washing	lifting	orthopedic
harm	linen	orthostatic hypotension
hearing aid	listening	osteoarthritis
hearing impaired	living will	osteoporosis
heart muscle	low sodium diet	output
heart rates	Maslow	oxygen
heat application	masturbation	oxygen concentrator
helping residents	material safety data sheets	oxygen cylinder
hemiplegia	measuring	oxygen use
hepatitis B	measuring height	pain
high fowler's	measuring temperature	palliative care
HIPAA	medical asepsis	

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paralysis	reposition	social needs
paranoia	repositioning	soiled linen
Parkinson's	resident belongings	specimen
partial assistance	resident centered care	spills
passive	resident harm	spiritual needs
pathogen	resident independence	sputum
pathogens	resident right	sputum specimen
perineal care	resident rights	sputum test
peristalsis	Resident's Bill of Rights	standard precautions
personal care	resident's chart	sterilization
personal items	resident's environment	stethoscope
personal protective equipment	resident's rights	stockings
personal stress	respectful treatment	stress
pet therapy	respiration	stroke
petit mal seizure	respiratory	sub acute care
phantom pain	respiratory disease	subjective
phobia	respiratory symptoms	subjective data
physical needs	respiratory system	sundowning
physician's authority	responding to resident behavior	supine
physiology	response	suprapubic
plaque	responsibilities	survey
policy book	responsibility	swallowing
positioning	restorative care	swelling
post mortem care	restraint	systolic
post-operative pneumonia	restraint alternative	tachycardia
PPE (personal protective equipment)	restraints	task
pressure injuries	resuscitation	TED hose
preventing injury	rights	telephone etiquette
privacy	risk factor	temperature
professional boundaries	roles and responsibilities	tendons
progressive	rotation	terminal illness
promoting independence	safety	terminology
pronation	safety and security need	thickened liquids
prone	safety precautions	threatening resident
prosthesis	sanitizer	tips
prosthetic device	scabies	toenails
psychological needs	scale	toileting schedule
pulse	scope of practice	trachea
pureed diet	seclusion	transfers
quadrant	security	transmission
quadriplegia	seizure	transport bag
quality of life	self-esteem	tub bath
radial	semi fowlers	tube feeding
range of motion	sensory system	tubing
rectal	sexual needs	twice daily
refusal	sharps container	tympanic
regulation	shaving	types of care
regulations	side rails	types of isolation
religious service	Sitz bath	unaffected
reminiscence therapy	skin	unconscious
reminiscing	skin integrity	unethical behavior
reporting	smoking	unsteady

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urethral
urinary bag
urinary catheter bag
urinary elimination
urinary system
urination
urine
UTI
validation

varicella virus
violent behavior
vision change
visual impairment
vital signs
vomitus
walker
wandering resident
warm and cold applications

water faucets
water temperature
weak side
weighing
weight
wheelchair safety
white blood cells

