

# D&S Diversified Technologies

PO Box #418, Findlay, OH 45839-0418  
Toll Free 877-201-0758 – Local 419-420-1605 - Fax 419-422-8328 - www.hdmaster.com

**PROVIDING CNA TESTING SOLUTIONS THROUGHOUT DELAWARE**

## TESTING SITE EQUIPMENT LIST AND AFFIDAVIT

Form 1502 DE MUST accompany this list

The Testing Site must include all of the materials necessary to properly administer any of the randomly selected Skill tests. The Observer is required to review all of the Skill Tests they receive prior to administration and ensure that the appropriate laboratory equipment is available prior to testing. Please refer to the following list for equipment requirements.

### Equipment Provided by Testing Site

- Catheter equipment and Urinary Drainage Bag
- Long-term care bed with side rails, working bed brakes
- Laundry hamper
- Bedside stand -- Over bed stand
- Wheelchair with working brakes and footrest
- Standard Scale or Analog Scale (No Digital)
- Blood Pressure Cuff
- Hand washing sink with running water, liquid soap, & paper towels
- Wash Basin – Emesis Basin-Bedpan
- Bedpan, output measurement container/graduate
- Wastebasket
- Call light—doesn't have to be a working call light
- Gait belt/transfer belt
- Food tray, plate, silverware
- Linens including: pillows and top linens (e.g. blanket) water proof pad
- Dentures, Denture container
- Anti embolic/Elastic Stocking
- Mannequin (peri area for female)
- Walker
- Privacy Curtain (Must be overhead rail, pull type with minimum 4' of rail)

### Additional Equipment Provided by Observer or Flexible Test Site

- A tape player/Walkman with working stereo headphones. The Observer must ensure that the tape player either has an AC adapter to plug into an available outlet, or has fresh batteries. (Used for Oral Test administration)
- Toothbrush, toothpaste, mouth rinse, dental floss, and 240 cc cup
- Lotion
- Nail file, orange stick
- Hair brush, comb and hand mirror
- Paper and pencil to record TPR and weight
- Intake and output record sheets
- Liquid Soap - Tissues
- Sheaths for oral thermometer
- Pants and shirt or slip and dress, socks
- Gloves
- Oral digital thermometer – Alcohol – Alcohol pads
- Non skid shoes or slippers
- #2 pencils for written test administration
- Sample food items & napkins. (Canned applesauce etc.)
- Watch and "egg" timer
- Linens including: pillowcases, flat & fitted sheets, towels, washcloth, bath blanket, blanket, and resident gown

Testing Sites and Observers may mutually agree to a different mix of equipment distribution and a Test Observer may use their consumable supplies reimbursement to purchase consumables from the Site, depending on mutual agreement with the Site. Please call D&S DIVERSIFIED TECHNOLOGIES toll free at 1-877-201-0758 or locally 419-420-1605 if we can be of assistance regarding these issues.

### Site Affidavit:

We hereby certify that

Facility Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Contact Person's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

has the equipment listed herein and will make the equipment available to D&S DIVERSIFIED TECHNOLOGIES certified observers (that are either independently contracted or TAG employed) for the purpose of administering CNA written and Skill Tests to nurse aide Candidates at our Site.

Site Administrator Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

### Test Observer Affidavit:

Test Observer Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I certify that I have reviewed the equipment list and will provide the Test Observers list of equipment required for the purpose of administering CNA written and Skill Tests to nurse aide Candidates.

Test Observer Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_