

South Dakota Candidate Handbook

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dba HEADMASTER, LLP**

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South Dakota Health Care Association (SDHCA)	(800) 952-3052
~ Test Dates & Location Options	
~ Test Results	
HEADMASTER.....	(406) 442-8656
~ Cancellations or Rescheduling	
~ Name or Address Changes	
South Dakota Board of Nursing.....	(605) 362-2760
~ Nurse Aide Registry Questions	
South Dakota Department of Health.....	(605) 773-3356
~ State & Federal Regulations	

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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 nurse aides who work in such facilities. Each state is responsible for following the terms of this federal law.

The South Dakota Department of Health monitors approved OBRA nurse aide training programs which provide specific standards for nurse aide related knowledge, skills and abilities. Their

purpose is to make sure that Candidates who are seeking nurse aide certification understand these standards, can competently and safely perform the job of an entry-level nurse aide and are prepared to test.

The South Dakota Health Care Association has contracted with D&S Diversified Technologies, dba HEADMASTER, to provide tests and scoring services for the Certified Nurse Aide Test. This handbook is designed to help prepare Candidates for the South Dakota approved Certified Nurse Aide Test. There are two parts to the Certified Nurse Aide Test — a multiple-choice Knowledge/Oral Test and a Skill Test. Candidates must pass both parts of the test to be certified and listed on the Nurse Aide Registry.

To learn how to apply to take the Certified Nurse Aide Test, please contact the South Dakota Health Care Association at (800) 952-3052. This handbook should be kept for future reference.

The Knowledge/Oral Test

The Test Observer will hand out materials and give instructions to those taking the paper Knowledge/Oral Test. On-line testing is performed by entering your answers on a computer. You will have ninety (90) minutes to complete the test. You will be told when fifteen (15) minutes are left to finish. You MAY NOT ask questions about the content of the Test (such as “What does this question mean?”). You must score at least a 75% in order to pass the Written Test.

An Oral Test may be taken in place of the Knowledge Test if you have difficulty reading English. If you want to take the Oral Test you must request it when you submit your application. The Oral Test can be given two ways: (1) in the form of a cassette tape with the test questions read to you or (2) or online testing where you enter your answers on a computer.

Your test may contain questions on which statistical information will be collected for use in constructing future tests. Your responses to these questions do not affect your score. They are mixed in with the scored questions and are not identified. All test materials must be left in the testing room. Anyone who takes or tries to take materials or information from the testing room is subject to prosecution.

Knowledge Test Content Outline

The knowledge test consists of 75 questions SELECTED from the nine (9) subject areas listed below and the number of questions from each subject area listed in () at the end of each listed subject area:

- 1) **Safety**—safety of residents, NA’s, facility safety issues & safety of facility personnel in general. (7)
- 2) **Communication & Interpersonal Skills**—any type communication, verbal & nonverbal, written & spoken; any communication related to hearing, seeing, feeling, tasting or smelling. (6)
- 3) **Infection Control**—relating to the nature of infections; causes & prevention, correct methods & procedures for dealing with infection. (7)
- 4) **Basic Rights**—rights residents are legally entitled to; facility & CNA roles in insuring those rights; to include the promotion of resident’s independence. (6)
- 5) **Basic Nursing Skills & Personal Care**—broad subject area including any act or activity that would be considered a basic skill necessary to perform the job of a CNA, includes data acquisition, handling & routing. (18)
- 6) **Role & Responsibility**—broad subject area including any act or activity or restorative services that would be considered part of the basic role or responsibility of a CNA in the workplace. (8)
- 7) **Physical Health & Illness**—activities or acts performed by a CNA for or to residents that are personal in nature and accommodations necessary for functionally impaired residents. (14)
- 8) **Mental Health**—mental processes of residents, signs and stages of mental states of residents both normal and care impaired; mental well-being & interaction of a CNA and co-workers. (4)
- 9) **Ageing Process**—awareness of developmental tasks associated with the ageing process. (5)

The Skill Test

The purpose of the Skill Test is to assess your performance of nurse aide skills. You must score at least a 75% on each skill task without missing any key steps in order to pass the Skill Test. You will find a complete list of skill tasks printed later in this handbook. Five (5) skill tasks will be randomly selected from this list for you to perform for your Skill Test. The steps that are listed for each skill task are the minimum number of steps required for a nurse aide to perform the task. You will be evaluated on these steps.

What to Expect:

- Each of the five skills with your assigned tasks will be read to you.
- Listen carefully to all instructions given by the Test Observer. You may have the scenario repeated.
- Be sure you understand all instructions before you begin because you may not ask questions after the test begins.
- You will be given thirty (30) minutes to complete the five (5) selected nurse aide tasks.
- If you make a mistake while performing a task, say so and then repeat the required task.
- Once the Skill Test begins, the Test Observer (TO) may not answer any questions after the test begins.
- If you fail one skill task, you will have to retest on five new skill tasks, one of which will be a task you failed.

Skill Test Instructions:

The following instructions will be read by the Test Observer (TO) to each candidate before their skill test begins:

I do not judge or evaluate your performance. I will be observing and recording whether or not you perform the steps on each of the five tasks that make up your Skill Test. HEADMASTER staff in Helena, MT will score your test. I will not know whether or not you have passed or failed.

We are going to ask you to actually perform and demonstrate every step on each of five tasks that the computer has randomly chosen. You will have 30 minutes to complete all five tasks. I will let you know when 15 minutes have gone by.

You will begin with the task of Handwashing followed by four more tasks, which will be read to you. You don't have to remember these four tasks, because I will tell them to you again, one at a time, as you progress through the Skill Test. After demonstrating Handwashing as your first task, you may just tell me when you should wash your hands during each of your remaining four tasks. It may help you to talk yourself through each step as you perform your five tasks.

Each task has its own scenario, which I will read to you before you begin. It may help you to relax if you picture yourself in your regular workplace and just demonstrate to me the way you normally perform each task. You may use any equipment necessary. You may move equipment as needed to accomplish your tasks. Try to relax, be calm, take charge and show me your best work.

I will read one scenario at a time to you. After I read the scenario to you, please actually demonstrate the task, beginning with entering the resident's room. I must see you perform each step. When you finish the task, tell me you are finished and move to the relaxation area. The Resident Actor and I will set up for the next task and then I will come to the relaxation area to read the next scenario to you.

Any time during the Skill Test, until you run out of time or tell me you are finished, you may repeat or correct any task or any step on a task that you believe you did incorrectly. **You may ask me to reread any of the scenarios for you at any time during your Skill Test.**

When all five tasks are finished, if you still have time remaining, you may go back and correct anything you think you performed incorrectly, or you may tell me you are finished with the Skill Test. I cannot answer any questions once we begin the test. Do you have any questions now?

Knowledge/Skill Testing Costs

The cost for a facility and/or individual to take the above exams are as follows:

Knowledge Test	\$ 67.50
Skill Test	\$ 85.00
Both	\$152.50

Latex / Powder Allergies

If you have an allergic reaction to latex or the powder in latex gloves, please bring latex/powder free gloves with you to the test site to use during your skill test.

Requests for Special Test Accommodations

If the candidate is in need of special test accommodations, please contact the SDHCA office to request an Accommodations Form or download it from the www.sdhca.org website and submit it to SDHCA along with the rest of your application materials.

Candidates with Temporary Disabilities

Please note that the Test Observer (TO) has the authority to deny testing to any candidate that expresses or has a noticeable temporary disability. The Manual Skill Test includes some strenuous physical tasks. If the candidate cannot perform even one of the skill tasks due to a temporary disability, they should not come to the test site. Temporary disabilities such as, knee injury, back injury, pregnancy, or recent surgery, etc., which would preclude the candidate from safely performing even one of the skill tasks are all reasons for denying testing unless the candidate has a specific doctor's excuse. The South Dakota Health Care Association, HEADMASTER, the Test Observer or Resident Actor do not cover personal bodily or physical injury. Therefore, you will not be allowed to test if you have a temporary disability.

If a candidate is experiencing a temporary disability and does not test within four months from their date of hire, document the specifics of the situation and file the documentation in the candidate's personnel file. Contact Juanita Webber at the South Dakota Department of Health (phone number 605-773-3356) and obtain an extension for testing for the candidate. Please remember, if a Test Observer (TO) denies testing to a candidate, because of a temporary disability, they are acting in the best interests of the candidate.

If a candidate goes to test and the individual expresses a temporary disability that has not been pre-approved by the South Dakota Health Care Association, the candidate may not be allowed to test.

Candidates with Permanent Disabilities

If a candidate has a permanent disability and needs an ADA accommodation, the ADA accommodation forms must be filled out and submitted to the South Dakota Health Care Association and approved prior to testing.

Manual Skill Listing

Abdominal Thrust

1. Candidate is able to identify symptoms of choking. Evaluates choking by asking resident "Are you choking?"
2. Gets resident up out of wheelchair.
3. Stands behind resident and wraps arms around resident's waist.
4. Makes a fist with one hand.
5. Places the thumb side of the fist against the resident's abdomen.
6. Positions fist slightly above navel and below the xiphoid process
7. Grasps fist with other hand, presses fist and hand lightly into the resident's abdomen and verbalizes an inward, upward thrust that is to be repeated at least 3-5 times.
8. Candidate stops and asks resident "Are you still choking?" Resident says, "I'm fine now."
9. Candidate should verbalize to the Test Observer that they would repeat this procedure until it is successful or until victim loses consciousness.
10. Identifies that hands should be washed.

Ambulation with Cane or Walker

1. Knocks on door.
2. Introduces himself/herself appropriately to the resident.
3. Identifies that hands should be washed.
4. Explains procedure to resident.
5. Assembles equipment as required.
6. Insures chair is easily accessible.
7. Brings resident to sitting position.
8. Assists resident in putting on non-skid slippers.
9. Positions cane or walker correctly.
10. Positions self appropriately to help resident stand always being aware to use correct body mechanics.
11. Assists resident to stand.
12. Stabilizes cane or walker. (Insures resident stabilizes cane or walker.)
13. Positions self behind and slightly to side of resident.
14. Safely ambulates resident at least 10 steps.
15. Assists resident to pivot and sit in the chair.
16. Returns walker/cane to appropriate storage area.
17. Maintains respectful, courteous interpersonal interactions at all times.
18. Leaves call light or signal calling device within easy reach of the resident.
19. Identifies that hands should be washed.

Ambulation with Use of Gait Belt

1. Knocks on door.
2. Introduces himself/herself appropriately to the resident.
3. Identifies that hands should be washed.
4. Obtains gait belt.
5. Explains procedure to be performed to the resident.
6. Lowers bed to lowest position.
7. Puts non-skid slippers on resident.
8. Places gait belt around resident below lower ribs and above waist to stabilize trunk.
9. Tightens gait belt so that fingers of candidate's hand can be comfortably, slipped up and under between the gait belt and resident.
10. Brings resident to standing position using proper body mechanics.
11. With one hand grasping gait belt that stays in proper position and the other stabilizing the resident by holding forearm, shoulder, or using other appropriate method to stabilize, ambulates resident 10 steps.

12. Assists resident to sit in the chair: Pivots, and sits resident using proper mechanics.
13. Removes gait belt.
14. Properly stores gait belt.
15. Maintains respectful, courteous interpersonal interactions at all times.
16. Leaves call light or signal calling device within easy reach of the resident.
17. Identifies that hands should be washed.

Applying Antiembolic Stockings

1. Knocks on door.
2. Introduces himself/herself appropriately to the resident.
3. Identifies that hands should be washed.
4. Explains procedure to resident.
5. Provide for resident's privacy by only exposing one leg.
6. Rolls OR gathers stocking down to heel.
7. Places stocking over the toes, foot, and heel.
8. Rolls OR pulls up the leg.
9. Checks toes for alignment/placement in stocking.
10. Adjusts stocking as needed.
11. Applied stocking is smooth and wrinkle free.
12. Maintains respectful, courteous interpersonal interactions at all times.
13. Leaves call light or signal calling device within easy reach of the resident.
14. Treated resident gently during entire procedure.
15. Identifies that hands should be washed.

Blood Pressure

1. Knocks on door.
2. Introduces himself/herself appropriately to the resident.
3. Identifies that hands should be washed.
4. Explains procedure to resident.
5. Provides for resident's privacy.
6. Assists resident into a comfortable sitting or recumbent position with forearm relaxed and supported in a palm-up position, approximately at the level of the heart.
7. Rolls resident's sleeve up about 5 inches above the elbow and applies the cuff around the upper arm just above the elbow.
8. Cleans earpieces of stethoscope appropriately and places in ears.
9. Locates brachial artery by feeling brachial pulse just above bend of elbow.
10. Places stethoscope over brachial artery and holds snugly in place.
11. Inflates cuff.
12. Slowly releases air from cuff to disappearance of pulsations.
13. Removes cuff.
14. Records reading on pad.
15. Candidate's recorded systolic and diastolic blood pressures are within 4 points of the Test Observer (TO).
16. Utilized appropriate equipment:
 - a. correct size cuff
 - b. teaching stethoscope
 - c. two alcohol swabs
 - d. pad and pencil
17. Maintains respectful, courteous interpersonal interactions at all times.
18. Leaves call light or signal calling device within easy reach of the resident.
19. Identifies that hands should be washed.

Brushing Teeth

1. Knocks on door.
2. Introduces himself/herself appropriately to the resident.

3. Identifies that hands should be washed.
4. Explains procedure to the resident.
5. Provides for resident's privacy.
6. Drapes the chest as needed to prevent soiling.
7. Puts on disposable gloves.
8. Applies toothpaste to toothbrush.
9. Gently brushes resident's teeth, including the **inner surfaces** of all upper and lower teeth. If available, toothettes may be utilized instead of the toothbrush as long as all of the surfaces listed above are cleaned.
10. Gently brushes resident's teeth, including the **outer surfaces** of all upper and lower teeth.
11. Gently brushes resident's teeth, including the **chewing surfaces** of all upper and lower teeth.
12. Cleans tongue.
13. Assists resident in rinsing mouth.
14. Wipes resident's mouth as needed.
15. Removes soiled drape.
16. Discards soiled drape in appropriate container.
17. Leaves resident in position of comfort and safety.
18. Empties emesis basin.
19. Cleans emesis basin.
20. Rinses toothbrush.
21. Returns all equipment to storage.
22. Places towel in linen hamper.
23. Removes gloves, turning gloves inside out as they are removed.
24. Disposes of gloves in an appropriate container.
25. Utilized the appropriate equipment during the procedure:
 - a. toothbrush
 - b. emesis basin
 - c. tooth paste
 - d. glass of water
 - e. towel
26. Maintains respectful, courteous interpersonal interactions at all times.
27. Leaves call light or signal calling within easy reach of the resident.
28. Identifies that hands should be washed.

Denture Care

1. Knocks on door.
2. Introduces himself/herself appropriately to the resident.
3. Identifies that hands should be washed.
4. Explains procedure to resident.
5. Provides for resident's privacy.
6. Puts on disposable gloves.
7. Lines sink with a washcloth.
8. Removes dentures from cup while handling dentures carefully to avoid damage.
9. Thoroughly brushes dentures, **including the inner, outer, and chewing surfaces** of upper and lower dentures. Toothettes may be utilized instead of a toothbrush as long as all of the surfaces listed above are cleaned.
10. Rinses dentures using clean cool water.
11. Places dentures in rinsed cup.
12. Adds cool clean water to the cup.
13. Drapes resident with a towel.
14. Cleans and rinses resident's mouth.
15. Brushes gums/tongue with toothbrush and toothpaste.
16. Rinses thoroughly with water OR mouthwash.
17. Wipes residue from resident's face.
18. Returns resident to position of comfort and safety.

19. Cleans equipment and returns to storage.
20. Discards towel and washcloth in linen hamper.
21. Removes gloves, turning gloves inside out as they are removed.
22. Disposes of gloves in an appropriate container.
23. Maintains respectful, courteous interpersonal interactions at all times.
24. Utilizes equipment appropriately throughout the procedures.
 - a. denture container/emesis basin
 - b. denture brush
 - c. toothpaste
 - d. towel or washcloth
 - e. glass of water
 - f. mouthwash
25. Leaves call light or signal calling device within reach of the resident.
26. Identifies that hands should be washed.

Dressing Resident

1. Knocks on door.
2. Introduces himself/herself appropriately to the resident.
3. Identifies that hands should be washed.
4. Explains the procedure to the resident.
4. While removing gown, provides for the resident's privacy by appropriately keeping resident covered.
5. Removes gown from strong (right) side first.
6. Places used gown in laundry hamper.
7. When dressing the resident in a shirt or sweater, the candidate inserts their hand through the sleeve of the shirt or sweater and grasps the hand of the resident, dressing from the weak (left) side first.
8. Leaves the resident comfortably and properly dressed.
9. Leaves call light or signaling device within easy reach of the resident.
10. Identifies that hands should be washed.

Feeding the Dependent Resident

1. Knocks on door before entering room.
2. Identifies that hands should be washed.
3. Explains procedure to the resident.
4. Looks at diet card to check that the resident has received the correct tray.
5. Positions the resident in an upright position, at least 45 degrees.
6. Protects clothing from soiling by using napkin, bib, or towel.
7. Washes resident's hands before feeding.
8. Dries resident's hands before feeding.
9. Discards soiled linen correctly.
10. Sits down facing the resident while feeding the resident or assumes other posture so candidate is at eye level with the resident.
11. Describes the foods being offered to the resident.
12. Offers fluid frequently.
13. Offers small amounts of food at a reasonable rate.
14. Allows resident time to chew and swallow.
15. Wipes resident's hands and face during meal as needed.
16. Leaves resident clean and in a position of comfort.
17. Records intake in percentage of total solid food eaten on pad provided.
18. Observer records their own calculations first without looking at the candidate's calculation and then records the candidate's calculations only after the candidate has left the skill test area.
19. Candidate's calculation must be within 25% of the observers.

20. Candidate records fluid intake in cc/ml on pad provided.
21. Observer records their own calculation first before looking at the candidate's calculation and then records the candidate's calculation only after the candidate has left the skill test area.
22. The candidate's calculation must be within 40cc of the Observer's.
23. Identifies that hands should be washed.
24. Maintains respectful, courteous interpersonal interactions at all times.
25. Leaves call light or signaling device within easy reach of the resident.

Fluid Intake

1. Identifies that hands should be washed.
2. Candidate observes dinner tray.
3. Uses pad, pencil, and/or calculator to estimate the number of cc or ml consumed.
4. Candidate decides on cc/ml of fluid consumed from each container.
5. Candidate calculates grand total cc/ml consumed from all containers.
6. Candidate obtains total fluid consumed in cc or ml.
7. Candidate records the total cc or ml consumed from the tray on pad provided.
8. Pre-measured total and candidate's calculated total are within required range.
9. Equipment utilized:
 - a. two clear 8oz (240cc or ml) glasses: one clear 4oz (120cc or ml) juice glass placed on a tray
 - b. calculator optional (candidate may bring if desired, but must give to RN for inspection during test check-in and ID verification)
 - b. c pad and pencil for candidate
10. Identifies that hands should be washed.

Gown and Gloves

1. Identifies that hands should be washed
2. Candidate faces the back opening of the gown
3. Candidate unfolds the gown
4. Candidate places arms through each sleeve
5. Candidate secures the neck opening
6. Candidate secures the waist, making sure that the back flaps completely cover clothing
7. Candidate puts on gloves
8. Gloves overlap gown sleeves at the wrist
9. Removes gloves before removing gown
10. Turns gloves inside out as they are removed
11. Dispose of the gloves in appropriate container
12. Unfastens gown at the neck
13. Unfastens gown at the waist
14. Removes gown by folding soiled area to soiled area
15. Disposes of gown in an appropriate container
16. Identifies that hands should be washed

Hair Care

1. Knocks on door.
2. Introduces himself/herself appropriately to the resident.
3. Identifies that hands should be washed.
4. Utilizes appropriate equipment:
 - a. brush, comb or hair pick
5. Explains procedure to the resident.
6. Asks resident how they would like their hair combed.
7. Combs/brushes hair gently and completely.
8. Leaves hair neatly brushed, combed and/or styled.
9. Insures that clothing is free of dandruff and hair.

10. Maintains respectful, courteous interpersonal interactions at all times.
11. Leaves call light or signal calling device within easy reach of the resident.
12. Identifies that hands should be washed.

Handwashing

1. Knocks on door before entering room.
2. Introduces himself/herself appropriately to the resident.
3. Turns on water.
4. Wets hands.
5. Applies liquid soap to hands.
6. Rubs hands together, using friction.
7. Rubs hands for at least 15 seconds,.
8. Interlaces fingers pointing downward.
9. Washes all surfaces of hands and wrist with liquid soap.
10. Rinses hands thoroughly under running water with fingers pointed downward.
11. Dries hands on clean paper towel(s)
12. Turns off faucet with a SECOND (last) clean, dry paper towel, or with a dry section of a previously used paper towel.
13. Discards paper towels to trash container as used.
14. Does not re-contaminate hands at any point during the procedure.

Making an Occupied Bed

1. Knocks on door.
2. Introduces himself/herself appropriately to the resident.
3. Identifies that hands should be washed.
4. Gathers clean linen and transports correctly away from the body. Places clean linen on a barrier in the room or over the back of the chair.
 - a. 1 bottom fitted sheet
 - b. 1 top flat sheet
 - c. 1 pillowcase
 - d. 1 blanket
 - e. 1 bedspread
 - f. 1 dirty linen hamper provided in the room
5. Explains procedure to resident.
6. Provides privacy.
7. Elevates bed to appropriate working height.
8. Resident is to remain covered at all times with the sheet.
9. Raises side rail/ assist bar opposite working side of bed or asks Test Observer to stand on the opposite side of the bed.
10. Rolls or fan folds soiled linen, soiled side inside, to the center of the bed.
11. Places clean bottom sheet along the center of the bed and rolls or fan folds linen against resident's back and unfolds remaining half. Pulls corners tightly in place and tucks sheet securely under the mattress as necessary.
12. Raises second side rail/ assist bar or asks Test administrator to stand opposite working side of the bed and assists the resident to roll over the bottom linen, preventing trauma and avoidable pain to resident.
13. Removes soiled linen without shaking. Avoids placing clean or dirty linen on the over bed table. Avoids touching linen to uniform.
14. Discards soiled linen in linen hamper.
15. Pulls through and smoothes out the clean bottom linen.
16. Places clean top linen over covered resident. Removes used linen keeping resident unexposed at all times.
17. Tucks in top linen.

18. Makes toe pleat.
19. Applies clean pillowcase, with zippers and/or tags to inside.
20. Gently lifts resident's head to replace the pillow.
21. Leaves resident in position of comfort and safety in a neatly made bed.
22. Maintains respectful, courteous interpersonal interactions at all times.
23. Leaves call light or signal calling device within easy reach of the resident.
24. Identifies that hands should be washed.

Mouth Care of a Comatose Resident

1. Knocks on door.
2. Introduces himself/herself appropriately to the resident.
3. Identifies that hands should be washed.
4. Explains procedure to the resident.
5. Provides for resident's privacy.
6. Insures resident's safety.
7. Positions resident upright with head turned well to one side, as appropriate to avoid choking or aspiration –OR– positions resident in a side lying position, as appropriated to avoid choking or aspiration.
8. Drapes chest/bed as needed to protect from soiling.
9. Puts on disposable gloves.
10. Uses toothettes.
11. Uses diluted mouthwash
12. Uses water or diluted mouthwash with a clean toothette to rinse.
13. Gently and thoroughly cleans inside of mouth, including the **gums**.
14. Gently and thoroughly cleans inside of mouth, including the **tongue**.
15. Gently and thoroughly cleans inside of mouth, including the **inner surfaces of all upper and lower teeth**.
16. Gently and thoroughly cleans inside of mouth, including the **outer surfaces of all upper and lower teeth**.
17. Gently and thoroughly cleans inside of the mouth, including the **chewing surfaces of all upper and lower teeth**.
18. Cleans and dries face.
19. Returns resident to position of comfort and safety.
20. Cleans and replaces equipment.
21. Discards disposable items in waste can.
22. Discards towel(s) and washcloth(s) in linen hamper.
23. Removes gloves, turning gloves inside out as they are removed.
24. Disposes of gloves in an appropriate container.
25. Maintains respectful, courteous interpersonal interactions at all time.
26. Identifies that hands should be washed.

Nail Care

1. Knocks on door.
2. Introduces himself/herself appropriately to the resident.
3. Identifies that hands should be washed.
4. Explains procedure to the resident.
5. Insures resident's safety. Locks wheelchair brakes.
6. Immerses nails in comfortably warm water and soaks for at least five (5) minutes. The five minutes may be verbalized after the nails have been placed in warm water.
7. Gently cleans under nails with file or nailbrush. Nails may be cleaned as they soak.
8. Dries hands thoroughly, being careful to dry between fingers.
9. Gently pushes cuticle back with towel.
10. Offers to cut nails.

11. Cleans equipment and returns to storage.
12. Discards towel in linen hamper.
13. Utilized equipment as appropriate.
 - a. towel
 - b. basin with warm water
 - c. nail clippers
 - d. nail file
 - e. nailbrush
14. Maintains respectful, courteous interpersonal interactions at all times.
15. Leaves call light or signal calling device within easy reach of the resident
16. Identifies that hands should be washed.

Partial Bed Bath

1. Knocks on door
2. Introduces himself/herself appropriately to the resident.
3. Identifies that hands should be washed.
4. Explains procedure to the resident.
5. Provides privacy.
6. Insures resident safety as appropriate.
7. Raises bed to appropriate working level.
8. Covers resident with a bath blanket. Removes top bed linens. Fanfolds to bottom of bed or places aside.
9. Removes resident's gown.
10. Fills basin with comfortably warm water.
11. Puts on disposable gloves.
12. Washes face first (WITHOUT SOAP).
13. Rinses face.
14. Dries face.
15. Washes hands using soap.
16. Rinses hands.
17. Dries hands.
18. Washes underarm (USING SOAP).
19. Rinses underarm.
20. Dries underarm.
21. Verbalizes procedure for perineal care. Verbalization MUST include wiping front to back.
22. Properly cleans and stores all equipment used.
23. Disposes of dirty laundry in linen hamper.
24. Removes gloves, turning gloves inside out as they are removed.
25. Disposes of gloves in an appropriate container.
26. Maintains respectful, courteous interpersonal interactions at all times.
27. Utilized required equipment appropriately.
 - a. bath blanket
 - b. washcloth
 - c. bath towel
 - d. resident gown
 - e. lotion - optional
 - f. disposable gloves
 - g. linen hamper
 - h. basin of warm water
28. Leaves call light or signal calling device within easy reach of the resident.
29. Identifies that hands should be washed.

Passing Fresh Water

1. Knocks on door.
2. Introduces himself/herself appropriately to the resident.
3. Identifies that hands should be washed.
4. Assembles equipment as required:
 - a. ice (marbles used as simulated ice)
 - b. scoop
 - c. pitcher, other appropriate equipment
5. Scoops ice (marbles used as simulated ice) into water pitcher.
6. Properly uses and stores ice scoop
 - a. Does not allow ice to touch hand and fall back into container.
 - b. Scoop placed in appropriate receptacle after each use or uses ice dispenser without contaminating water.
7. Adds water to pitcher.
8. Returns pitcher to resident.
9. No contamination occurred at any time during the task.
10. Maintains respectful, courteous interpersonal interactions at all times.
11. Leaves call light or signal calling device within easy reach of the resident.
12. Identifies that hands should be washed.

Position Resident on His/Her Side in Bed

1. Knocks on door
2. Introduces himself/herself appropriately to the resident.
3. Identifies that hands should be washed.
4. Explains what is to be done and how the resident may help.
5. Provides privacy.
6. Positions bed flat and removes pillow from under resident's head.
7. Insures resident safety as appropriate by checking that the bed wheel brakes are locked.
8. Raises side rail/assist bar on left side of the bed, if bed has side rail/assist bar.
9. Moves upper body toward self.
10. Moves hips toward self.
11. Moves legs toward self.
12. Crosses legs.
13. Assists/turns resident to left side, either toward raised side rail /assist bar or physically moves to left side of bed and turns resident toward self.
14. Places support devices i.e. pillows, wedges, blankets, etc., to maintain correct body alignment and protect bony prominences.
15. Support devices should be placed under the resident's head.
16. Support devices should be placed under the resident's right arm.
17. Support devices should be placed behind the resident's back.
18. Support devices should be placed between the resident's knees.
19. Adjust bed to working height and lowers when finished.
20. Maintains respectful, courteous interpersonal interactions at all times.
21. Leaves call light or signal calling device within easy reach of the resident.
22. Identifies that hands should be washed.

Range of Motion Exercise

1. Knocks on door.
2. Introduces himself/herself appropriately to the resident.
3. Identifies that hands should be washed.
4. Explains procedure to the resident.
5. Provides for resident's privacy.
6. Positions resident supine and in good body alignment.
7. Correctly supports the extremity/joint being exercised.

8. Moves each joint through flexion, extension, rotation, abduction, and adduction as appropriate for each joint, at least three times. **Joints to include shoulder, elbow, and wrist.**
9. Moves each joint at least three times. **Joints to include shoulder, elbow, wrist.**
10. Moves each joint through flexion, extension, rotation, abduction, and adduction as appropriate for each joint, at least three times. **Joints to include hip, knee, and ankle.**
11. Moves each joint at least three times. **Joints to include hip, knee, ankle.**
12. Does not cause discomfort or pain and does not force any joint beyond the point of free movement.
13. Maintains respectful, courteous interpersonal interactions at all times.
14. Leaves call light within easy reach of the resident.
15. Identifies that hands should be washed.

Toileting Using a Bedpan

1. Knocks on door.
2. Introduces himself/herself appropriately to the resident.
3. Identifies that hands should be washed.
4. Explains the procedure to the resident.
5. Insures resident safety at all times.
6. Provides privacy for resident.
7. Puts on disposable gloves.
8. Positions resident on bedpan correctly.
9. Uses correct body mechanics when placing resident on bedpan.
10. Leaves call light and tissue within reach of resident and moves to a pre-designated area in the room.
11. When signaled, candidate returns and safely removes empty bedpan from under resident..
12. Washes/assists resident to wash and dry hands.
13. Measures output.
14. Empties and cleans receptacle. Flushes toilet if used..
15. Removes gloves; turning gloves inside out as they are removed.
16. Disposes of gloves in an appropriate container.
17. Records output on I/O pad provided.
18. Candidate's measurement reading is within 30cc/ml of Test Observer's reading.
19. Maintains respectful, courteous interpersonal interactions at all times.
20. Leaves call light or signal calling device within reach of the resident.
21. Utilizes equipment appropriately.
 - a. bedpans
 - b. tissues
 - c. washcloth or disposable peri-cloth
 - d. graduated cylinder
22. Identifies that hands should be washed.

Transfer from Bed to Wheelchair Using a Gait Belt

1. Knocks on door.
2. Introduces himself/herself appropriately to the resident.
3. Identifies that hands should be washed.
4. Obtains a gait belt.
5. Explains the procedure to be performed to the resident.
6. Positions wheelchair at the foot or head of bed.
7. Insures resident's safety. Locks wheelchair brakes.
8. Insures resident's safety. Locks bed brakes.
9. Lowers bed to lowest position.
10. Brings resident to a sitting position using proper body mechanics.
11. Assists resident in putting on non-skid slippers.
12. Places gait belt around resident below lower ribs and above waist to stabilize trunk.

13. Tightens gait belt so that four fingers of candidate's hand can be slipped up and under between gait belt and resident.
14. Brings resident to a standing position using proper mechanics.
15. Grasps the gait belt that stays in proper position, with one hand placed up and under the gait belt and the other hand stabilizing resident by holding forearm, shoulder, or using another appropriate method to stabilize the resident, transfers resident from bed to wheelchair.
16. Assists resident to pivot and sit in a controlled manner that ensures safety.
17. Maintains respectful, courteous interpersonal interactions at all times.
18. Leaves call light or signal calling device within easy reach of the resident.
19. Identifies that hands should be washed.

Transfer from Wheelchair to Bed Using a Gait Belt

1. Knocks on door.
2. Introduces himself/herself appropriately to the resident.
3. Identifies that hands should be washed.
4. Obtains a gait belt.
5. Explains the procedure to be performed to the resident.
6. Positions wheelchair at the foot of the bed.
7. Insures resident's safety. Locks wheelchair brakes.
8. Insures resident's safety. Locks bed brakes.
9. Places gait belt around resident below lower ribs and above waist to stabilize trunk.
10. Tightens gait belt so that four fingers of candidate's hand can be slipped up and under between gait belt and resident.
11. Brings resident to standing position using proper body mechanics.
12. Grasps the gait belt that stays in proper position, with one hand placed up and under the gait belt and the other hand stabilizing resident by holding forearm, shoulder, or using another appropriate method to stabilize the resident, transfers resident from bed to wheelchair.
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 and lie, supporting extremities as necessary.
17. Makes sure resident is comfortable and in good body alignment.
18. Maintains respectful, courteous interpersonal interactions at all times.
19. Leaves call light or signal calling device within easy reach of the resident.
20. Identifies that hands should be washed.

Urinary Emptying Drainage Bag

1. Knocks on door.
2. Introduces himself/herself appropriately to the resident
3. Identifies that hands should be washed.
4. Explains procedure to resident.
5. Pulls curtain - provides for privacy.
6. Puts on disposable gloves.
7. Places a barrier on the floor under the drainage bag.
8. Places the graduate on the barrier.
9. Assures the bag is below the bladder at all times.
10. Assures the drainage tube is not kinked.
11. Opens the drain to allow the urine to flow into the graduate.
12. Allows all the urine to flow into the graduate.
13. Avoids touching the tip of the tubing to the graduate.
14. Clamps tubing.
15. Wipes the drain with alcohol.
16. Inserts a plug or protective cap into tubing or into holder.
17. Measures output.
18. Turns gloves inside out as they are removed.

19. Disposes of gloves in an appropriate container.
20. Records the output in cc/ml on the provided I/O sheet.
21. Candidate's measurement is within 15 cc/ml of the correct amount.
22. Leaves resident in a position of safety and comfort.
23. Places call light within reach.
24. Maintains respectful, courteous interpersonal interactions.
25. Identifies that hands should be washed.

Vital Signs - Pulse and Respiration

1. Knocks on door.
2. Introduces himself/herself appropriately to the resident.
3. Identifies that hands should be washed.
4. Explains procedure to resident.
5. Insures resident's safety.
6. Locates the radial pulse by placing tips of fingers on thumb side of the resident's wrist.
7. Counts pulse for 60 seconds.
8. Candidate records pulse on the pad provided.
9. Candidate's recorded pulse rate is within 4 beats of TO's recorded rate.
10. Candidate counts respirations for 60 seconds.
11. Candidate records results on the pad provided.
12. Candidate's recorded respiratory rate is within 2 breaths of the TO's recorded rate.
13. Utilized equipment as appropriate.
 - a. official I/O sheet and pen
14. Maintains respectful, courteous interpersonal interactions at all times.
15. Leaves call light or signal calling device within easy reach of the resident.
16. Identifies that hands should be washed.

Weighing of an Ambulatory Resident

1. Knocks on door.
2. Introduces himself/herself appropriately to the resident.
3. Identifies that hands should be washed.
4. Explains procedure to resident.
5. Insures resident's safety.
 - a. Use of gait belt is optional but if used procedure must be performed safely.
6. Checks balance of scale before weighing resident.
7. Balances or zeros scale.
8. Checks that resident is balanced and centered on scale with arms at side.
9. Checks that resident is not holding on to anything that would alter reading of weight.
10. Reads weight.
11. Records weight on candidate's signed I/O sheet provided.
12. Candidate's recorded weight varies no more than 1 lb. from actual.
13. Returns resident to position of comfort and safety.
14. Maintains respectful, courteous interpersonal interactions at all times.
15. Leaves call light or signal calling device within easy reach of the resident.
16. Identifies that hands should be washed.

Test Day

What to Bring:

- Bring a photo ID or an approved substitute ID form, and your test notification letter.
- Arrive at your assigned test site twenty (20) minutes before the test is to start.
- Bring several sharpened Number 2 pencils with erasers.

Testing Policy

- If you arrive late for your test appointment, **you will not be admitted.**
- Cellular phones, beepers or any other electronic devices are not permitted during testing and there is no place for storage of personal belongings.
- You are not permitted to bring personal belongings such as briefcases, large bags, study materials, extra books, or papers into the testing room. Any such materials brought into the testing room will be collected and returned to you when you have completed the test.
- You may bring a calculator. You must give the calculator to the Test Observer (TO) during check in and the observer will give you the calculator back when you need it during your test. No cell phones with calculator functions are allowed.
- You may not take any notes or other materials from the testing room.
- You are not permitted to eat, drink or smoke during the test.
- If you are discovered causing a disturbance of any kind or engaging in any kind of misconduct, you will be dismissed from the test and reported to your state licensing agency. Decisions regarding disciplinary measures are the responsibility of your state licensing agency.
- No visitors, guests, pets or children are allowed during testing.

Security

Anyone who removes or tries to remove test material or information from the test site will be prosecuted. Study materials may not be brought to the test or used during testing. If you give or receive help from anyone during testing, the test will be stopped, your test will be scored as a failed test, you will be dismissed from the testing room and your name will be reported to the appropriate agency.

Test Results

South Dakota Health Care Association will provide test results to the facility and the candidate in a timely manner after your test is officially scored by HEADMASTER staff. The score report will indicate whether you have passed or failed the Knowledge/Oral Test and/or Skill Test. If you failed, the report will indicate the content areas where you need improvement. If you have failed a test (Knowledge or Skill Test) you will need to retake the test you failed in order to become certified. After you have successfully passed both the Knowledge/Oral Test and Skill Test, you will be placed on the South Dakota Nurse Aide Registry. Duplicate Pass/Fail Letters may be requested from SDHCA for \$15.00.

The Registry

The South Dakota Board of Nursing maintains information regarding the certification of nurse aides in South Dakota. The Registry operates according to federal and state requirements and guidelines. Anyone may contact the Registry to inquire about his or her status as a nurse aide. Contact the South Dakota State Board of Nursing with questions about lapsed certification and transfer of certification to or from another state.

Reporting Irregularities

Candidates may report any irregularity that may or may not have had bearing on the outcome of his/her Certified Nurse Aide Test by requesting and completing a Reporting Irregularities Form. Contact LuAnn at SDHCA within 24 hours of the test (800) 952-3052.

Sample Questions

The following questions are samples of the kinds of questions that you will find on the Knowledge/Oral Test. Check your answers to these questions in the box below. Also see practice tests on line at www.hdmaster.com.

- 1. Linen from an isolated room should be placed**
 - (a) in a wastepaper basket lined with a red bag
 - (b) with all other linens
 - (c) in a laundry hamper at least two doors away
 - (d) in a hamper lined with a yellow biohazard laundry bag
- 2. Before giving a back rub, the bottle of lotion can be placed in a basin of warm water for several minutes so that**
 - (a) the bottle is sanitary
 - (b) the lotion will not be cold
 - (c) the lotion will be easier to apply
 - (d) the lotion will relieve itching
- 3. 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's bed
 - (c) considered dirty and placed in the soiled linen hamper
 - (d) used only in the room whose floor the linen fell on
- 4. A soft, synthetic fleece pad placed beneath the client**
 - (a) takes pressure off the back
 - (b) provides warmth for the client
 - (c) gives the client a sense of security
 - (d) should only be used with bedridden clients
- 5. A client's psychological needs**
 - (a) should be given minor consideration
 - (b) make the client withdrawn and secretive
 - (c) are nurtured by doing everything for the client
 - (d) are nurtured when clients are treated like individuals
- 6. The proper temperature for a soapsuds enema is**
 - (a) 80°F
 - (b) 96°F
 - (c) 105°F
 - (d) 115°F

1D, 2B, 3C, 4A, 5D, 6C

Vocabulary Study List

abandonment
abdominal thrust
abduction pillow
absorption
abuse
acceptance
accidents
activity
adduction
ADL's
admitting residents
affected side
aging process
AIDS (HIV)
alarms
alternating pressure
mattress
Alzheimer's
ambulate with assistance
ambulation
ambulatory resident
amputees
anger
antibacterial
antiembolic stockings
anxiety
aphasia
apical
appropriate response
arteries
arthritis
aspiration
assistive device
atrophy
attitudes
avoiding falls
axillary temperature
back strain
bacteria
bargaining
basic human needs
bath water temperature
bathing resident
bed bath

bed cradle
bed height
bed position
bedfast
bedpan
bedrest
behavioral care plan
biohazard bag
bladder training
blindness
blood pressure
bodily fluids
body mechanics
body temperature
bowel and bladder
programs
bowel movements
break time
breathing
broken equipment
burnout
burns
call light
cancer
cane
cardiac arrest
cardiopulmonary
resuscitation
care plan
cast
cataracts
catastrophic reactions
catheter drainage bag
central nervous system
cerebral vascular accident
charge nurse
chest pain
choking
chronic
circulation
circulatory system
clarification
cleaning up of spills
clear liquid diet
clergy
cognitively impaired
cold compress

colostomy bag
combative resident
comfort care
communicable
communication
communication with
depressed
resident
compensation
competency evaluation
program
confidential information
confidentiality
confused resident
congestive heart failure
constipation
constrict
contaminated hands
contamination
contracture
converting measures
COPD
CPR
CVA
decubitus ulcer
dehydration
demanding resident
dementia
denial
dentures
depression
dermatitis
diabetes
dialysis
diastolic
diet
digestion
digestive system
discharging resident
disinfectants
disinfection
disoriented
disoriented resident
disposing of contaminated
materials
disrespectful treatment
dizziness

DNR	gloves	mealtime
documentation	grand mal seizure	measuring height
draw/lift	grieving process	mechanical soft diet
dressing resident	guardian	medications
drowsy	hair care	memory loss
dry skin	hallucination	mental retardation
dying process	hand care	mentally impaired
dysphagia	hand-washing	microorganisms
edema	hazardous substance	minerals
elastic stockings	health-care team	mistakes
electrical equipment	hearing aid	mistreatment
elimination of wastes	hearing impaired	mobility
emesis basin	heart	money
emotional abuse	heat application	mouth care
emotional needs	height	moving a resident
emotional stress	Heimlich maneuver	multiple sclerosis
emotional support	hepatitis A	muscle spasms
emphysema	hepatitis B	nail care
end of life care	hip prosthesis	nasal cannula
enema	HIPAA	needles
ethical code	HIV	neglect
evacuation	hospice care	new resident
exercise	hydration	nonverbal communication
extremity	hyperventilation	NPO
eye glasses	immune system	nurses station
facility policy	impairment	nursing assistant behavior
falls	incontinence	nursing assistant's role
faulty equipment	indwelling catheter	nursing station
fecal impaction	infection control	objective
feeding resident	initial observations	OBRA
feeding tube	in-service programs	ombudsman
fingernail care	insulin	oral care
fire safety procedures	intake and output	oral hygiene
flexed	integumentary system	oral temperature
fluid intake	interpersonal skills	orientation
Foley catheter	intoxicated resident	oriented
foot board	isolation	osteoporosis
foot care	jaundice	ostomy bag
foot drop	kidney failure	oxygen
Fowler's position	laxatives	pain
fractures	linen	paralysis
frequent urination	liquid diet	Parkinson's disease
gait belt	low sodium diet	partial assistance
gastrostomy tube	making occupied bed	partial bath
geriatrics	mask	passive
germ transmission	Maslow	pathogens
gerontology	material safety data sheet	patience

perineal care
personal care
personal choice
personal hygiene
personal possessions
personal protective
equipment
pet therapy
phantom pain
physical needs
pill-rolling
plaque
plate rim
policy book
positioning resident
positive attitude
post mortem care
post-operative pneumonia
post-surgical care
pressure sore
pressure ulcer
preventing falls
preventing injury
privacy
prone
prosthesis
protective equipment
providing privacy
psychological needs
pulmonary disease
pulse
quadrant
RACE (acronym)
radial pulse
ramps
range of motion
rationalization
rectal temperature
reddened/discolored area
rehabilitation
religious service
reminiscing
reporting abnormal
changes
reporting abnormal vital
signs
reporting observations

reposition resident
resident abuse
resident belongings
resident identification
resident independence
resident rights
residents
resident's bill of rights
resident's chart
resident's environment
resident's families
respectful treatment
respiration
respiratory condition
responding to resident
behavior
restorative care
restrained resident
restraints
right to refuse care
safety procedures
saliva
scale
secretions
security
seizure
self-esteem
sensory system
sexual expression
sexual needs
shampoo tray
sharps container
shaving
shaving resident
shearing of skin
side rails
Sims position
skin breakdown
smoking
social well being
social worker
soiled linen
specimen
spilled food
spills
spiritual needs
sputum test

standard/universal
precautions
stealing
stereotypes
stethoscope
stool specimen
stress
stroke
strong side
subjective
suicide
sundowning
supine
supplemental feedings
suspected abuse
swelling
systolic
telephone etiquette
temperature
terminal illness
threatening resident
tips
toenails
trachea
transferring
transport bag
transporting food
treating residents with
respect
tub bath
tube feeding
twice daily
unaffected side
unconscious resident
unethical behavior
uniform
unopened mail
unsteady
urinary catheter bag
urinary system
urinary tract
urine
vaginal drainage
visually impaired
vital signs
vitamins
vomiting

vomitus
walker
wandering resident
water faucets

water intake
water temperature
weakness
weighing resident

wheelchair safety
white blood cells
withdrawal

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