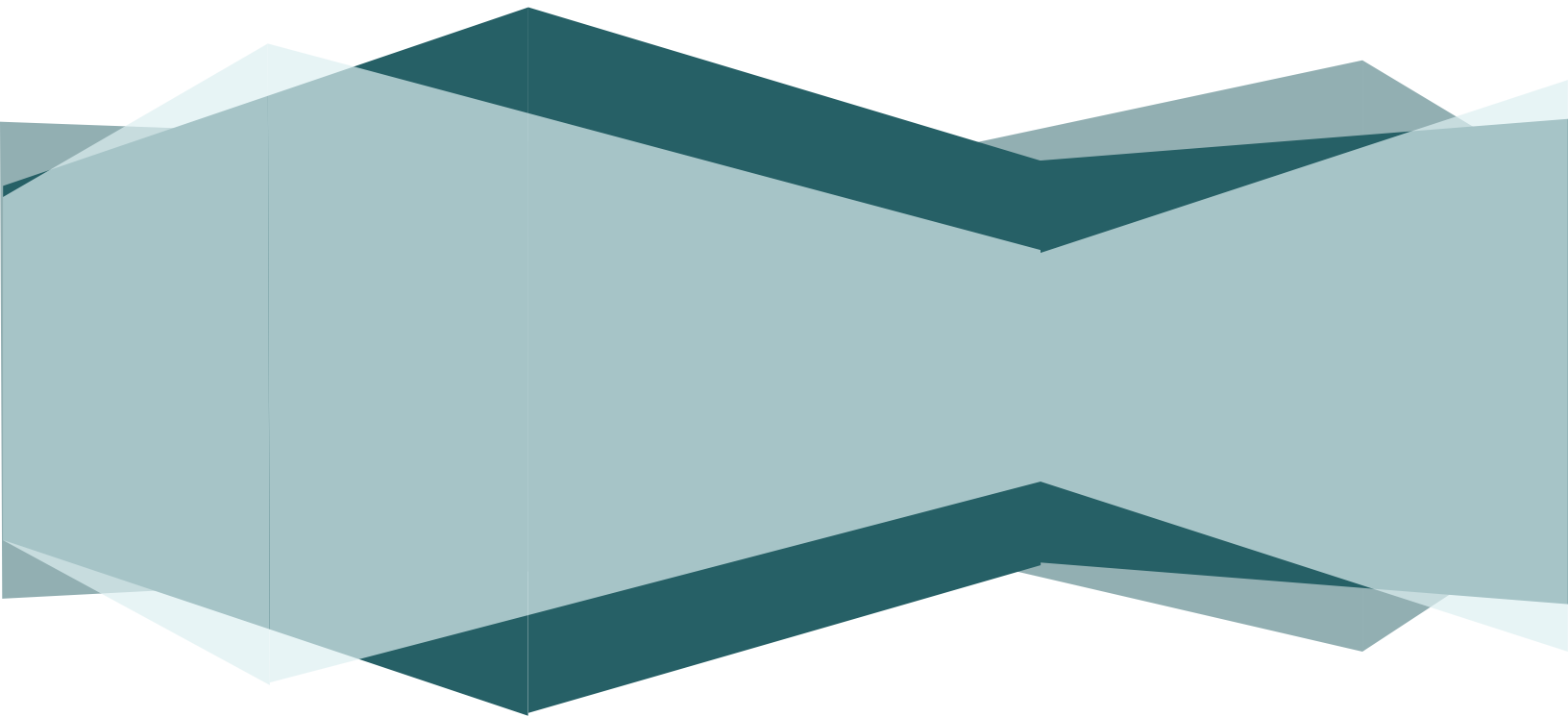


Tennessee Mock Skills

Effective for testing December 1, 2020



AMBULATION WITH A GAIT BELT

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Obtain gait belt for the resident.	
	Lower bed until resident's feet are flat on the floor when resident is sitting on the edge of the bed.	
	Lock bed brakes to ensure resident's safety.	
	Lock wheelchair brakes to ensure resident's safety.	
	Bring resident to sitting position.	
	Place gait belt around resident's waist to stabilize trunk.	
	Tighten gait belt.	
	Check gait belt for tightness by slipping fingers between gait belt and resident.	
	Assist resident to put on non-skid slippers.	
	Bring resident to standing position.	
	Grasp gait belt with one hand and the other hand stabilizing resident by holding forearm, shoulder or using other appropriate method to stabilize.	
	Safely ambulate resident at least 10 steps to the wheelchair.	
	Assist resident to pivot/turn and sit resident in the wheelchair in a controlled manner that ensures safety.	
	Use proper body mechanics at all times.	
	Remove gait belt.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Place call light or signaling device within easy reach of the resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

AMBULATION WITH A WALKER

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Lower bed until resident's feet are flat on the floor when resident is sitting on the edge of the bed.	
	Lock bed brakes to ensure resident's safety.	
	Lock wheelchair brakes to ensure resident's safety.	
	Bring resident to a sitting position.	
	Assist resident to put on non-skid slippers.	
	Position walker correctly.	
	Assist resident to stand.	
	Ensure resident has stabilized walker.	
	Position self behind and slightly to side of resident.	
	Safely ambulate resident at least 10 steps to the wheelchair.	
	Assist resident to pivot/turn and sit resident in the wheelchair in a controlled manner that ensures safety.	
	Use proper body mechanics at all times.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Place call light or signaling device within easy reach of the resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

BACK RUB

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Provide privacy for resident – pull curtain.	
	Assist resident to turn onto side away from the candidate toward the center of the bed.	
	Verbalize exposing back.	
	Verbalize pouring a small amount of lotion onto own hands.	
	Rub hands together to warm lotion.	
	Rub entire back in upward, outward motion.	
	Return resident to a supine position.	
	Lower bed to lowest position.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Place call light or signaling device within easy reach of the resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

BED BATH (PARTIAL) – WHOLE FACE AND ONE ARM, HAND AND UNDERARM

Knock on door.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide privacy for resident – pull curtain.	
Raise bed height between mid-thigh and waist level.	
Cover resident with a bath blanket or clean sheet.	
Remove remaining top covers. Fanfold to bottom of bed or place aside.	
Remove resident's gown without exposing resident and place soiled gown in designated laundry hamper.	
Fill basin with comfortably warm water.	
Place basin on over bed table or bedside stand.	
Wash face WITHOUT SOAP.	
Dry face.	
Place towel under arm, exposing one arm.	
Wash arm with soap.	
Wash hand with soap.	
Wash underarm with soap.	
Rinse arm.	
Rinse hand.	
Rinse underarm.	
Dry arm.	
Dry hand.	
Dry underarm.	
Assist resident to put on a clean gown.	
Place soiled linen in designated laundry hamper.	
Empty equipment.	
Rinse equipment.	
Dry equipment.	
Return equipment to storage.	
Lower bed.	
Maintain respectful, courteous interpersonal interactions at all times.	
Place call light or signaling device within easy reach of the resident.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

BEDPAN AND OUTPUT WITH HAND WASHING REQUIRED

(ONE OF THE POSSIBLE MANDATORY FIRST TASKS)

Knock on door.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide privacy for resident – pull curtain.	
Put on gloves.	
Position resident on bedpan safely and correctly. (Pan not upside down, is centered, etc.)	
Position resident on bedpan pan using correct body mechanics.	
Raise head of bed to comfortable level.	
Leave tissue within reach of resident.	
Leave call light or signaling device within reach of resident.	
Step behind privacy curtain to provide privacy for resident.	
When the RN Test Observer indicates, candidate returns.	
Gently remove bedpan.	
Hold the bedpan for the RN Test Observer while an unknown quantity of liquid is poured into bedpan.	
Do not place the bedpan on the floor or on the over bed table at any time during the demonstration.	
Place graduate on designated level flat surface.	
Pour bedpan contents into graduate.	
With graduate at eye level, measure output.	
Empty equipment used into designated toilet/commode. (Bedpan – Graduate)	
Rinse equipment used. (Bedpan – Graduate)	
Dry equipment used. (Bedpan – Graduate)	
Return equipment to storage.	
Remove gloves turning inside out.	
Dispose of gloves in the appropriate container.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Wash/assist resident to wash and dry hands with soap and water AFTER removing gloves.	
Record output on previously signed recording form.	
Candidate's recorded measurement is within 30cc/ml's of RN Test Observer's pre-measured reading.	

	Maintain respectful, courteous interpersonal interactions at all times.	
	Place call light or signaling device within easy reach of the resident.	
	Wash hands: Turn on water.	
	Wash hands: Wet hands.	
	Wash hands: Apply soap to hands.	
	Wash hands: Rub hands together using friction with soap.	
	Wash hands: Scrub/wash hands together for at least twenty (20) seconds with soap.	
	Wash hands: Scrub/wash with interlace fingers pointing downward with soap.	
	Wash hands: Wash all surfaces of hands with soap.	
	Wash hands: Wash wrists with soap.	
	Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.	
	Wash hands: Dry hands on clean paper towel(s).	
	Wash hands: Turn off faucet with a clean, dry paper towel.	
	Wash hands: Discard paper towels to trash container as used.	
	Wash hands: Do not re-contaminate hands at any time during the hand washing procedure.	

BLOOD PRESSURE

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Provide privacy for resident – pull curtain.	
	Assist 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.	
	Roll resident's sleeve up about five (5) inches above the elbow.	
	Apply the appropriate size cuff correctly around the upper arm just above the elbow.	
	Clean earpieces of stethoscope appropriately and place in ears.	
	Locate the brachial artery.	
	Place stethoscope over brachial artery.	
	Hold stethoscope snugly in place.	
	Inflate cuff until 30mmHG above the average systolic rate provided by the RN Test Observer.	
	Slowly release air from cuff to disappearance of pulsations.	
	Remove cuff.	
	Record reading on previously signed recording form.	
	Candidate's recorded systolic blood pressure is within 4mmHg of the RN Test Observer's recorded systolic blood pressure.	
	Candidate's recorded diastolic blood pressure is within 4mmHg of the RN Test Observer's recorded diastolic blood pressure.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Place call light or signaling device within easy reach of the resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

CATHETER CARE FOR A FEMALE WITH HAND WASHING REQUIRED

(ONE OF THE POSSIBLE MANDATORY FIRST TASKS)

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Provide privacy for resident – pull curtain.	
	Fill basin with comfortably warm water.	
	Place basin on over bed table or bedside stand.	
	Cover resident with a bath blanket or clean sheet BEFORE putting on gloves.	
	Put on gloves AFTER gathering supplies and preparing the area.	
	Verbalize and physically check to see that urine can flow, unrestricted, into the drainage bag.	
	Verbalize and physically check the area around the urethra for signs of leakage.	
	Use soap and water to carefully wash around the catheter where it exits the urethra.	
	Hold catheter near the urethra.	
	Clean 3-4 inches away from the urethra down the drainage tube.	
	Clean with strokes only away from the urethra.	
	Use clean portion of wash cloth for each stroke.	
	Rinse with a clean wash cloth.	
	Rinse using strokes only away from the urethra.	
	Rinse using clean portion of wash cloth for each stroke.	
	Pat dry with a clean towel.	
	Do not allow the tube to be pulled at any time during the procedure.	
	Replace top cover over resident.	
	Remove bath blanket or sheet.	
	Place soiled linens in the designated laundry hamper.	
	Leave resident in a position of safety and comfort.	
	Empty basin.	
	Rinse basin.	
	Dry basin.	
	Return basin to storage.	
	Remove gloves turning inside out.	
	Dispose of gloves in the appropriate container.	
	Maintain respectful, courteous interpersonal interactions at all times.	

	Place call light or signaling device within easy reach of the resident.	
	Wash hands: Turn on water.	
	Wash hands: Wet hands.	
	Wash hands: Apply soap to hands.	
	Wash hands: Rub hands together using friction with soap.	
	Wash hands: Scrub/wash hands together for at least twenty (20) seconds with soap.	
	Wash hands: Scrub/wash with interlace fingers pointing downward with soap.	
	Wash hands: Wash all surfaces of hands with soap.	
	Wash hands: Wash wrists with soap.	
	Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.	
	Wash hands: Dry hands on clean paper towel(s).	
	Wash hands: Turn off faucet with a clean, dry paper towel.	
	Wash hands: Discard paper towels to trash container as used.	
	Wash hands: Do not re-contaminate hands at any time during the hand washing procedure.	

DENTURE CARE

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Place a protective lining in the sink basin. (Cloth towel or wash cloth.)	
	Put on gloves AFTER gathering supplies and preparing the area.	
	Remove denture from cup.	
	Handle dentures carefully to avoid damage.	
	Rinse denture cup.	
	Apply cleaning solution.	
	Thoroughly brush denture inner surfaces of upper or lower dentures.	
	Thoroughly brush denture outer surfaces of upper or lower dentures.	
	Thoroughly brush denture chewing surfaces of upper or lower dentures.	
	Rinse denture using clean cool water.	
	Place denture in rinsed cup.	
	Add cool clean water to denture cup.	
	Rinse equipment.	
	Dry equipment.	
	Return equipment to storage.	
	Discard protective lining in an appropriate container.	
	Remove gloves turning inside out.	
	Dispose of gloves in an appropriate container.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Place call light or signaling device within easy reach of the resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

DRESSING BEDRIDDEN RESIDENT

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Provide privacy for resident – pull curtain.	
	Raise bed height to between mid-thigh and waist level.	
	Keep resident covered while removing gown.	
	Remove gown from unaffected side first.	
	Place soiled gown in designated laundry hamper.	
	Dress the resident in a button-up shirt. Insert hand through the sleeve of the shirt and grasp the hand of the resident.	
	When dressing the resident in a button-up shirt, always dress from the affected (weak) side first.	
	Assist the resident to raise her/his buttocks or turn the resident from side-to-side and draw the pants over the buttocks and up to the resident's waist.	
	When dressing the resident in pants, always dress the affected (weak) side leg first.	
	Put on the resident's socks. Draw the socks up the resident's foot until they are smooth.	
	Leave the resident comfortably/properly dressed (pants pulled up to waist front and back and shirt completely buttoned.)	
	Lower bed.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Place call light or signaling device within easy reach of the resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

FEEDING THE DEPENDENT RESIDENT

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Look at diet card and verbally indicate that the resident has received the correct tray.	
	Position the resident in an upright position. At least 45 degrees.	
	Protect clothing from soiling by using napkin, clothing protector, or towel.	
	Wash resident's hands BEFORE feeding with soap and water.	
	Rinse and dry resident's hands BEFORE feeding.	
	Place soiled linen in designated laundry hamper.	
	Sit in a chair, facing the resident, while feeding the resident.	
	Describe the foods being offered to the resident.	
	Offer fluid frequently from each glass.	
	Offer small amounts of food at a reasonable rate.	
	Allow resident time to chew and swallow.	
	Wipe resident's hands and face at least once during the feeding demonstration.	
	Leave resident clean and in a position of comfort.	
	Record intake as a percentage of total solid food eaten on the previously signed recording form.	
	Candidate's calculation must be within 25 percentage points of the RN Test Observer's.	
	Record estimated intake as the sum total fluid consumed from the two glasses in cc/ml on the previously signed recording form.	
	Candidate's calculation must be within 30cc/ml of the RN Test Observer's.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Place call light or signaling device within easy reach of the resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

HAIR CARE

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Place towel on resident's shoulders.	
	Ask resident how they would like their hair combed.	
	Comb/brush the resident's hair gently and completely.	
	Place soiled linen in designated laundry hamper.	
	Leave hair neatly brushed, combed or styled.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Place call light or signaling device within reach of resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

ISOLATION GOWN AND GLOVES AND EMPTY URINARY BAG WITH HAND WASHING REQUIRED

(ONE OF THE POSSIBLE MANDATORY FIRST TASKS)

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Unfold the gown.	
Face the back opening of the gown with seams and tags on the inside.	
Place arms through each sleeve.	
Fasten the neck opening behind the neck.	
Secure the waist, making sure that the back flaps cover clothing as completely as possible.	
Put on gloves.	
Glove overlap gown sleeves at the wrist.	
Knock on door.	
Explain the procedure to the resident.	
Provide privacy for resident – pull curtain.	
Place a clean barrier on the floor under the drainage bag.	
Place the graduate on the previously placed barrier.	
Open the drain to allow the urine to flow into the graduate until bag is empty.	
Avoid touching the graduate or the urine in the graduate with the tip of the tubing.	
Close the drain.	
Wipe the drain with an uncontaminated antiseptic wipe.	
Place graduate on the designated level flat surface.	
With graduate at eye level, read output.	
Empty graduate into designated toilet.	
Rinse and dry equipment.	
Return equipment to storage.	
Discard barrier in the appropriate container.	
Leave resident in a position of comfort and safety.	
Record the output on previously signed recording form.	
Candidate's recorded measurement is within 25cc/ml of the RN Test Observer's measurement.	
Maintain respectful, courteous interpersonal interactions at all times.	
Place call light or signaling device within reach of resident.	
Remove gloves, turning inside out.	

	Remove gloves BEFORE removing gown.	
	Dispose of the gloves in the designated biohazard container.	
	Unfasten gown at the neck AFTER the gloves are removed.	
	Unfasten gown at the waist AFTER the gloves are removed.	
	Remove gown by folding soiled area to soiled area.	
	Dispose of gown in the designated biohazard container.	
	Wash hands: Turn on water.	
	Wash hands: Wet hands.	
	Wash hands: Apply soap to hands.	
	Wash hands: Rub hands together using friction with soap.	
	Wash hands: Scrub/wash hands together for at least twenty (20) seconds with soap.	
	Wash hands: Scrub/wash with interlace fingers pointing downward with soap.	
	Wash hands: Wash all surfaces of hands with soap.	
	Wash hands: Wash wrists with soap.	
	Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.	
	Wash hands: Dry hands on clean paper towel(s).	
	Wash hands: Turn off faucet with a clean, dry paper towel.	
	Wash hands: Discard paper towels to trash container as used.	
	Wash hands: Do not re-contaminate hands at any time during the hand washing procedure.	

MAKING AN OCCUPIED BED

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Gather linen and transport linen correctly without touching uniform.	
	Place clean linen over back of chair, drape over foot of bed or on over bed table.	
	Explain the procedure to the resident.	
	Provide privacy for resident – pull curtain.	
	Raise bed height to between mid-thigh and waist level.	
	Resident is to remain covered at all times.	
	Assist resident to turn onto side away from the candidate toward the center of the bed.	
	Roll or fan fold soiled linen, soiled side inside, to the center of the bed.	
	Place clean bottom sheet along the center of the bed and roll or fan fold linen against the resident’s back and unfold the remaining half of the clean bottom sheet.	
	Secure two fitted corners.	
	Roll or fan fold clean linen against resident’s back.	
	Assist the resident to roll onto side over the clean bottom linen.	
	Remove soiled linen without shaking.	
	Avoid placing soiled linen on the over bed table, chair or floor.	
	Avoid touching linen to uniform.	
	Place soiled linen in designated laundry hamper.	
	Pull through and smooth out the clean bottom linen leaving it tight and free of wrinkles.	
	Secure the other two fitted corners.	
	Place resident on their back maintaining correct body alignment – must verbalize checking for body alignment.	
	Ensure that resident never touches the bare mattress at any time during the demonstration.	
	Place clean top linen over covered resident.	
	Place clean blanket or bed spread over covered resident.	
	Remove used linen keeping resident unexposed at all times.	
	Place soiled linen in designated laundry hamper.	
	Tuck in top linen, blanket or bedspread at the foot of bed only.	
	Make mitered corners at the foot of the bed.	
	Apply clean pillow case with zippers and/or tags to the inside.	

	Gently lift resident's head while replacing the pillow.	
	Leave bed neatly and completely made.	
	Lower bed.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Place call light or signaling device within reach of resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

MAKING AN UNOCCUPIED BED

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Gather linen and transport linen correctly without touching uniform.	
	Place clean linen over back of chair, drape over foot of bed or on over bed table.	
	Raise bed height to between mid-thigh and waist level.	
	Remove soiled linen from bed without touching uniform.	
	Place removed linen in designated laundry hamper.	
	Do not put soiled linen on the over bed table or floor.	
	Do not put clean linen on the floor.	
	Apply clean bottom fitted sheet, keeping it straight and center.	
	Make bottom linen smooth and/or tight and free of wrinkles.	
	Place clean top linen and blanket or bedspread on the bed.	
	Tuck in top linen and blanket or bedspread at the foot of the bed only.	
	Make mitered corners at the foot of the bed.	
	Apply clean pillow case with zippers and/or tags to the inside.	
	Leave bed neatly and completely made.	
	Lower bed.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

MOUTH CARE

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Provide privacy for resident – pull curtain.	
	Drape resident's chest with a towel to prevent soiling.	
	Put on gloves only AFTER supplies have been gathered and preparing the area.	
	Wet toothbrush (toothettes may be utilized) and apply a small amount of cleaning solution.	
	Brush the inner surfaces of resident's upper and lower teeth.	
	Brush the outer surfaces of resident's upper and lower teeth.	
	Brush the chewing surfaces of resident's upper and lower teeth.	
	Brush the resident's tongue.	
	Assist the resident in rinsing mouth.	
	Wipe resident's mouth.	
	Remove soiled linen.	
	Place soiled linen in the designated laundry hamper.	
	Empty emesis basin.	
	Rinse emesis basin.	
	Dry emesis basin.	
	Rinse toothbrush or dispose of toothette.	
	Return equipment to storage.	
	Remove gloves turning inside out.	
	Dispose of gloves in appropriate container.	
	Leave resident in position of comfort.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Place call light or signaling device within reach of resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

MOUTH CARE OF A COMATOSE RESIDENT

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Provide privacy for resident – pull curtain.	
	Positions resident in semi-Fowler's position with head turned well to one side or positions resident on side as appropriate to avoid choking or aspiration.	
	Drape resident's chest/bed as needed to protect from soiling.	
	Put on gloves only AFTER supplies have been gathered and preparing the area.	
	Apply a small amount of cleaning solution to a swab(s).	
	Gently and thoroughly brush the inner surfaces of resident's upper and lower teeth.	
	Gently and thoroughly brush the outer surfaces of resident's upper and lower teeth.	
	Gently and thoroughly brush the chewing surfaces of resident's upper and lower teeth.	
	Gently and thoroughly brush the resident's gums.	
	Gently and thoroughly brush the resident's tongue.	
	Clean/wipe resident's mouth.	
	Dry resident's mouth.	
	Return resident to position of comfort and safety.	
	Rinse equipment.	
	Dry equipment.	
	Return equipment to storage.	
	Discard disposable items in designated container.	
	Place soiled linens in designated laundry hamper.	
	Remove gloves turning inside out.	
	Dispose of gloves in appropriate container.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Place call light or signaling device within reach of resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

NAIL CARE ONE HAND

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to resident.	
	Immerse nails in comfortably warm water	
	Verbalize to soak nails for at least five (5) minutes.	
	Dry hand thoroughly.	
	Specifically dry between fingers.	
	Gently clean under nails with orange stick.	
	Gently push cuticle back with an orange stick.	
	File each fingernail.	
	Rinse equipment.	
	Dry equipment.	
	Return equipment to storage.	
	Place soiled linen in designated laundry hamper.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Place call light or signaling device within reach of resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

PERINEAL CARE FOR A FEMALE WITH HAND WASHING REQUIRED

(ONE OF THE POSSIBLE MANDATORY FIRST TASKS)

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident. (manikin)	
	Provide privacy for resident – pull curtain.	
	Raise bed height to between mid-thigh and waist level.	
	Fill basin with comfortably warm water.	
	Place basin on over bed table or bedside stand.	
	Prepare area and gather supplies.	
	Place bath blanket or clean sheet over resident BEFORE putting on gloves.	
	Put on gloves.	
	Expose perineum only.	
	Separate labia. (Candidate <u>must also verbalize</u> separating.)	
	Use water and soapy wash cloth (no peri wash allowed).	
	Clean both sides of labia from front to back.	
	Use a clean portion of a wash cloth with each single stroke.	
	Clean the middle of the labia from front to back using a clean portion of a wash cloth with each single stroke.	
	Rinse both sides of labia from front to back.	
	Rinse middle of labia from front to back.	
	Use a clean portion of a wash cloth with each single stroke.	
	Pat dry.	
	Covers the exposed area with the bath blanket or clean sheet.	
	Assist resident (manikin) to turn onto side away from the candidate toward the center of the bed. a. RN Test Observer may help hold the manikin on her side ONLY after the candidate has turned the manikin.	
	Use a clean wash cloth with water and soap (no peri-wash).	
	Clean rectal area from vagina to rectum with single strokes using a clean portion of a wash cloth with each single stroke.	
	Rinse area from front to back using a clean portion of the wash cloth with each single stroke.	
	Pat dry.	
	Position manikin on her back.	
	Place soiled linen in designated laundry hamper.	
	Empty equipment.	

Rinse equipment.	
Dry equipment.	
Return equipment to storage.	
Remove gloves turning inside out.	
Dispose of gloves in appropriate container.	
Lower bed.	
Maintain respectful, courteous interpersonal interactions at all times.	
Place call light or signaling device within reach of resident.	
Wash hands: Turn on water.	
Wash hands: Wet hands.	
Wash hands: Apply soap to hands.	
Wash hands: Rub hands together using friction with soap.	
Wash hands: Scrub/wash hands together for at least twenty (20) seconds with soap.	
Wash hands: Scrub/wash with interlace fingers pointing downward with soap.	
Wash hands: Wash all surfaces of hands with soap.	
Wash hands: Wash wrists with soap.	
Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.	
Wash hands: Dry hands on clean paper towel(s).	
Wash hands: Turn off faucet with a clean, dry paper towel.	
Wash hands: Discard paper towels to trash container as used.	
Wash hands: Do not re-contaminate hands at any time during the hand washing procedure.	

POSITIONING RESIDENT ON SIDE

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to resident and how the resident may help.	
	Provide privacy for resident – pull curtain.	
	Position bed flat.	
	Raise bed height to between mid-thigh and waist level.	
	From the working side of bed - move resident's upper body toward self.	
	From the working side of the bed - move resident's hips toward self.	
	From the working side of the bed - move resident's legs toward self.	
	Assist/turn resident on his/her left/right side. (Side will be read to candidate by RN Test Observer.)	
	Verbalize while physically checking to ensure that the resident's face never becomes obstructed by the pillow.	
	Check to be sure resident is not lying on down side arm.	
	Place support devices under the resident's head.	
	Place support devices under the resident's upside arm.	
	Place support devices behind resident's back.	
	Place support devices between resident's knees.	
	Ensure resident is in correct body alignment (must verbalize checking).	
	Lower bed.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Place call light or signaling device within reach of resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

RANGE OF MOTION FOR HIP AND KNEE

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Provide privacy for resident – pull curtain.	
	Raise bed height to between mid-thigh and waist level.	
	Position resident supine (bed flat).	
	Correctly support joints at all times by placing one hand under the resident's knee and the other hand under the resident's ankle.	
	ROM for Hip: Move the entire leg away from the body. <i>a. Must verbalize name of motion - abduction</i>	
	ROM for Hip: Move the entire leg toward the body. <i>a. Must verbalize name of motion - adduction</i>	
	Complete abduction and adduction of the hip at least three times.	
	Continue to correctly support joints by placing one hand under the resident's knee and the other hand under the resident's ankle.	
	Bend the resident's knee and hip toward the resident's trunk. <i>a. Must verbalize name of motion - flexion (of hip and knee at the same time)</i>	
	Straighten the knee and hip. <i>a. Must verbalize name of motion - extension (of knee and hip at the same time)</i>	
	Complete flexion and extension of the knee and hip at least three times.	
	Do not force any joint beyond the point of free movement.	
	Candidate <i>must ask</i> at least once during the ROM exercise if there is/was any discomfort/pain.	
	Does not cause any discomfort or pain at any time during ROM.	
	Leave resident in a comfortable position.	
	Verbalize while checking that resident is in good body alignment.	
	Lower bed.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Place call light or signaling device within reach of resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

RANGE OF MOTION SHOULDER

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Provide privacy for resident – pull curtain.	
	Raise bed height to between mid-thigh and waist level.	
	Position resident supine (bed flat) on back.	
	Correctly support resident’s joints by placing one hand under the resident’s elbow and the other hand under the resident’s wrist.	
	Raise the resident's arm up and over the resident's head. <i>a. Must verbalize the name of the motion - flexion</i>	
	Bring the resident's arm back down to the resident's side. <i>a. Must verbalize the name of the motion - extension</i>	
	Complete flexion and extension of shoulder at least three times.	
	Continue same support for shoulder joints by placing one hand under the resident’s elbow and the other hand under the resident’s wrist.	
	Move the resident's entire arm out away from the body. <i>a. Must verbalize the name of the motion - abduction</i>	
	Return arm to the resident's side. <i>a. Must verbalize the name of the motion - adduction</i>	
	Complete abduction and adduction of the shoulder at least three times.	
	Do not force any joint beyond the point of free movement.	
	Candidate <i>must ask</i> at least once during the ROM exercise if there is/was any discomfort/pain.	
	Does not cause any discomfort or pain at any time during ROM.	
	Leave resident in a comfortable position.	
	Verbalize while checking that resident is in good body alignment.	
	Lower bed.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Place call light or signaling device within reach of resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

STAND, PIVOT AND TRANSFER RESIDENT USING A GAIT BELT

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Obtain a gait belt.	
	Position wheelchair at the foot or head of the bed.	
	Lock wheelchair brakes to ensure resident's safety.	
	Lock bed brakes to ensure resident's safety.	
	Adjust bed height to ensure resident's feet will be flat on the floor when sitting on the edge of the bed.	
	Assist resident to a sitting position.	
	Place gait belt around resident's waist to stabilize trunk.	
	Tighten gait belt.	
	Check gait belt for tightness by slipping fingers between gait belt and resident.	
	Assist resident in putting on non-skid slippers.	
	Grasp gait belt with both hands.	
	Bring resident to standing position, using proper body mechanics.	
	With one hand grasping the gait belt and the other hand stabilizing the resident by holding forearm, shoulder or using other appropriate method to stabilize, transfer resident from bed to wheelchair.	
	Assist resident to pivot and sit in the wheelchair in a controlled manner that ensures safety.	
	<i>RN Test Observer will tell the candidate to transfer the resident back into the bed.</i>	
	Bring resident to a standing position, using proper body mechanics.	
	With one hand grasping the gait belt and the other hand stabilizing the resident by holding forearm, shoulder or using other appropriate method to stabilize, transfer resident from wheelchair back to the bed.	
	Assist resident to pivot and sit on the bed in a controlled manner that ensures safety.	
	Assist resident in removing non-skid slippers.	
	Remove gait belt.	
	Assist resident to move to center of bed and lie down.	
	Make sure resident is in a position of comfort.	
	Verbalize while checking that resident is in good body alignment.	
	Maintain respectful, courteous interpersonal interactions at all times.	

	Place call light or signaling device within reach of resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

VITAL SIGNS – AXILLARY TEMPERATURE, PULSE AND RESPIRATIONS

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to resident.	
	Provide privacy for resident – pull curtain.	
	Apply sheath or clean thermometer with an alcohol pad.	
	Turn on digital oral thermometer	
	Dry inner armpit and place thermometer in center of the axilla.	
	Hold thermometer in place for appropriate length of time.	
	Remove thermometer and candidate <u>reads</u> and <u>records the temperature reading</u> on the previously signed recording form.	
	Candidate's recorded temperature varies no more than .1 degree from the RN Test Observer's recorded temperature.	
	Wipe thermometer clean with alcohol pad or discard sheath.	
	Locate the radial pulse by placing tips of fingers on thumb side of the resident's wrist.	
	Count pulse for 60 seconds or 30x2. a. Tell the RN Test Observer when you start counting and tell her/him when you stop counting.	
	Record your pulse rate reading on the previously signed recording form.	
	Candidate's recorded pulse rate is within 4 beats of RN Test Observer's recorded rate.	
	Count respirations for 60 seconds or 30x2. a. Tell the RN Test Observer when you start counting and tell her/him when you stop counting.	
	Record your respirations reading on the previously signed recording form.	
	Candidate's recorded respiratory rate is within 2 breaths of the RN Test Observer's recorded rate.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Place call light or signaling device within reach of resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

VITAL SIGNS – ORAL TEMPERATURE, PULSE AND RESPIRATIONS

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to resident.	
	Provide privacy for resident – pull curtain.	
	Apply sheath or clean thermometer with an alcohol pad.	
	Turn on digital oral thermometer.	
	Gently insert bulb end of thermometer in mouth under tongue.	
	Hold thermometer in place for appropriate length of time.	
	Remove thermometer.	
	Candidate <u>reads</u> and <u>records the temperature reading</u> on the previously signed recording form	
	Candidate's recorded temperature varies no more than .1 degree from the RN Test Observer's recorded temperature.	
	Wipe thermometer clean with alcohol pad or discard sheath.	
	Locate the radial pulse by placing tips of fingers on thumb side of the resident's wrist.	
	Count pulse for 60 seconds or 30x2. a. Tell the RN Test Observer when you start counting and tell her/him when you stop counting.	
	Record your pulse rate reading on the previously signed recording form.	
	Candidate's recorded pulse rate is within 4 beats of RN Test Observer's recorded rate.	
	Count respirations for 60 seconds or 30x2. a. Tell the RN Test Observer when you start counting and tell her/him when you stop counting.	
	Record your respirations reading on the previously signed recording form.	
	Candidate's recorded respiratory rate is within 2 breaths of the RN Test Observer's recorded rate.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Place call light or signaling device within reach of resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

WEIGHING AN AMBULATORY RESIDENT

	Knock on door.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to resident.	
	Balance scale before weighing resident or zeros if using an analog scale.	
	Lock wheelchair brakes to ensure resident's safety.	
	Assist resident to stand and walk resident to the scale.	
	Assist resident to step on the scale.	
	Check that resident is balanced and centered on the scale with arms at sides and not holding on to anything that would alter reading of the weight.	
	Appropriately adjust weights until scale is in balance or observe the analog scale.	
	Read weight and return resident to wheelchair and assist resident to sit in the wheelchair.	
	Record weight on the previously signed recording form.	
	Candidate's recorded weight varies no more than 2 pounds from RN Test Observer's recorded weight.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Place call light or signaling device within reach of resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	