D&S DIVERSIFIED TECHNOLOGIES LLP

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VERSION 12 EFFECTIVE 3/01/2016

If you are testing after the effective date of this handbook, you are required to check the website to determine if this version is currently in effect. You will be tested based on the effective version of the handbook at the time of the test regardless of when you completed the course.

(CHANGES ARE HIGHLIGHTED IN RED)

PROVIDING TESTING SOLUTIONS THROUGHOUT TENNESSEE

Clinical Attire including shoes, clothing and hair pulled back is required for testing.

Contact Information

Contact information		
Questions regarding test applications-test D&S Diversified Technologies 333 Oakland Avenue Findlay, OH 45840	8:00 am to 2:00 pm Saturday	(877) 201-0758
Questions about registry status: Tennessee Nurse Aide Registry 665 Mainstream Drive, 2nd Floor Nashville, TN 37243 Tennessee Department Of Health Website	8:00 a.m. to 4:30 p.m. M-F (CST)	(615) 532-5171 fax (615) 248-3601 www.state.tn.us/health
Questions about training programs: Training Program Information and Abuse Registry Main Switchboard, Renewals, Name Changes and Address Changes Challenges, Reciprocities and Verifications		(615) 253-6085 (615) 532-5171 (615) 741-7173
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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 requirements of this federal law.

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

This handbook describes the process of taking the nurse aide competency test and is designed to help prepare Candidates for testing. There are two parts to the nurse aide competency test—a multiple-choice Written/Oral Test and a Skill Test. Candidates must pass both parts of the test to be listed on the Tennessee Nurse Aide Registry.

The Tennessee Department of Health has approved D&S Diversified Technologies to provide test scheduling, tests and scoring services for Tennessee Nurse Aide Testing. Any questions you have after reading this handbook can be answered by checking the Tennessee page on our web site (www.hdmaster.com) or calling D&SDT toll free at 877-201-0758. This handbook should be kept for future reference. General information regarding the Tennessee Nurse Aide program may also be found at www.state.tn.us/health. Once on the State home page, choose Health Professionals/Licensing Boards and from there click on Nurse Aides. Also to determine the status of your Tennessee nurse aide certification, you may either log onto www.state.tn.us /health and click on License Verification, or you may call the Tennessee Abuse/Nurse Aide Registry at 1-800-778-4504.

Applying to Take the Tennessee Nurse Aide Test

- 1. Registration through the <u>www.hdmaster.com</u> website requires you to enter you test ID number and PIN. If you do not have this information, please call our office.
 - a. From the www.hdmaster.com homepage, select Tennessee under the Nurse Aide column, select Student/Candidate button under the Candidate Forms column.
 - b. You will enter the required login information, once you are in your record, you will need to read and answer the questions at the bottom of the screen.
 - c. Place a check mark in the box by the Attestation heading.
 - d. Click the Prepay by Credit Card button and enter your payment information (Visa or MasterCard only).
 - e. After the payment has been made you will be able to select your test site and date from the appropriate drop down menus.
 - f. After selecting the test location and date you would like to attend, you must click the Submit Updates button at the top of the screen. Once you have successfully scheduled yourself, the test notification will appear on your screen. If you do not see the test notification, you are not scheduled to test.
- 2. If you prefer to mail your paperwork to our office, you may visit our website and print the 1101 and 1402 forms that you will be required to submit.
 - a. You will need to mail or fax the 1101, 1402 and a copy of your training certificate to our office. If you fax the application you must pay by Visa or MasterCard and you will be billed a \$5.00 fax fee in addition to the application testing fee.

Applicants wishing to test in less than 10 business days from the date D & S receives their application are required to pay \$15 Express Service Fee and \$19.50 Overnight Shipping. (Candidates testing at WebETest sites only pay \$15 Express Service Fee)

Important Notes

- Incomplete applications will be returned to the candidate (missing information, illegible applications, missing signature, missing payment or incorrect payment.)
- DO NOT send personal checks or cash.
- We accept Money Orders, Cashier's Check, Facility Checks, Facility Purchase Orders, MasterCard, Visa and Prepaid Visa or MasterCard.
- Applications must be received in the Findlay office 10 business days before the requested test date. EXCLUDING SUNDAYS AND HOLIDAYS.
- All test dates are filled on a first come, first serve basis.

- ❖ D & S will notify the candidate via mail or e-mail of their test date and time. You are responsible to call the Findlay office if you do not receive an EMAIL or WRITTEN response within five business days of submitting your application at 1-877-201-0758.
- Prior to your testing day you should check our website to ensure that no changes have occurred in the skills and/or testing protocols since your training class completion at hdmaster.com, then click on Tennessee.

ADA Accommodations

The Tennessee Department of Health and D & S Diversified Technologies Nurse Aide Testing program provides reasonable accommodations for applicants with disabilities or limitations that may affect their ability to take the Nurse Aide Competency Exam. Accommodations are granted in accordance with the Americans with Disabilities Act. If you are a candidate with a disability or limitation for which you wish to request an accommodation, please complete form 1404TN located on our web site at www.hdmaster.com and return completed forms and supporting documentation to D & S Diversified Technologies or call-1-877-201-0758 or-1-877-851-2355 for information.

Test Day_

- ❖ You should arrive at your confirmed test site between twenty and thirty (20-30) minutes before your test is scheduled to start.
- ❖ You must bring a SIGNED, NON-EXPIRED, PHOTO ID (must be U.S. government issued: drivers license, state ID, passport (must have photo, signature and expiration date to be used), handgun carry permit or military ID) and your SOCIAL SECURITY CARD. You must bring original ID's to testing, photocopies or faxes are not allowed for any ID. You will not be admitted for testing if you do not bring these TWO proper forms of ID and you will have to reapply and repay for a new testing date. The candidate name on both of the IDs must match EXACTLY the name entered into the database for the candidate; if the names do not match EXACTLY you will be considered a no show for testing. Any names changes that need to be made (due to marriage, divorce, etc...) must have legal documentation submitted to our office at least 48 hours prior to the scheduled test date.
- ❖ You must be in full **clinical attire** including clinical shoes (no flip flops or sandals) and hair pulled back. If you do not have appropriate required attire you will not be able to test and viewed as a no show and forfeit your testing fee. Your test notification letter should be with you, although they are not required. Clinical Attire is mandatory and you will be turned away as a no show if you do not have clinical attire, clinical shoes and long hair tied back for both the written and skills test sessions.
- Please bring several sharpened Number 2 pencils with erasers for your paper written test. <u>DO NOT BRING or USE INK PENS</u>. The scanner won't read answers recorded in ink.
- Wrist watches are prohibited at all test events. Due to recent advancements in technology, there are now fully functional wrist watch cell phones with full internet access.

WebETest

Online testing is available at several regional sites in Tennessee. Candidates take their written test via the computer. The Observer uses a computer to evaluate the candidate on the skills portion of the exam. WebETest results are normally available the next business day after 3:00 PM excluding Sundays and Holidays.

Online Written Practice Test

We have restructured our website to better serve you. The hdmaster.com website now offers a free written test question of the day and a free online 10 question practice test. For the free online 10 question practice test, the questions remain the same. For the question of the day, it changes daily. A mastery learning testing method is used. Candidates must get the question correct before they may move onto the next question. A first attempt percentage score and vocabulary feedback are supplied upon completion of the practice test. A list of vocabulary words to study is provided at the end of each test. Single or group purchase plans are available. Visit hdmaster.com and follow the prompts.

Testing Policy_

The following policies are observed at each test site—

★ If you arrive late for your confirmed test, or if you do not bring the two required IDs, you will not be admitted to the test and your test fee will NOT be refunded if you are an advance pay candidate. The candidate name on both of the IDs must match EXACTLY the name entered into the database for the candidate; if the names do not match EXACTLY you will be considered a no

- show for testing. You will be required to resubmit your paperwork and repay the entire fee to reschedule. Facilities who submit candidates that are TDH funded will be billed a \$40.00 no show fee per candidate.
- You must be in full Clinical Attire including clinical shoes (no flip flops or sandals) and hair pulled back for all test sessions written and skills. If you do not have appropriate required attire you will not be able to test and viewed as a no show and forfeit your testing fee
- NO CELL PHONES, ELECTRONIC DEVICES OF ANY KIND OR PERSONAL ITEMS ARE PERMITTED IN THE TESTING ROOM. Anyone caught with these items will be asked to leave and will forfeit their testing fee. Anyone caught USING, TEXTING OR PHOTOGRAPHING on a cell phone or any type of device during testing will be removed from the testing area, forfeit testing fees and will not be permitted to test for six months or without the approval of the Tennessee Department of Health.
- Candidates may not have coats or hooded apparel over the head during testing due to security reasons.
- Candidates with long hair are asked to pull it back to ensure that no blue tooth devices are being used.
- You are <u>not</u> 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. Test sites, Observers or Proctor are not responsible for personal items brought to testing. The only exception is a word for word language translation dictionary that you must show to the written test proctor and Test Observer before you start the written test. No electronic translation dictionaries or dictionaries with definitions are permitted. If any documentation or writing is in the translation dictionary book you will not be able to use it during testing.
- You must provide the required U.S. government issued ID's and sign in on the required form with the tester or you will not be allowed to test. The candidate name on both of the IDs must match the name entered into the database for the candidate; if the names do not match you will be considered a no show for testing. Any name changes that need to be made (due to marriage, divorce, etc...) must have legal documentation submitted to our office at least 48 hours prior to the scheduled test date.
- You may not take any notes or other materials from the testing room.
- Study materials may not be brought to the test or used during testing.
- 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, classified with a no show status and reported to your training program and the Tennessee Department of Health.
- No visitors, guests, instructors, pets or children are allowed during testing. If you bring visitors, guests, instructors, pets or children you will be asked to leave and forfeit testing fees then you will be required to resubmit your application and repay.
- You may not test if you have any type of physical limitation (excluding pre-arranged ADA's) that would prevent you from performing your duties as a CNA (examples: Cast, Braces, Crutches, etc.) Call D&S immediately if you are on doctor's orders and you must fax (419-422-7395) or email (hdmastereast@hdmaster.com) a doctor's order within 5 working days of your scheduled testing day to qualify for a free reschedule.
- You should plan to be at the test site for 4 to 6 hours on the day of your test.
- Wrist watches are prohibited at all test events. Due to recent advancements in technology, there are now fully functional wrist watch cell phones with full internet access.

Refusal to obey the above testing policy guidelines could result in the forfeit of your testing fee and you will be required to re-submit your application and repay.

Reschedule/Cancellation/No Show Policy

- Reschedules- An individual candidate may reschedule one time during the three attempt testing cycle to a new mutually agreed upon test date and site for no charge up to 24 business hours prior to the actual testing time (excluding Sundays and holidays). Reschedules must occur within 60 days of the actual testing date. If reschedules are not made within the 60 days you will be charged a \$35 reschedule fee. Any further reschedules will be charged at the rate of \$35 which must be paid before the reschedule can occur. No refunds will be granted after 120 calendar days.
- Cancellations-Tests must be cancelled at least 24 business hours prior to the test date excluding Sundays and holidays. Cancellations made at least 24 business hours prior to the test date will be given a full refund minus a \$25 cancellation fee. All cancellations must be submitted to D&S in writing through fax or email. Facilities funded by TDH will be billed a \$25 cancellation fee for all candidates cancelled at least 24 business hours prior to the test date.
- No Shows-Non-TDH funded candidates who no show for a scheduled test will be required to resubmit an application and repay the entire test fee to be scheduled again. Facilities submitting TDH funded candidates will be billed a \$40 no show fee and will be required to resubmit a new application to be scheduled for testing. If you fax supporting documentation to our office you are required to contact our office to ensure that we have received the documentation within the required timeframe and that it meets the requirements for a free reschedule. If you do not contact our office and we did not receive the supporting documentation, you will be unable to resubmit if you are outside of the required timeframe.

If you **No Show** for any of the following reasons you must provide the following documentation within the **required** time frame to be eligible for a reschedule:

<u>Car breakdown</u>: A tow bill faxed within 48 hours of the test date, if we do not receive proof within 48 the hour time frame you will remain a No Show.

- Medical emergency: Doctor's notes within 5 business days (Sundays and holidays excluded). You must see the doctor or other healthcare provider prior to or on the day of the test and the note must cover the date of the test. If we do not receive proof within the 5 business days time frame you will remain a No Show.
- Death in the family: Obituary's for immediate family only within 14 business days from a missed test date otherwise you will remain a No Show. The obituary must include the funeral date and your name in order to qualify for the free reschedule.

<u>Winter Weather Policy</u> Testing will proceed as scheduled unless you are called by D&S to reschedule. If testing is not cancelled and you do not go, you will be considered a no show for testing.

<u>Test Dispute</u>-If you dispute your test results, a step-by step explanation of skill steps demonstrated must be received at the D&S Diversified Technologies office within **10 days of your test event along with the \$25.00 test dispute fee**. If we receive your dispute without the \$25.00 payment or outside of the 10 day period, it will not be processed and it will be shredded. If the dispute is found in your favor the dispute fee will be refunded. If it is determined your results will remain the same or if you are given a free reschedule the fee will not be refunded.

Security

Anyone who removes or tries to remove test material or information from the test site will be prosecuted to the full extent of the law, will be recorded as a test failure, and will not be allowed to retest for a minimum period of six months after complete review of the circumstances by D&S DT and the Tennessee Department of Health. 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 not be scored, you will be dismissed from the testing room and your name will be reported to the appropriate agencies.

Test Results

After you have successfully passed both the Written/Oral Test and Skill Test, you will be placed on the Tennessee Nurse Aide Registry and receive a score report from D&SDT. When you pass your test your certification card will be issued by the TN Nurse Aide Registry and you should receive the card within 4-6 weeks after your test.

If you fail either portion of the certification test you must reapply to retake the NA test. Procedures for reapplying and **detailed test diagnostics** are included with failure notification letters. Test results can also be obtained by visiting www.hdmaster.com clicking on Tennessee. Candidates will then have to enter their identification number (social security number), test date and date of birth.

The Registry

The Tennessee Nurse Aide Registry maintains information regarding the status of nurse aides in Tennessee. 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 Tennessee Nurse Aide Registry at 615-532-5171 with questions about lapsed certification, challenging the nurse aide test and transfer of certification to or from another state.

Instructions for CNA Renewals

Certified Nurse Aides are required to re-certify every two years and *must provide verification of having worked at least one 8 hour shift during the past 24 months in a state licensed or certified facility.* (Note: Private duty services, sitter, companion services, private physician's offices are not accepted for renewal.) The proof of employment must be in the form of a pay stub, a payroll printout or a notarized attestation form. The pay stub and payroll printout must contain the individual's social security number and place of employment. The notarized attestation, which is completed by the facility where the individual worked, must include the individual's name, social security number, date the individual worked & hours, the name and title of the individual verifying this information and the notary must be provided by the facility. Please contact the Nurse Aide Registry with any questions at 615-532-5171 or 800-778-4504.

Online Training Reports

Training programs are able to access training program reports for any time period they choose by visiting www.hdmaster.com and clicking on Tennessee. The training program will then be required to enter their facility ID, PIN and select the date range for the selected report. These reports are for the training programs use only.

Sample Questions_

The following questions are samples of the kinds of questions that you will find on the Written/Oral Test. Check your answers to these questions using the answers below.

- 1. Clean linens that touch the floor should be:
- (A) Picked up guickly and placed back on the clean linen cart
- (B) Used immediately on the next resident bed
- (C) Considered dirty and placed in the soiled linen hamper

(D) Used only in the room with the floor the linen fell on

2. A soft, synthetic fleece pad placed beneath the resident:

- (A) Takes pressure off the back
- (B) Provides warmth for the resident
- (C) Gives the resident a sense of security
- (D) Should only be used with bedridden residents

3. A resident's psychological needs:

- (A) Should be given minor consideration
- (B) Make the resident withdrawn and secretive
- (C) Are nurtured by doing everything for the resident
- (D) Are nurtured when residents are treated like individuals

Answers: 1c, 2a, 3d.

On-Line Test Notification

SCHEDULED TEST NOTIFICATIONS CAN BE ACCESSED ON THE WEB SITE HOME PAGE at www.hdmaster.com. ENTER YOUR SOCIAL SECURITY or TEST ID # AND STATE.

View your scheduled exam

Please click here to see where and when your next test is scheduled.

The Written/Oral Test

A Written Test Proctor will hand out materials and give instructions for taking the Written Test. You will have a maximum of ninety (90) minutes to complete the 75 question Written Test. You will be told when fifteen (15) minutes remain. You may not ask questions about the content of the Written Test (such as "What does this question mean?"). Fill in only one (1) oval on the answer sheet for each question. DO NOT mark in the testing booklet. Marks in the test booklet will not be accepted as answers. Your answers must appear on the separate scan form answer sheet. You must have a score of 75% or better on the written portion of the test to pass the written portion. You may be taking the written test on a computer at selected test sites. Your Written Test Proctor will have you answer ten practice questions on the computer and answer all your questions about taking the test on a computer before your written test starts.

The written test may be taken in English or in Spanish. You will select your language of choice when you apply to take the test. If you choose to take the test in Spanish there will be an English comprehension component that will be part of the written test that you will have to successfully complete. Ten of the questions will not be printed in Spanish and MUST be read in English and answered without aide. These ten questions serve as the reading comprehension requirement.

An Oral Test may be taken in conjunction with the Written Test if you have difficulty reading English or Spanish. If you want to take the Oral Test you must request it when you submit your application. The questions are read to you from a cassette tape in addition to having the written test booklet and scan form. Ten of the questions will not be read on the oral tape and MUST be read in English and answered without aide of the oral tape. These ten questions serve as the reading comprehension requirement.

You may be asked to answer some additional questions on which statistical information will be collected for use in constructing future tests. Your responses to these questions will not affect your score and are voluntary.

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, their test will not be scored and they will be reported to the Tennessee Department of Health.

Written Test Content Outline

The **Written Test consists of 75 multiple-choice questions**. Questions are selected from the following subject areas and include questions from all the required categories as defined in OBRA regulations. The subject areas and the number of questions () from each subject area are as follows:

1) Safety (8)

7) Communication (6)

- 2) Infection Control (5)
- 3) Personal Care (7)
- 4) Mental Health (4)
- 5) Care Impaired (5)
- 6) Resident Rights (5)

- 8) Data Collection (4)
- 9) Basic Nursing Skills (11)
- 10) Role and Responsibility (11)
- 11) Disease Process (5)
- 12) Aging Process (4)

The Skill Test

The purpose of the Skill Test is to evaluate your performance on a subset of the nurse aide care tasks that you learned during your training program. You will find a complete list of skill tasks printed later in this handbook. Hand washing will be one of the tasks you will need to perform. Four (4) additional tasks will be randomly selected from the list for you to perform on your Skill Test. The steps that are listed in this handbook are the scored steps for each skill. You must have a score of 80% on each task without missing any key steps (the bolded steps) to pass the skill portion of the test. If you fail a single task you will have to take another skill test with five tasks on it, one of which will be the one you failed. If you fail two or more tasks you will have to take another complete Skill Test that will have at least one of the tasks that you failed included on your new Skill Test.

- Each of the five scenarios associated with your five assigned tasks will be read to you immediately before you do each task.
- Listen carefully to all instructions given by the RN Test Observer. You may request to have any of the five scenarios repeated anytime during your skill test.
- ❖ Be sure you understand all instructions before you begin because you may not ask questions once the Skill Test begins.
- You will be given thirty-five minutes to complete the five (5) tasks. You must correctly perform all five (5) tasks in order to pass the Skill Test. You will be told when 15 minutes remain.
- If you believe you have made a mistake while performing a task, inform the Test Observer of the needed change and then repeat the task or the step on the task that you believe you performed incorrectly. You may repeat any step or steps you believe you have performed incorrectly any time during your allotted 35 minutes or until you tell the Test Observer you are finished with the Skill Test. Once the Skill Test has begun, the Test Observer may not answer any questions.

Manual Skills Listing

Every step must actually be performed and demonstrated during testing to receive credit. The only exception is after completing the handwashing skill, handwashing may be verbalized for the remaining four (4) skills

Skill 1—Handwashing

- 1. Knocks on door.
- 2. Introduces themselves to the resident.
- Turns on water.
- 4. Wets hands.
- 5. Applies liquid soap to hands.
- 6. Rubs hands together using friction.
- 7. Interlaces fingers pointing downward.
- 8. Washes all surfaces of hands and wrists with liquid soap.
- 9. Rinses hands thoroughly under running water with fingers pointed downward.
- 10. Dries hands on clean paper towel(s).
- 11. Turns off faucet with a clean dry paper towel. (Cannot use a previously used paper towel to turn off the faucet.)
- 12. Discards paper towels to trash container as used.
- 13. Does not re-contaminate hands at any point during the procedure.

Skill 2—Ambulation With Gait Belt

- Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Explains procedure to be performed to the resident and obtains gait belt.
- 4. Lowers bed until residents feet are flat on the floor.
- Locks bed brakes to ensure resident's safety.
- 6. Locks wheelchair brakes to ensure resident's safety.
- 7. Brings resident to sitting position and places gait belt around waist to stabilize trunk. Tightens gait belt. Checks gait belt by slipping fingers between gait belt and resident.
- 8. Assists resident to put on non-skid slippers.
- 9. Brings resident to standing position, using proper body mechanics.

- 10. With one hand grasping gait belt and the other stabilizing resident by holding forearm, shoulder, or using other appropriate method to stabilize, ambulates resident at least 10 steps.
- 11. Assists resident to pivot and sit in a wheelchair in a controlled manner that ensures safety. Removes gait belt.
- 12. Maintains respectful, courteous interpersonal interactions at all times.
- 13. Leaves call light or signaling device within easy reach of the resident.
- 14. Identifies that hands should be washed.

Skill 3—Ambulation with Walker

- 1. Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Explains procedure to resident.
- 4. Locks bed wheels to ensure resident's safety.
- 5. Locks wheelchair brakes to ensure resident's safety.
- 6. Brings resident to sitting position.
- 7. Assists resident in putting on non-skid slippers.
- 8. Positions walker correctly.
- 9. Assists resident to stand, stabilizes walker and insures resident has stabilized walker.
- 10. Positions self behind and slightly to side of resident.
- 11. Safely ambulates resident at least 10 steps.
- 12. Assists resident to pivot and sit in a wheelchair, using correct body mechanics.
- 13. Maintains respectful, courteous interpersonal interactions at all times.
- 14. Leaves call light or signaling device within easy reach of the resident.
- 15. Identifies that hands should be washed.

Skill 4—Backrub

- Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Explains procedure to resident.
- 4. Provides privacy for resident pulls curtain.
- 5. Insures resident's safety with side rail up on side opposite working side.
- 6. Positions resident on side in bed for massage.
- 7. Exposes back. (verbalize)
- 8. Candidate pours a small amount of lotion onto their own hands (verbalize) and rubs hands together to warm.
- 9. Rubs entire back in upward, outward motion.
- 10. Returns resident to a position of comfort and safety.
- 11. Lowers bed to lowest position.
- 12. Lowers side rail.
- 13. Maintains respectful, courteous interpersonal interactions at all times.
- 14. Leaves call light or signaling device within easy reach of the resident.
- 15. Identifies that hands should be washed.

Skill 5—Bedpan and Output

- 1. Knocks on door.
- Identifies that hands should be washed.
- 3. Explains the procedure to resident.
- 4. Provides privacy for resident pulls curtain.
- 5. Candidate puts on gloves after gathering supplies and preparing the area.
- 6. Positions resident on bedpan correctly and safely using correct body mechanics.
- 7. Raises head of bed to comfortable level.
- 8. Leaves call light and tissue within reach of resident and candidate indicates they are providing privacy by stepping behind the privacy curtain. When signaled by Test Observer, candidate returns.
- 9. Gently removes bedpan and holds while Observer adds a known quantity of fluid.
- 10. With graduate at eye level on previously designated flat surface, measures output.
- 11. Empties into toilet or designated location, rinses and dries the equipment and returns equipment to storage. Flushes toilet if used.
- 12. Removes gloves by turning inside out and disposes of gloves.
- 13. Identifies that hands should be washed
- 14. Washes/assists resident to wash and dry hands with soap & water.
- 15. Records output on pad.
- 16. Candidate's measurement reading is within 30ccs of Test Observer's reading.
- 17. Maintains respectful, courteous interpersonal interactions at all times.

- 18. Leaves call light or signaling device within easy reach of the resident.
- 19. Identifies that hands should be washed.

Skill 6 — Blood Pressure

- Knocks on door.
- Identifies that hands should be washed.
- 3. Explains procedure to resident.
- 4. Provides privacy for resident pulls curtain.
- 5. 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.
- 6. Rolls resident's sleeve up about five inches above the elbow.
- 7. Applies the appropriate size cuff around the upper arm just above the elbow.
- 8. Cleans earpieces of stethoscope appropriately and places in ears.
- 9. Locates brachial artery.
- 10. Places stethoscope over brachial artery.
- 11. Holds stethoscope snugly in place.
- 12. Inflates cuff until 30mm above the average systolic rate provided by RN test observer.
- 13. Slowly releases air from cuff to disappearance of pulsations. Removes cuff.
- 14. Records reading on pad.
- 15. Candidate's recorded systolic and diastolic blood pressure are within 4 mm of the Test Observers.
- 16. Maintains respectful, courteous interpersonal interactions at all times.
- 17. Leaves call light or signal calling device within easy reach of the resident.
- 18. Identifies that hands should be washed.

Skill 7—Catheter Care

- Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Explains procedure to resident.
- 4. Provides privacy for resident pulls curtain.
- 5. Fills basin with comfortably warm water.
- 6. Covers resident with a bath blanket or clean sheet to maintain privacy. (Order change, must be done before putting on gloves)
- 7. Put on gloves after gathering supplies and preparing the area.
- 8. Verbalizes and physically checks to see that urine can flow, unrestricted, into the drainage bag.
- 9. Verbalizes and checks the area around the urethra for signs of leakage.
- 10. Uses soap and water to carefully wash around the drainage tube where it exits the urethra.
- 11. Holds catheter near the urethra to prevent tugging on catheter and cleans 3-4 inches away from the urethra down the drainage tube.
- 12. Cleans with strokes only away from the urethra, uses a clean portion of the wash cloth with each stroke.
- 13. Using a clean washcloth rinses using strokes away from urethra, using a clean portion of the washcloth with each stroke.
- 14. Pats dry with a clean towel.
- 15. Does not allow the tube to be pulled at any time during the procedure.
- 16. Replaces top linen over resident and discards bath blanket in the appropriate container. Leaves resident in a position of safety and comfort.
- 17. Empties, rinses and dries the equipment and returns equipment to storage.
- 18. Disposes of linen in the appropriate container.
- 19. Removes gloves turning inside out and disposes in the appropriate container.
- 20. Maintains respectful, courteous interpersonal interactions.
- 21. Leaves call light within reach of resident.
- 22. Identifies hands should be washed.

Skill 8—Denture Care

- 1. Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Explains procedure to resident.
- 4. Places protective lining (wash cloth) in the sink basin to help prevent damage to the dentures.
- 5. Puts on gloves after gathering supplies and preparing area and removes dentures from cup.
- 6. Handles dentures carefully to avoid damage, rinses the denture cup.
- 7. Applies cleaning solution and 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.
- 8. Rinses dentures using clean cool water.
- 9. Places dentures in rinsed cup.

- 10. Adds cool clean water to denture cup.
- 11. Cleans and dries equipment and returns to storage.
- 12. Discards protective lining in an appropriate container.
- 13. Removes gloves by turning inside out and disposes of gloves in an appropriate container.
- 14. Maintains respectful, courteous interpersonal interactions at all times.
- 15. Leaves call light or signaling device within easy reach of the resident.
- 16. Identifies that hands should be washed.

Skill 9—Dressing Resident

- 1. Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Explains the procedure to the resident.
- 4. Provides privacy for resident pulls curtain.
- 5. Raises bed to between mid-thigh and waist level.
- 6. Keeps resident covered while removing gown.
- 7. Removes gown from unaffected side first.
- 8. Places used gown in laundry hamper.
- 9. When dressing the resident in a shirt or blouse, the Candidate inserts their hand through the sleeve of the shirt or blouse and grasps the hand of the resident, dressing from the affected side first.
- 10. When dressing the resident in pants, the Candidate assists the resident to raise their buttocks or turns resident from side to side and draws the pants over the buttocks and up to the resident's waist, always dressing from the affected side first.
- 11. When putting on the resident's socks, the Candidate draws the socks up the resident's foot until they are smooth.
- 12. Lowers bed.
- 13. Leaves the resident comfortably and properly dressed (pants pulled up to waist front and back and shirt completely buttoned)
- 14. Maintains respectful, courteous interpersonal interactions at all times.
- 15. Leaves call light or signaling device within easy reach of the resident.
- 16. Identifies that hands should be washed.

Skill 10—Emptying a Urinary Drainage Bag

- Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Explains procedure to resident.
- 4. Provides privacy for resident pulls curtain.
- 5. Puts on gloves after gathering supplies and preparing area.
- 6. Places a clean barrier on the floor under the drainage bag (paper towel or linen).
- 7. Places the graduate on the previously placed barrier. Opens the drain to allow the urine to flow into the graduate until the bag is empty.
- 8. Avoids touching the graduate or urine in the graduate with the tip of the tubing. Closes the drain.
- 9. Wipes the drain with uncontaminated antiseptic wipe.
- 10. Places graduate at eye level on a flat surface and measures output.
- 11. Empties graduate into toilet. Rinses and dries equipment. Returns equipment to storage.
- 12. Discards barrier in the appropriate container.
- 13. Turns gloves inside out as they are removed. Disposes of gloves in the appropriate container.
- 14. Leaves resident in a position of safety and comfort.
- 15. Records the output in cc/ml on signed recording sheet.
- 16. Candidate's measurement is within 25cc of Observer's measurement.
- 17. Places call light within reach of resident.
- 18. Maintains respectful, courteous interpersonal interactions.
- 19. Identifies that hands should be washed.

Skill 11—Feeding the Dependent Resident

- Knocks on door.
- Identifies that hands should be washed.
- 3. Explains procedure to the resident.
- 4. Candidate looks at diet card and verbally indicates that 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, clothing protector or towel.
- 7. Washes and rinses resident's hands with soap & water before feeding. Dries resident's hands. (KEY STEP AS OF 3/1/16)
- 8. Discards soiled linen appropriately.
- 9 Sits down in a chair facing the resident while feeding resident.
- 10. Describes the foods being offered to the resident.

- 11. Offers water or other fluid frequently.
- 12. Offers food in small amounts at a reasonable rate, allowing resident to chew and swallow.
- 13. Wipes resident's hands and face during meal at least once.
- 14. Leaves resident clean and in a position of comfort.
- 15. Records intake in percentage of total solid food eaten on pad.
- 16. Candidate's calculation must be within 25% of the solids consumed.
- 17. Candidate records total (sum) of fluid intakes from two glasses in cc/ml on recording pad provided.
- 18. Candidates calculation is within 30cc/ml of the fluids consumed.
- 19. Maintains respectful, courteous interpersonal interactions at all times.
- 20. Leaves call light or signaling device within easy reach of the resident.
- 21. Identifies that hands should be washed.

Skill 12—Hair Care

- Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Explains procedure to the resident.
- 4. Places towel on shoulders.
- 5. Asks resident how they would like their hair combed.
- 6. Combs/brushes hair gently and completely.
- 7. Discards linen in appropriate container.
- 8. Leaves hair neatly brushed, combed or styled.
- 9. Maintains respectful, courteous interpersonal interactions at all times.
- 10. Leaves call light or signaling device within easy reach of the resident.
- 11. Identifies that hands should be washed.

Skill 13—Isolation Gown and Gloves

- 1. Identifies that hands should be washed.
- 2. Candidate unfolds the gown.
- Candidate faces the back opening of the gown correctly with seams and tags on the inside.
- 5. Candidate places arms through each sleeve.
- 6. Candidate secures the neck opening by fastening behind the neck.
- 7. Candidate secures the waist, making sure that the back flaps completely cover clothing.
- 8. Candidate puts on gloves overlapping gown sleeves at the wrist.
- 9. When directed the Candidate will remove the gloves, turning inside out, and disposes of gloves in biohazard container before removing gown.
- 10. Unfastens gown at the neck after gloves have been removed.
- 11. Unfastens gown at the waist after gloves have been removed.
- 12. Candidate will remove the gown by folding soiled area to soiled area.
- 13. Disposes of gown in a biohazard container.
- 14. Identifies that hands should be washed.

Skill 14—Making an Occupied Bed

- 1. Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Gathers linen and transports correctly without touching uniform.
- 4. Places clean linen over back of chair, drapes over foot of bed or on overbed table.
- 5. Explains procedure to resident.
- **6.** Provides privacy for resident pulls curtain.
- 7. Raises side rail opposite working side of the bed.
- 8. Raises the bed between mid-thigh and waist level.
- 9. Resident is to remain covered at all times.
- 10. Assists resident to roll onto side toward raised side rail. Side rail remains up on side opposite candidate at all times during the task.
- 11. Rolls or fan folds soiled linen, soiled side inside, to the center of the bed. Does not leave resident on the bare mattress at any time.
- 12. Places clean bottom sheet along the center of the bed and rolls or fan folds linen against resident's back and unfolds remaining half.
- 13. Secures two fitted corners.
- 14. Raises second side rail.
- 15. Assists resident to roll over the bottom linen, preventing trauma and avoidable pain to resident.
- 16. Removes soiled linen without shaking, and places in hamper. Avoids placing dirty linen on the overbed table, chair or floor.
- 17. Avoids touching linen to uniform.
- 18. Pulls through and smoothes out the clean bottom linen leaving tight and free of wrinkles.

- 19. Secures other two fitted corners.
- 20. Places clean top linen and blanket or bedspread over covered resident. Removes used linen making sure the resident is unexposed at all times
- 21. Disposes of soiled linen in hamper.
- 22. Tucks in top linen and blanket or bedspread at foot of the bed.
- 23. Makes mitered corners at the foot of the bed. Leaves bed neat and completely made.
- 24. Applies clean pillowcase, with zippers and/or tags to inside.
- 25. Gently lifts resident's head when replacing the pillow.
- 26. Lowers bed.
- 27. Returns side rails to lowered position.
- 28. Maintains respectful, courteous interpersonal interactions at all times.
- 29. Leaves call light or signaling device within easy reach of the resident.
- 30. Identifies that hands should be washed.

Skill 15—Making an Unoccupied Bed

- 1. Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Gathers linen and transports correctly.
- 4. Places clean linen over back of chair, drapes over foot of bed or on overbed table.
- 5. Raises the bed between mid-thigh and waist level
- 6. Removes soiled linen from bed without touching uniform.
- 7. Places removed linen in appropriate place (does not put dirty linen on the overbed table or clean or dirty linen on the floor).
- 8. Applies bottom fitted sheet, keeping it straight and centered.
- 9. Makes bottom linen smooth and/or tight, free of wrinkles.
- 10. Places clean top linen and blanket or bed spread on the bed.
- 11. Tucks in top linen and blanket or bedspread at the foot of the bed.
- 12. Makes mitered corners at the foot of the bed.
- 13. Applies clean pillowcase with zippers and/or tags to inside of pillowcase.
- 14. Leaves bed completely and neatly made.
- 15. Returns bed to lowest position.
- 16. Identifies that hands should be washed.

Skill 16—Mouth Care

- 1. Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Explains procedure to the resident.
- 4. Provides privacy for resident pulls curtain.
- 5. Drapes the chest with towel to prevent soiling.
- 6. Candidate puts on gloves after gathering supplies and preparing the area.
- 7. Wets brush and applies a small amount of cleaning solution.
- 8. Brushes resident's teeth, including the inner, outer, and chewing 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.
- 9. Cleans tongue.
- 10. Assists resident in rinsing mouth.
- 11. Wipes resident's mouth, removes soiled linen and places in appropriate container.
- 12. Empties, rinses and dries emesis basin. Rinses toothbrush or disposes of toothette in the appropriate container. Returns emesis basin and toothbrush to storage.
- 13. Removes gloves by turning inside out and disposes of gloves in the appropriate container.
- 14. Leaves resident in position of comfort.
- 15. Maintains respectful, courteous interpersonal interactions at all times.
- 16. Leaves call light or signaling device within easy reach of the resident.
- 17. Identifies that hands should be washed.

Skill 17—Mouth Care Comatose Resident

- 1. Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Provides privacy for resident pulls curtain.
- 4. Explains procedure to the resident.
- 5. 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.

- 6. Drapes chest/bed as needed to protect from soiling.
- 7. Candidate puts on gloves after gathering supplies and preparing area.
- 8. Uses swabs and/or toothbrush and a small amount of cleaning solution (NO TOOTHPASTE).
- 9. Gently and thoroughly cleans the inner, outer, and chewing surfaces of all upper and lower teeth.
- 10. Gently and thoroughly cleans the gums.
- 11. Gently and thoroughly cleans the tongue.
- 12. Cleans, dries mouth area.
- 13. Returns resident to a position of comfort and safety.
- 14. Rinses, dries and replaces equipment; discards disposable items in waste can; discards towel and washcloth in linen hamper.
- 15. Candidate removes gloves by turning inside out and disposes in the appropriate container.
- 16. Maintains respectful, courteous interpersonal interactions at all times.
- 17. Leaves call light or signaling device within easy reach of the resident.
- 18. Identifies that hands should be washed.

Skill 18—Nail Care One Hand

- 1. Knocks on door.
- 2. Identifies that hands should be washed.
- Explains procedure to the resident.
- 4. Immerses nails in comfortably warm water and soaks for at least five (5) minutes. (The five minutes may be verbalized.)
- 5. Dries hand thoroughly, being careful to dry between fingers.
- 6. Gently cleans under nails with orange stick.
- 7. Gently pushes cuticle back with orange stick.
- 8. Files each fingernail.
- 9. Rinses and dries equipment and returns to storage. Discards towel in linen hamper.
- 10. Maintains respectful, courteous interpersonal interactions at all times.
- 11. Leaves call light or signaling device within easy reach of the resident.
- 12. Identifies that hands should be washed.

Skill 19—Partial Bed Bath-Face, Arm, Hand and Underarm

- 1. Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Explains procedure to the resident.
- 4. Provides privacy for resident pulls curtain.
- 5. Raises the bed between mid-thigh and waist level.
- 6. Covers resident with a bath blanket or clean sheet.
- 7. Removes remaining top bed covers. Fanfolds to bottom of bed or places aside.
- 8. Removes resident's gown without exposing resident and places in linen hamper immediately after removal.
- 9. Fills basin with comfortably warm water and places on overbed table or bed side stand.
- 10. Washes and dries face WITHOUT SOAP.
- 11. Places towel under arm, exposing one arm.
- 12. Washes arm, hand and underarm using soap and water.
- 13. Rinses arm, hand, underarm and dries entire area.
- 14. Assists resident to put on a clean gown.
- 15. Properly rinses and dries basin(s) and stores all equipment used.
- 16. Disposes of soiled linen in appropriate container.
- 17. Lowers bed.
- 18. Maintains respectful, courteous interpersonal interactions at all times.
- 19. Leaves call light or signaling device within easy reach of the resident.
- 20. Identifies that hands should be washed.

Skill 20—Perineal Care for a Female

- Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Explains procedure to the resident. (Manneguin)
- 4. Provides privacy for resident pulls curtain.
- 5. Raises the bed between mid-thigh and waist level.
- 6. Fills basin with comfortably warm water. Places basin on overbed table or bedside stand.

- 7. Raises side rail opposite working side of bed.
- 8. Places bath blanket or clean sheet over resident. (Order change, must be done before putting on gloves)
- 9. Puts on gloves after gathering supplies and preparing area.
- 10. Exposes perineum only.
- 11. Verbalizes separating labia, while physically separating the labia.
- 12. Using water and soapy washcloth (no peri wash), cleans both sides of the labia from front to back using a clean portion of a washcloth with each stroke.
- 13. Cleans middle of labia from front to back using clean portion of washcloth with each stroke.
- 14. Rinses and pats dry the area from front to back.
- 15. Covers the exposed area with the bath blanket or clean sheet.
- 16. Assists resident (manneguin) to turn onto side away from the Candidate.
- 17. With a clean washcloth, cleans the rectal area.
- 18. Using water, washcloth and soap (no peri wash) cleans rectal area from vagina to rectum with single strokes.
- 19. Rinses and pats dry area from front to back.
- 20. Disposes of soiled linen in an appropriate container.
- 21. Rinses, dries and replaces equipment. Dries table.
- 22. Removes gloves by turning inside out and disposes of gloves in an appropriate container.
- 23. Positions resident (mannequin) on back. (order change)
- 24. Lowers bed.
- 25. Lowers side rail.
- 26. Places call light or signaling device within reach of resident.
- 27. Identifies that hands should be washed.

Skill 21—Position Resident on Side

- 1. Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Explains what is to be done and how the resident may help.
- 4. Provides privacy for resident pulls curtain.
- 5. Positions bed flat.
- 6. Raises the bed between mid-thigh and waist level.
- 7. Raises side rail on opposite side of the bed.
- 8. From the working side—moves upper body toward self.
- 9. Moves hips toward self.
- 10. Moves legs toward self.
- 11. Assists/turns resident on side and insures that the resident's face never becomes obstructed by the pillow. (Candidate physically checks and verbalizes checking)
- 12. Checks to be sure resident is not laying on his/her arm.
- 13. Protects bony prominences, under head (must physically check), arm, behind back and between knees by placing support devices such as pillows, wedges, blankets, etc....
- 14. Maintains correct body alignment (must verbalize checking).
- 15. Lowers bed.
- 16. Lowers side rail.
- 17. Maintains respectful, courteous interpersonal interactions at all times.
- 18. Leaves call light or signaling device within easy reach of the resident.
- 19. Identifies that hands should be washed.

Skill 22—Range of Motion Hip & Knee

- 1. Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Explains procedure to the resident.
- 4. Provides privacy for resident pulls curtain.
- 5. Raises bed to between mid-thigh and waist level.
- 6. Positions resident supine (bed flat).
- 7. Correctly supports joints at all times by placing one hand under the knee and the other hand under the ankle.
- 8. Moves the entire leg away from the body and verbalizes abduction. (MUST VERBALIZE NAME OF MOTION)
- 9. Moves the entire leg back toward the body and verbalizes adduction. (MUST VERBALIZE NAME OF MOTION)
- 10. Completes abduction and adduction of the hip three times.
- Continues to correctly support joints and bend the resident's knee and hip toward the resident's trunk and verbalizes flexion.
 (MUST VERBALIZE NAME OF MOTION)
- 12. Straighten the knee and hip and verbalizes extension. (MUST VERBALIZE NAME OF MOTION)

- 13. Complete flexion and extension of knee and hip three times.
- 14. Does not cause discomfort or pain and does not force any joint beyond the point of free movement. (Candidate must ask if they are causing any pain or discomfort).
- Leaves resident in a comfortable position and checks and verbalizes good body alignment (MUST VERBALIZE CHECKING GOOD BODY ALIGNMENT).
- 16. Lowers bed.
- 17. Maintains respectful, courteous interpersonal interactions at all times.
- 18. Leaves call light or signaling device within easy reach of the resident.
- 19. Identifies that hands should be washed.

Skill 23—Range of Motion One Shoulder

- Knocks on door.
- 2. Identifies that hands should be washed.
- Explains procedure to the resident.
- 4. Provides privacy for resident pulls curtain.
- 5. Positions resident supine (bed flat) on back.
- Raises bed to between mid-thigh and waist level.
- 7. Correctly supports the resident's joint by placing one hand under their elbow and the other hand under the resident's wrist.
- 8. Raises resident's arm up and over the resident's head and verbalizes flexion. (MUST VERBALIZE NAME OF MOTION)
- 9. Brings the resident's arm back down to the resident's side and verbalizes extension. (MUST VERBALIZE NAME OF MOTION)
- 10. Completes full range of motion for shoulder through flexion and extension three times.
- 11. Continue supporting joints correctly and move the resident's entire arm out away from the body and verbalizes abduction. (MUST VERBALIZE NAME OF MOTION)
- 12. Return the resident's arm to the middle of the resident's body and verbalizes adduction. (MUST VERBALIZE NAME OF MOTION)
- 13. Complete full range of motion for shoulder through abduction and adduction three times.
- 14. Does not cause discomfort or pain and does not force any joint beyond the point of free movement (Candidate must ask if the resident feels any pain or discomfort).
- Leaves resident in a comfortable position and checks and verbalizes good body alignment (MUST VERBALIZE CHECKING GOOD BODY ALIGNMENT).
- 16. Lowers bed.
- 17. Maintains respectful, courteous interpersonal interactions at all times.
- 18. Leaves call light or signaling device within easy reach of the resident.
- 19. Identifies that hands should be washed.

Skill 24—Stand, Pivot and Transfer - With a Gait Belt

- 1. Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Explains the procedure to be performed to the resident.
- 4. Positions wheelchair at the foot or head of the bed.
- 5. Locks wheelchair brakes to ensure resident's safety.
- 6. Locks bed brakes to ensure resident's safety.
- 7. Lowers bed until resident's feet are flat on the floor.
- 8. Assists resident to sitting position and places gait belt around waist to stabilize trunk. Tightens gait belt. Checks gait belt by slipping fingers between gait belt and resident.
- 9. Assists resident to put on non-skid slippers.
- 10. Brings resident to a standing position using proper body mechanics.
- 11. With one hand grasping the gait belt and the other stabilizing resident by holding forearm, shoulder, or using other appropriate method to stabilize, transfers resident from bed to wheelchair.
- 12. Assists resident to pivot and sit in a controlled manner that ensures safety.
- 13. Test Observer will tell the Candidate to transfer the resident back into bed and Candidate brings resident to standing position, using proper body mechanics.
- 14. With one hand grasping the gait belt and the other stabilizing resident by holding forearm, shoulder, or using other appropriate method to stabilize, transfers resident from wheelchair back to bed.
- 15. Assists resident to pivot and sit on the bed in a controlled manner that ensures safety.
- 16. Assists resident in removing non-skid slippers and gait belt.
- 17. Assists resident to move to center of bed and lie down.
- 18. Makes sure resident is comfortable. Checks and verbalizes that resident is in good body alignment.
- 19. Maintains respectful, courteous interpersonal interactions at all times.
- 20. Leaves call light or signaling device within easy reach of the resident.
- 21. Identifies that hands should be washed.

Skill 25—Vital Signs - Oral Temperature, Pulse and Respiration

- Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Explains procedure to resident.
- 4. Provides privacy for resident pulls curtain.
- 5. Applies sheath or clean with alcohol pad.
- 6. Turns on digital oral thermometer and gently inserts bulb end of thermometer in mouth under tongue.
- 7. Holds thermometer in place for appropriate length of time.
- 8. Removes thermometer and Candidate reads and records the temperature reading on a pad of paper.
- 9. Candidate's recorded temperature varies no more than .1 degree from Test Observer's.
- 10. Candidate wipes thermometer clean with alcohol pad or discards sheath.
- 11. Locates the radial pulse by placing tips of fingers on thumb side of the resident's wrist.
- 12. Counts pulse for 60 seconds or 30X2. Then records on the pad of paper.
- 13. Candidate's recorded pulse rate is within 4 beats of Test Observer's recorded rate.
- 14. Candidate counts respirations for 60 seconds or 30X2 and records results on the pad of paper.
- 15. The Candidate's recorded respiratory rate is within 2 breaths of the Test Observer's recorded rate.
- 16. Maintains respectful, courteous interpersonal interactions at all times.
- 17. Leaves call light or signaling device within easy reach of the resident.
- 18. Identifies that hands should be washed.

Skill 26-Vital Signs-Axillary Temperature, Pulse and Respiration

- 1. Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Explains procedure to resident.
- 4. Provides privacy for resident pulls curtain.
- 5. Applies sheath or clean with alcohol pad.
- 6. Turns on digital thermometer, candidate dries inner armpit and places thermometer in the center of the Axilla.
- 7. Holds thermometer in place for appropriate length of time.
- 8. Removes thermometer and Candidate reads and records the temperature reading on a pad of paper.
- 9. Candidate's recorded temperature varies no more than .1 degree from Test Observer's.
- 10. Candidate wipes thermometer clean with alcohol pad or discards sheath.
- 11. Locates the radial pulse by placing tips of fingers on thumb side of the resident's wrist.
- 12. Counts pulse for 60 seconds or 30X2. Then records on the pad of paper.
- 13. Candidate's recorded pulse rate is within 4 beats of Test Observer's recorded rate.
- 14. Candidate counts respirations for 60 seconds or 30X2 and records results on the pad of paper.
- 15. The Candidate's recorded respiratory rate is within 2 breaths of the Test Observer's recorded rate.
- 16. Maintains respectful, courteous interpersonal interactions at all times.
- 17. Leaves call light or signaling device within easy reach of the resident.
- 18. Identifies that hands should be washed.

Skill 27—Weighing an Ambulatory Resident

- 1. Knocks on door.
- 2. Identifies that hands should be washed.
- 3. Explains procedure to resident.
- 4. Balances scale before weighing resident or zeros if the scale at the test site is an analog scale.
- 5. Insures resident's safety. Locks wheelchair brakes.
- 6. Assists resident to stand and walks them to the scale.
- 7. Assists resident to step on scale.
- 8. Checks that resident is balanced and centered on scale with arms at side and not holding on to anything that would alter reading of the weight.
- 9. Appropriately adjusts weights until scale is in balance or observes analog scale.
- 10. Reads weight and returns resident to wheelchair and assists to sitting position.
- 11. Records weight on pad provided.
- 12. Candidate's recorded weight varies no more than 2 lb. from Test Observer's reading.
- 13. Maintains respectful, courteous interpersonal interactions at all times.
- 14. Leaves call light or signaling device within easy reach of the resident.
- 15. Identifies that hands should be washed.

Tennessee Written Test Vocabulary List

abandonment bargaining CHF
abdominal thrust basic needs choking
abductor wedge basic skin care chronic
abnormal vital signs bath water temperature circulation

absorption bathing circulatory system abuse bed cradle clarification accidents bed making cleaning activities bed position clean liquid diet

adapative equipment bedsore clergy adaptive devices behavior cognitively impaired

addiction behavioral care plan cold application adduction beliefs colostomy bag biohazard colostomy care

admission bladder training combative resident admitting resident blindness comfort care

advance directives blood pressure communicable afebrile bodily fluids communication affected side body alignment compensation aging process body fluids compressions agitation body mechanics confidentiality

AIDS body systems confused resident body temperature congestive heart failure

alternating pressure bowel program constipation

mattress BP constrict

Alzheimer's brain stem contact isolation
Alzheimer's care breathing contamination
ambulation burnout contracture

amputees burns converting measures

anger call light COPD

angina cancer coughing excessively antibiotics cardiac arrest CPR

antibiotics cardiac arrest CPR antiembolitic cardiopulmonary cueing anxiety resuscitation CVA

aphasia cardiovascular system cyanotic

apnea care impaired death and dying appropriate response care plan decubitus ulcer

arteries care planning deeper tissue arthritis cast dehydration aseptic cataracts delegation

aspiration catheter dementia assault catheter care denial

assistive device cc's in an ounce denture care
assistive devices central nervous system dentures
atrophy

atrophy cerebral vascular depression attitudes accident diabetes

axillary temperature charge nurse diabetic bacteria chemotherapy dialysis

diastolic diet digestion dilate

discharging resident

disease

disease process disinfection disoriented disposing of

contaminated materials

disrespect

disrespectful treatment

dizziness DNR

documentation

dressing droplets drowsy

drug tolerance

dying dysphagia dyspnea dysuria edema elastic

elastic stockings

elderly

elevate head elimination emesis emesis basin emotional abuse emotional needs emotional stress

emotional support empathy emphysema

end of life care enema epilepsy

essential behaviors

ethics evacuation eye glasses

falls

false imprisonment fecal impaction

feces feeding

financial abuse

fire first aid flatus flexed flexion

Foley catheter foot care

Fowler's position fractures fraud

frayed cord free from disease

frequent urination gait belt

gastric feedings gastrostomy tube

geriatrics

germ transmission gerontology gestures

glass thermometer

gloves

grand mal seizure

grieving process

group settings hair care hallucination hand tremors hand washing

hazardous substance

health-care team hearing hearing aid hearing impaired hearing loss heart muscle

heat application height hemiplegia

HIPAA HIV

hormones hospice hospice care hydration

hyperglycemia hypertension hyperventilation hypoglycemia

I&O immobility immune impaired impairment incontinence

indwelling catheter

infection

infection control infectious disease in-house transfer initial observations in-service programs

insomnia insulin intake

intake and output integumentary system interpersonal skills

isolation

isolation precautions

iaundice job description kidney failure **laxatives** life support lift/draw sheet

linen listening living will log roll loose teeth low sodium diet

macular degeneration making occupied bed manipulative behavior

mask Maslow masturbation material safety data

sheets MDS

measuring height measuring temperature

mechanical lift

mechanical soft diet medical asepsis medical record medications memory loss mental health mentally impaired

metastasis microorganisms

minerals

misappropriation of

property mobility mouth care moving

mucous membrane multiple sclerosis musculoskeletal myocardial infarction

nail care nasal cannula neglect negligence new resident

non-contagious disease

nonverbal communication nosocomial

NPO

nurse's station

nursing assistant's role

nutrition objective objective data

OBRA observation official records ombudsman

open-ended questions

oral care oral hygiene oral temperature

orientation oriented osteoporosis ostomy bag

output overbed table

oxygen pain

palliative care paralysis paranoia Parkinson's

partial assistance passive pathogen pathogens patience perineal care personal care personal items personal stress

personal values
pet therapy
phantom pain
phone etiquette
physical needs
physician's authority

plaque podiatrist policy book positioning

post mortem care postural supports

PPE

pressure ulcers preventing falls preventing injury

privacy

professional boundaries

progressive projection pronation prone prostate gland prosthesis

protective equipment psychological needs

psychosis psychosocial

pulse QID

quadriplegia quality of life

radial ramps

range of motion rationalization reality orientation

rectal
refusal
regulation
regulations
rehabilitation
religious service
reminiscing
reporting

reporting abuse reposition resident abuse resident belongings resident centered care resident identification resident independence

resident pain resident rights resident treatment resident unit

Resident's Bill of Rights

resident's chart

resident's environment resident's families resident's rights respectful treatment

respiration respirations

respiratory symptoms respiratory system responding to resident

behavior

responsibilities responsibility restorative care

restraint restraints resuscitation

rights
rigidity
risk factor
role
rotation
safety
scabies
scale
seclusion

security
seizure
self-esteem
semi fowlers
sensory system
sexual harassment

sexual needs sexuality

sharps container

shaving

shearing of skin side rails Sims position skilled care facility

skin

skin integrity skin observation slander

smoking social needs social worker soiled linen specimen spills

spiritual needs sputum test standard precautions

STAT stealing sterilization

stethoscope

stomach stress stroke strong side subjective subjective data

suicide sundowning supine suprapubic survey swelling systolic TED hose

telephone etiquette

temperature tendons terminal illness thermometers

thickened liquids threatening resident

tips toenails

toileting schedule

trachea transfer belt transfers transporting transporting food transporting linens

tub bath tube feeding tubing twice daily tympanic unaffected unconscious urethral

urinary catheter bag urinary problems urinary system urinary tract urination urine validation

validation therapy

violent behavior vision change vital signs vitamins vocabulary vomitus walker

wandering resident water faucets water intake water temperature

weak side weakness weighing weight

well balanced meal

well-being

wheelchair safety white blood cells withdrawn resident workplace violence