

# **MAP TESTING CANDIDATE HANDBOOK**

**VERSION 4.1 – EFFECTIVE 05/12/16**

## **Contact Information**

The Massachusetts Department of Developmental Services (DDS) and Department of Mental Health (DMH) have contracted with D&S Diversified Technologies to provide testing, scoring and registry services for the Massachusetts MAP. This handbook is designed to help guide you through successful completion of MAP testing. For questions not answered here please contact:

### **D&S Diversified Technologies**

PO BOX 418, Findlay, OH 45839  
Ph: 1-877-851-2355 Fax: 1-419-422-7395  
Monday - Friday 8:00 am to 5:30 pm  
Saturday 8:00 am to 2:00 pm

**Questions about MAP training or certification status:**

### **Massachusetts MAP Registry**

PO BOX 418, Findlay OH 45839  
Ph: 1-888-734-6211 Fax: 1-419-422-7395  
Monday - Friday 8:30 am to 5:30 pm

**Please call D&S at 1-877-851-2355 the evening prior to your testing event after 6PM for updated testing and weather information. If you are uncertain about testing due to weather that has occurred overnight, please call the morning of your test event after 5AM or prior to your departure time.**

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## **Introduction**

The purpose of MAP (Medication Administration Program) testing is to ensure that candidates seeking to be MAP certified staff are prepared to safely administer medications as regulated by the Massachusetts Department of Public Health. You qualify to take the MAP test after successful completion of an approved MAP training program. This candidate handbook describes the process for taking the MAP test(s).

There are **three components** to the MAP Certification test.

1. A **knowledge test** taken on a computer using WebETest© software or a test taken on paper. You **must** pass the knowledge test before becoming eligible to take the skill components of the test.

### **Skills components:**

2. A transcription task
3. A medication administration demonstration task

Candidates must successfully pass all three test components (knowledge, transcription and medication administration) to be listed as certified on the Massachusetts MAP registry.

## **MAP Test Scheduling**

Upon successful completion of State approved MAP training you will be registered in WebETest© and will receive a PIN and ID from your MAP Trainer or employer. Do not lose or share your PIN with anyone. You may take the MAP test at a regional (open) test site, or at a provider specific (closed) test site. See further instructions in this handbook or at [www.hdmaster.com](http://www.hdmaster.com). You may also call **877-851-2355** for help. We must receive your testing application and paperwork at least 8 business days (excluding Saturdays, Sundays, and holidays) prior to a paper test event. Web test events must be scheduled at least 3 business days (excluding Saturdays, Sundays, and holidays) prior to the event. Any requests for testing in less than the specified time frames will result in express and overnight charges.

The following are options for scheduling the knowledge test:

- Your MAP Trainer or employer can schedule the test for you and will give you a confirmation letter. If they do not give you one, ask for one for your reference.
- You can schedule (reschedule) yourself online at [www.hdmaster.com](http://www.hdmaster.com) or by calling **877-851-2355** for alternative options.

Options for scheduling the medication administration/transcription test components after you successfully complete your knowledge test are:

- Go to [www.hdmaster.com](http://www.hdmaster.com) and use your ID and PIN to select a skill test event on a day and at a location of your choosing.
- Work with your MAP trainer or employer to schedule online.
- Call **877-851-2355** and D&SDT staff will assist you with scheduling the test.

***Sponsored candidates***, not scheduled into a test event by their MAP trainer or employer, will choose a DDS/DMH test event from the public test schedule available at [www.hdmaster.com](http://www.hdmaster.com)

***Non-Sponsored candidates***, (Candidates not employed by a DDS or DMH provider) will choose a D&SDT testing event by going to [www.hdmaster.com](http://www.hdmaster.com), clicking on Massachusetts MAP button, and then clicking on the testing schedule, listed on the left hand side of the screen at [www.hdmaster.com](http://www.hdmaster.com).

**CANDIDATES SCHEDULED BY D&S: PLEASE CALL 877-851-2355 IF YOU DO NOT RECEIVE AN EMAIL RESPONSE WITHIN 24 HOURS OF SCHEDULING TO VERIFY YOUR TEST DATE. IF YOU DO NOT RECEIVE A NOTIFICATION FROM US AND DO NOT CALL US TO VERIFY, YOU WILL STILL BE CONSIDERED A NO SHOW FOR ANY MISSED TEST DATE SCHEDULED.**

**Candidates scheduled by Trainers/Providers will be notified by them. If you are not notified by your Trainer/Provider and miss a scheduled test event you will still be considered a no show. You can check your test time and date at [www.hdmaster.com](http://www.hdmaster.com).**

### **The Knowledge Test Components**

The multiple choice knowledge component will be administered on a computer or paper by a certified knowledge test proctor. You should have received directions during MAP training explaining that it is to your advantage to spend time on your own taking sample tests on a computer.

**You will have a maximum of 75 minutes to complete the 50 question knowledge test.** You will be told when 15 minutes are remaining. You may not ask questions about the content of the knowledge test; such as "What does this question mean?" During WebETest®, computer testing, you may use either the mouse or keyboard to choose your correct answers. You must score at least 80% to pass the knowledge portion of the MAP test. You will have the option to bookmark questions to refer back to later in your testing session.

### **Knowledge Test Site Options**

1. A **provider (closed) test event** established just for the group of candidates completing MAP training with you. You will be given a notification letter with test date/time information and instructions by your MAP Trainer or employer.
2. A **regional (open) test** center where you will be scheduled by your MAP Trainer, or you may schedule (or reschedule) yourself online at [www.hdmaster.com](http://www.hdmaster.com). You may also call **877-851-2355** for scheduling assistance. You will receive a test notification email including test date/time information and instructions from D&SDT if scheduled by D&SDT.
3. A **PSI (Psychological Services, Inc.)** open regional test site where you will be scheduled (or rescheduled) by your MAP Trainer or yourself, or online at [www.hdmaster.com](http://www.hdmaster.com). You may also call **877-851-2355** for scheduling assistance.

### **Knowledge Test Content Outline**

The knowledge test is made up of 50 multiple-choice questions and you will be given 75 minutes to complete your test. The questions are selected from subject areas based on the approved Massachusetts MAP curriculum. The questions are selected from subject areas based on the approved Massachusetts MAP curriculum. The subject areas and number of questions per subject area are as follows:

Administering Medications the Right Way.....	5 questions
Medications and What You Need to Know.....	4 questions
Observing and Reporting Information.....	7 questions
Steps in Administering Medications.....	12 questions
Obtaining Medications .....	7 questions
Documentation, Recording and Storage.....	15 questions

### **Skills Test Components**

Expect to spend no more than 2½ hours at a skills test event. You will need to bring a #2 pencil with you for your testing session, along with your required ID's.

### **\*Medication Administration Demonstration Task**

The purpose of the medication administration test component (task) is for you to demonstrate whether you can administer medication safely. This evaluation is done by a certified tester. You will find the medication administration checklist used by the Tester during testing in this handbook. The medication administration task is demonstrated individually. You will have 10 minutes to complete the following task.

- A scenario will be read to you immediately before you demonstrate the task. Listen carefully to all instructions. You may request to have instructions or the scenario repeated to you at any time. Once the test begins you may not ask any further questions. You will be given a copy of the scenario for reference.
- After hearing the scenario for the medication administration task use the medication book provided to determine what medication to obtain from the locked medication box.
- The tester will play the role of the individual; you will administer the appropriate medication to the tester.
- If you believe you made a mistake while performing the medication administration task, say so and then repeat what you believe you performed incorrectly. You may repeat anything you believe you performed incorrectly any time during your allotted 10 minutes or until you tell the Tester you are finished. **No corrections can be made after the medication has been administered or after documentation has been completed.**
- Each part of the medication administration process listed on the checklist must be demonstrated in order to pass. **You must not miss any part on the checklist.** If you miss a single part you will have to re-schedule and take another randomly selected medication administration test. **Non-sponsored** candidates will need to log onto [www.hdmaster.com](http://www.hdmaster.com) to schedule a retake task and pay for it with a credit card.

### **\*Transcription Task**

The purpose of the transcription component (task) is for you to demonstrate your ability to correctly document, using a HCP order, the discontinuation of a medication and to transcribe a new medication onto a medication administration sheet. You will find the transcription checklist used to score your transcription task in this handbook. The transcription task will be done in a group setting with each candidate having been provided a unique, random, transcription task. You will have 15 minutes to complete the transcription task.

Each part of the transcription process listed on the checklist must be demonstrated in order to pass. You must not miss any part of this task. If you miss a single part you must reschedule to take the transcription component again.

### **Medication Administration Task Checklist**

1. Candidate locates the correct individual in the medication book.
2. Candidate identifies the correct medication on the medication sheet.
3. Candidate selects the correct medication from the medication box.
4. Candidate performs Check #1 by comparing the HCP order and the pharmacy label.
5. Candidate performs Check #2 by comparing the pharmacy label and the medication sheet.
6. Candidate pours the correct number of tablets.
7. Candidate performs Check #3 by comparing the pharmacy label and the medication sheet.
8. Candidate gives only the right medication.
9. Candidate gives the right dose of medication.
10. Documentation Med Sheet: Candidate initials the correct medication sheet under the right

date after administering medication.

11. Documentation Med Sheet: Candidate initials the correct medication sheet across from the right time after administering medication.
12. Documentation Med Sheet: Candidate initials the correct medication sheet across from the right medication after administering medication.
13. Documentation Count Book: Candidate records the appropriate date on the correct page in the count book. Acceptable date format includes "year" or "yr" or actual current year.
14. Documentation Count Book: Candidate records the right time on the correct page in the count book.
15. Documentation Count Book: Candidate records the right route on the correct page in the count book.
16. Documentation Count Book: Candidate records the right number of tablets on hand on the correct page in the count book. **Please be aware that medications provided in blister packs may have been popped out of sequence by previous candidates. There will be a sticker on the package calling your attention to this. In such a case, you will need to count each tablet separately. This is not an attempt to "trick" you.**
17. Documentation Count Book: Candidate records the right number of tablets used on the correct page in the count book.
18. Documentation Count Book: Candidate records the right number of tablets remaining on the correct page in the count book.
19. Documentation Count Book: Candidate signs name on correct page in the count book.
20. Candidate secures all medication(s).

### **Transcription Task Checklist**

1. Candidate marks through every unused box in grid portion of med sheet for correct discontinued medication.
2. Candidate draws a single diagonal line to cross out the medication description for the correct medication.
3. Candidate draws a diagonal line through the grid portion of the medication sheet for the correct medication.
4. Candidate writes correct discontinued (D/C) in medication description portion of medication sheet for the correct medication.
5. Candidate writes correct discontinued (D/C) in grid portion of medication sheet for the correct medication.
6. Candidate writes correct discontinuation date in medication description of the medication sheet for the correct medication.
7. Candidate writes correct discontinuation date in grid portion of the medication sheet for the correct medication.

8. Both generic and brand names of correct medication are accurately transcribed onto medication sheet for the correct medication.
9. Strength of the medication is accurately transcribed onto medication sheet for the correct medication.
10. Amount of medication is accurately transcribed onto medication sheet for the correct medication.
11. Dose of medication is accurately transcribed onto medication sheet for the correct medication.
12. Frequency of medication is accurately transcribed onto medication sheet for the correct medication.
13. Route of administration is accurately transcribed onto medication sheet for the correct medication.
14. Start date of medication is accurately transcribed onto medication sheet for the correct medication.
15. Stop date of medication is accurately transcribed onto medication sheet for the correct medication.
16. Appropriate medication times are written in the hour column on the medication sheet for the correct medication.
17. Grid accurately shows when first dose is to be administered for the correct medication.
18. Grid accurately shows when last dose is to be administered for the correct medication.
19. Candidate only transcribes the new medication.
20. Candidate does not sign off newly transcribed medication as given.

### **Before Test Day**

Please call D&S at 1-877-851-2355 the evening prior to your testing event after 6PM for updated testing and weather information. If you are uncertain about testing due to weather that has occurred overnight, please call the morning of your test event after 5AM or prior to your departure time.

### **Test Day**

For all components of the MAP test

- **All candidates are required to be in the designated testing wait area prior to the time listed on their testing confirmation. If you are not in the designated testing wait area as required to sign in with the tester/proctor you will be considered a No Show and you will not be allowed to test. Signing in with the front desk at the test location does not count as being signed in for testing.** Plan to arrive early.
- **You must bring a SIGNED, NON-EXPIRED (must have an expiration date printed on it that has not expired), US GOVERNMENT ISSUED PHOTO ID (some examples are: driver's license, state ID, passport, handgun carry permit or military ID). All government issued IDs must be issued by the United States of America. You will not be admitted for testing if you do not bring the proper form of ID and you will be considered a no show. The candidate name on the ID must match EXACTLY the name entered into the D&S testing**

**database for the candidate. If the name does not match exactly you will be considered a no show for testing.**

- Due to changes in road construction and weather you will want to check one of the following websites to review any current projects or closures which may impact your travel to testing: <http://www.massdot.state.ma.us/> or <https://twitter.com/MassDOT>. Remember you are required to be in the testing wait area signed prior to the time listed on your notification, with your valid government issued ID.
- **You will not be admitted for testing if you do not bring proper ID and you will have to apply for a new test date and pre-pay all required rescheduling or testing fees.**
- **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.**

## **Testing Policies**

The following policies are observed at each test site:

- If you arrive late for a confirmed test, or if you do not bring appropriate ID, you will not be admitted to the test and any testing fee paid *will NOT be refunded*.
- If you are a "NO SHOW" for any portion of the MAP test, un-sponsored candidates will forfeit all testing fees paid and will have to reapply for a new test date and prepay all required testing fees for the component(s) of the MAP test missed. Sponsored candidates will have to pay a \$45 re-schedule fee before they can schedule a new test.
- Cellular phones, beepers, blue tooth capable devices of any type, or any other electronic devices are not permitted during testing AND must be left outside the testing room or parked at the back of the room on a table by the door placed in the off position and picked up on the way out the testing room.
- Candidates with long hair are asked to pull hair back to ensure that no blue tooth device is present.
- Candidates that enter the testing area with a cell phone turned on will be asked to leave and forfeit any testing fees.
- Candidates may not wear coats or hooded apparel during testing for security reasons.
- Candidates are not permitted to bring personal belongings such as briefcases, large bags, study materials, extra books, or papers into the testing room. Any such materials brought into the testing room will be collected and returned to you when you have completed the test. D&S testers or facilities will not be responsible for personal items. The only exception is a paper or hard back English translation dictionary (must be word-for-word; no definitions) which must be shown to and will be checked by the knowledge test proctor before the test begins. No electronic dictionaries will be allowed.
- You may not take any notes or other materials from the testing room.
- You are not permitted to eat, drink, or smoke during the test.
- If you are discovered causing a disturbance of any kind or engaging in any kind of misconduct, you will be dismissed from the test and reported to the appropriate agencies.
- **No visitors, instructors, guests, pets or children are allowed at the testing site.** If you bring visitors, guests, pets, or children you will be asked to leave and will be listed as a "NO SHOW." You must then reschedule and pay rescheduling test fees according to the NO SHOW policies.
- If you have any type of physical limitation (excluding pre-arranged ADA's) that would prevent you from demonstrating your competency to perform your duties as a MAP certified staff person, we strongly recommend you reschedule your test date until you no longer have the limitation. If you decide to continue with your scheduled test date while under limitation, you will not be given a free reschedule for testing due to issues that arise due to the limitation (Examples: Cast, Braces, Crutches, etc.). Call D&SDT immediately if you are on medical restriction prior to your scheduled event for reschedule. If the limitation occurs prior to the test date, you **must fax a copy of the medical restriction no later than the day prior to your scheduled test** (Saturdays, Sundays and holidays are not business days) to qualify for a free reschedule.
- Check the website prior to your day of testing for policy and testing updates.

- **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.**

### **Inappropriate Behavior Policy**

Inappropriate behavior will not be tolerated at test events. All candidates are required to be in the designated testing wait area prior to the time listed on the testing notification. If you are not in the designated testing wait area as required you will be considered a No Show.

1. If you are late you will be given an information sheet with documented steps that need to be followed in order to schedule a new test date.
2. Security or the Police will be contacted if your behavior causes a disturbance to testing or the work place.
3. Your sponsoring employer will be informed about any inappropriate behavior at testing.

### **Weather Policy**

Cancellations will be posted on the D&S Diversified Website and on our weather number recording at our office. Please call the weather hotline at 1-877-851-2355 to determine if your testing has been cancelled due to weather prior to leaving home or work for your test event.

1. Testing will proceed as scheduled if the test site is open and the tester/proctor is able to travel to the test site.
2. If you have severe weather that occurs in your area within the 24 hours prior to testing and are unable to travel to the test site as a result, notify D&S at 1-877-851-2355 as soon as possible prior to the scheduled test time. You will be required to submit documentation (i.e.: screen shot from a news station or webpage, a statement from the MassDOT website or your local police department, etc.) for review to determine if the \$45 no show fee will be waived. All documentation must be received within 5 days of the test date.
3. If you do not attend testing due to weather related issues (i.e.: your roof fell in due to heavy snow, extended power outage, etc.), you are required to provide documentation to confirm the situation. Some examples of appropriate documentation would be a claim form from your insurance company, a copy of a repair bill or estimate, a print out of power outage areas from power provider, etc.)
4. All exceptional weather events will be reviewed by D&S, in collaboration with DDS & DMH for possible cancellations, rescheduling modifications and/or allowances.

### **Test Results**

After you pass all three components of the MAP test, you will be listed on the Massachusetts MAP Registry as Certified. If you fail any portion of the MAP test, you may apply to retake the component of the MAP test you failed. If you have three failing scores in any combination you must successfully complete retraining by a MAP trainer or attend the full MAP training program again in order to be eligible to take all of the testing components again. After retraining, you must take all three components of the test again even if you previously passed one of more of the test components. Procedures for retesting are included with failure notification letters either emailed to you or that you print from an Internet connected computer. Detailed test results are supplied in all test result notification emails.

If you tested at any CBT-Computer based testing (WebETest©) event your test results will be officially scored and posted after 6pm at [www.hdmaster.com](http://www.hdmaster.com) the following business day. All paper knowledge tests are graded within three to five (3 to 5) business days from the testing event (excluding Saturdays, Sundays and holidays) in our Findlay, Ohio office and posted at **[www.hdmaster.com](http://www.hdmaster.com)** web site after 6:00 pm the day received in our Ohio office.



## **ADA Accommodations**

D&S Diversified Technologies provides reasonable accommodations for test candidates with documented disabilities or limitations that may affect their ability to take any portion of the MAP test in the manner expected. 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, tell your MAP Trainer and you will receive a form 1404 to complete during your MAP training. The form is also located at [www.hdmaster.com](http://www.hdmaster.com). Mail or fax the completed form 1404 and required attachments to D&S Diversified Technologies. Call 877-851-2355 if you need additional information. If you are requesting an ADA accommodation for any portion of your MAP test your application must be submitted to our office at least 14 business days prior to your anticipated test date for that portion of the test. Be aware that there are extra costs associated with providing reasonable accommodations (translators) for testing and that you are expected to notify D&S directly of the need to reschedule or cancel more than two business days before any scheduled examination or as soon as you become aware at 877-851-2355.

## **Security**

Candidates who remove or try to remove test materials or share information from any test event will be prosecuted to the full extent of the law, will have their test results recorded as a failure, will not be allowed to test for a minimum period of six months and will have to be cleared to test by the Massachusetts Department of Developmental Services (DDS) or Massachusetts Department of Mental Health (DMH). Study materials may **NOT** be brought into the test event or used during testing. If you give or receive help from anyone during testing, the test will be stopped, your test will be scored as a failure, you will be dismissed from the test event and your name will be reported to the appropriate State agencies.

## **Reschedule/Cancellation Policies**

Cancellations or reschedules attempted less than two business days before the actual testing day (**Saturdays, Sundays and Holidays excluded**) will result in a "NO SHOW" status for the candidate.

## **Reschedule**

A candidate may reschedule a test component once during each three attempt testing cycle to a new mutually agreed upon test date and site for no charge up to two business days (**Saturdays, Sundays and Holidays excluded**) before a scheduled test event. Any additional reschedules requested more than two business days before the scheduled test event will be charged \$30.00 for each rescheduled component. The reschedule fee must be paid before the test component can be rescheduled. Rescheduling a test component less than two business days before the test event results in a "no show" status. For non-sponsored candidates, the entire fee for the component(s) must be repaid.

<b>MAP RESCHEDULE &amp; CANCELLATION CHART</b>	
The only time this will change is if there is a Holiday during the week. The requirement is <b>TWO BUSINESS DAYS EXCLUDING WEEKENDS AND HOLIDAYS!!</b>	
<b>Scheduled Day</b>	<b>Last day you can reschedule or cancel by end of day</b>
Monday	Wednesday (the week prior)
Tuesday	Thursday (the week prior)
Wednesday	Friday (the week prior)
Thursday	Monday
Friday	Tuesday
Saturday	Wednesday
Sunday	Wednesday

## **Cancellation** (see previous chart)

For sponsored candidates, cancellations MUST be faxed or emailed to D&SDT at least two business days (**Saturdays, Sundays and Holidays excluded**) before a scheduled test event to qualify for a cancellation without the \$45 no show fee being accessed. No phone calls or voice mail messages will be accepted. A cancellation means that you are not interested in taking the MAP test at all.

For non-sponsored candidates, cancellations MUST be faxed or emailed to D&SDT at least two business days (**Saturdays, Sundays and Holidays excluded**) before a scheduled test event to qualify for a full refund minus a \$30.00 cancellation fee. No phone calls or voice mail messages will be accepted. A cancellation means that you are not interested in taking the MAP test at all.

## **No Show**

If you are scheduled for your test and do not show up without notifying D&SDT staff two business days before the actual testing time (**Saturdays, Sundays and Holidays excluded**) you will be considered a **NO SHOW** and **must either submit all required fees for the portion(s) of the test missed if you are a non-sponsored candidate or pay the NO SHOW reschedule fee (\$45) if you are a DDS/DMH sponsored candidate in order to acquire a new test date. 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.**

**No show fees will be accessed for the following reasons but are not limited to:**

1. **Candidate does not arrive in time to be signed in with the tester/proctor for testing before the time listed on your test confirmation.**
2. **Candidate does not arrive for testing at all.**
3. **Name on ID does not match what was entered in to the database by the trainer/provider. Candidate is instructed on the notification to make sure the names match exactly before the test date. Call 1-877-851-2355 immediately if the names don't match.**
4. **Candidate does not bring an ID that meets the requirements for testing.**
5. **Candidate takes one component of the skill test and leaves before taking the second skill test component. Skills tests are scheduled on the same day, however they are counted as individual tests for scoring purposes and no show fees.**

If you are a **No Show** for any of the following reasons please provide proof as indicated:

### ▪ **Car breakdown**

A tow bill faxed within **48 hours** of the test date. If we do not receive proof within the 48 hour time frame you will remain a No Show.

### ▪ **Medical emergency**

Doctor's notes within **5 business days. 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. (Saturdays, Sundays and holidays excluded.)** If we do not receive proof within the 5 business days time frame you will remain a No Show.

### **Death in the family**

Obituary for **immediate family only** within **14 business days (Saturdays, Sundays and Holidays excluded)** from a missed test date, otherwise you will remain a No Show.

The candidates name must appear in the obituary.

## **Re-Testing**

- If you are a DDS/DMH sponsored candidate and you fail your **KNOWLEDGE TEST component**, you may secure a new test date by going to **www.hdmaster.com** and selecting a new date and time to retake the knowledge test component. If you are non-sponsored, you may send in your failure notification with correct payment.
- After three unsuccessful attempts to pass any combination of knowledge, medication administration, or transcription test components you must successfully complete a remedial training by your MAP trainer or complete the MAP training program again.
- If you fail a **MEDICATION ADMINISTRATION DEMONSTRATION and/or TRANSCRIPTION TASK**, you may secure a new test slot by going to **www.hdmaster.com** and selecting a new date and time to test, after your employment has been re-verified. Non-sponsored candidates may apply at **www.hdmaster.com** to schedule a new testing event using a credit card for payment prior to receiving a test date.

## **Re-scoring request - Test dispute deposit**

Write a step-by-step explanation of the steps you demonstrated but were not credited with doing correctly and fax, email, or mail the explanation along with the \$25.00 rescoring/dispute processing fee. Rescoring requests will not be refunded unless the candidate wins the dispute process. Your request must be received in our office **within 10 days from the date of your test** (Saturdays, Sundays and Holidays excluded). If a candidate wins the dispute, the \$25.00 processing fee will be refunded. If a candidate decides to schedule and pay for another test component while waiting for the dispute decision and the candidate successfully passes the test component previously noted as a failure, the candidate would be refunded the cost of that test component plus the \$25.00 dispute processing fee if the dispute findings are in favor of the candidate.

## **Certification**

The Massachusetts MAP registry contains all MAP Certified staff and candidates in Massachusetts. The internet link to the MAP registry is available at **www.hdmaster.com** as well as on the DDS and DMH websites. Your certification is valid for a two year period. You must recertify within 90 days of the expiration date. If you do not recertify within that 90 day recertification period, your certification will lapse. You are eligible to recertify for up to one year from when your certification expired however you will no longer be eligible to administer medication. If you have any questions regarding your MAP status go to [www.hdmaster.com](http://www.hdmaster.com) or call the MAP registry staff at (1-888) 734-6211 or Fax- (1-419)-422-7395 Monday - Friday 8:30 am to 5:30 pm.

## **Recertification Process**

- If a recertification is scheduled through D&S Diversified, the entire recertification process must be completed through D&S Diversified. Once that process begins, in-house recertifications are not allowed. This process is the same, if an in-house recertification is completed first, the recertification process must be completed through in-house recertifications.
  - Switching between D&S and in-house recertifications is not allowed.

## **Massachusetts Medication Administration Rationale List**

acceptable codes  
administration  
amount  
amount of medication  
basic principles  
categories of medications

cautionary guidelines  
certain time reporting  
certification renewal  
communication  
confidentiality  
controlled substance

count book  
count book documentation  
count book index  
count discrepancy  
countable medication  
countable substances  
countables  
cross checking  
crosschecks  
cycle of responsibility  
day program  
desired effect  
discontinued medication  
discontinuing a medication  
disposal  
documentation  
documentation error  
documenting missed dose  
documenting observations  
dose  
drug loss  
drug sensitivity  
expiration date  
faxed order  
five rights  
hand washing  
HCP order  
HCP visit  
health care provider order  
health care provider visit  
hotline  
immediate reporting  
individual rights  
individual's rights  
leave of absence  
liquid administration  
liquid medication  
liquid oral medications  
LOA medication  
maintaining medication supply  
MAP consultant  
maximize capabilities  
medication  
medication administration  
medication administration process  
medication administration skills  
medication book  
medication categories  
medication counts  
medication disposal  
medication documentation  
medication effect  
medication forms  
medication indication  
medication information

medication information sheet  
medication interaction  
medication label  
medication occurrence  
medication principles  
medication refills  
medication refusal  
medication resource  
medication security  
medication sensitivity  
medication sheet  
medication storage  
mindfulness  
missed dose  
missing documentation  
missing medication  
objective information  
objective observation  
objective reporting  
observation  
observation types  
observing and reporting  
obtaining medications  
occurrence reporting  
oral medication  
order transcription  
OTC medications  
other substances  
over the counter medications  
pharmacy label  
post and verify  
posting and verifying  
prepare medication  
prescription  
prescription medication  
PRN  
PRN documentation  
PRN medication  
recording information  
refusal  
reporting  
respecting rights  
right dose  
right medication  
right time  
route  
routine reporting  
sample medication  
security  
side effects  
special instructions  
standardization  
start date  
storing medications  
strength

subjective information  
target symptoms  
telephone order  
telephone/fax orders  
transcribing  
transcription  
unwanted effects  
verification