D&S Diversified Technologies LLP

Headmaster LLP

Arizona Medication Assistant

CANDIDATE HANDBOOK

February 1st, 2026

VERSION 9

D&S Diversified Technologies (D&S DT) – Headmaster

Email: arizona@hdmaster.com

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Website: www.hdmaster.com

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HEADMASTER

TMU©

Contact Information

Questions regarding: testing process • test scheduling • eligibility to test • name and address changes ..... **(800) 393-8664**

Questions regarding: Medication Assistant certification • Registry • renewals ... **(602) 771-7800**

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Arizona State Board of Nursing (AZBN) 1740 W. Adams Street, Suite 2000 Phoenix, AZ 85007-2607 Website: www.azbn.gov Email: arizona@azbn.gov	*Monday through Friday* *8:00AM –5:00PM* *Local Time*	Phone #: (602) 771-7800

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INTRODUCTION

A Medication Assistant competency evaluation program is designed to ensure that candidates seeking to become Medication Assistants in Arizona understand the state standards and can competently and safely perform the duties of an entry-level Medication Assistant.

This handbook describes the Medication Assistant competency examination process and is designed to help prepare candidates for testing.

There are two parts to the Medication Assistant competency examination—a multiple-choice knowledge test and a skill test. Exam candidates must be registered, complete approved training, pass both parts of the exam, and meet all other Arizona Board of Nursing (AZBN) requirements for certification in Arizona.

Arizona approved D&S Diversified Technologies (D&SDT)-HEADMASTER LLP to provide tests and scoring services for Medication Assistant Testing. For questions not answered in this handbook, please contact D&S Diversified Technologies (D&SDT)-HEADMASTER at (800) 393-8664 or go to D&SDT-HEADMASTER's Arizona Medication Assistant web page.

AZBN REQUIREMENTS BEFORE STARTING A MEDICATION ASSISTANT TRAINING PROGRAM

In order to start a medication assistant training program, the following criteria must be met:

- Candidates must have been licensed and worked as a Licensed Nursing Assistant (LNA) for at least six (6) months ***before*** starting the medication assistant training program.
- Candidates must have no outstanding complaints or restrictions on their nursing assistant certification.
- Candidates must successfully complete an approved 100-hour Certified Medication Assistant training program.
- Candidates must pass the Certified Medication Assistant Competency Exam Knowledge and Skill tests components.
- The CMA Knowledge and Skill tests must be passed within one year after taking the training.
  - If not passed within one year from the completion of the training date, candidates must retake the training.

AMERICANS WITH DISABILITIES ACT (ADA)

ADA Compliance

The Arizona Board of Nursing (AZBN) and D&SDT-HEADMASTER provide reasonable accommodations for candidates with disabilities or limitations that may affect their ability to perform the medication assistant competency examination. Accommodations are granted in accordance with the Americans with Disabilities Act (ADA).

If you have a qualified disability or limitation, you may request special accommodations for the examination. D&SDT-HEADMASTER must approve accommodations in advance of the examination. The request for accommodations can be found on the D&SDT-HEADMASTER web page, where you can click the PDF Fillable ADA Accommodation Form 1404. Complete the ADA Request and attach the required documentation on the second page to an email to arizona@hdmaster.com for review of your accommodation request.

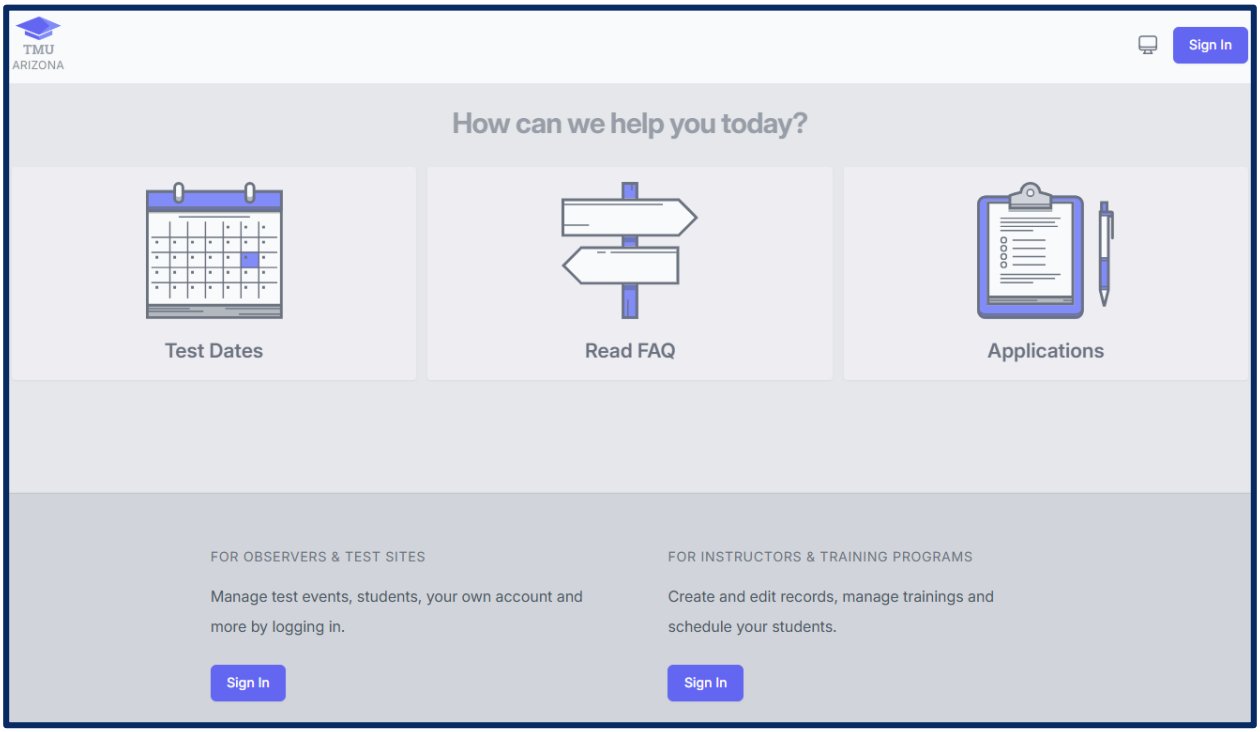
ADA Accommodation Request Applications submitted without the required supporting documentation of a diagnosed disability will not be reviewed until the required documentation is provided. D&SDT-HEADMASTER will email you if any further documentation or information is required, using the email address in your TMU© account.

Please allow additional time for your request to be approved. If you have questions regarding the ADA review process or specific required documentation, please call D&SDT-HEADMASTER at (800) 393-8664.

ARIZONA TESTMASTER UNIVERSE© (TMU©)

Arizona TMU© Home Page

This is the Arizona TMU© main page, **az.tmutest.com**



→ *Click on 'Test Dates' to see the calendar of available test events and their location*

→ *Click on 'Read FAQ' for frequently asked questions*

→ *Click on 'Applications' for frequently used applications*

Complete your TMU© Account

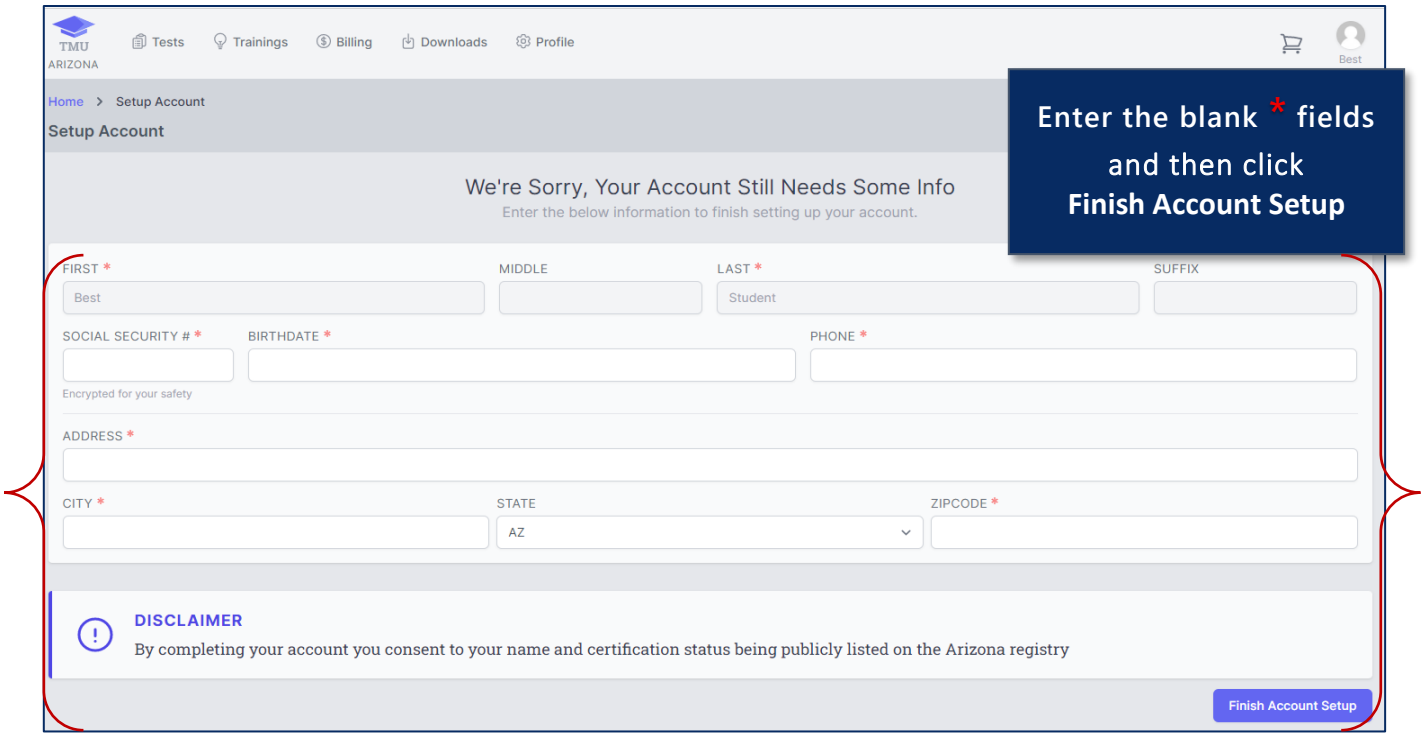
Your training program will enter your initial registration information in D&SDT-HEADMASTER's Arizona TestMaster Universe (TMU©) software.

IMPORTANT: Before you can test, you must sign in to your TMU© account using your secure Email or Username and Password and complete the missing demographic information *prior to testing*. Failure to do so may result in your being denied access to testing. You will be marked as a no-show for your event and will forfeit your testing fees.

- Upon receiving your confirmation email from TMU© (check your junk/spam mail) that your account has been created, you need to sign in to your account, update your password, and complete your demographic information. **This must be done before scheduling a test event**

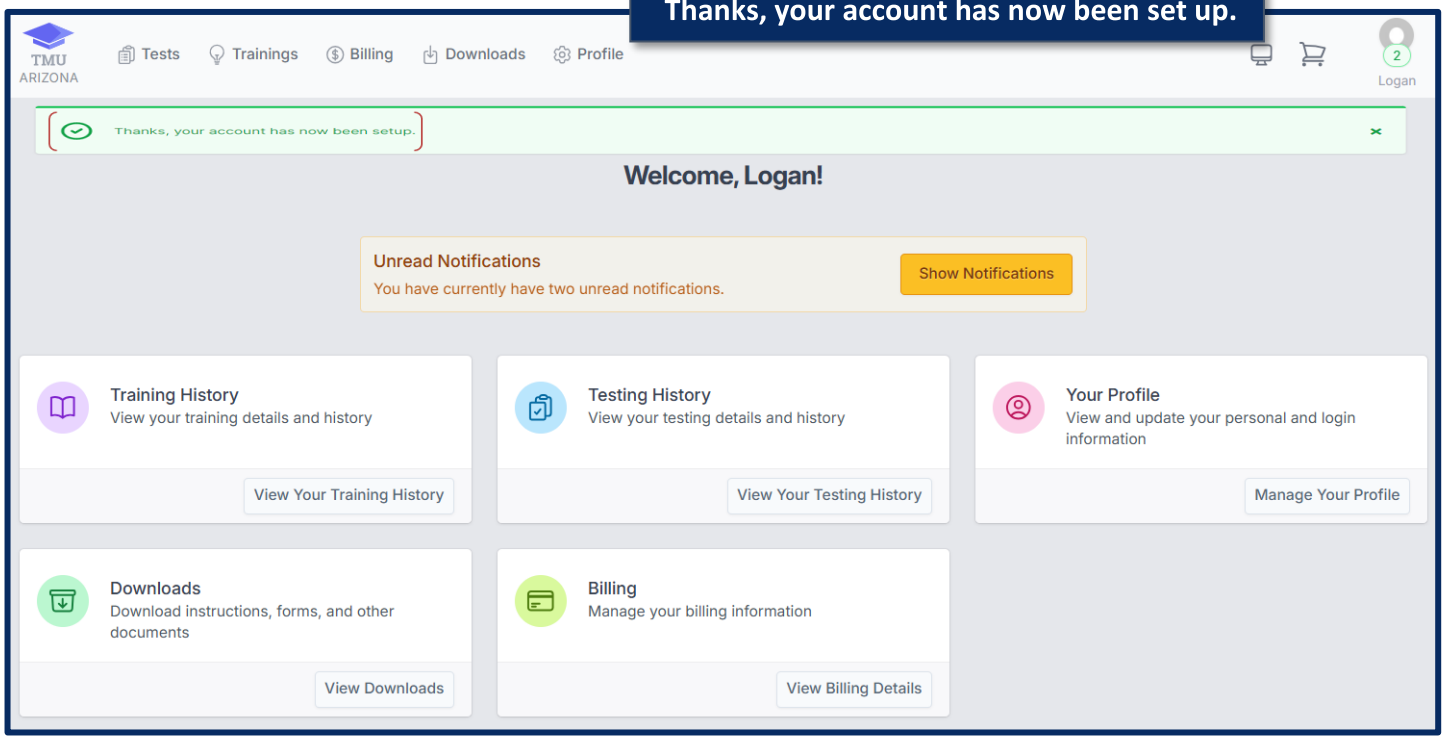
If you do not know your Email or Username and Password, enter your email address and click "Forgot Your Password?" You will be asked to re-enter your email, and a 'reset password link' will be sent to your email (see instructions under **Forgot your Password and Recover your Account**). If you cannot sign in, contact D&SDT-HEADMASTER at (800) 393-8664.

*This is the screen you will see the first time you sign in to your TMU© account with the **demographic information you need to enter to complete your account**:*



This is the candidate's home page:

You will receive the message,
Thanks, your account has now been set up.

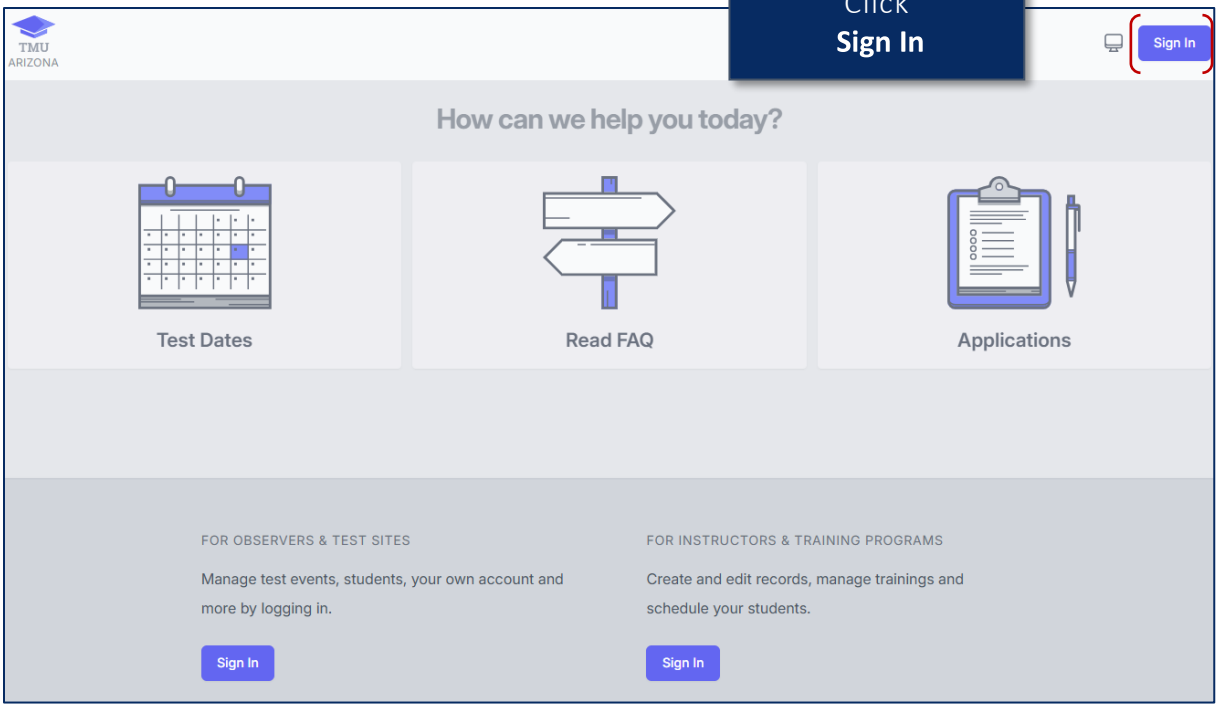


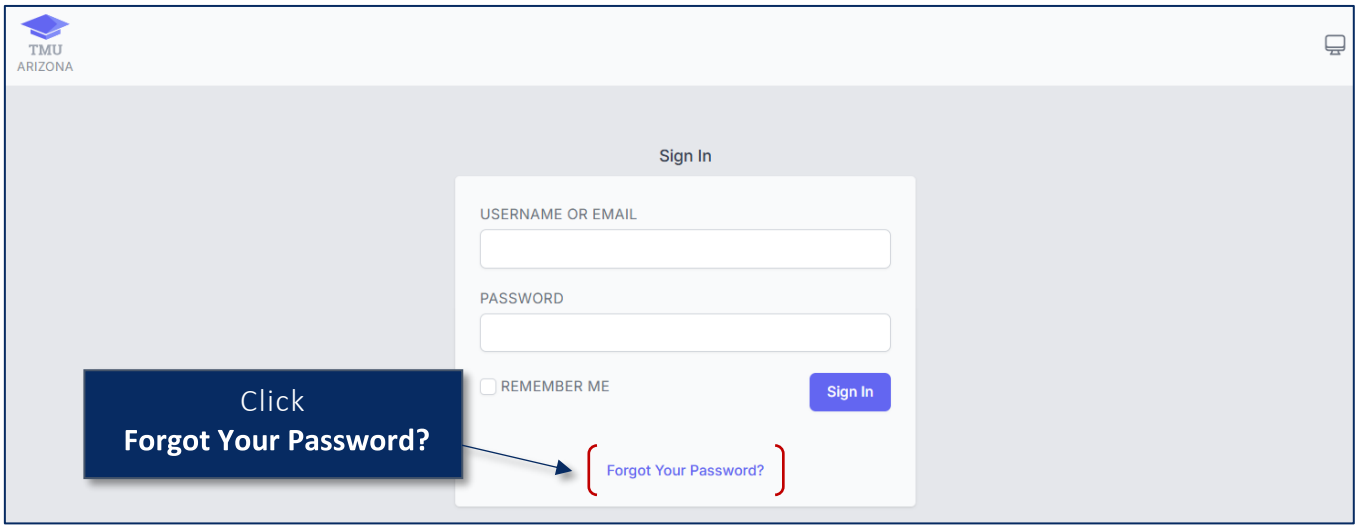
Forgot your Password and Recover your Account

If you do not remember your password, follow the instructions with screenshots in this section.

Go to **az.tmutest.com**.

Click
Sign In





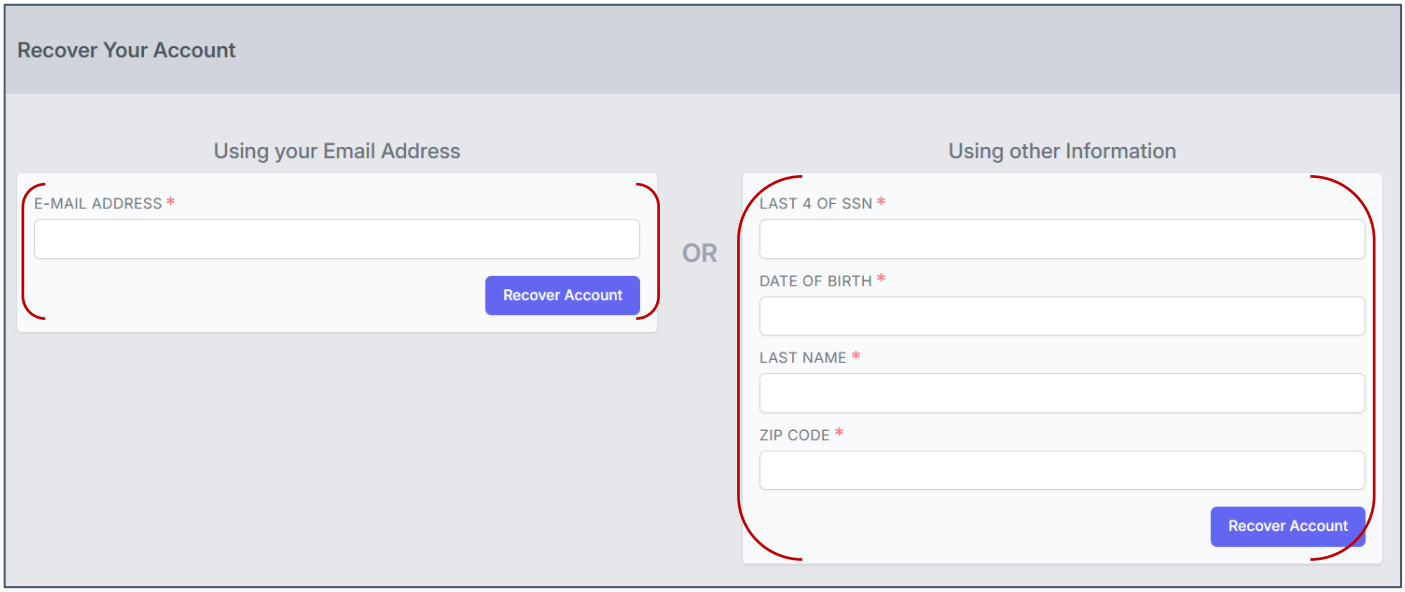
Click
Forgot Your Password?

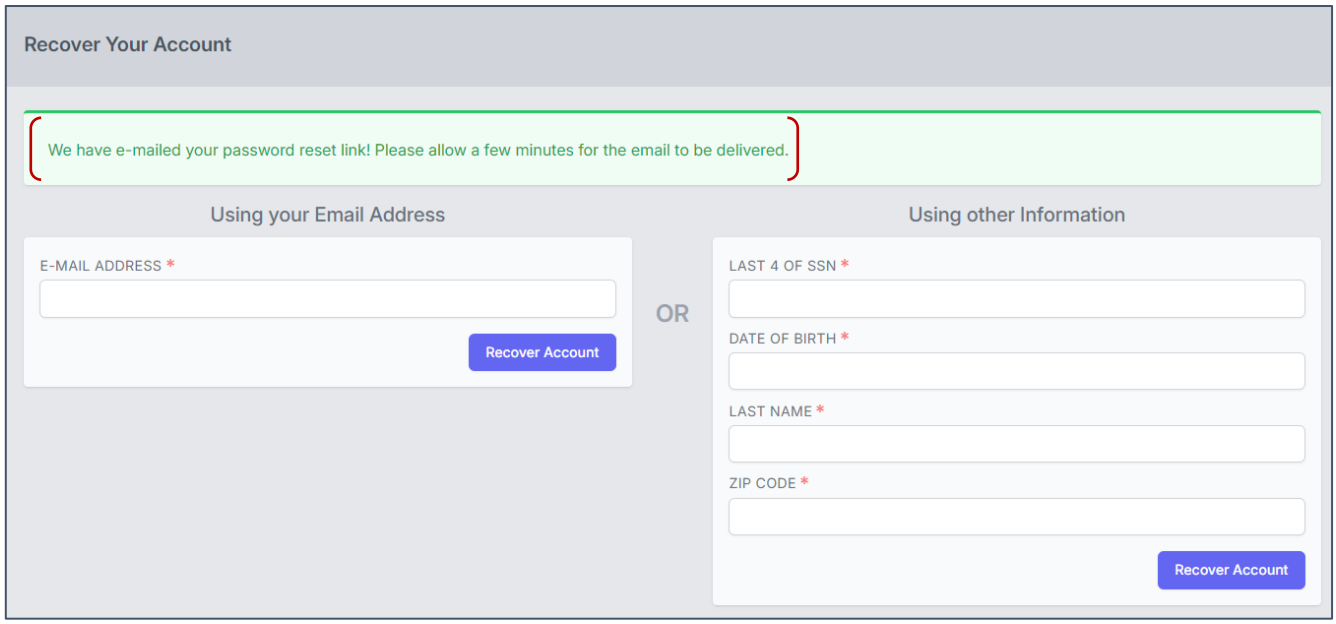
Type in your Email Address
Click **Recover Account**

- An email with the reset link will be sent to you.
- Click on the reset link in your email to reset your password.

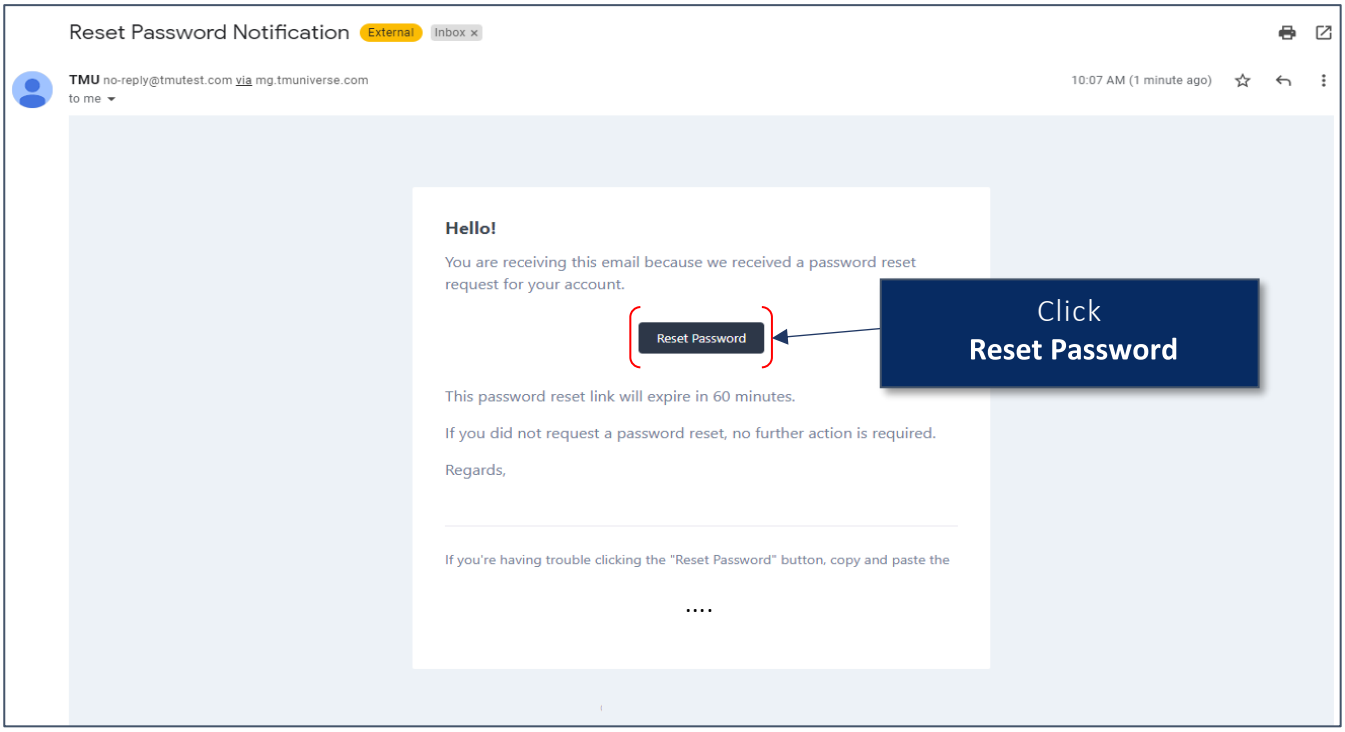
(-OR- You can type in the requested data under **Using other Information** if you have already updated your demographic information in your account)
Click **Recover Account**

You will receive the message,
We have emailed your password reset link! Please allow a few minutes for the email to be delivered.

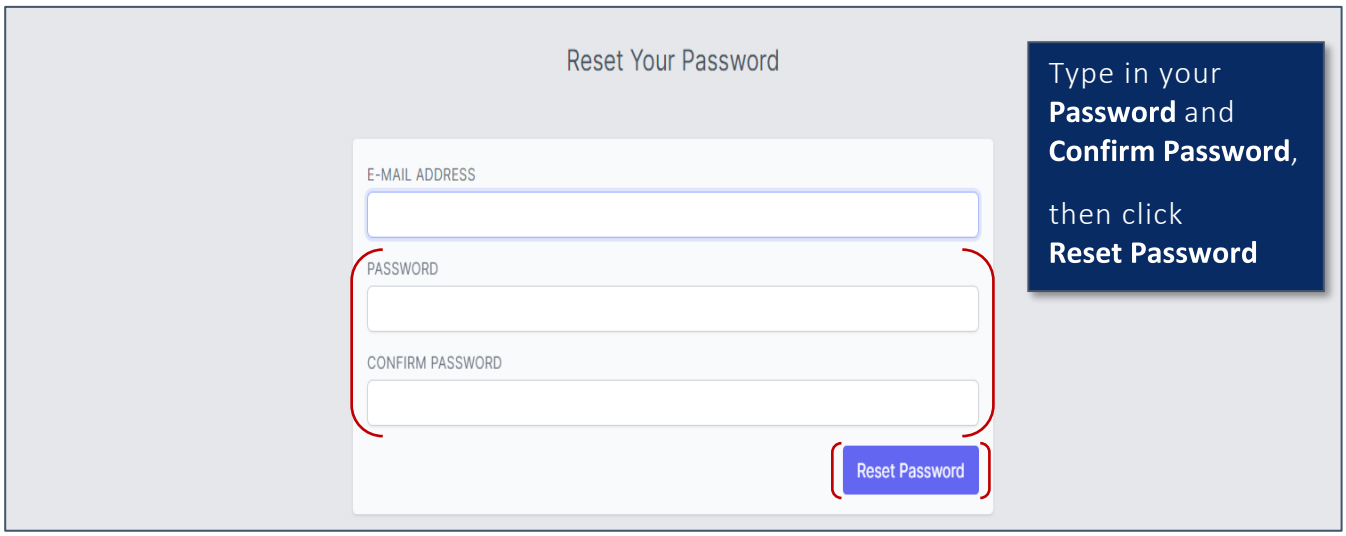




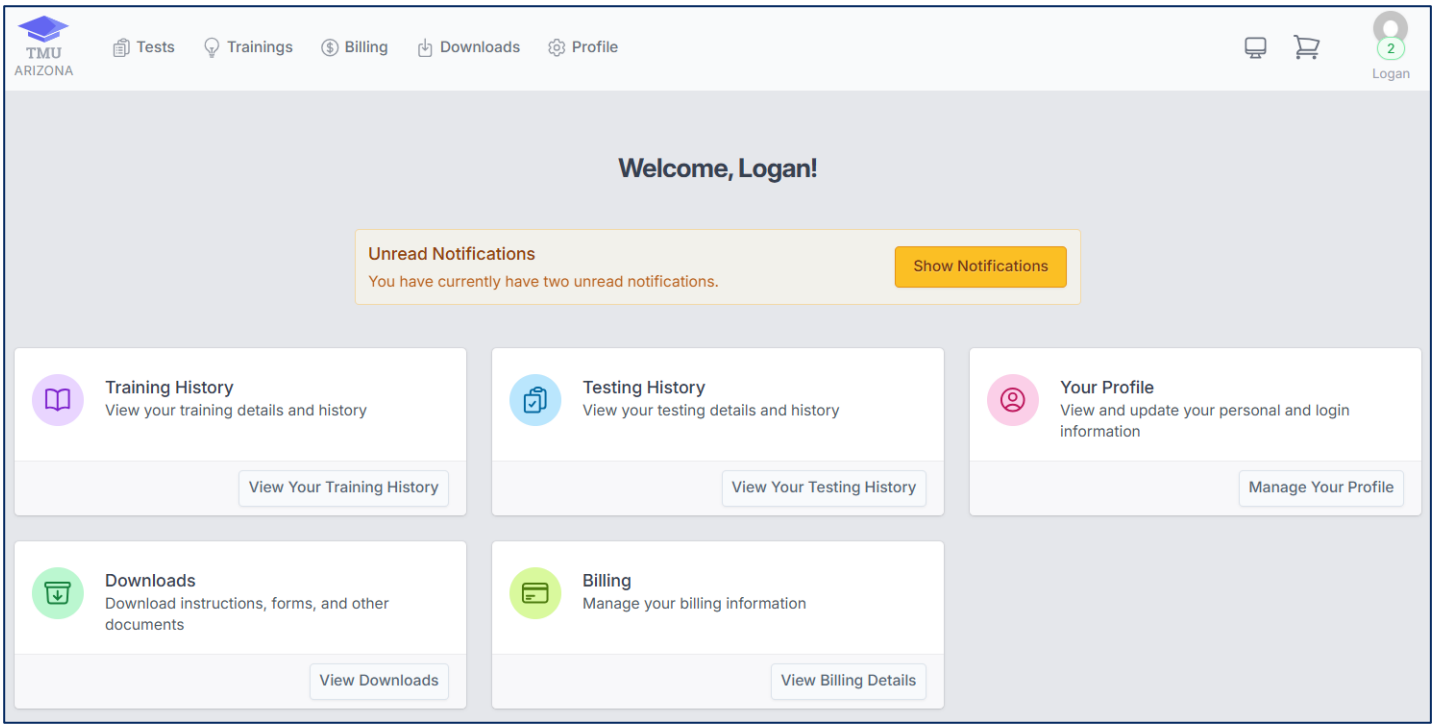
This is what the email will look like (check your junk/spam folder for the email):



Note: If you do not reset your password right away, the link will expire in 60 minutes, and you will need to request a new link after that time.



This is the home screen you will see once you have reset your password:



THE ARIZONA MEDICATION ASSISTANT COMPETENCY EXAM

Payment Information

Exam Description	Price
Knowledge Exam *-or- Knowledge Retake*	**$25.00**
Audio Version of the Knowledge Exam *-or- Audio Knowledge Retake* [$25 + $10 = $35] (The knowledge test questions and answers are read through the computer and listened to through headphones/earbuds while you read along.)	**$35.00**
Skills Test *-or- Skills Retake*	**$70.00**

Schedule an Arizona Medication Assistant Exam

Medication Assistant Training Program Candidates

To schedule an examination date, candidates must have successfully completed an Arizona Board of Nursing (AZBN) approved Medication Assistant (MA) training program or have an AZBN-approved MA Education Waiver. In addition, all Medication Assistant certification exam candidates must be registered with D&SDT-HEADMASTER by their training program, unless the AZBN grants a waiver. Your registration information will be transmitted to the AZBN upon passing both portions of the Medication Assistant competency exam.

Once your completed record is in the D&SDT-HEADMASTER TestMaster Universe© (TMU©) database, you may pay your testing fees and schedule your exam date online at the Arizona TMU© webpage at az.tmutest.com using your email and password (see instructions under **Forgot your Password and Recover your Account**, **Self-Pay of Testing Fees**, and **Schedule/Reschedule a Test Event**). Securely processed Visa or MasterCard credit/debit card information is required when scheduling online. You can schedule and/or reschedule your test event up to the business day before your chosen test date, and receive your test confirmation notification online or on-screen while you are logged in. You may log in with any Internet-connected device. You will be scheduled to take your initial knowledge and skill tests on the same day. To schedule or reschedule your test date, sign in to the Arizona TMU© webpage at az.tmutest.com with your email and password.

If you cannot schedule/reschedule online, please call D&SDT-HEADMASTER at (800) 393-8664 during regular business hours, 6:00AM to 5:00PM, Mountain Time (MT), Monday through Friday, excluding Holidays, for assistance.

Education Waivers for Military, Foreign Graduate, or Nursing Students

For information on MA Education Waivers, visit the AZBN website www.azbn.gov, then click on Applications and Forms and scroll down to “Other Form Downloads”.

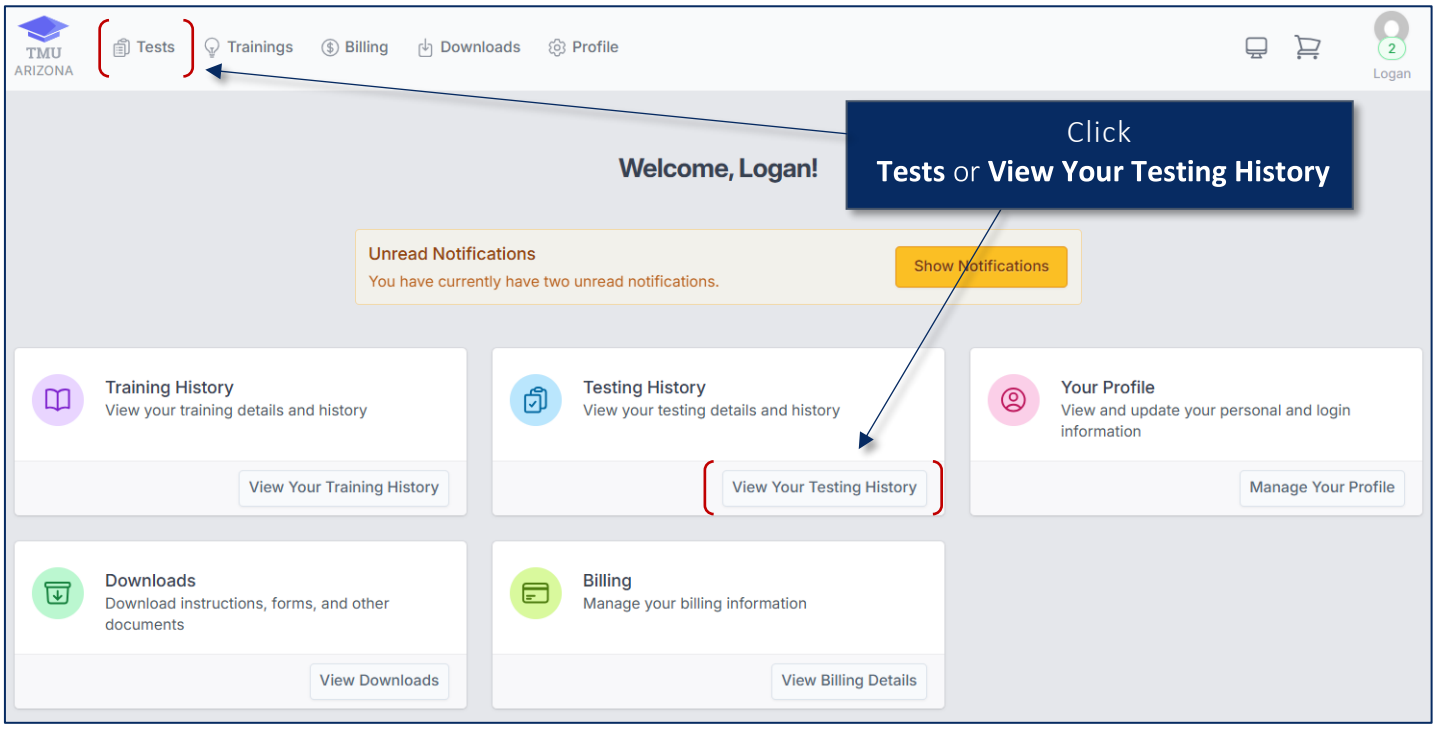
If you have an AZBN-approved Medication Assistant Education Waiver (military, foreign graduate, or nursing student), you will need to complete, upload your approved MA Education Waiver from AZBN, and submit the **Medication Assistant Education Waiver Application** found at **az.tmutest.com/apply/6**.

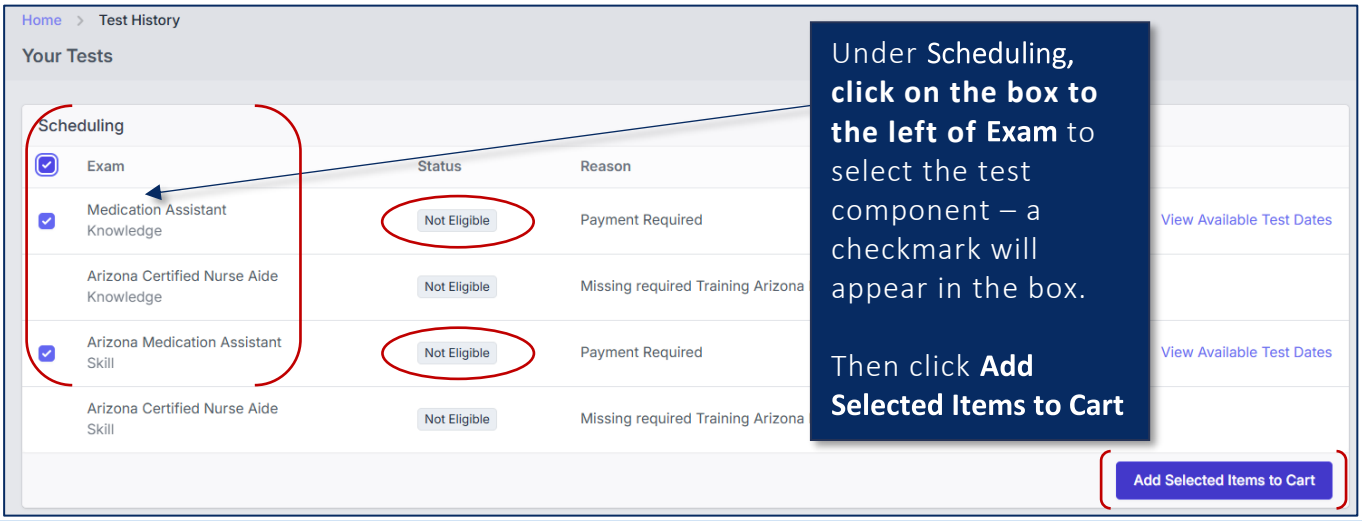
Once D&SDT-HEADMASTER approves your application, you will receive an email and text message with your Username and Temporary Password to sign in to your TMU© account, pay your testing fees, and schedule a test event. Please follow the instructions in the **Complete your TMU© Account**, **Self-Pay of Testing Fees**, and **Schedule/Reschedule a Test Event** sections.

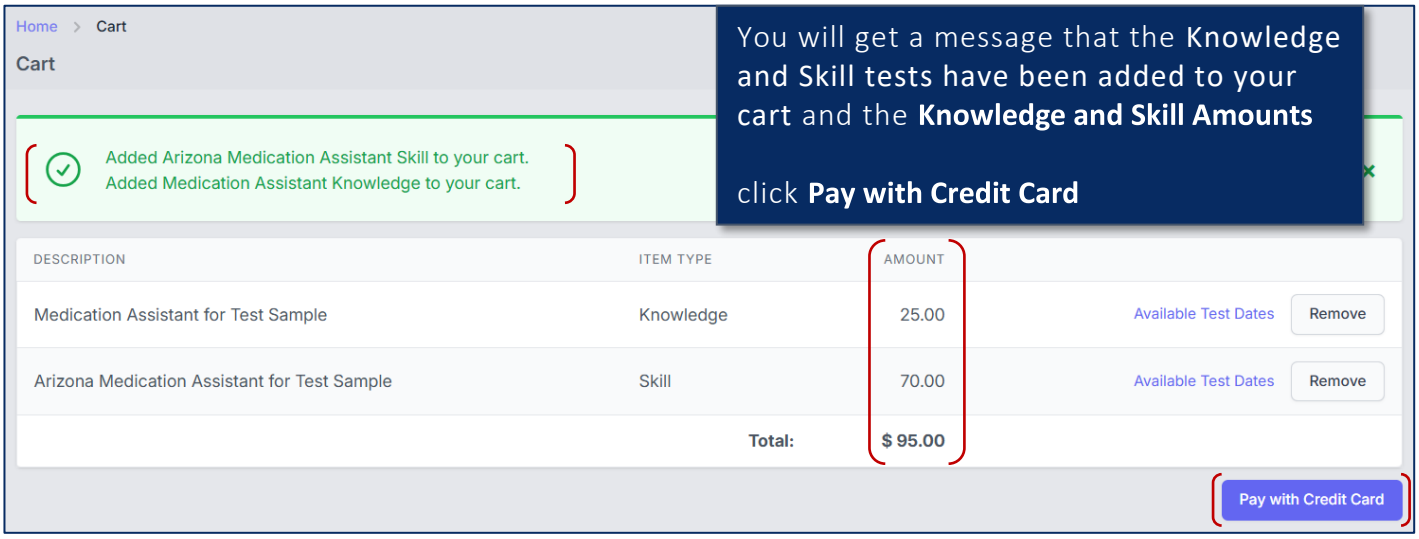
Self-Pay of Testing Fees in TMU©

Testing fees must be paid *before* you can schedule a test date. Once your training program has completed your training record with completion hours and date, you will receive an email and text message notifying you that you are eligible to schedule a test date. Some training programs pre-pay testing fees for their graduating students. Your program/instructor will inform you if this is the case. Before scheduling a test, verify with your instructor whether the training program has already prepaid for it.

Securely processed Visa or MasterCard credit/debit card information is required to pay testing fees online.

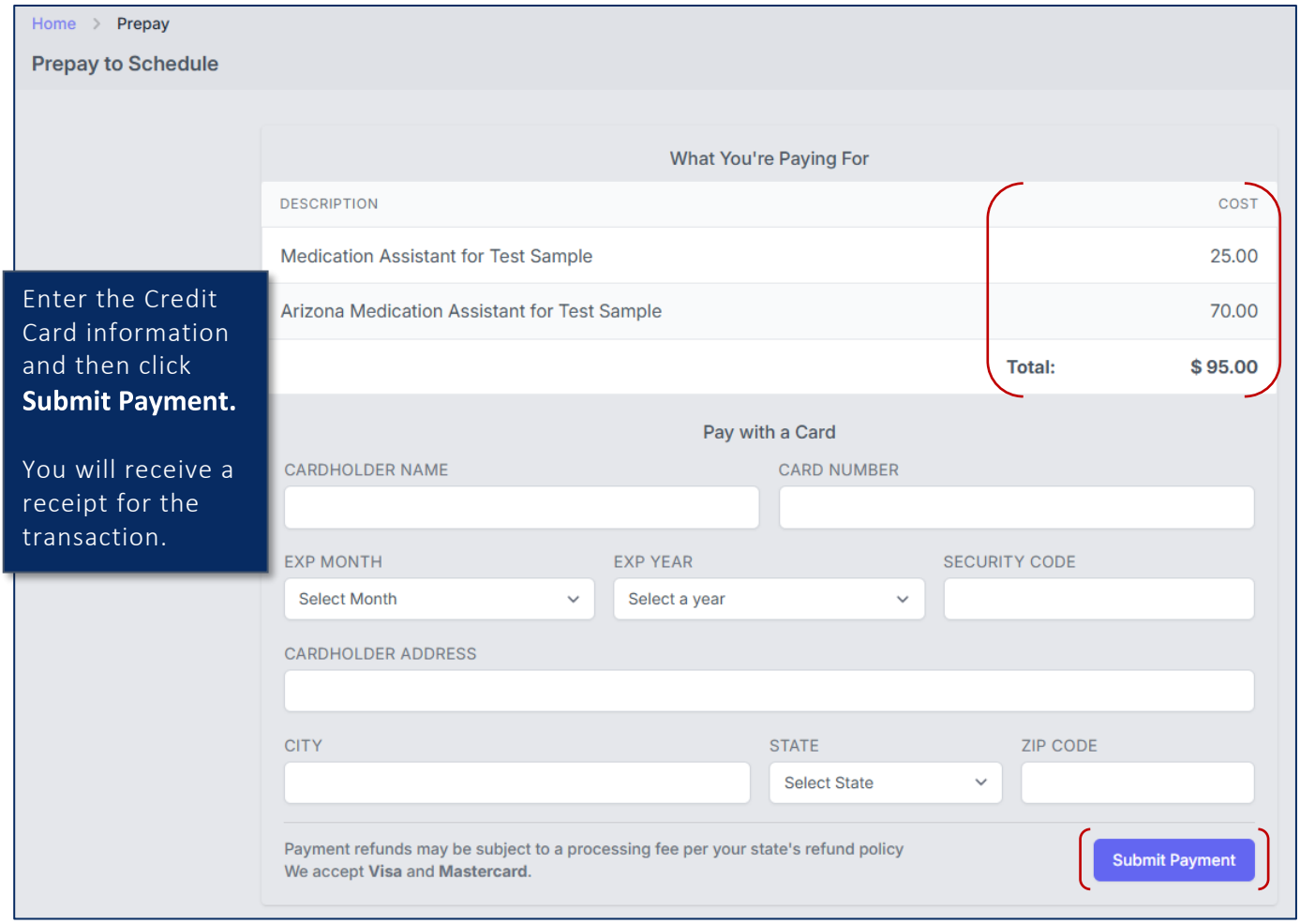






You will get a message that the **Knowledge and Skill tests have been added to your cart** and the **Knowledge and Skill Amounts**

click **Pay with Credit Card**

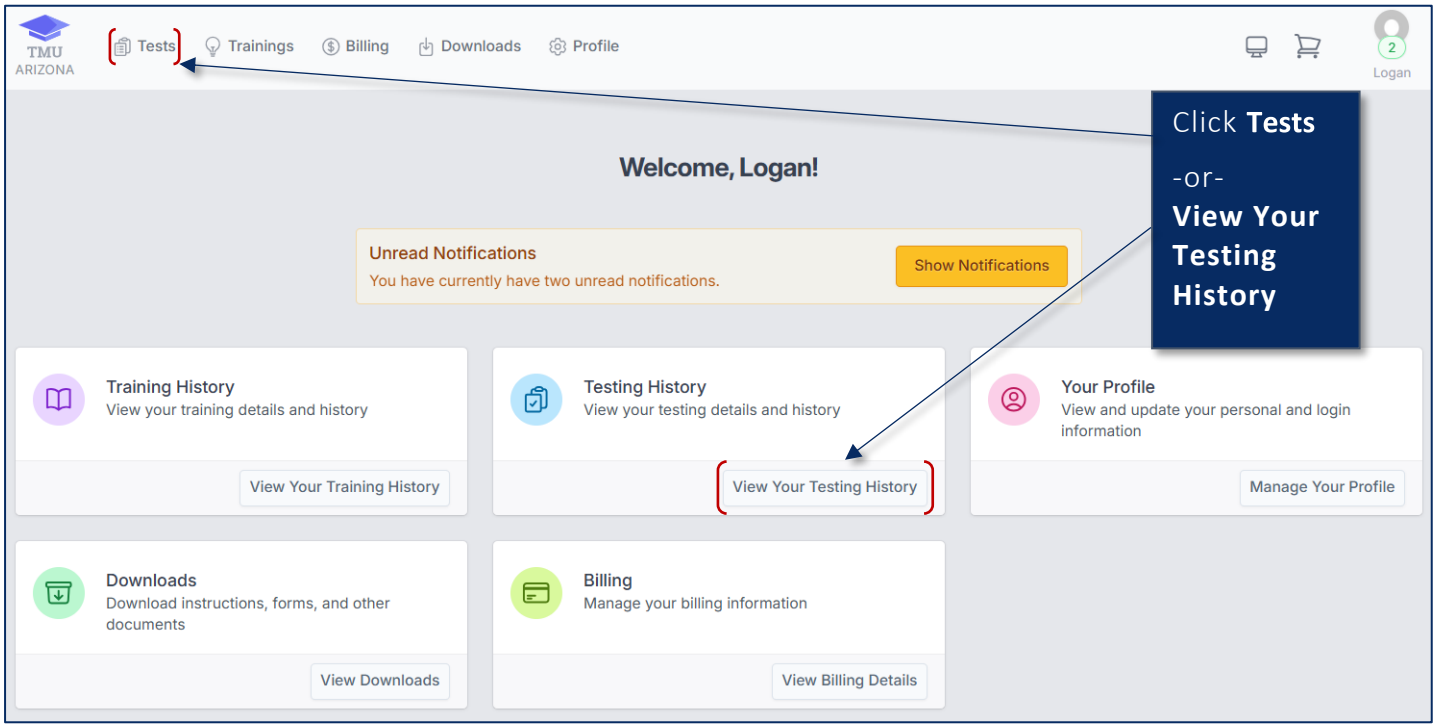


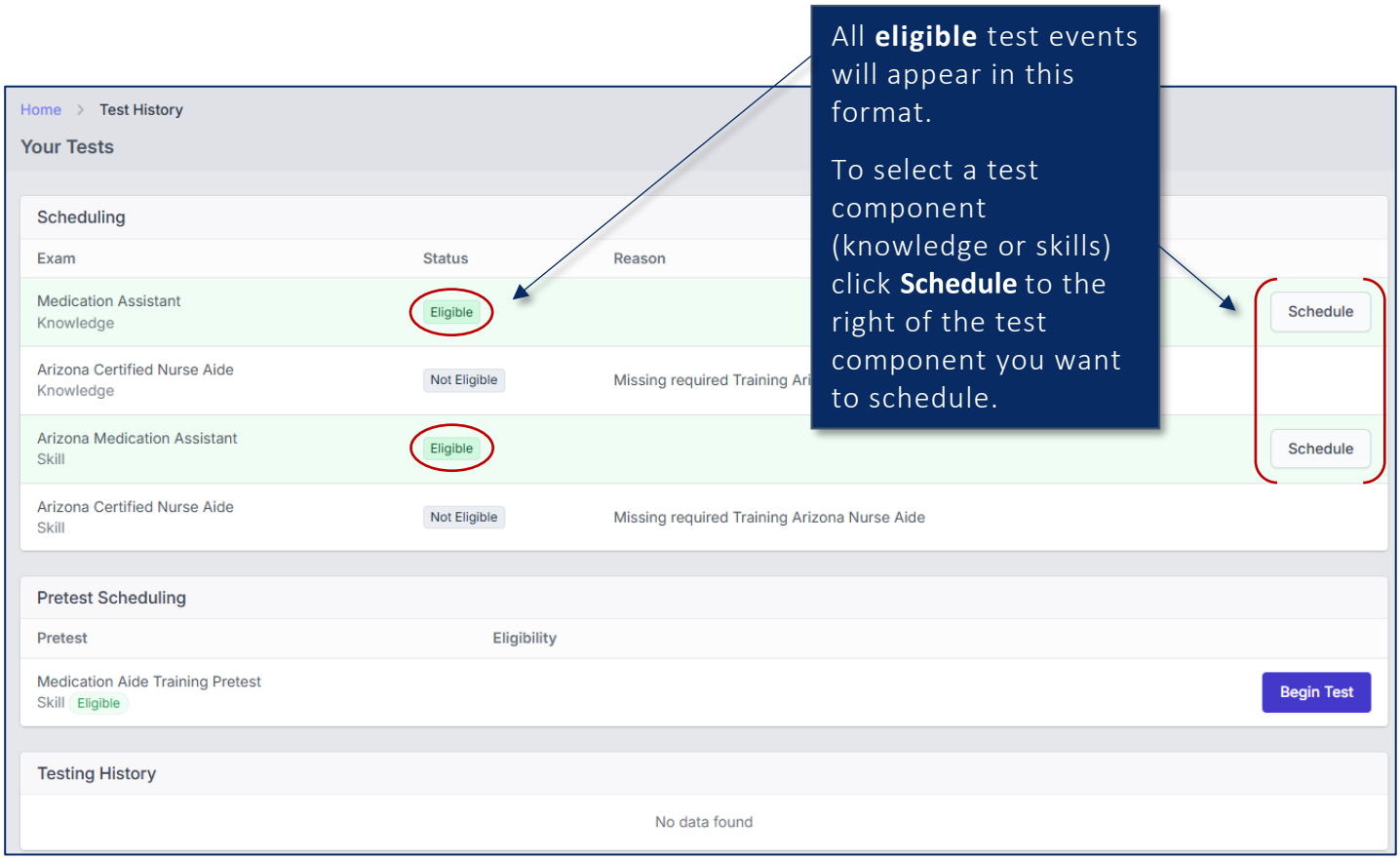
Enter the Credit Card information and then click **Submit Payment.**

You will receive a receipt for the transaction.

Once your testing fees are paid, you will be eligible to choose a test site and date. Follow the instructions in the next section to schedule or reschedule a test event.

Schedule / Reschedule a Test Event





Home > Tests > Find Event

Find Event ARIZONA MEDICATION ASSISTANT

Show Map

This is the next screen that opens showing you available events. Click **Schedule** to the right of the site and date you want to test.

TEST DATE	TEST SITE	SCHEDULING FOR	
12/22/2025 8:00 AM MST	Practice Test Site (TS) Phoenix, AZ	S Arizona Medication Assistant K Medication Assistant	Schedule

az.tmutest.com says

Schedule into Event #8582 on 12/22/2025 for Medication Assistant Knowledge, Arizona Medication Assistant Skill. Are you sure?

OK Cancel

To confirm this is the site and date you want to schedule, click **OK**

Home > Test History

Your Tests

Student Sample, Test scheduled into Skill for Arizona Medication Assistant.
Student Sample, Test scheduled into Knowledge for Medication Assistant.

This screen confirms you are scheduled for a test date to take your knowledge and/or skills exam.

Your status shows **Scheduled**, and a note at the top of your screen also shows you are scheduled.

Under **Actions**, click **Test Confirmation Page** to see your test confirmation with important reminders for testing.

Scheduling

Exam	Status	Reason
Medication Assistant Knowledge	Not Eligible	Already Scheduled
Arizona Certified Nurse Aide Knowledge	Not Eligible	Missing required Training
Arizona Medication Assistant Skill	Not Eligible	Already Scheduled
Arizona Certified Nurse Aide Skill	Not Eligible	Missing required Training Arizona Nurse Aide

Pretest Scheduling

Pretest	Eligibility	
Medication Aide Training Pretest Skill	Eligible	Begin Test

Testing History

Test Date	Exam	Test Site	Status	
12/22/2025 8:00 AM MST	Medication Assistant Knowledge	Practice Test Site (TS) Phoenix, AZ	Scheduled	Actions
12/22/2025 8:00 AM MST	Arizona Medication Assistant Skill	Practice Test Site (TS) Phoenix, AZ	Scheduled	Actions

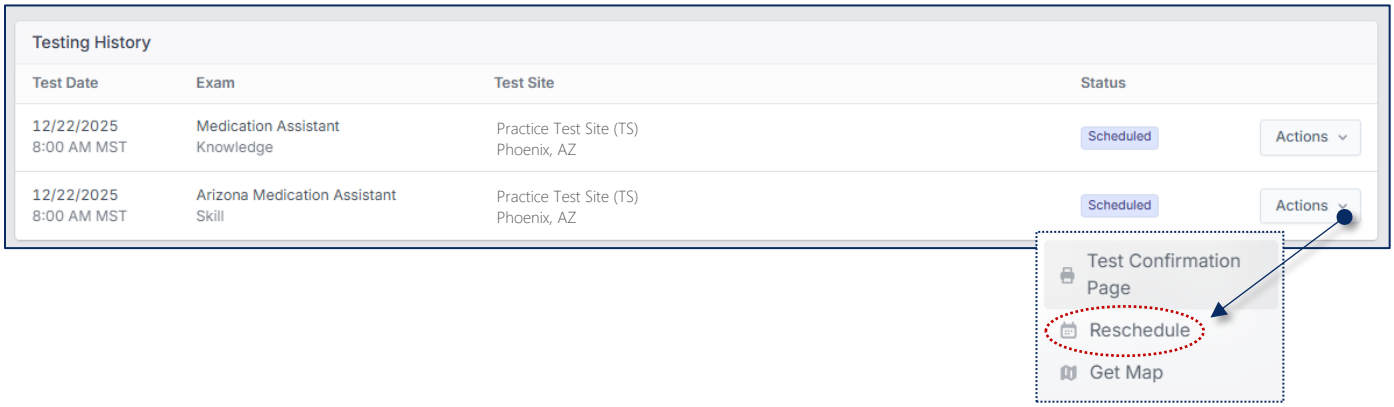
- Test Confirmation Page
- Reschedule
- Get Map

See the test confirmation letter in the **Test Confirmation Letter** section.

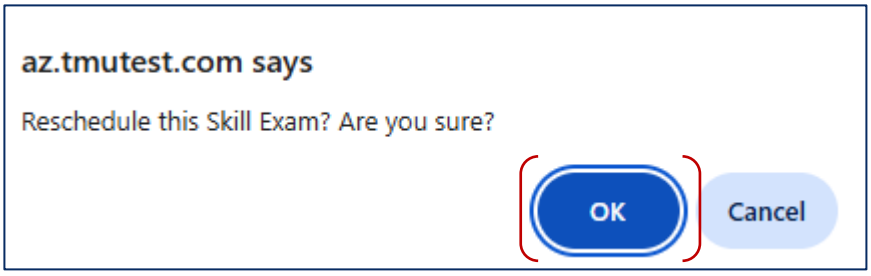
RESCHEDULE A TEST EVENT SCREENSHOTS

You may reschedule an exam date online in your TMU© account at **az.tmutest.com** up until one (1) business day, excluding Saturdays, Sundays, and Holidays, before your scheduled exam date.

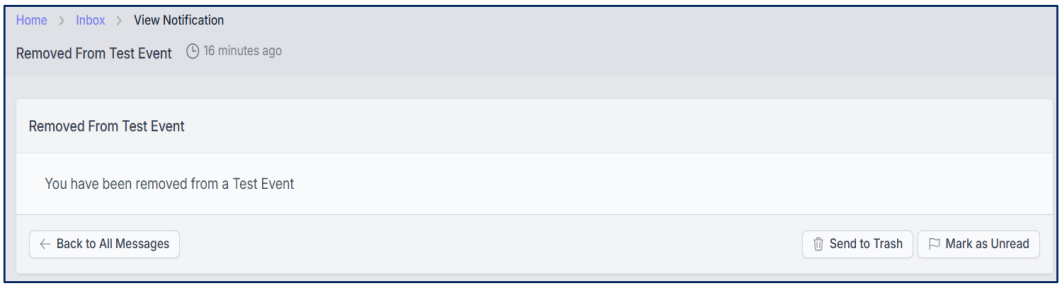
If you need to reschedule your test date, click **Reschedule** under **Actions** to select a new date.



Click **OK** to confirm you wish to 'RESCHEDULE' from the event. You will then be able to select another available test date.



The following message will be in your notifications.



TEST CONFIRMATION LETTER

Your test confirmation letter will provide you with important information regarding where you are scheduled to test (date, time, and address). It can be accessed at any time.

The body of the test confirmation letter will refer you to read the Arizona medication assistant candidate handbook, as it will give you specific instructions on what time to arrive, ID requirements, dress code, etc.

Note: Failure to read the candidate handbook could result in a no-show status for your test event if you do not adhere to the testing policies, etc.

It is important you read this letter!

Test Confirmation Letter

Scheduled Test Confirmation - Arizona Arizona Medication Assistant

Get Map | Print Page

Test Date:	12/22/2025
Test Time:	8:00 AM MST
Test Exam:	Skill - Arizona Medication Assistant
Test Site:	Practice Test Site Test Site Address Phoenix, AZ

Click **Print Page** to print your confirmation letter.

Click **Get Map** to get Google Maps directions to the test site.

Sample Candidate
Best Student Address
Phoenix, AZ

TESTING BEGINS AT **8:00 AM MST** ON **12/22/2025**:

- You **MUST** be at your confirmed test site waiting area/room **20 minutes in advance** of your scheduled exam start time, **8:00 AM MST**, to check in.
  - *Testing **begins** promptly at the start time noted on this test confirmation.*
- If you are unable to access your account, go to https://az.tmutest.com, click on 'Forgot Password', enter your Email, then click on 'Send Reset Password Link' and follow the directions. If you need further assistance, please call D&SDT-Headmaster at 1.800.393.8664.

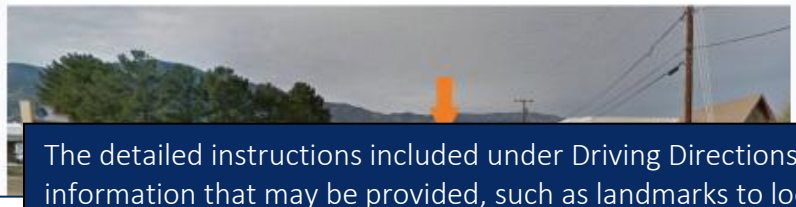
NURSE AIDE CANDIDATES: Refer to the **Nurse Aide Competency Exam** section of the **Arizona Nurse Aide Candidate Handbook** regarding requirements for testing and what to expect on your test day. Failure to do so may result in you being turned away from testing and forfeiting your testing fees. Review this specific information prior to your testing date.

Click to open the Nurse Aide Candidate Handbook

MEDICATION ASSISTANT CANDIDATES: Refer to the **Medication Assistant Competency Exam** section of the **Arizona Medication Assistant Candidate Handbook** regarding requirements for testing and what to expect on your test day. Failure to do so may result in you being turned away from testing and forfeiting your testing fees. Review this specific information before your testing date.

Click to open the Medication Assistant Candidate Handbook

Driving Directions
Location of testing site: The [redacted] The test site is next to the [redacted] [redacted]allels with the church. Testing is held in the white building with blue doors.



The detailed instructions included under Driving Directions are shown as an example. Other information that may be provided, such as landmarks to look for, parking, building numbers, entrances, floor numbers, etc., will also be included under driving directions.
A map of the facility/campus may also be included.

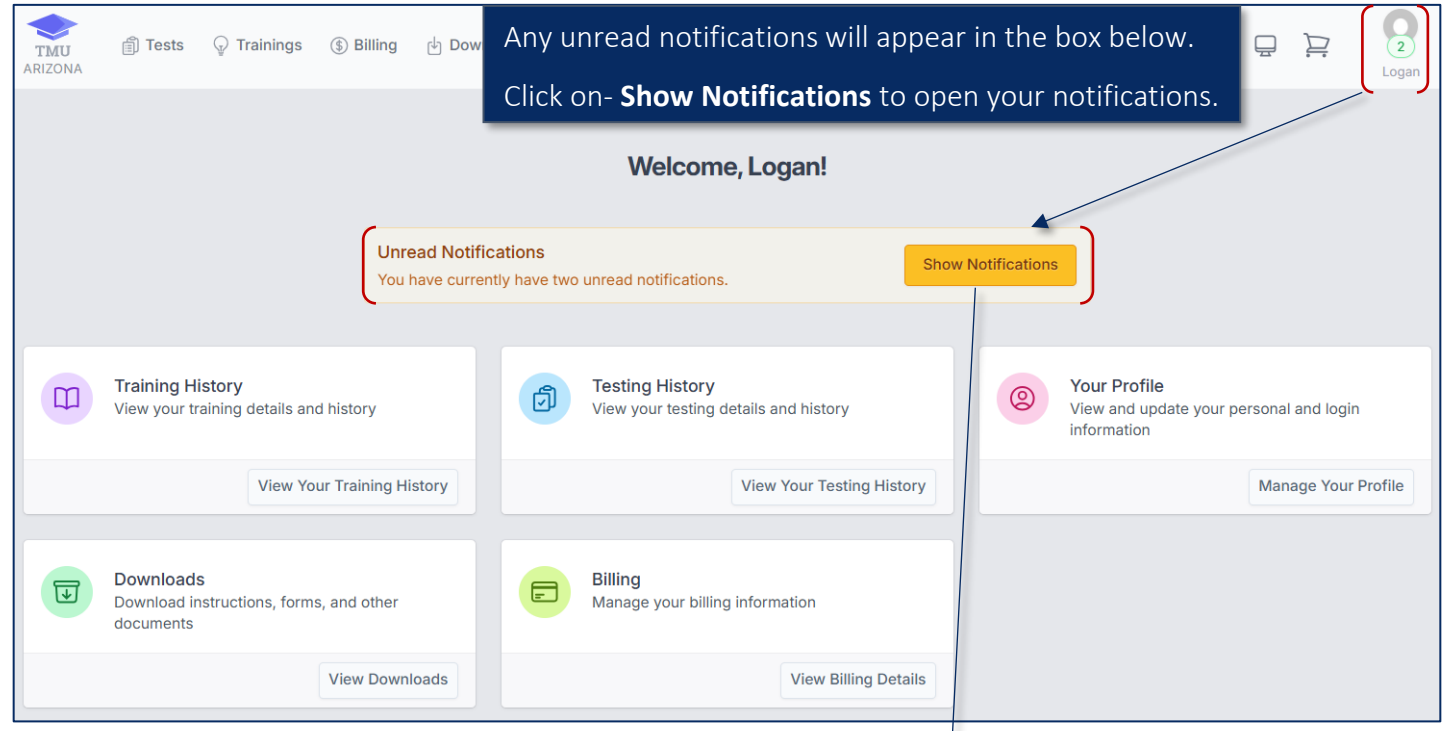
Note: Candidates who self-schedule online or are scheduled by their training programs will receive their test confirmation at the time they are scheduled.

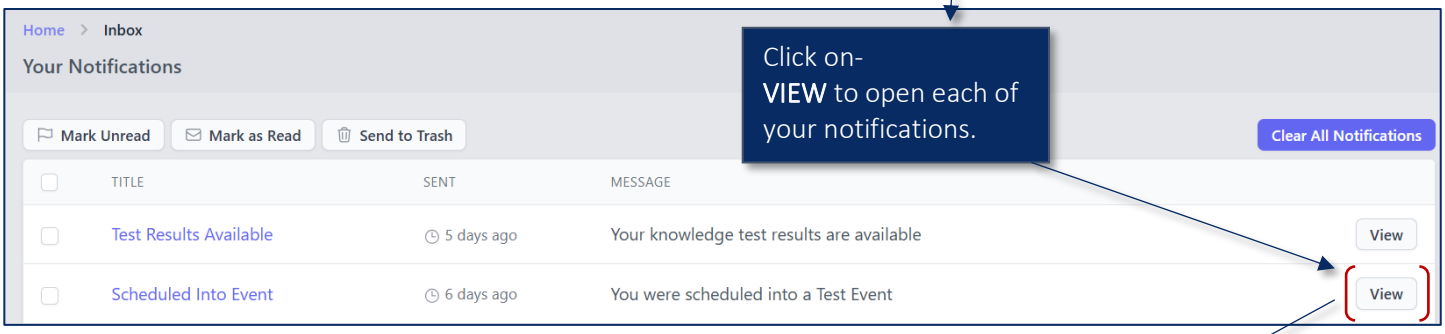
D&SDT-HEADMASTER does not send postal mail test confirmation letters to candidates.

View your Notifications in TMU©

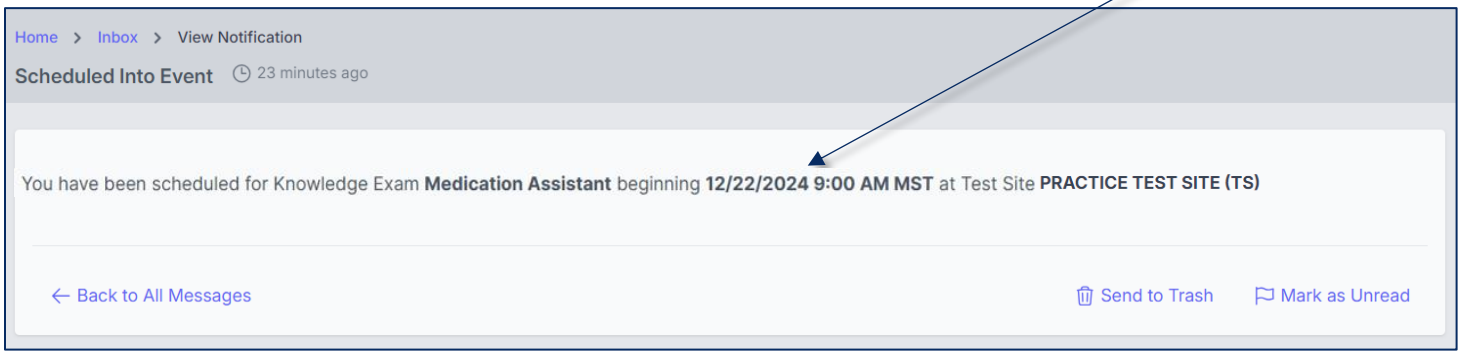
Remember to check your 'notifications' in your TMU© account for important notices regarding your selected test events and other information.

See the screenshots below.





Notification example when scheduled into a test event:



Time Frame for Testing from Training Program Completion

You will be scheduled to take your initial knowledge and skill tests on the same day. You must schedule a test **within one year of your training program's completion date.** After one year, if you have not tested and/or not passed, you must complete another AZBN-approved Medication Assistant training program to be eligible to schedule testing.

Many training programs host and pre-schedule in-facility test dates for their graduating students. Your program/instructor will inform you if this is the case. Before scheduling a test, verify with your instructor if the training program has already scheduled and/or prepaid for your test. Regional test seats are open to all candidates. Regional test dates are posted on the Arizona TMU© site.

If you have any questions regarding your test scheduling, call D&SDT-HEADMASTER at (800) 393-8664 during regular business hours, 6:00AM to 5:00PM MT, Monday through Friday, excluding holidays.

Test Day

Exam Check-In

You must arrive at your confirmed test site's waiting area/room *20 minutes before* your scheduled exam start time.

- Testing **begins** promptly at the start time noted on your test confirmation.
- You need to ensure you are at the event in the waiting area/room ***20 minutes before the start time*** to allow time to get checked in with the RN Test Observer.
  - *For example*, if your test starts at 8:00AM, you **must be at the test site waiting area/room for check-in by 7:40AM**.

Note: If you arrive late, you will not be permitted to take the test.

Testing Attire

The required testing attire applies to both the knowledge and skills exams.

- You must be in full clinical attire:
  - This consists of a scrub top and scrub bottoms.
  - Closed-toed shoes.
  - Scrubs and shoes can be any color/design.
- You may bring a standard watch with a second hand.
- Smartwatches, smart glasses, fitness monitors, or any other Bluetooth-connected devices are not allowed.
- Long hair must be pulled back.

NOTE: You must be dressed in professional nursing attire at the discretion of the RN Test Observer.
You will not be admitted for testing if you are not wearing professional nursing (scrubs) attire and closed-toed shoes. You will be considered a no-show status. You will forfeit your testing fees and must pay for another exam date.

IDENTIFICATION

You must bring a **U.S. GOVERNMENT-ISSUED, PHOTO-BEARING FORM OF IDENTIFICATION**.

Only original forms of identification are allowed. Photocopies, faxes, emails, screenshots, and electronic or digitally stored identification documents (e.g., Apple Wallet or Google Wallet) **will not be accepted**.

Examples of the forms of U.S. government-issued, acceptable photo IDs are:

- **State-issued Driver's License** *(Arizona Driver's License must be issued after January 1, 1997)*
  - *You may use the letter issued by the Department of Motor Vehicles (DMV) that you receive when you apply for or renew your driver's license while waiting to receive your new license.*
- **State-issued Identification Card** *(Arizona Driver's License must be issued after January 1, 1997)*
- **U.S. Passport** (Foreign Passports and Passport Cards *are not* acceptable)
  - *Exception: A foreign passport with a U.S. visa within the passport is acceptable.*
- **Permanent Resident Card** (Green Card or Alien Registration Card) / Employment-Work Authorization Card issued by the U.S. Citizenship and Immigration Services (USCIS)
  - *The new redesigned permanent resident card ISSUED from January 30, 2023, to the present day is acceptable. The old card, issued before January 1, 2023, is acceptable provided it has not expired.*
- **Tribal Identification Card** *(must contain a photo and be issued by a federally recognized Tribal Nation/Indian Tribe)*

The **FIRST** and **LAST** names **listed on your identification presented** to the RN Test Observer during check-in at your test event **MUST EXACTLY MATCH** the FIRST and LAST names entered in your TMU© account. You may call D&SDT-HEADMASTER at (800) 393-8664 during regular business hours, 6:00AM to 5:00PM MT, Monday through Friday, excluding holidays, to confirm that your name of record matches your U.S. government-issued photo-bearing form of identification, or sign in to your TMU© account to check or change your demographic information. See more information under **Demographic Updates / Changes / Corrections**.

Note:

- **You will not be admitted for testing if you do not bring proper/valid identification**.
  - Check to ensure that the FIRST and LAST printed names on your identification card match the current name on record in your TMU© account.
- A driver's license or state-issued ID card with a hole punched in it is NOT VALID and will not be accepted as an acceptable form of ID.
- A school ID ***is not*** an acceptable form of ID.
- In cases where names do not match, your ID is not proper/valid, or it has a hole punched in it, this is considered a no-show status, and you will have to reschedule and pay for another test and date.

You will be required to show your ID again when you enter the knowledge test room and the skills lab. Please keep your ID with you throughout the exam.

DEMOGRAPHIC UPDATES / CHANGES / CORRECTIONS

Name changes (marriage/divorce, etc.), date-of-birth changes, Social Security number corrections, etc., must be verified with appropriate documentation. Please complete the **DEMOGRAPHIC CHANGE/CORRECTION REQUEST FORM** and upload your demographic change/correction documentation. The form is under 'APPLICATIONS' on the Arizona TMU© main web page (before you log in to your account), or click on this link: **https://az.tmutest.com/apply/7**.

Instructions for the Knowledge and Skill Exams

Test instructions for the knowledge and skill exams will be provided in written format in the waiting area when you check in for your test.

These instructions outline the process and what to expect during your exams. Please read the instructions ***before*** entering the knowledge test room or skill demonstration lab. The instructions will be left in the waiting area during testing for your reference throughout your time at the test site. The RN Observer or Knowledge Test Proctor will ask questions about the instructions you read when entering the knowledge test room and skill test lab.

The **Knowledge and Skill Exam Instructions** are available under the **'DOWNLOADS'** tab in your TMU© account. For instructions, refer to the **Access the Candidate Handbook and Testing Instructions** section of this handbook.

Testing Policies

The following policies are observed at each test site:

- Communication between the candidate and the testing team must be in English.
- Make sure you have signed in to your TMU© account at **az.tmutest.com** well before your test date to update your password and complete your demographic information. Refer to this handbook's **Complete Your TMU© Account** section for instructions and information.
    - **If you have not signed in and completed/updated your TMU© account when you arrive for your test, you may not be admitted to the exam, and any exam fees paid *will NOT be refunded*.**
- Testing begins promptly at the start time noted on your confirmation. You **must** be in the test site waiting area/room **to check in 20 minutes before your scheduled start time**. If your test start time is 8:00AM, you must be in the test site waiting area/room **by 7:40AM**. If you arrive late to your confirmed exam, you will not be admitted. Any exam fees paid *will NOT be refunded*.
- If you do not bring a valid and appropriate U.S. government-issued photo-bearing form of identification, you will not be admitted to the exam, and any exam fees paid *will NOT be refunded*.
    - If the **FIRST** and **LAST** printed names listed on your ID presented to the RN Test Observer during check-in at your test event **DO NOT MATCH** the FIRST and LAST names that were entered in the Arizona TMU© database, you will not be admitted to the exam, and any exam fees paid *will NOT be refunded*.
- If you do not wear professional nursing clinical attire and closed-toed shoes and conform to all testing policies for both the knowledge (including retakes) and skills portion of the exam, you will not be admitted to the exam, and any exam fees paid *will NOT be refunded*.
- If you do not show up for your exam day, or are considered a NO-SHOW STATUS *(see details in this handbook's* **No-Show Status** *section)* for any reason, any test fees paid will NOT be refunded. You must repay your testing fees online in your TMU© account using your Email or Username and Password to schedule another exam date.
    - If your exam is paid for by a U.S. government-funded facility, you (the candidate) will be charged a NO SHOW fee, which must be paid before you can schedule a new test date.
- **ELECTRONIC DEVICES AND PERSONAL ITEMS:** Cell phones, smartwatches, fitness monitors, electronic recording devices, Bluetooth-connected devices (including smart glasses), and personal items (such as water bottles, purses, briefcases, large bags, study materials, extra books, or papers) are not permitted to be on or near you in either testing room. The testing team will inform you of the designated area for placing your personal items and electronic devices, and you will collect them when you complete your test(s).

  - All electronic devices must be **turned off**, including smartwatches, fitness monitors, and Bluetooth-connected devices (which include smart glasses), which must be removed from your wrist or body. ***If the RN Test Observer or Knowledge Test Proctor has any inclination that you are wearing Bluetooth-connected smart glasses, you will be asked to show the glasses to them for examination.***

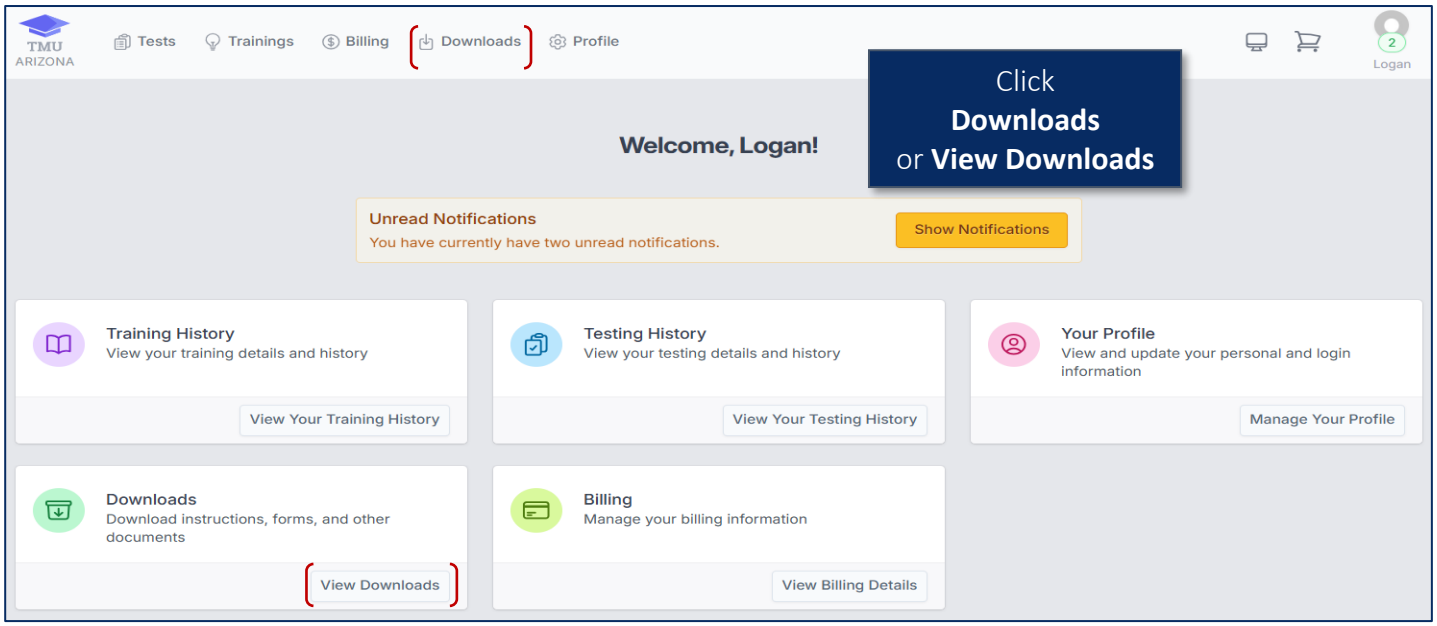
- Anyone caught using any electronic recording device during either component (knowledge or skills) of the exam will be dismissed from the exam and testing room(s), your test will be scored as a failed attempt, you will forfeit all testing fees, and you will be reported to the Arizona State Board of Nursing (AZBN). You may, however, use personal devices in the waiting area during your free time. Please refer to the **Security** section of this handbook for detailed information.
- You are encouraged to bring a jacket, snack, drink, or study material while waiting to test.
- **LANGUAGE TRANSLATION DICTIONARIES:** Per the Arizona State Board of Nursing, translation dictionaries (either paper format or electronic), translating devices, or non-approved language translators **are not allowed.**
- **SCRATCH PAPER AND CALCULATORS:** ***Are not allowed.***
- You may not remove any notes or other materials from the testing room.
- You are not permitted to eat, drink, or smoke (e-cigarettes or vape) during the exam.
- You are not allowed to leave the testing room (knowledge test room or skills lab) once the exam has begun ***for any reason***. If you do leave during your test event, you will not be allowed back into the testing room to finish your exam.
- Behavioral misconduct or unlawful acts by test candidates are strictly prohibited at any stage of the competency evaluation. Such actions may result in dismissal from the test site, denial of testing privileges, and reporting to your training program and the Arizona State Board of Nursing (AZBN). Please refer to the **Security** section of this handbook for detailed information.
- Test sites, RN Test Observers, Knowledge Test Proctors, and Actors are not responsible for the candidate's personal belongings at the test site.
- No visitors, guests, pets (including companion and emotional support animals), or children are allowed.
  - Service animals (a dog that has been individually trained to perform specific tasks for people with disabilities) are allowed. We encourage you to contact D&SDT-HEADMASTER at (800) 393-8664 or via email at arizona@hdmaster.com once you have scheduled a test date, so that we can notify the testing team.
  - If you attend your event with guests, pets (including companion or emotional support animals), or children of any age, you will not be permitted to test and will forfeit all testing fees paid.
- **You may not test if you are ill (sick).** Call D&SDT-HEADMASTER at (800) 393-8664 immediately to reschedule *(see the **note** below)*.
  - **You may not test** if you have any physical limitation (excluding pre-arranged ADAs) that would prevent you from performing your duties as a medication assistant. (Examples: cast, arm/leg braces, crutches, etc.) Call D&SDT-HEADMASTER at (800) 393-8664 immediately to reschedule if you are on doctor's orders *(see the **note** below)*.

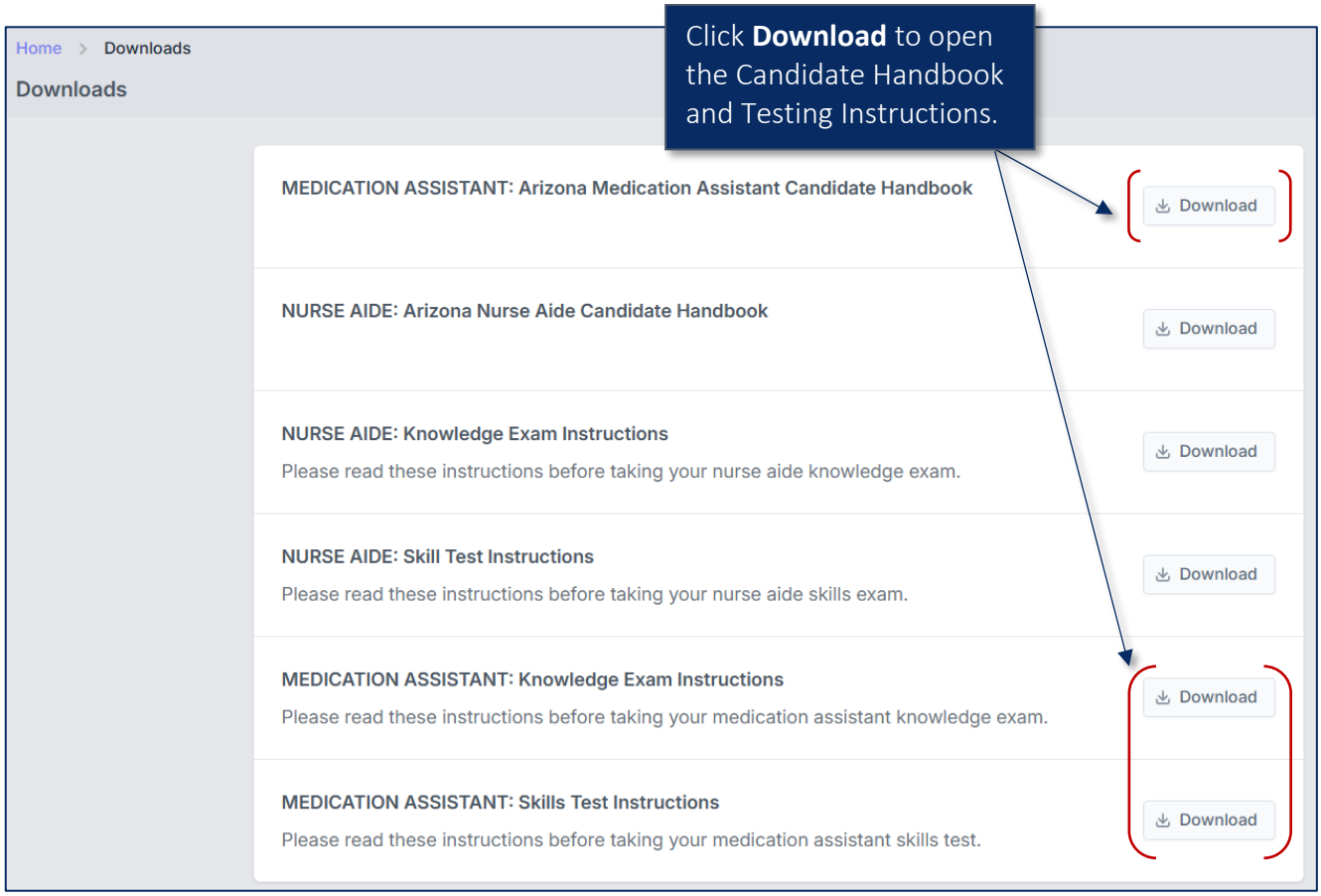
    NOTE: Please refer to the handbook's **Reschedule Policy** and **No-Show Exceptions** sections.

    → *Reschedules will not be granted less than one (1) full business day before a scheduled test date.*
- **Please review this Arizona Medication Assistant Candidate Handbook before your test day for any testing and/or policy updates.**

- The Candidate Handbook and testing instructions can also be accessed within your TMU© account under your 'DOWNLOADS' tab.

Access the Candidate Handbook and Testing Instructions





Security

Behavioral misconduct or unlawful acts by test candidates are strictly prohibited at any stage of the competency evaluation. Such actions may result in dismissal from the test site, denial of testing privileges, and reporting to your training program and the Arizona State Board of Nursing (AZBN).

You will be asked to leave the test site, your test will be stopped and scored as a failed attempt, and you will forfeit any testing fees if you, which may include, but are not limited to, the following circumstances:

- Are caught cheating
- Refuse to follow directions
- Use abusive language or threaten others
- Disrupt the examination environment
- Are visibly impaired
- Engage in unprofessional or aggressive behavior
- Attempt to remove test material, take notes, or copy information
- Give or receive unauthorized help during testing, including using electronic devices (e.g., cell phones, smartwatches) or navigating to other browsers during your exam

A report of your behavior will be sent to your training program and AZBN, and you are subject to legal prosecution to the fullest extent of the law. You may not be eligible to retake the test for at least 6 months and may require AZBN approval.

Reschedule Policy

All candidates may reschedule online at no cost at **az.tmutest.com** up to one (1) business day before the scheduled test date, excluding Saturdays, Sundays, and holidays.

If you must reschedule your exam date, please do so as soon as possible. You may reschedule an exam date online by signing in to your TMU© account at **az.tmutest.com**. (See instructions under **Schedule / Reschedule a Test Event**).

- **Example:** If you are scheduled to take your exam on a Saturday, Sunday, or Monday, you would need to reschedule by the close of business on the Thursday before your scheduled exam. D&SDT-HEADMASTER is open 6:00AM to 5:00PM MT, Monday through Friday, excluding holidays.
- Please see the **Reschedule a Test Event Screenshots** for a visual of rescheduling an exam date.

The scheduled test date is on a:	Reschedule before 5:00PM MT the previous:
Monday	The previous Thursday
Tuesday	The previous Friday
Wednesday	The previous Monday
Thursday	The previous Tuesday
Friday	The previous Wednesday
Saturday	The previous Thursday
Sunday	The previous Thursday

Note: Reschedules will not be granted fewer than one full business day before the scheduled test date.

Refund of Testing Fees Paid

Requesting a refund of testing fees paid is different than rescheduling a test date. Requesting a refund indicates you are not interested in taking the Arizona Medication Assistant Certification Exam.

Scheduled in a Test Event

1) If you are scheduled for a test event, you can request a refund of the testing fees paid by filling out and submitting the **CANDIDATE-Refund Request Fillable Form** on D&SDT-HEADMASTER's main web page at www.hdmaster.com at least one (1) full business day before your scheduled test event (excluding Saturdays, Sundays, and holidays). No phone calls will be accepted.
   - *Example:* If you are scheduled to take your exam on a Saturday, Sunday, or Monday, you would need to request a refund by the close of business on the Thursday before your scheduled exam. D&SDT-HEADMASTER is open until 5:00PM MT, Monday through Friday, excluding holidays.
2) Refund requests made in the required time frame qualify for a full refund of any testing fees paid minus a $35 refund processing fee.
3) Refund requests must be made within thirty (30) days of payment of the original testing fees with HEADMASTER. Requests for refunds submitted more than 30 days after the original payment of testing fees with HEADMASTER will not be approved.

Not Scheduled in a Test Event

1) Refund requests must be made within thirty (30) days of the original payment of testing fees with HEADMASTER. Requests for refunds submitted more than 30 days after the original payment of testing fees with HEADMASTER will not be approved.
2) To request a refund for testing fees paid, you must fill out and submit the **CANDIDATE-Refund Request Fillable Form** on D&SDT-HEADMASTER's main web page at www.hdmaster.com. No phone calls will be accepted.
3) Refund requests made in the required time frame qualify for a full refund of any testing fees paid minus a $35 refund processing fee.

Unforeseen Circumstances Policy

If an exam date is canceled due to weather or other unforeseen circumstances, D&SDT-HEADMASTER staff will make every effort to contact you using the contact information (phone number/email) we have on file in your TMU© account to reschedule you for no charge to a mutually agreed-upon new test date.

Therefore, you must keep your contact information up to date in case we need to contact you *(*see examples below for reasons we may not be able to contact you that you are responsible for).*

If D&SDT-HEADMASTER is unable to reach you via phone call or email with the information in your TMU© account (*see examples below) due to an unforeseen circumstance for a test event you are scheduled for, you will be removed from the test event, and D&SDT-HEADMASTER will not reschedule you until we hear back from you.

NOTE: The *examples listed below are your responsibility to check and/or keep updated.

- If D&SDT-HEADMASTER leaves you a message or emails you at the phone number or email in your TMU© account and:
  - you do not call us back in a timely manner
  - your phone number is disconnected/your voice mailbox is full
  - you do not check your messages in a timely manner
  - you do not check your email or reply to our email in a timely manner
  - your email is invalid, or you are unable to access your email for any reason

See more information under **No-Show Exceptions**.

No-Show Status

If you are scheduled for your exam and do not show up without notifying D&SDT-HEADMASTER at least one (1) full business day before your scheduled testing event, ***excluding*** Saturdays, Sundays, and holidays, OR if you are turned away for lack of proper identification, not arriving on time to the test site or any other reason to deem you ineligible to test, you will be considered a **NO-SHOW status.** You will forfeit all fees paid and must sign in to your TMU© account to repay or submit a new testing fee to schedule a new test event.

These fees partially offset D&SDT-HEADMASTER's costs incurred for services requested and the resulting work that is performed. If a reschedule or refund request is not made or received before the one (1) full business day preceding a scheduled test event, excluding Saturdays, Sundays, and holidays (see examples under Reschedule a Test Event and Refund of Testing Fees Paid), a NO-SHOW status will exist. You will forfeit your testing fees and must repay the full testing fee to secure a new test event.

No-Show Exceptions

Exceptions to the no-show status exist; if you are a no-show for any test component for any of the following reasons, a free reschedule will be authorized to the remitter of record, provided **the required documentation is received within the appropriate time frames outlined below:**

⇒ Complete, upload the required documentation, and submit (within the required time frames outlined below) the **No Show Exception Form** available on the Arizona TMU© main page under 'APPLICATIONS', or click this link:

https://az.tmutest.com/apply/12

- **Car breakdown or accident**: D&SDT-HEADMASTER must be contacted via phone call, fax, or email within one business day. A tow bill, police report, or other appropriate documentation showing your name and the provider of the service name must be submitted within **three (3) business days** of the exam date. If we do not receive proof within 3 business days, your no-show status will stand, and you will be required to repay your testing fee.

- **Weather or road condition-related issue**: D&SDT-HEADMASTER must be contacted via phone call, fax, or email within one business day. A road report, weather report, or other appropriate documentation must be submitted within **three (3) business days** of the exam date. If we do not receive proof within 3 business days, your no-show status will stand, and you will be required to repay your testing fee.

- **Medical emergency or illness**: D&SDT-HEADMASTER must be contacted via phone, fax, or email within one business day. A doctor's note showing your name and the provider of the service name, or on the provider's letterhead, must be submitted within **three (3) business days** of the missed exam date. If we do not receive proof within 3 business days, your no-show status will stand, and you will be required to repay your testing fee.

- **Death in the family**: D&SDT-HEADMASTER must be contacted via phone call, fax, or email within one business day. An immediate family obituary or letter on your behalf from the funeral home showing your name must only be submitted within **seven (7) business days** from a missed exam date. If we do not receive proof within 7 business days, your no-show status will stand, and you will be required to repay your testing fee. (The immediate family includes the parent, grandparent, great-grandparent, sibling, children, spouse, or significant other.)

- **Remotely proctored testing issues:** D&SDT-HEADMASTER must be contacted via phone, fax, or email within one business day. Appropriate documentation showing your name and the provider of the service name must be submitted within **three (3) business days** of the exam date. If we do not receive proof within 3 business days, your no-show status will stand, and you will be required to repay your testing fee.
    - **Internet outage or issue:** Documentation showing your name and the Internet provider showing outage date and times.
    - **Computer or cell phone issue:** If the computer or cell phone fails to work, documentation from a computer repair technician/shop or other appropriate documentation showing your name and the provider of the service is required.

Test Results

After you have completed both the Knowledge Exam and Skill Test components of the competency exam, your test results will be officially scored and double-checked by D&SDT-HEADMASTER scoring teams. Official test results will be available after 5:00PM (MT) on the business day after your test event by signing in to your TMU© account. D&SDT-HEADMASTER cannot release test results over the phone.

Note: *D&SDT-HEADMASTER does not send postal mail test results letters.*

Sign in to your TMU© account at **az.tmutest.com** to view your test results. The screenshots on the following pages show an example of test results.

-continued on the next page-

TMU ARIZONA | Tests | Trainings | Billing | Downloads | Profile | Logan

Click **Tests** or **View Your Testing History**

Welcome, Logan!

Unread Notifications
You have currently have two unread notifications.
Show Notifications

Training History
View your training details and history
View Your Training History

Testing History
View your testing details and history
View Your Testing History

Your Profile
View and update your personal and login information
Manage Your Profile

Downloads
Download instructions, forms, and other documents
View Downloads

Billing
Manage your billing information
View Billing Details

Home > Test History

Your Tests

Scheduling

Exam	Status	Reason
Medication Assistant Knowledge	Not Eligible	Previously Passed
Arizona Certified Nurse Aide Knowledge	Not Eligible	Missing required Training Arizona Nurse Aide
Arizona Medication Assistant Skill	Not Eligible	Already Scheduled
Arizona Certified Nurse Aide Skill	Not Eligible	Missing required Training Arizona Nurse Aide

Pretest Scheduling

Pretest	
Medication Aide Training Pretest Skill Eligible	Retake (already passed)

Under Actions, click on **Details** to view your results.

Click on **Print Test Results** to print your results.

Testing History

Test Date	Exam	Test Site	Status	
12/22/2025 8:00 AM MST	Arizona Medication Assistant Skill	Practice Test Site (TS) Phoenix, AZ	Scheduled	Actions
11/21/2025 8:00 AM MST	Medication Assistant Knowledge	Practice Test Site (TS) Phoenix, AZ	Passed	Actions
11/21/2025 8:00 AM MST	Arizona Medication Assistant Skill	Practice Test Site (TS) Phoenix, AZ	Failed	Actions
11/09/2025 10:00 AM MST	Medication Assistant Knowledge	Another Practice Test Site (TS) Scottsdale, AZ	Noshow	
11/09/2025 10:00 AM MST	Arizona Medication Assistant Skill	Another Practice Test Site (TS) Scottsdale, AZ	Noshow	

Details
Print Test Results

Knowledge and Skills Test Results Example:

← Back

Print

HEADMASTER, LLP
P.O. BOX 6609, HELENA, MT 59604-6609
800-393-8664 — FAX: 406-442-3357 WWW.HDMASTER.COM

ARIZONA MEDICATION ASSISTANT EXAM RESULTS REPORT

Example

IMPORTANT TEST RESULTS

TEST DATE: Friday, November 21, 2025

Dear Valeria,

You have **passed** the knowledge portion of the Medication Assistant exam.
Your overall knowledge test score is 85.45%.
You have **failed** the skill portion of the Medication Assistant exam.
You must correctly perform all of the **key steps** and **80%** of all non-key steps on each assigned task to pass the skill test.

A passing score **does not** imply certification. You must verify on the registry.

Any weaknesses indicated in your test results are listed below:

Knowledge Exam Results By Subject Area

Effects of Medication on Body Systems	85%
Controlled Substances	100%
Medication Administration	89%
Documentation	67%
Role/Responsibilities	80%
Terminology	100%

Skill Exam Incomplete Steps

Eye Drops / Tablet Medication Administration 1.2024
Performs hand hygiene with hand sanitize...
Oral Liquid Medication / Ear Drops Administration 1.2024
Performs hand hygiene with hand sanitize...
Assists resident to take the medication.
Documents administration on the medicati...

Manual Skill Task(s) Failed: Oral Liquid Medication / Ear Drops Administration 1.2024 **Vocabulary words to study:** documentation, infection control, hypoglycemia, measurement equivalents, medication affect, glipizide (Glucotrol XL), documentation, antibiotic

Test Attempts

You have **unlimited attempts** to pass the exam's knowledge and skill test portions **within one (1) year from your medication assistant training program completion date**. If you do not complete testing within one year of completing training, you must complete a new AZBN-approved training program to become eligible to further attempt the Arizona medication assistant examinations.

Retaking the Medication Assistant Exam

In the event that you fail the knowledge and/or skill portion of the examination, when you want to apply for a retest, you will need to pay for the portion that you failed before you can schedule a new exam date.

You can schedule a test or re-test online by signing in to your TMU© account with your Email or Username and Password at **az.tmutest.com**. (See instructions with screenshots under **Schedule / Reschedule a Test Event**.)

You will need to pay with a Visa or MasterCard credit/debit card before you can schedule.

If you need assistance scheduling your re-test, please call D&SDT-HEADMASTER at (800) 393-8664 during regular business hours, 6:00AM to 5:00PM MT, Monday through Friday, excluding holidays. We can assist you in scheduling a test or retest date, provided your fees have been paid.

Test Review Requests

You may request a review of your test results or dispute any other testing condition. The purpose of this review process is to ensure fairness and accuracy in the evaluation of your test.

PLEASE READ BEFORE FILLING OUT THE TEST REVIEW REQUEST: Please call D&SDT-HEADMASTER at (800) 393-8664 during regular business hours, Monday through Friday, 6:00AM to 5:00PM MT, excluding holidays, and discuss the test outcome you are questioning before committing to sending the $25 test review request deposit fee. Once you have further details about the scoring of your test, you will often understand the scoring process and learn how to better prepare yourself for subsequent exam attempts. If, after discussion with D&SDT-HEADMASTER staff, you still have a concern with your testing process that affected the outcome of your exam, you may submit a Test Review Request.

There is a $25 non-refundable test review deposit fee. To request a review, complete the **Test Review Request and Payment Application**, available on the Arizona TMU© main page (before you log in to your account) at az.tmutest.com. Test Review Requests must be received **within three (3) business days from the official scoring of your test** (excluding Saturdays, Sundays, and holidays). Late requests will be denied and will not be considered.

Since one qualification for certification as a medication assistant in Arizona is demonstrated by examination of minimum medication assistant knowledge and skills, the likely outcome of your review will determine who pays for any retests that may be granted. If, after investigation, the review finding is in your favor, you will be refunded the $25 test review deposit. If the findings of the review are *not in your favor*, the $25 test review deposit will stand, and the fee is non-refundable.

D&SDT-HEADMASTER will review your detailed recollection, your knowledge test markings, and any skill task measurements you recorded at the time of your test, in addition to reviewing markings, notations, and measurements recorded by the RN Test Observer at the time of your test. We will interview the RN Test Observer, Actor, or Knowledge Test Proctor about the facts detailed in your dispute documentation. D&SDT-HEADMASTER will re-check the scoring of your test and may contact you and/or the RN Test Observer, Actor, and/or Knowledge Test Proctor, and other candidates who were on-site at your test event for any additional information about the test event.

D&SDT-HEADMASTER cannot review test results or reviews with the candidate's instructor/training program, family members, or anyone else on the candidate's behalf.

D&SDT-HEADMASTER will complete your review request within ten (10) business days of receiving it in a timely manner. D&SDT-HEADMASTER will email the review results to your email address and the Arizona State Board of Nursing (AZBN).

APPLY FOR AN ARIZONA LICENSE

To apply for certification as a Certified Medication Assistant with AZBN, you must adhere to the following:

- All CMAs must apply with the LNA license.
- All CMAs must be 18 years old and older.
- All CMAs must have a high school diploma or GED.
- All CMAs must have a lawful presence and photo IDs.
  - Please see Citizenship and Alien Status on the Arizona Board of Nursing website for more information.
  - From the Arizona Board of Nursing webpage under Licenses and Certifications:

    Arizona Statement of Citizenship & Alien Status
    All applicants must answer questions on the application regarding citizenship. A xeroxed copy of a document that shows evidence of your citizenship or alien status MUST BE submitted with your application for licensure or renewal. See List A or List B.

After successfully passing both the Knowledge and Skill Test components of the medication assistant exam, your test results will be sent electronically to the Arizona Board of Nursing by D&SDT-HEADMASTER.

On the Arizona State Board of Nursing web page (www.azbn.gov), select the option to apply for a license. You will be taken to the Arizona Nurse Portal, where you can apply for certification, check on application status, and update your information with the Board. Once you have created a Nurse Portal account, you will have access to start and submit the Certified Medication Assistant (CMA) application. You will be notified by AZBN when you have met all criteria for being a Certified Medication Assistant in Arizona.

THE KNOWLEDGE/AUDIO EXAM

Knowledge Exam Content

The Knowledge Test consists of 55 multiple-choice questions. Questions are selected from subject areas aligned with the Arizona State Board of Nursing-approved Arizona medication assistant test plan and include all required categories defined in federal regulations. The subject areas are as follows:

SUBJECT AREAS

Subject Area	Number of Questions	Subject Area	Number of Questions
Allowable Route	3	Medication Administration	10
Body Systems – A&P	3	Regulations	3
Controlled Substances	2	Resident Safety – Infection Control	2
Documentation	3	Role and Responsibility	7
Effects of Medication	10	Six Rights	3
Error Reporting	3	Terminology	6

Knowledge Exam Information

You will be required to re-present your ID when entering the knowledge test room and the skills lab. Please keep your ID with you during the entire exam day.

The Knowledge Test Proctor will hand out materials, if needed, and provide instructions for taking the Knowledge Exam. You will have **sixty (60) minutes to complete the 55-question exam.** The multiple-choice questions will be presented to you, one at a time, on the computer screen to select answers A, B, C, or D. You can navigate through the exam questions with the previous and next buttons. You will be told when fifteen (15) minutes remain. You may not ask questions about the content of the Knowledge Exam, such as "What does this question mean?"

You must have a score of 80% or better to pass the knowledge portion of the exam.

All test sites in Arizona utilize electronic TMU© testing using Internet-connected computers. The knowledge exam portion of your exam will be displayed on a computer screen for you to read and to type or click your answers.

NOTE: You will need your TMU© Username or Email and Password to sign in to your knowledge exam. Please see the information under **Complete your TMU© Account** to sign in to your TMU© account.

- The Knowledge Test Proctor will provide you with a code at the test event to start your exam.

TRANSLATION DICTIONARIES
Per the Arizona State Board of Nursing, translation dictionaries (either paper format or electronic), translating devices, or non-approved language translators ***are not allowed***.

SCRATCH PAPER AND CALCULATOR
Scratch paper and calculators ***are not allowed***.

When you leave the testing room, you must leave all test materials in it. Anyone who takes or tries to take materials, notes, or information from the room is subject to prosecution and will be reported to the Arizona State Board of Nursing (AZBN).

Knowledge Exam Audio Version

An audio (oral) version of the knowledge exam is available. However, there is an additional $10 charge for the audio version ($35 total), and you must request the audio version ***before submitting your testing fee payment***.

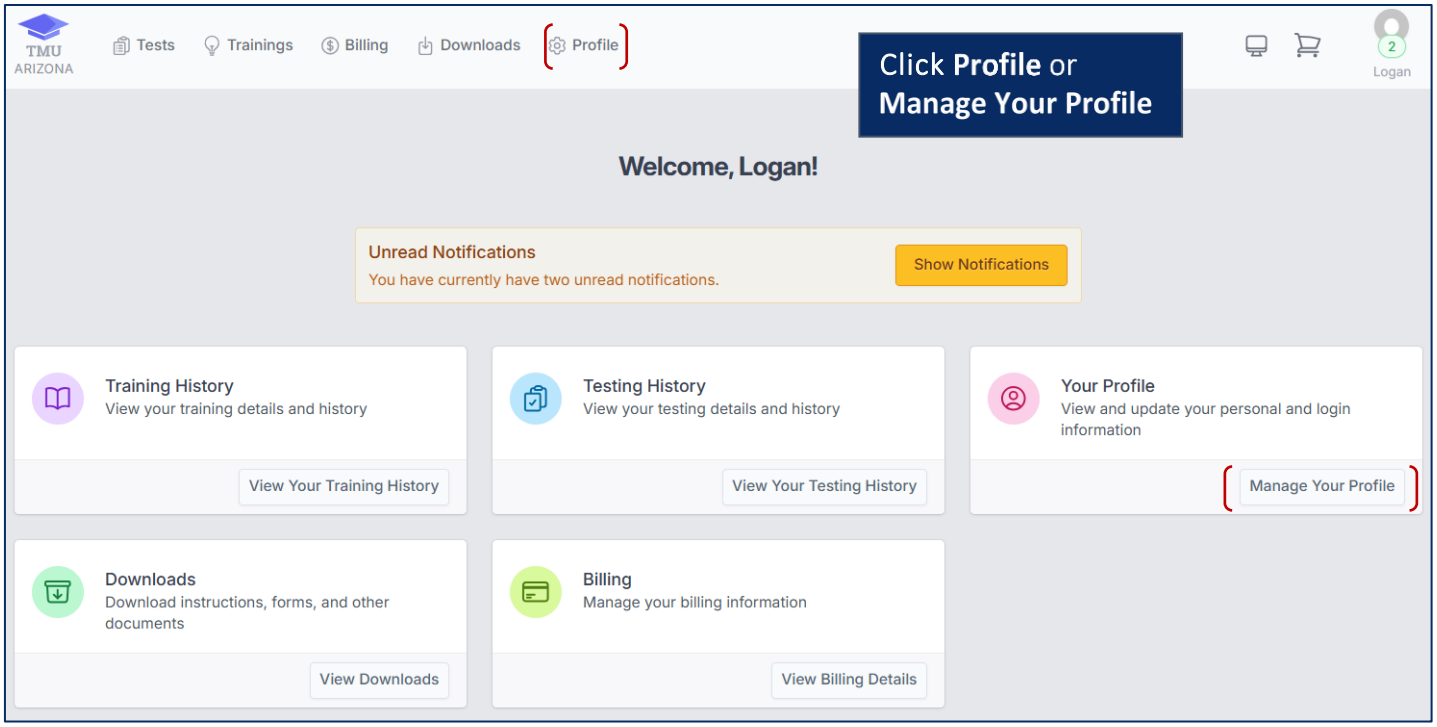
NOTE: Only the first 45 questions will be read orally on the Audio Knowledge Exam. To assess English reading comprehension, the remaining 10 questions must be answered without oral assistance.

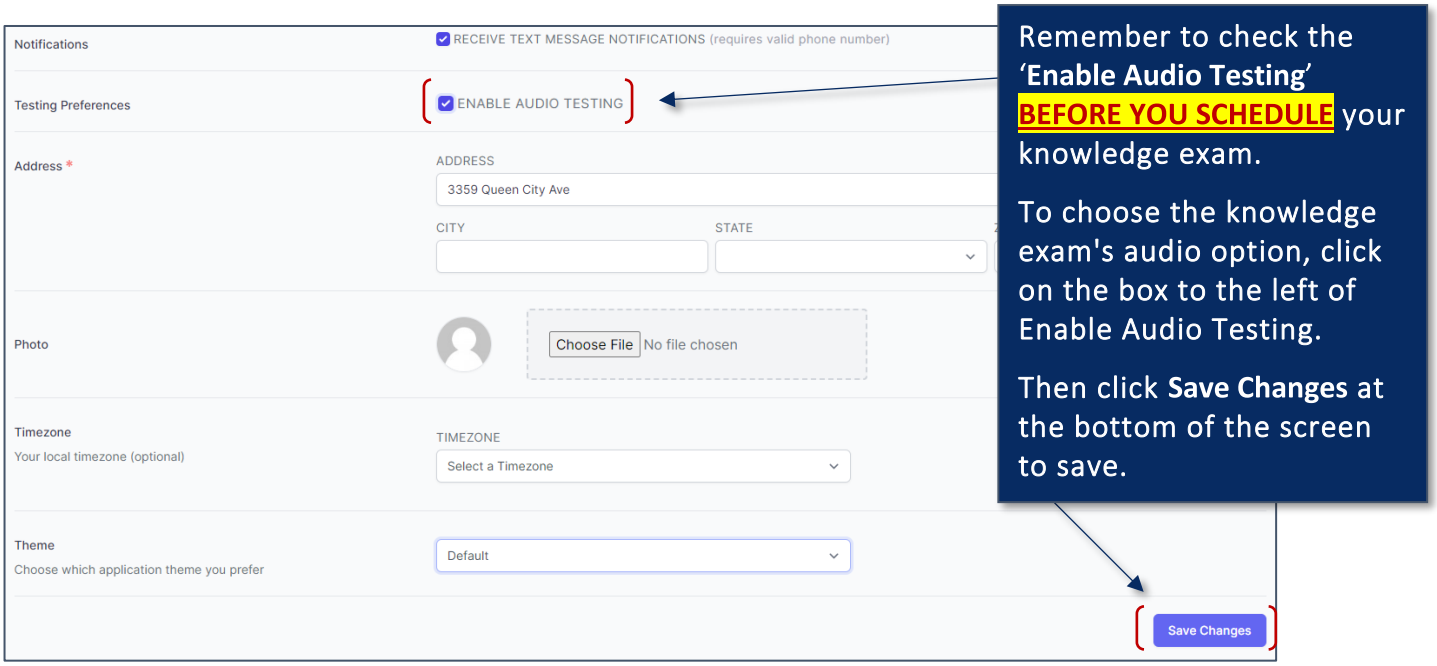
→ EXCEPTION: All questions will be read orally if the candidate has an approved ADA.

Selecting an Audio Version of the Knowledge Exam

To select the Audio version of the knowledge exam, follow the instructions with the screenshots below.

*Under your PROFILE, check the **'Enable Audio Testing'** to receive an Audio version of the Knowledge Exam:*





The questions are read to you in a neutral tone and can be heard through wired headphones or earbuds plugged into the computer. ***Bluetooth-connected devices (which also include smart glasses) are not allowed.*** When taking an electronic Audio exam, the audio control buttons will appear on the computer screen, allowing you to play, rewind, or pause the audio as needed.

The following is a sample of the kinds of questions that you will find on the Knowledge/Audio exam:

1. An order for Colace qd would require that you administer this medication to a resident:
(A) Once a week
(B) Every day
(C) On an empty stomach
(D) When the resident complains of constipation

2. If a resident refuses to take the medication you bring to him, you should:
(A) Make a mental note and plan to come back and try again later
(B) Try to get the resident to take his medication anyway
(C) Leave the medication on the resident's bedside stand and instruct him to take it later
(D) Document the refusal and report it to the nurse

3. The following medication is not allowed to be administered by a medication assistant:
(A) A regularly scheduled oral hypertensive agent
(B) An antibiotic cream applied to an open wound
(C) A laxative to be administered by rectal suppository
(D) A schedule III controlled substance timed for every night

ANSWERS: 1-B | 2-D | 3-B

THE MANUAL DEMONSTRATION SKILL TEST

- The purpose of the Skill Test is to evaluate your performance when demonstrating AZBN-approved medication assistant skill tasks. You will find a complete list of skill tasks in this handbook.
- You will be asked to present your ID, which you showed the RN Test Observer at check-in.
- Be sure you understand all instructions you read while in the waiting area before you begin your skill task demonstrations. You may not ask questions once the Skill Test begins and the timer starts. Once the Skill Test begins, the RN Test Observer may not answer questions.
- Two (2) medication administration tasks will be randomly selected from the list of skill tasks for you to perform as your skill test. Each of your randomly selected tasks will have associated scenarios. The scenarios will be read to you by the RN Test Observer immediately before you are asked to do each task.
- After hearing a scenario, you will use the MAR to determine what medications to obtain from the locked medication cart. You will administer the medications obtained to a live resident actor.
- You will be allowed **25 minutes** to complete your medication administration. After 10 minutes have elapsed, you will be alerted that 15 minutes remain.
- Listen carefully to all instructions given by the RN Test Observer. You may request to have any of the scenarios repeated **at any time** during your Skill Test up until you run out of time or tell the RN Test Observer that you are finished with your skill task demonstrations.
- You must correctly perform all **key** steps (in bold font) and 80% of all non-key steps on all medication administrations assigned to pass the Skill Test.

- If you believe you made a mistake while performing a task, tell the RN Test Observer you would like to make a correction. You will need to correctly demonstrate the step or steps on the task you believe you performed incorrectly to receive credit for the correction.

- You may repeat or correct **any step** or **steps** on any task you believe you have performed incorrectly at **any time** during your allotted 25 minutes or until you tell the RN Test Observer you are finished with the Skill Test.

- The skill task steps are not order dependent unless the words BEFORE or AFTER are used in a step.
- When you finish each task, verbally tell the RN Test Observer you are finished and move to the designated "relaxation area." When the RN Test Observer and actor have set up and are ready for your next skill task demonstration, the RN Test Observer will read the scenario for your next task.
- **All steps must actually be demonstrated. Steps that are only verbalized WILL NOT COUNT.**

Skill Tasks Listing

To receive credit, you must actually perform and demonstrate every step during your skill test demonstration.

The steps listed for each task are required for a medication assistant candidate to successfully demonstrate minimum proficiency in the skill task for the RN Test Observer. You will be scored only on the steps listed.

You must score **80%** on each task **without missing key steps (bolded)** to pass the skill component of your competency evaluation.

If you fail a single task, you will have to take another skill test with two tasks on it. The skill tasks included on your Skill Test are randomly chosen so that every Skill Test is comparable in difficulty and average length of time to complete. The RN Test Observer will observe your medication administrations and record what they observe. D&SDT-HEADMASTER scoring teams will officially score and double-check your test.

Note: The skill task steps included in this handbook are offered as guidelines to help prepare candidates for the Arizona medication assistant skill test, and the steps included herein are not intended to be used to provide complete care that would be all-inclusive of best care practiced in an actual work setting.

Ear Drops / Tablet Medication Administration

1) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.
2) Open MAR.
3) Identify the correct resident's MAR.
4) Identify medications to be given to the resident.
5) **For each medication, identify the correct drug label for the correct resident's MAR.**
6) Identify the right drugs when obtaining the medications from the medication cart. (Show medications to the RN Test Observer.)
7) **For each medication, identify the right dose and compare the labels to the right resident's MAR.**
8) **Medications selected are for the correct time.**

9) **Medications selected are for the correct routes.**
10) Open container.
11) Do not contaminate the lid during removal, replacement, or while off the container. *(Hint: To avoid contamination, place the lid on a clean barrier.)*
12) Pour the correct number of prescribed tablets into the medication cup without touching the medication.
13) Lock the medication cart.
14) Close or cover MAR.
15) Greet the resident.
16) Introduce yourself by name as a medication assistant.
17) Explain the procedure to the resident.
18) **Identify the right resident using an appropriate identification method (i.e., picture, wristband, or facility-appropriate method of identification).**
19) Ask the resident to state their name.
20) Ask the resident to state their date of birth.
21) Give the resident a glass of water.
22) Provide medications to the resident.
23) Lower the head of the bed.
24) Remove container lid.
25) Do not contaminate the lid during removal, replacement, or while off the container. *(Hint: To avoid contamination, place the lid on a clean barrier.)*
26) Turn the resident's head toward the correct side with the correct ear upward.
27) Hold the resident's external ear flap (pinna) and pull up and back.
28) **Instill the correct number of prescribed drops of medication into the correct ear.**
29) Do not touch the inside of the resident's ear canal with the container tip.
30) Tell the resident not to move their head for a few minutes.
31) Return medication to the medication cart.
32) Lock the medication cart.
33) **Document administration on the medication administration record (MAR) on the correct day.**
34) Initial and sign MAR.
35) Close or cover MAR.
36) Maintain respectful, courteous interpersonal communications during administrations.
37) Place the call light within easy reach of the resident.
38) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.

Eye Drops / Tablet Medication Administration

1) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.
2) Open MAR.
3) Identify the correct resident's MAR.
4) Identify medications to be given to the resident.
5) **For each medication, identify the correct drug label for the correct resident's MAR.**

6) Identify the right drugs when obtaining the medications from the medication cart. (Show medications to the RN Test Observer.)
7) For each medication, identify the right dose and compare the labels to the right resident's MAR.
8) Medications selected are for the correct time.
9) Medications selected are for the correct routes.
10) Open container.
11) Do not contaminate the lid during removal, replacement, or while off the container. *(Hint: To avoid contamination, place the lid on a clean barrier.)*
12) Pour the correct number of prescribed tablets into the medication cup without touching the medication.
13) Lock the medication cart.
14) Close or cover MAR.
15) Greet the resident.
16) Introduce yourself by name as a medication assistant.
17) Explain the procedure to the resident.
18) Identify the right resident using an appropriate identification method (i.e., picture, wristband, or facility-appropriate method of identification).
19) Ask the resident to state their name.
20) Ask the resident to state their date of birth.
21) Give the resident a glass of water.
22) Provide medications to the resident.
23) Assist the resident in taking medication.
24) Put on gloves.
25) Remove container lid.
26) Do not contaminate the lid during removal, replacement, or while off the container. *(Hint: To avoid contamination, place the lid on a clean barrier.)*
27) Gently tilt the resident's head back with chin up.
28) Pull down on the resident's lower eyelid of the correct eye, making a pocket.
29) Ask the resident to look up toward the forehead.
30) Drop the correct number of prescribed drops of medication into the correct pocket.
31) The container tip does not touch the resident's eye.
32) Apply gentle pressure to the inner corner of the resident's eye.
33) Use a tissue to remove any excess fluid from around the resident's eye.
34) Remove and discard gloves.
35) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.
36) Return medication to the medication cart.
37) Lock the medication cart.
38) Document administration on the medication administration record (MAR) on the correct day.
39) Initial and sign MAR.
40) Close or cover MAR.
41) Maintain respectful, courteous interpersonal communications during administrations.
42) Place the call light within easy reach of the resident.
43) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.

Nasal Spray / Tablet Medication Administration

1) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.
2) Open MAR.
3) Identify the correct resident's MAR.
4) Identify medications to be given to the resident.
5) **For each medication, identify the correct drug label for the correct resident's MAR.**
6) Identify the right drugs when obtaining the medications from the medication cart. (Show medications to the RN Test Observer.)
7) **For each medication, identify the right dose and compare the labels to the right resident's MAR.**
8) **Medications selected are for the correct time.**
9) **Medications selected are for the correct routes.**
10) Open containers.
11) Do not contaminate the lid during removal, replacement, or while off the container. *(Hint: To avoid contamination, place the lid on a clean barrier.)*
12) Pour the correct number of prescribed tablets into the medication cup without touching the medication.
13) Lock the medication cart.
14) Close or cover MAR.
15) Greet the resident.
16) Introduce yourself by name as a medication assistant.
17) Explain the procedure to the resident.
18) **Identify the right resident using an appropriate identification method (i.e., picture, wristband, or facility-appropriate method of identification).**
19) Ask the resident to state their name.
20) Ask the resident to state their date of birth.
21) Give the resident a glass of water.
22) Provide medications to the resident.
23) Assist the resident in taking the medication one tablet at a time.
24) Remove container lid.
25) Do not contaminate the lid during removal, replacement, or while off the container. *(Hint: To avoid contamination, place the lid on a clean barrier.)*
26) Have the resident blow their nose.
27) Instruct the resident to breathe in with their mouth closed.
28) Time administration of the spray with the resident's inhalation.
29) Press the resident's correct nostril closed while administering the nasal spray.
30) **Administer the correct number of prescribed spray(s) in the resident's correct nostril.**
31) Return medication to the medication cart.
32) Lock the medication cart.
33) **Document administration on the medication administration record (MAR) on the correct day.**
34) Initial and sign MAR.
35) Close or cover MAR.

36) Maintain respectful, courteous interpersonal communications during administrations.
37) Place the call light within easy reach of the resident.
38) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.

Oral Capsule Medication Administration

1) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.
2) Open MAR.
3) Identify the correct resident's MAR.
4) Identify medications to be given to the resident.
5) **For each medication, identify the correct drug label for the correct resident's MAR.**
6) Identify the right drugs when obtaining the medications from the medication cart. (Show medications to the RN Test Observer.)
7) **For each medication, identify the right dose and compare the labels to the right resident's MAR.**
8) **Medications selected are for the correct time.**
9) **Medications selected are for the correct routes.**
10) Open the first container or pop the medication from the blister pack.
11) Do not contaminate the lid during removal, replacement, or while off the container. *(Hint: To avoid contamination, place the lid on a clean barrier.)*
12) Pour the correct number of prescribed capsules into the medication cup without touching the medication.
13) Open the second container or pop the medication from the blister pack.
14) Do not contaminate the lid during removal, replacement, or while off the container. *(Hint: To avoid contamination, place the lid on a clean barrier.)*
15) Pour the prescribed number of capsules into the medication cup without touching the medication.
16) Return medication to the medication cart.
17) Lock the medication cart.
18) Close or cover MAR.
19) Greet the resident.
20) Introduce yourself by name as a medication assistant.
21) Explain the procedure to the resident.
22) **Identify the right resident using an appropriate identification method (i.e., picture, wristband, or facility-appropriate method of identification).**
23) Ask the resident to state their name.
24) Ask the resident to state their date of birth.
25) Give the resident a glass of water.
26) Provide medications to the resident.
27) Assist the resident in taking the medication one capsule at a time.
28) **Document administration on the medication administration record (MAR) on the correct day.**
29) Initial and sign MAR.
30) Close or cover MAR.

31) Maintain respectful, courteous interpersonal communications during administrations.
32) Place the call light within easy reach of the resident.
33) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.

Oral Liquid Medication / Ear Drops Administration

1) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.
2) Open MAR.
3) Identify the correct resident's MAR.
4) Identify medications to be given to the resident.
5) **For each medication, identify the correct drug label for the correct resident's MAR.**
6) Identify the right drugs when obtaining the medications from the medication cart. (Show medication to the RN Test Observer.)
7) **For each medication, identify the correct dose and compare the labels to the right resident's MAR.**
8) **Medications selected are for the correct time.**
9) **Medications selected are for the correct routes.**
10) Open container.
11) Do not contaminate the lid during removal, replacement, or while off the container. *(Hint: To avoid contamination, place the lid on a clean barrier.)*
12) Set the medication cup on a level surface.
13) **Pour the correct amount of prescribed medication into the medication cup.**
14) Check for the correct amount of medication at eye level.
15) Lock the medication cart.
16) Close or cover MAR.
17) Greet the resident.
18) Introduce yourself by name as a medication assistant.
19) Explain the procedure to the resident.
20) **Identify the right resident using an appropriate identification method (i.e., picture, wristband, or facility-appropriate method of identification).**
21) Ask the resident to state their name.
22) Ask the resident to state their date of birth.
23) Provide medication to the resident.
24) Assist the resident in taking the oral medication.
25) Lower the head of the bed.
26) Remove container lid.
27) Do not contaminate the lid during the removal, replacement, or while off the container. (*Hint: To avoid contamination, place the lid on a clean barrier.)*
28) Turn the resident's head to the correct side with the correct ear upward.
29) Hold the resident's external ear flap (pinna) and pull up and back.
30) **Instill the correct number of prescribed drops of medication into the correct ear.**
31) The container tip does not touch the inside of the resident's ear canal.
32) Tell the resident not to move their head for a few minutes.

33) Return medication to the medication cart.
34) Lock the medication cart.
35) Document administration on the medication administration record (MAR) on the correct day.
36) Initial and sign MAR.
37) Close or cover MAR.
38) Maintain respectful, courteous interpersonal communications during administrations.
39) Place the call light within easy reach of the resident.
40) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.

Oral Liquid Medication / Topical Ointment Medication Administration

1) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.
2) Open MAR.
3) Identify the correct resident's MAR.
4) Identify medications to be given to the resident.
5) For each medication, identify the correct drug label for the correct resident's MAR.
6) Identify the right drugs when obtaining the medications from the medication cart. (Show medication to the RN Test Observer.)
7) For each medication, identify the right dose and compare the labels to the right resident's MAR.
8) Medications selected are for the correct time.
9) Medications selected are for the correct routes.
10) Open the container.
11) Do not contaminate the lid during removal, replacement, or while off the container. *(Hint: To avoid contamination, place the lid on a clean barrier.)*
12) Set the medication cup on a level surface.
13) Pour the correct amount of prescribed medication into the medication cup.
14) Check for the correct amount of medication at eye level.
15) Lock the medication cart.
16) Close or cover MAR.
17) Greet the resident.
18) Introduce yourself by name as a medication assistant.
19) Explain the procedure to the resident.
20) Identify the right resident using an appropriate identification method (i.e., picture, wristband, or facility-appropriate method of identification).
21) Ask the resident to state their name.
22) Ask the resident to state their date of birth.
23) Provide medication to the resident.
24) Inspect the resident's correct forearm skin area where medication is to be applied.
25) Put on one glove.
26) Open container.
27) Do not contaminate the lid during removal, replacement, or while off the container. *(Hint: To avoid contamination, place the lid on a clean barrier.)*

28) Squeeze ointment onto the finger of the gloved hand.
29) Apply ointment on the gloved finger to the resident's correct forearm.
30) Spread ointment to cover the entire area that is to be treated.
31) Remove and discard glove.
32) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.
33) Return medication to the medication cart.
34) Lock the medication cart.
35) Document administration on the medication administration record (MAR) on the correct day.
36) Initial and sign MAR.
37) Close or cover MAR.
38) Maintains respectful, courteous interpersonal communications during administrations.
39) Place the call light within easy reach of the resident.
40) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.

Oral Tablet Medication / Eye Drop Administration

1) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.
2) Open MAR.
3) Identify the correct resident's MAR.
4) Identify medications to be given to the resident.
5) Close or cover MAR.
6) Greet the resident.
7) Introduce yourself by name as a medication assistant.
8) Explain the procedure to the resident.
9) Identify the right resident using an appropriate identification method (i.e., picture, wristband, or facility-appropriate method of identification).
10) Ask the resident to state their name.
11) Ask the resident to state their date of birth.
12) Listen to the apical heart rate for 60 seconds with a teaching stethoscope.
13) Record the apical heart rate on the MAR.
14) The recorded apical heart rate is within five (5) beats of the RN Test Observer's recorded apical heart rate.
15) Verbalize whether or not to administer medication based on the apical heart rate obtained.
16) For each medication, identify the correct drug label for the correct resident's MAR.
17) Identify the correct drugs when obtaining the medications from the medication cart. (Show medication to the RN Test Observer.)
18) For each medication, identify the correct dose and compare the labels to the right resident's MAR.
19) Medications selected are for the correct time.
20) Medications selected are for the correct routes.
21) If proceeding with tablet administration, open the container.

22) If proceeding with tablet administration, do not contaminate the lid during removal, replacement, or while off the container. *(Hint: To avoid contamination, place the lid on a clean barrier.)*
23) If proceeding with tablet administration, pour the correct number of prescribed tablets into the medication cup without touching the medication.
24) Lock the medication cart.
25) Close or cover MAR.
26) If proceeding with tablet administration, give the resident a glass of water.
27) If proceeding with tablet administration, provide the medication to the resident.
28) If proceeding with tablet administration, assist the resident in taking the medication.
29) Put on gloves.
30) Remove the container lid.
31) Do not contaminate the lid during removal, replacement, or while off the container. *(Hint: To avoid contamination, place the lid on a clean barrier.)*
32) Gently tilt the resident's head back with chin up.
33) Pull down on the resident's lower eyelid of the correct eye, making a pocket.
34) Ask the resident to look up toward their forehead.
35) Drop the correct number of prescribed drops of medication into the correct pocket.
36) Do not touch the resident's eye with the container tip.
37) Apply gentle pressure to the inner corner of the resident's eye.
38) Use a tissue to remove any excess fluid from around the resident's eye.
39) Remove and discard gloves.
40) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.
41) Return medication to the medication cart.
42) Lock the medication cart.
43) Document administration on the medication administration record (MAR) on the correct day.
44) Initial and sign MAR.
45) Close or cover MAR.
46) Maintain respectful, courteous interpersonal communications during administrations.
47) Place the call light within easy reach of the resident.
48) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.

Topical Ointment Medication / Oral Capsule Medication Administration

1) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.
2) Open MAR.
3) Identify the correct resident's MAR.
4) Identify medications to be given to the resident.
5) For each medication, identify the correct drug label for the correct resident's MAR.
6) Identify the correct drugs when obtaining the medications from the medication cart. (Show medication to the RN Test Observer.)

7) **For each medication, identify the correct dose and compare the labels to the right resident's MAR.**
8) **Medications selected are for the correct time.**
9) **Medications selected are for the correct routes.**
10) Open the container.
11) Do not contaminate the lid during removal, replacement, or while off the container. *(Hint: To avoid contamination, place the lid on a clean barrier.)*
12) Pour the capsule into the medication cup without touching the medication.
13) Lock the medication cart.
14) Close or cover MAR.
15) Greet the resident.
16) Introduce yourself by name as a medication assistant.
17) Explain the procedure to the resident.
18) **Identify the right resident using an appropriate method of identification (i.e., picture, wristband, or facility-appropriate method of identification).**
19) Ask the resident to state their name.
20) Ask the resident to state their date of birth.
21) Give the resident a glass of water.
22) Provide medications to the resident.
23) Assist the resident in taking medication.
24) Inspect the resident's correct forearm skin area where medication is to be applied.
25) Put on one glove.
26) Open the container.
27) Do not contaminate the lid during removal, replacement, or while off the container. *(Hint: To avoid contamination, place the lid on a clean barrier.)*
28) Squeeze ointment onto the finger of the gloved hand.
29) **Apply ointment on the gloved finger to the resident's correct forearm.**
30) Spread ointment to cover the entire area that is to be treated.
31) Remove and discard glove.
32) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.
33) Return medication to the medication cart.
34) Lock the medication cart.
35) **Document administration on the medication administration record (MAR) on the correct day.**
36) Initial and sign MAR.
37) Close or cover MAR.
38) Maintain respectful, courteous interpersonal communications during administrations.
39) Place the call light within easy reach of the resident.
40) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.

Topical Spray Medication / Unit Dose Medication Administration

1) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.
2) Open MAR.
3) Identify the correct resident's MAR.
4) Identify medications to be given to the resident.
5) Close or cover MAR.
6) Greet the resident.
7) Introduce yourself by name as a medication assistant.
8) Explain the procedure to the resident.
9) **Identify the right resident using an appropriate identification method (i.e., picture, wristband, or facility-appropriate method of identification).**
10) Ask the resident to state their name.
11) Ask the resident to state their date of birth.
12) Listen to the apical heart rate for 60 seconds with a teaching stethoscope.
13) Record the apical heart rate on the MAR.
14) **The recorded apical heart rate is within five (5) beats of the RN Test Observer's recorded apical heart rate.**
15) **Verbalize whether or not to proceed with medication administration based on the apical heart rate obtained.**
16) **For each medication, identify the correct drug label for the correct resident's MAR.**
17) Identify the correct drugs when obtaining the medications from the medication cart. (Show medication to the RN Test Observer.)
18) **For each medication, identify the correct dose and compare the labels to the right resident's MAR.**
19) **Medications selected are for the correct time.**
20) **Medications selected are for the correct routes.**
21) If proceeding with tablet administration, open the container.
22) If proceeding with tablet administration, do not contaminate the lid during removal, replacement, or while off the container. *(Hint: To avoid contamination, place the lid on a clean barrier.)*
23) If proceeding with tablet administration, pour the correct number of prescribed tablets into the medication cup without touching the medication.
24) Lock the medication cart.
25) Close or cover MAR.
26) If proceeding with tablet administration, give the resident a glass of water.
27) If proceeding with tablet administration, provide the medication to the resident.
28) If proceeding with tablet administration, assist the resident in taking medication.
29) Inspect the resident's correct forearm skin area where medication is to be applied.
30) Open container.
31) Do not contaminate the lid during removal, replacement, or while off the container. *(Hint: To avoid contamination, place the lid on a clean barrier.)*
32) Instruct the resident to turn their face away while spraying medication.
33) **Spray one spray on the area of the resident's correct forearm.**
34) Return medication to the medication cart.
35) Lock the medication cart.
36) **Document administration on the medication administration record (MAR) on the correct day.**

37) Initial and sign MAR.
38) Close or cover MAR.
39) Maintain respectful, courteous interpersonal communications during drug administrations.
40) Place the call light within easy reach of the resident.
41) Perform hand hygiene with hand sanitizer.
    a. Cover all surfaces of hands with hand sanitizer.
    b. Rub your hands together until they are completely dry.

KNOWLEDGE EXAM VOCABULARY LIST

abbreviation
abnormal response to medication
absorption
absorption of drugs through the skin
abuse
administering medication
administration
administration directions
adverse effects
adverse reaction
Advil
affects of medication
Albuterol
Aldactone
alendronate sodium (Fosamax)
allergic reactions
allowable routes
amber-colored containers
aminoglycoside
analgesic
anaphylactic reaction
anaphylaxis
anemia
angina pectoris
antacids
anti-anginals
antiarrhythmic
antiarthritics

antibiotic
anti-coagulants
anti-convulsants
antidepressants
antidote
antiemetic
anti-hypertensive
anti-infective
antilipemics
anti-microbial
antineoplastics
anti-Parkinsonian
antipruritic
anti-psychotic
antitussive
anti-viral
apical
application of topical medication
aspiration
aspirin
astringents
Ativan
atorvastatin calcium (Lipitor)
authorized duties
bacterial infections
benzodiazepines
beta blockers
bid

black box warnings
Board of Nursing
bulk-forming laxative
Calamine/diphenhydramine (Benadryl)
calcium
calculations
carbamazepine (Tegretol)
carbidopa/levodopa (Sinemet)
cardiac
cardiac medication
cardiovascular drugs
carisoprodol
central nervous system
certification criteria
certification renewal
checks
chewable tablets
cholesterol
cirrhosis
classification
clonidine (Catapres)
CMA eligibility
Colace
conduct unbecoming
confidentiality
congestive heart failure
constipation
continuing education
contraindicated
controlled drugs
controlled medications
controlled narcotics
controlled substance
correct administration
corticosteroids
cough medications
cumulative effect
decongestants
delegation

Depakote
dermatological medication
diabetes
diazepam (Valium)
dietary supplements
digitalis
digoxin (Lanoxin)
digoxin administration
discontinued medication
disposal
diuretic
documentation
docusate sodium (Colace)
dosage
dosage calculation
drug absorption rate
drug actions
drug classification
drug dependence
Drug Enforcement Agency
drug interactions
drug metabolism
drug reference
drugs
dyspnea
ear drops
edema
electronic documentation
enalapril maleate (Vasotec)
enteric coatings
error reporting
estrogen
excretion
expected adverse affects
extrapyramidal symptoms (EPS)
eye medication
facility policy
fat-soluble
fluoxetine hydrochloride (Prozac)

Food and Drug Administration requirement
fraud
furosemide (Lasix)
glaucoma
glipizide (Glucotrol XL)
gout
habit forming
haloperidol (Haldol)
health care provider order
held medication
herbal medications
histamine
hormones
hyperglycemia
hyperkalemia
hypnotic
hypoglycemia
hypokalemia
ibuprofen
infection control
infections
inflammation
insulin
integumentary system
international time
interpreting administration directions
iron preparations
iron sulfate
itching
kidneys
Lanoxin
laxative
legal restriction
lethal dose
levaquin
levothyroxine sodium (Synthroid)
liquid administration
liquid medication

lisinopril
lithium carbonate (Lithane)
lorazepam (Ativan)
MAR
maximum dose
measurement equivalents
measuring device
medication administration
medication administration documentation
medication administration process
medication administration record
medication affect
medication assistant's role
medication calculation
medication categories
medication disposal
medication error
medication frequency
medication information
medication interaction
medication inventory
medication knowledge
medication label
medication order
medication refusal
medication route
medication storage
medications
medications affect
mg
mineralocorticoid
missed medication
muscle relaxants
naproxen (Naprosyn)
narcotic medication
narcotics
narrow-spectrum antibiotic
nasal medication
nasal spray

needles
negligent
nitrofurantoin (Furadantin)
nitroglycerin
nonsteroidal anti-inflammatory drugs
nothing by mouth
nurse supervision
Nursing Drug Reference Manual
ointment administration
ophthalmic
ophthalmic medication
optic
oral antibiotic
oral medications
oral preparations
osteoporosis
OTC
otic
otic medication
over-the-counter
oxygen
Parkinson's disease
paroxetine hydrochloride (Paxil)
pathogens
pediculicide
penicillin
phenazopyridine (Pyridium)
phenytoin (Dilantin)
pituitary
placebo
potassium
potassium-sparing diuretic
priorities
privacy
PRN order
protocol
Proventil
psoriasis
psychotropic drugs

Psyllium hydrophilic muciloid (Metamucil)
radial pulse
rebound effect
rectal suppository
refusing medication
regulation
reporting changes
reporting errors
resident rights
responsibilities
results of medications
right drug
right time
role
role and responsibilities
route administration
safety
safety checks
scheduled medication
scheduled narcotic
scope of practice
scored tablet
security
sedatives
seizures
sertraline hydrochloride (Zoloft)
sharps container
side effects
six rights
skin disorder
skin medication
skin patches
special instructions
state regulation
statin
stimulants
subjective information
sublingual
sulfonamides

supplements
suppository
suspension of medications
swallowing medications
systolic
tablet disposal
tachycardia
terminology
testing requirements
Tetracyclines
therapeutic dose
thyroid
TID medications

tinnitis
topical medication
toxic
transdermal
triamcinolone (Aristocort)
types of orders
urinary system
valid prescriptions
vitamins
vomiting
warfarin (Coumadin)
water-soluble vitamins
when to report

Notes: