D&S Diversified Technologies LLP

Headmaster LLP

Tennessee Medication Aide-Certified

CANDIDATE HANDBOOK

September 2026

VERSION 7.0

NOTE: EFFECTIVE SEPTEMBER 2026

THE TESTING FEES HAVE INCREASED. (PAGE 10)

D&S DIVERSIFIED TECHNOLOGIES

(D&SDT)

TMU©

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CONTACT INFORMATION

Questions on:	Contact:	Hours and Phone #:
• Applications • Testing process • Test scheduling • Eligibility to test	**D&S Diversified Technologies (D&SDT), LLP** 333 Oakland Avenue Findlay, OH 45840 Email: tennessee@hdmaster.com Website: www.hdmaster.com Tennessee TMU© Webpage: **tn.tmutest.com**	Monday through Friday 7:00AM – 6:00PM Central Time 8:00AM – 7:00PM Eastern Time **Phone #: (877) 201-0758** Fax #: (406) 442-3357
Questions on: • obtaining information on official regulations and guidelines for medication assistants • updating your name or address on the Registry	**Contact:** **Tennessee Board of Nursing (TBON)** 665 Mainstream Drive Nashville, TN 37243 Email: nursing.health@tn.gov Website: https://www.tn.gov/health/health-program-areas/health-professional-boards/nursing-board.html	**Hours and Phone #:** Monday through Friday 8:00AM –4:30PM Central Time Phone #: (615) 532-5166

ABOUT THE TENNESSEE MA-C CANDIDATE HANDBOOK

The information in this handbook describes the Tennessee Medication Aide examination process and is designed to help you prepare to take the Tennessee Board of Nursing (TBON) approved Medication Aide-Certified Examination administered by TBON's approved test vendor, D&S Diversified Technologies (D&SDT). You must pass both parts to be identified and listed on the Tennessee Medication Aide Registry. If you have questions that are not answered in this handbook, contact D&SDT:

- Email: **tennessee@hdmaster.com**;
- Call: (877) 201-0758 during regular business hours, 7:00AM to 6:00PM (CT)/8:00AM to 7:00PM (ET), Monday through Friday, excluding holidays; or

Review the Tennessee Medication Aide-Certified website found at: **hdmaster.com**.

INTRODUCTION

The purpose of a Medication Aide competency evaluation program is to ensure that candidates who are seeking to be Medication Aides understand the state standards and can competently and safely perform the job of an entry-level Medication Aide.

This handbook explains the Tennessee Medication Aide competency evaluation process and provides preparation guidance. Candidates must pass both the multiple-choice knowledge test and the skill test, and meet all Tennessee Board of Nursing requirements, to become certified.

D&S Diversified Technologies (D&SDT) administers the testing and scoring services. For additional questions, contact D&SDT at (877) 201-0758, email tennessee@hdmaster.com, or visit www.hdmaster.com.

TEST ACCOMMODATIONS: AMERICANS WITH DISABILITIES ACT (ADA)

ADA Compliance

The Tennessee Board of Nursing (TBON) and D&SDT provide reasonable accommodations for candidates with disabilities or limitations that may affect their ability to perform the Tennessee Medication Aide examination. Accommodations are granted under the Americans with Disabilities Act (ADA).

- Submit the **ADA Accommodation Request Application**, located on the Tennessee TMU© main page under 'APPLICATIONS', for review and approval by D&SDT **in advance** of your MA-C examination.
- Submit all required supporting documentation of your diagnosed disability with your request. We will only review applications with the required supporting documentation.
- D&SDT will email you if additional documentation or information is required, using the email address in your TMU© account.
- **Allow for additional time to process your request.** If you have questions regarding the ADA review process or specific required documentation, please call D&SDT at (877) 201-0758.

TENNESSEE TESTMASTER UNIVERSE© (TMU©)

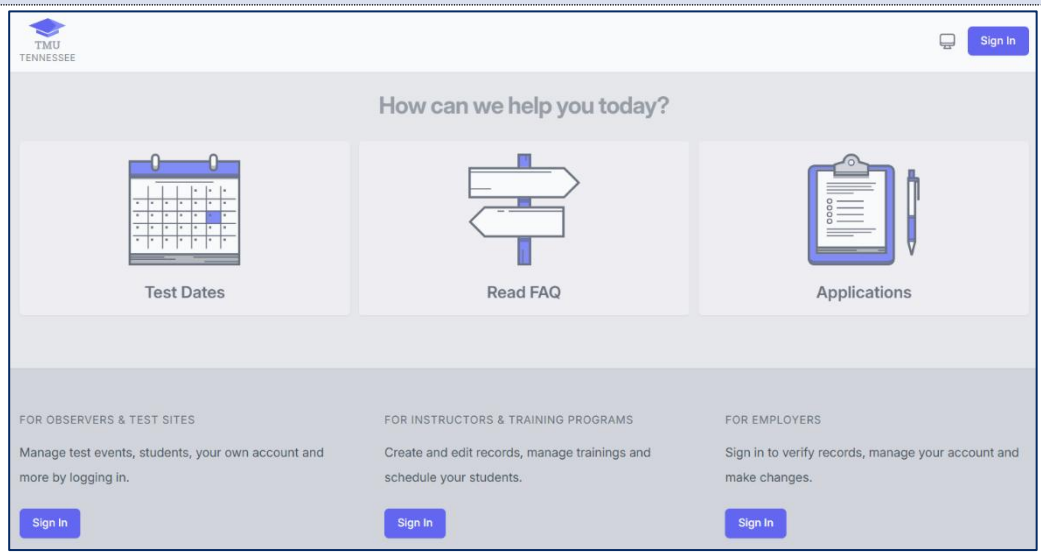
Tennessee TMU© Home Page

This is the Tennessee TMU© main page, **tn.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*

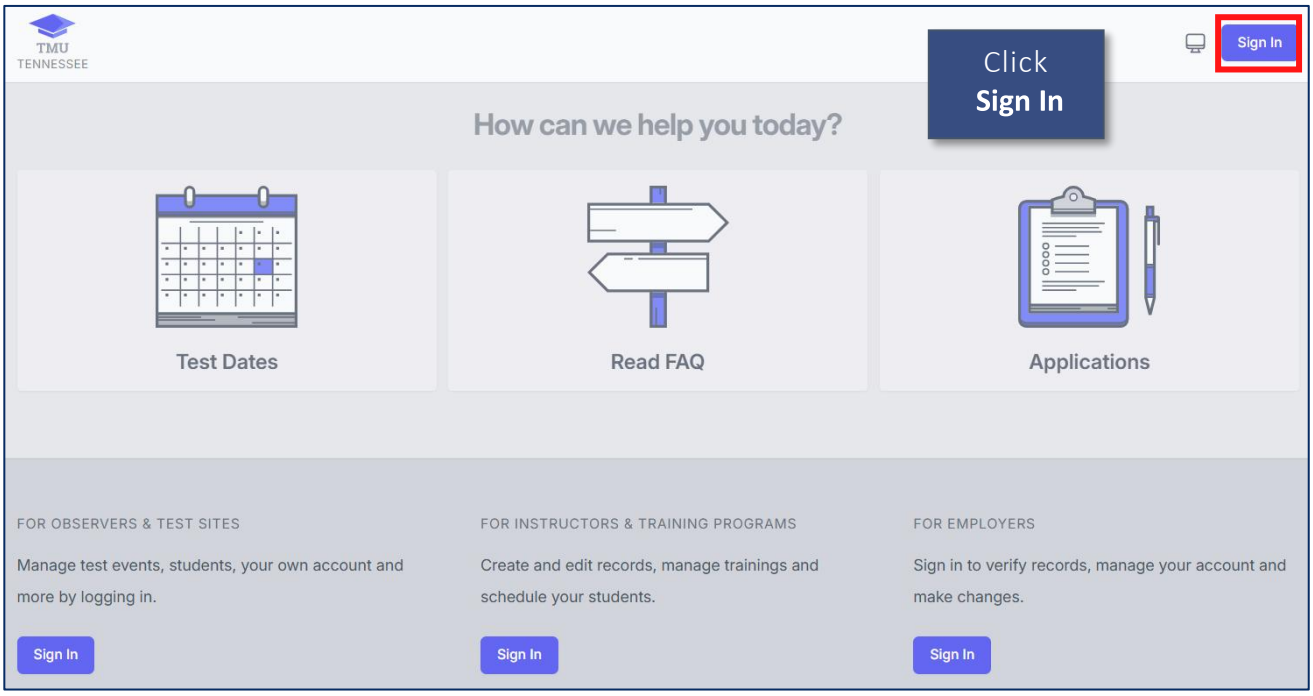
→ *Click on 'Applications' for frequently used applications*

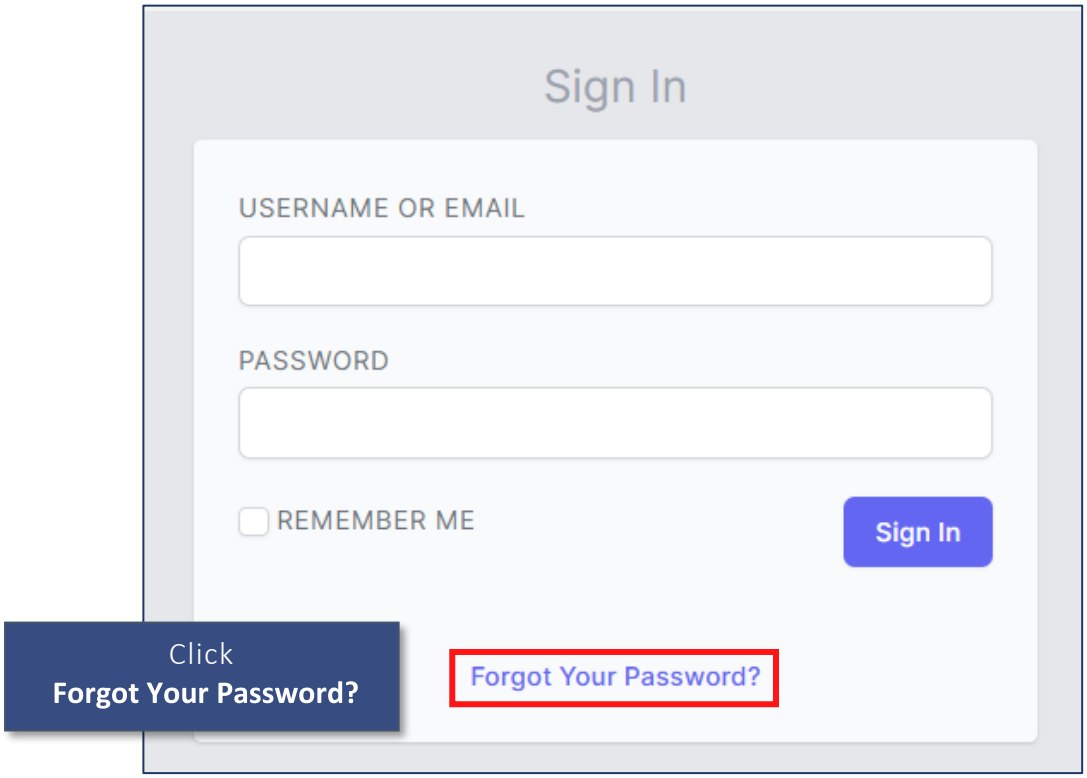


Forgot your Password and Recover your Account

If you do not remember your password or this is your first time accessing the Tennessee TMU©, follow the instructions with screenshots in this section.

Go to **tn.tmutest.com**.

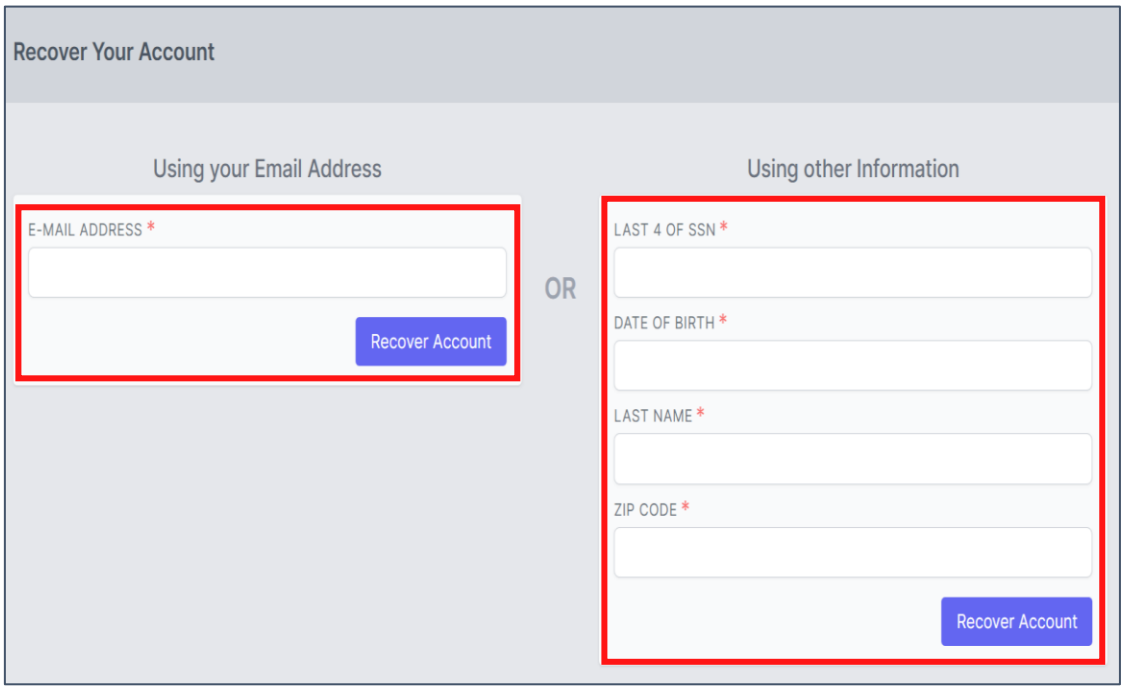




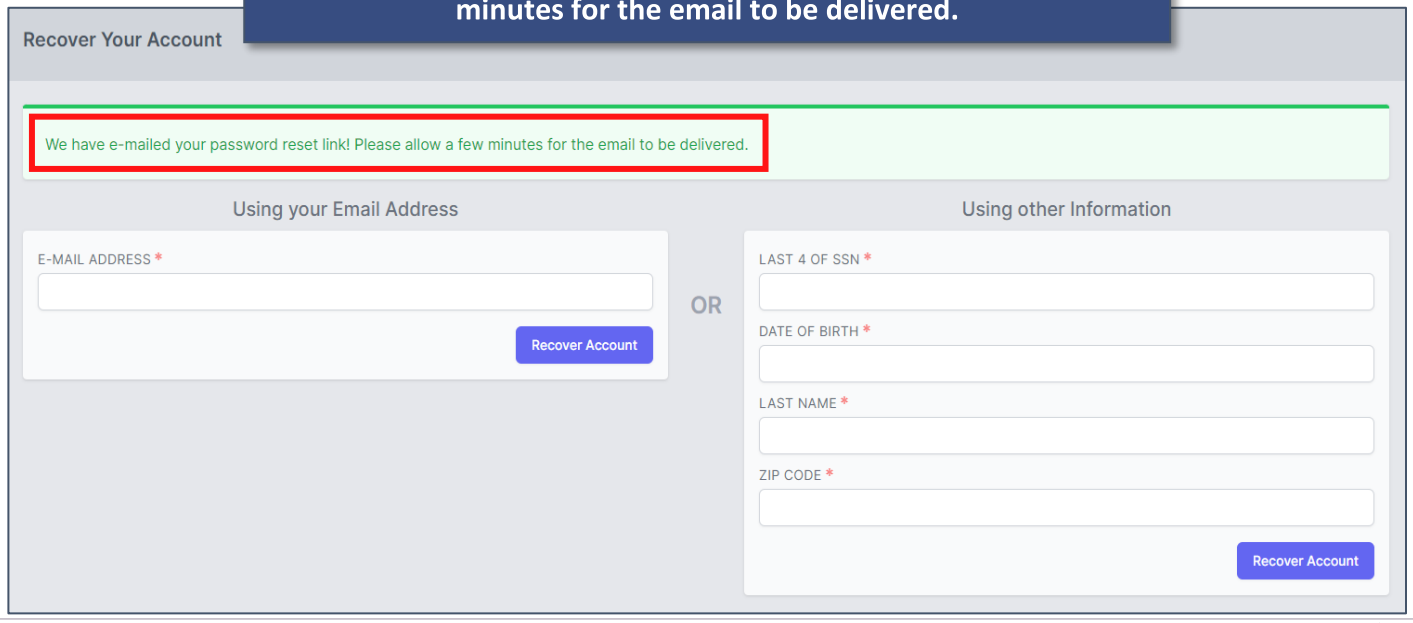
Type in your Email Address
Click **Recover Account**

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

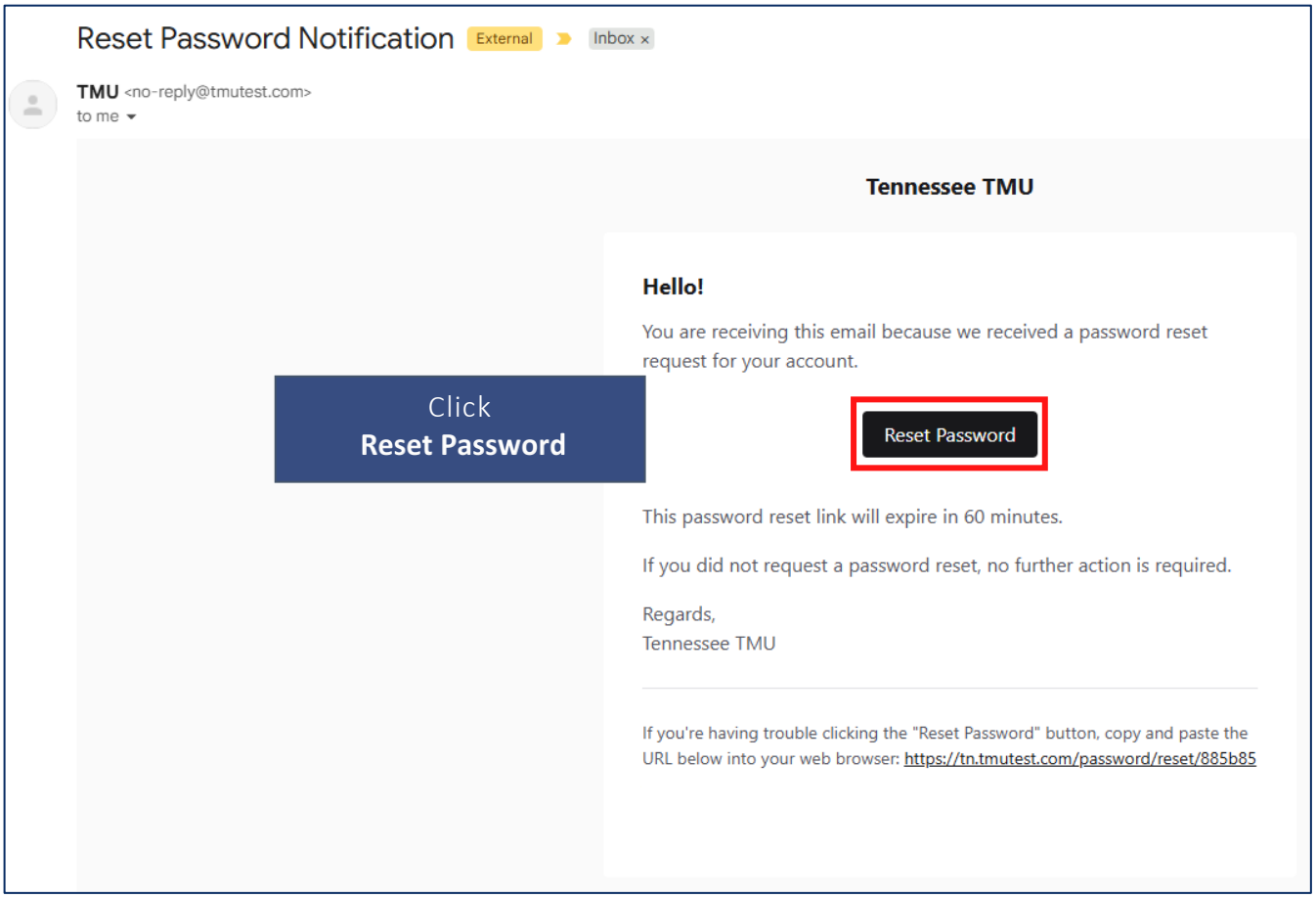
(-OR- if you have already updated your demographic information in your account, you can type in the requested data under **Using other Information**)
Click **Recover Account**



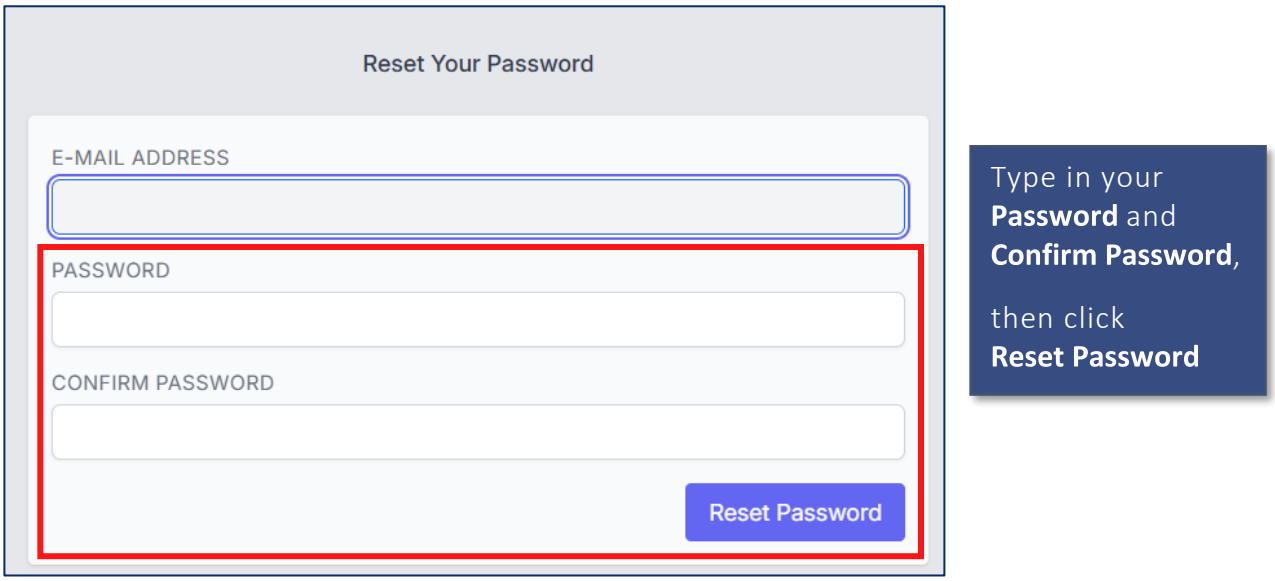
You will receive the message,
We have emailed your password reset link! Please allow a few minutes for the email to be delivered.



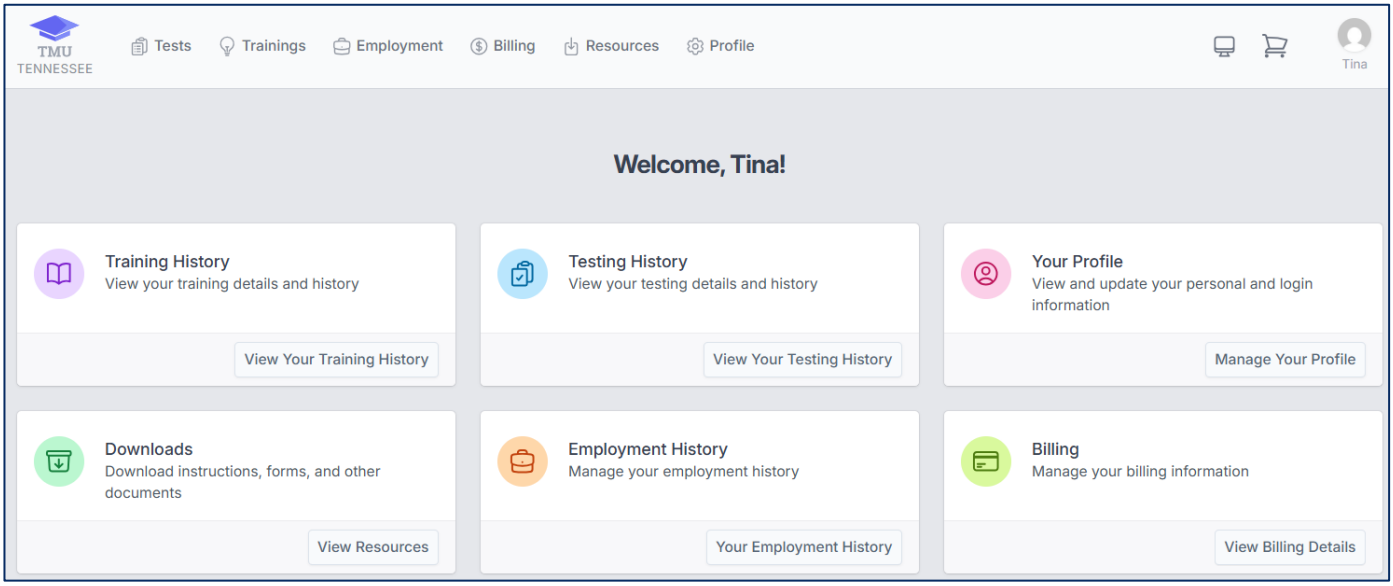
This is what the email will look like. Check your junk/spam folder if you cannot find this email.



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



You will see one of two screens, depending on whether this is your first time logging in or you have reset your password. *This is the candidate home screen you will see once you have reset your password:*



Complete your TMU© Profile

Medication Aide Training Program Candidates

Your training program will enter your initial registration information in D&SDT's Tennessee 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 turned away from testing. You will be marked as a no-show for your event and forfeit your testing fees.

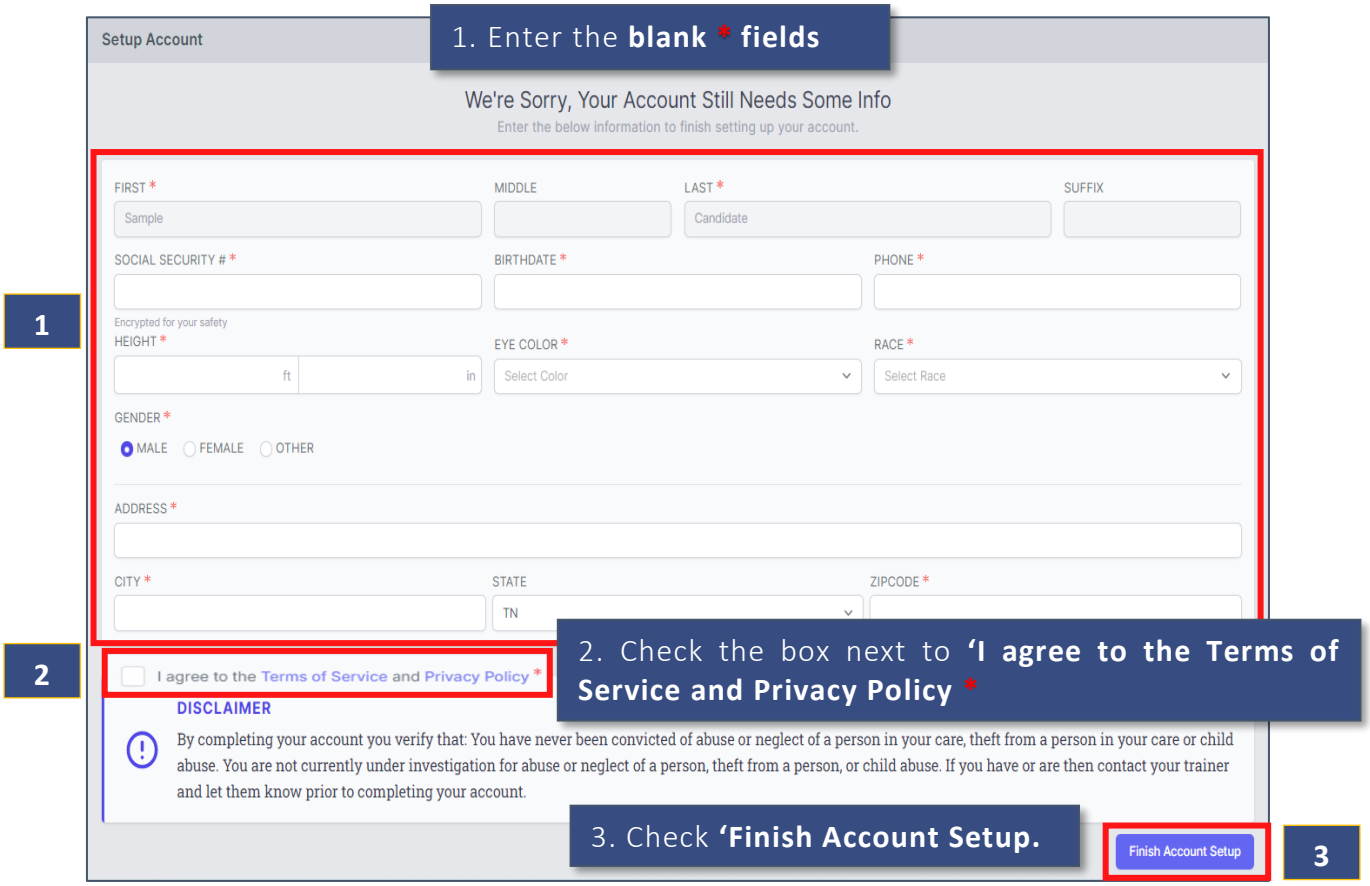
- Upon receiving your confirmation email from TMU© (check your junk/spam mail) that your account has been created, you need to sign in to your account, update your password, and complete your demographic information. **This must be done before scheduling a test event**

- By completing your account, you verify that:

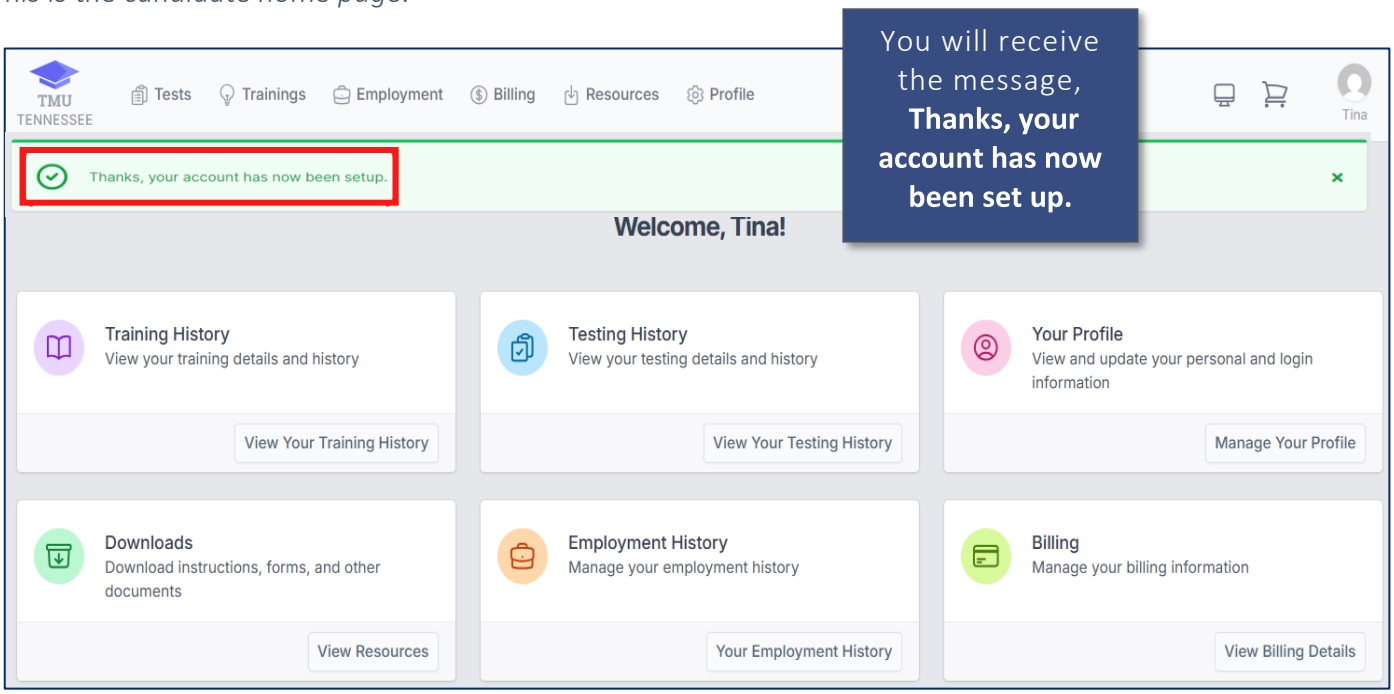
  - You have never been convicted of abuse or neglect of a person in your care, theft from a person in your care, or child abuse.
  - You are not currently under investigation for abuse or neglect of a person, theft from a person, or child abuse.
    - If you have or are, then you need to contact your trainer and let them know before completing your account.

If you do not know your 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 at (877) 201-0758.

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 home page:



THE TENNESSEE MEDICATION AIDE COMPETENCY EXAM

Payment Information

Exam Description	Price
Knowledge Exam or Retake	$45.00
Skill Test or Retake	$100.00

Schedule a Tennessee Medication Aide Exam

To schedule an examination date, candidates must have successfully completed a Tennessee Board of Nursing (TBON) approved medication aide (MA) training program or have a TBON-approved MA Education Waiver.

NOTE: You must have submitted your Tennessee Board of Nursing (TBON) application and received your Proof of Approval to test from the Tennessee Board of Nursing (TBON)prior to scheduling an exam.

In addition, all medication aide certification exam candidates must be registered with D&SDT through their training program unless the TBON grants a waiver. Your registration information will be transmitted to the TBON upon passing both portions of the MA-C exam.

Once your completed account is in the Tennessee TestMaster Universe© (TMU©) database, and your testing fee has been paid, you may schedule your exam date online at the Tennessee TMU© webpage at **tn.tmutest.com** using your Email or Username and Password (instructions with screenshots below). If you cannot sign in with your Email, please call D&SDT at (877) 201-0758.

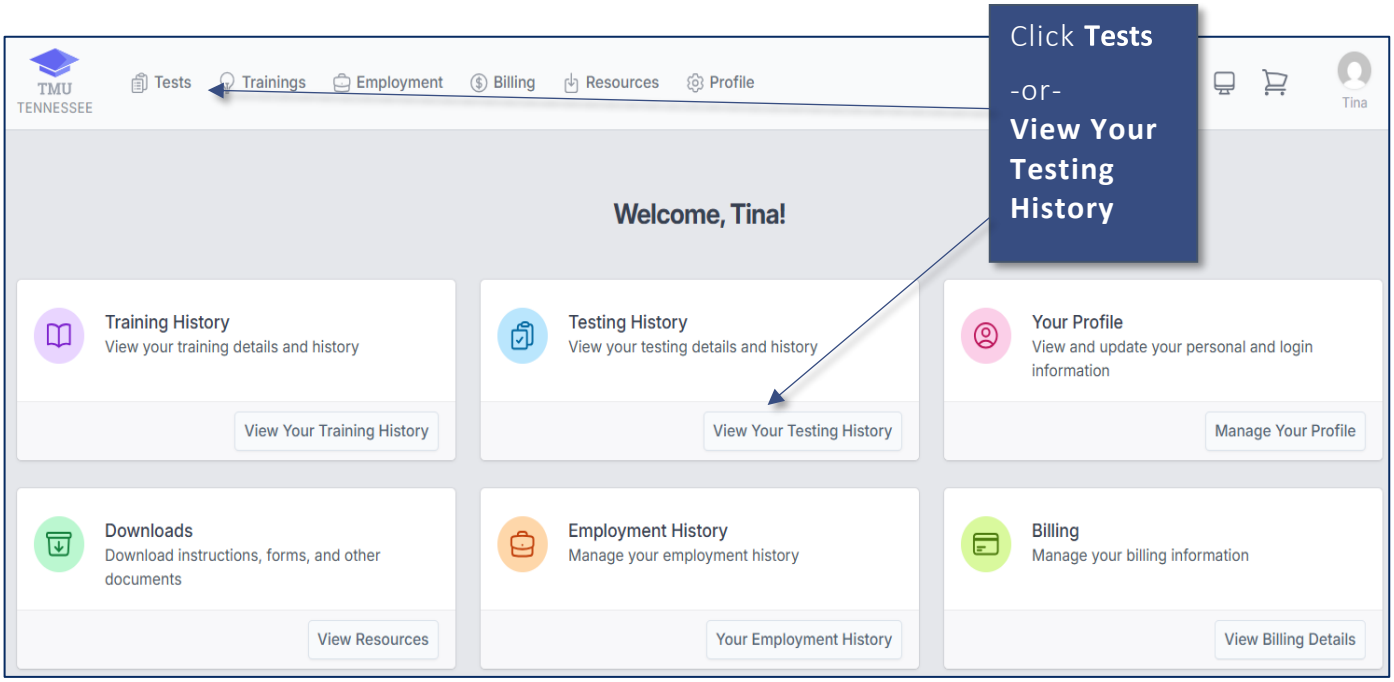
IMPORTANT: D&SDT schedules MA-C test events primarily on an 'as needed' basis. Therefore, it is important that you contact us at (877) 201-0758 or email us at tennessee@hdmaster.com to arrange a test date.

Self-Pay of Testing Fees in TMU©

You must pay testing fees 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 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 if the training program has already prepaid for your test.

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



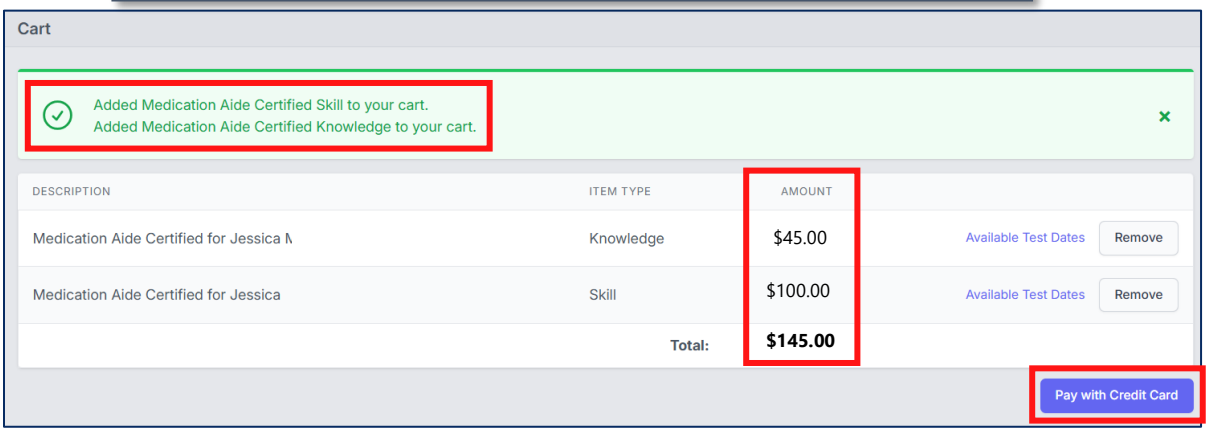
Click **Tests**

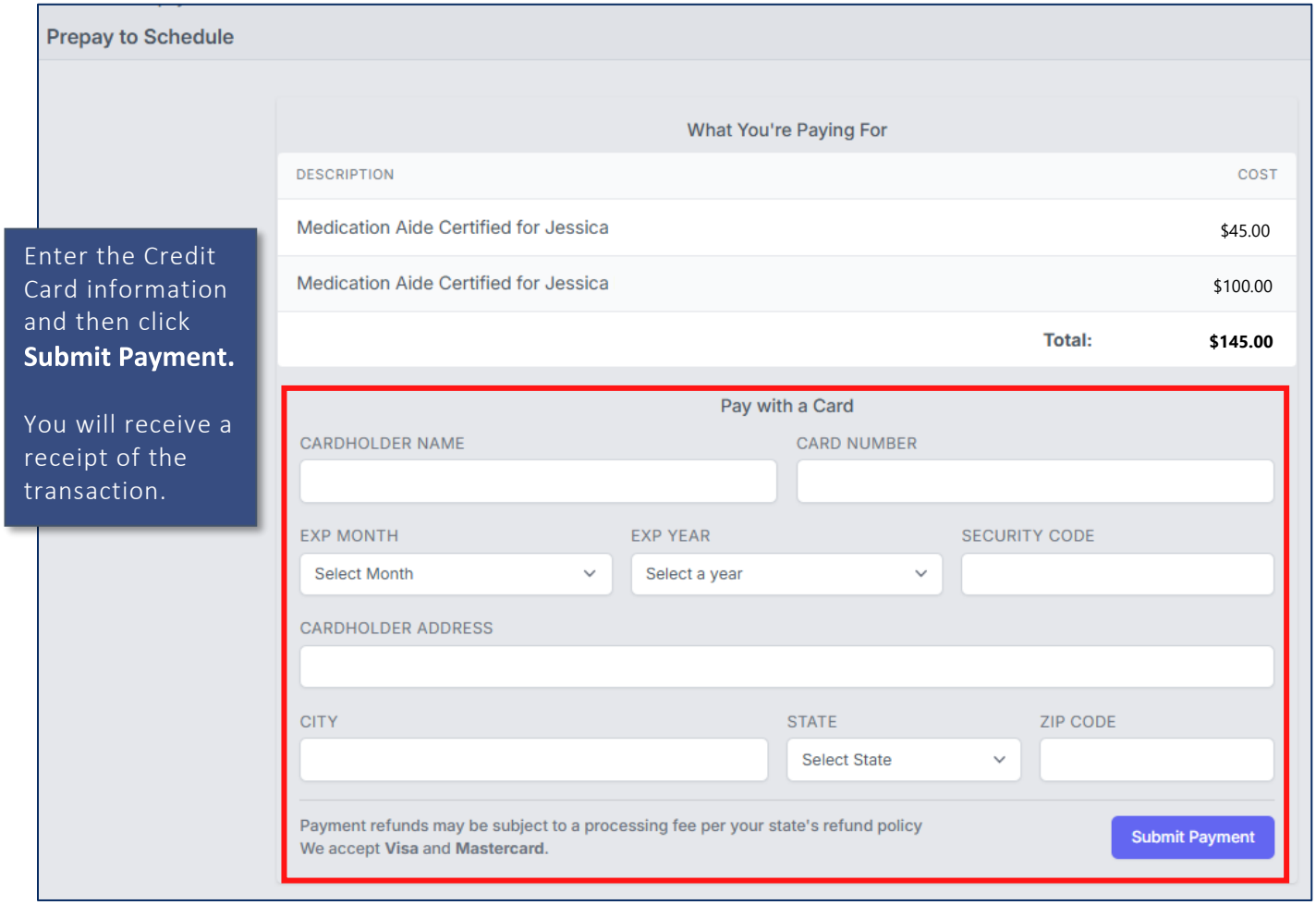
-or-

View Your Testing History

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

Click **Pay with Credit Card**





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

You will receive a receipt of the transaction.

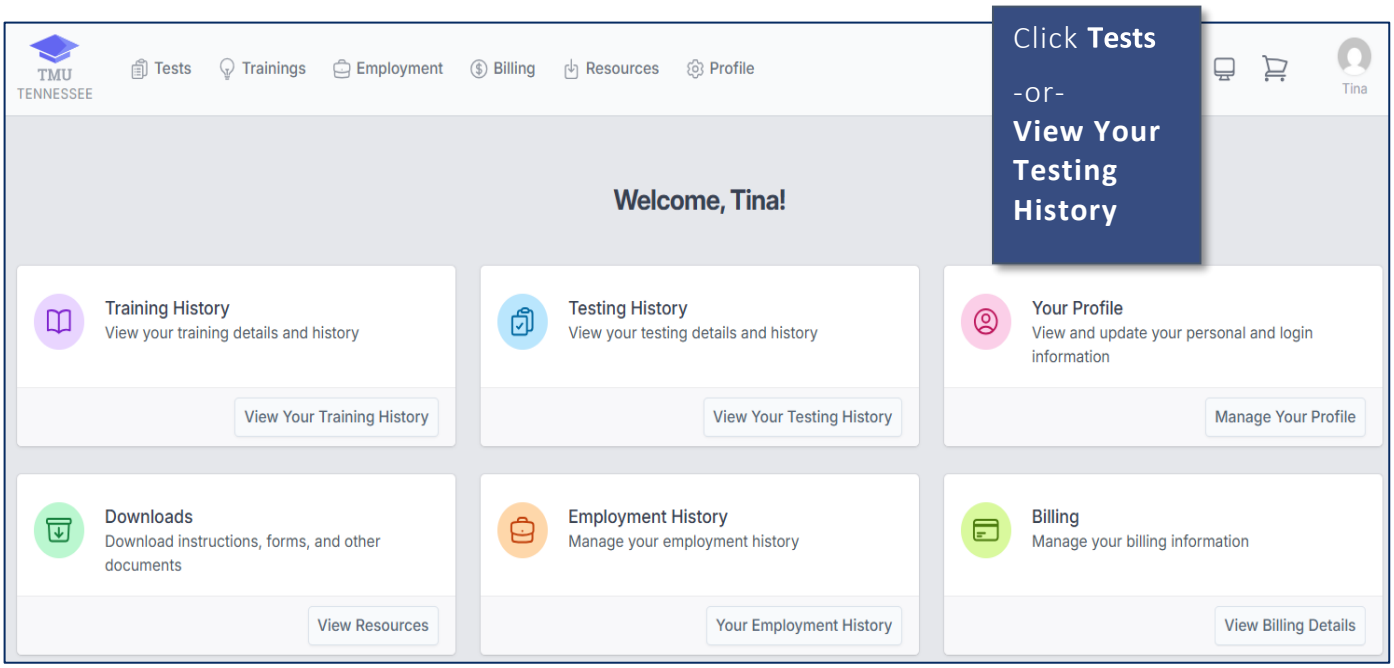
Special circumstances only: You may also pay your testing fees by emailing tennessee@hdmaster.com to request a Tennessee Payment Form.

NOTE: We will not process forms with missing information, payment, or signatures, and we will shred them. If you send a money order or cashier's check with the form, we will mail it back to the candidate.

Once we receive your payment form and process your payment, we will notify you via email and text that you are eligible to schedule a test event. **Please call D&SDT at (877) 201-0758 or email us at tennessee@hdmaster.com to schedule a test date.**

Schedule or Reschedule a Test Date

Go to **tn.tmutest.com**.



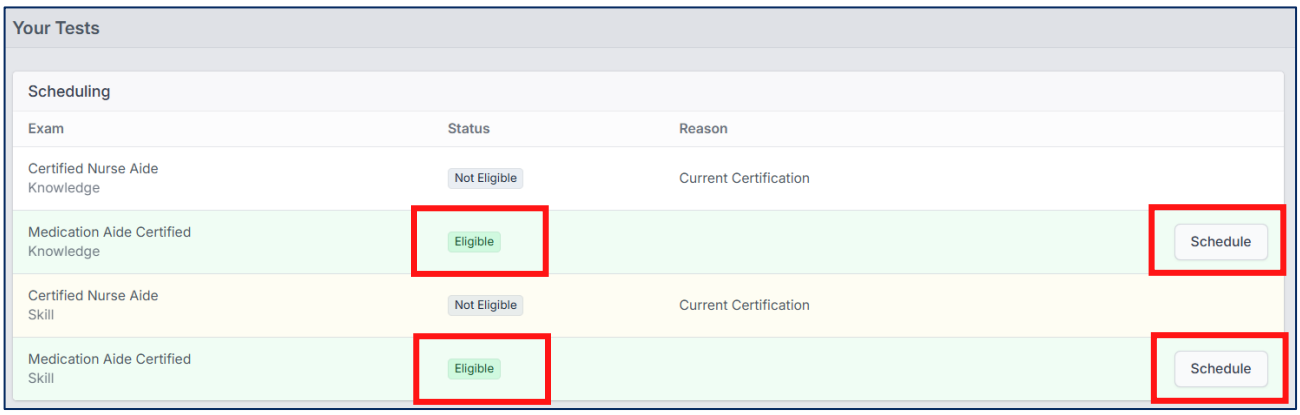
Click **Tests**

-or-

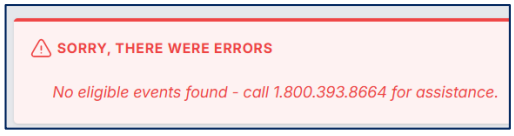
View Your Testing History

After your fees have been paid, your 'Status' will show that you are 'Eligible'.

Click **Schedule**

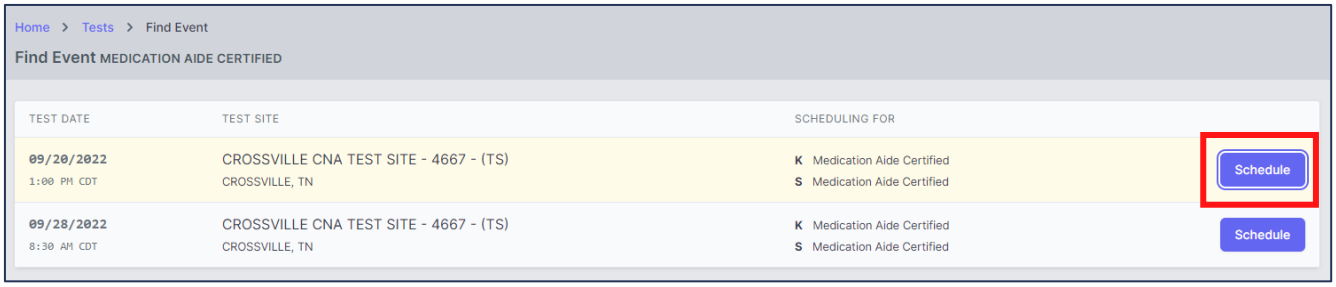


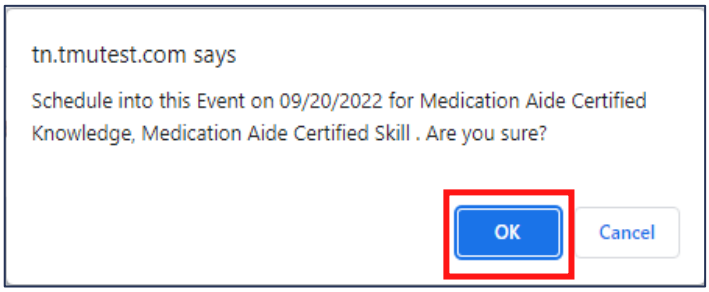
If you receive this message when you try to schedule, please call us to arrange a test date.



IMPORTANT: D&SDT schedules MA-C test events primarily on an 'as-needed' basis. Please **contact us at (877) 201-0758 or email us at tennessee@hdmaster.com to arrange a test date**. We may know of an event, or we will arrange one and add it to your calendar to schedule.

If there are eligible test dates you can schedule for, the next screen opens, showing you available test events. Click **Schedule** to the right of the site and date you want to test.



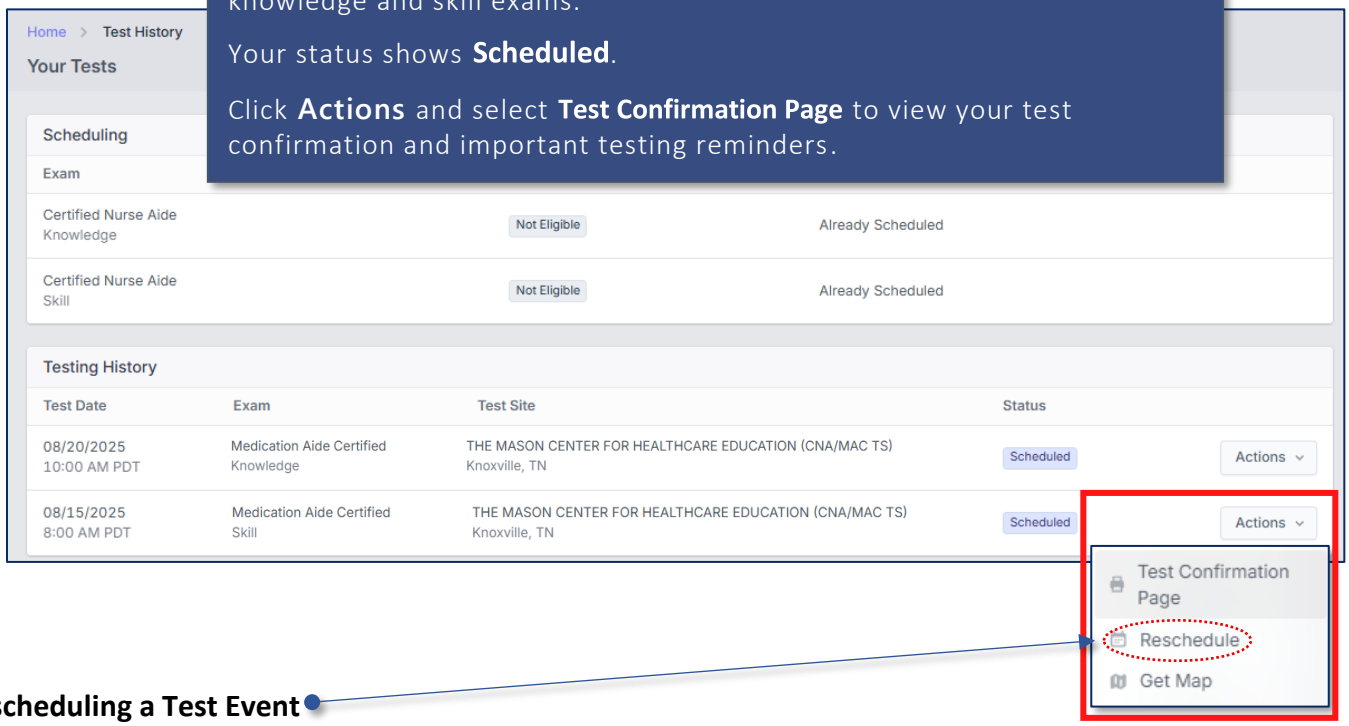


To confirm this is the site and date you want to schedule for a knowledge exam, click **OK**

This screen confirms that you are scheduled for a test date to take your knowledge and skill exams.

Your status shows **Scheduled**.

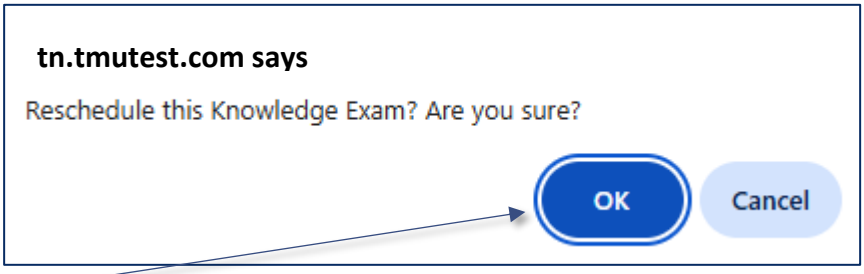
Click **Actions** and select **Test Confirmation Page** to view your test confirmation and important testing reminders.



Rescheduling a Test Event

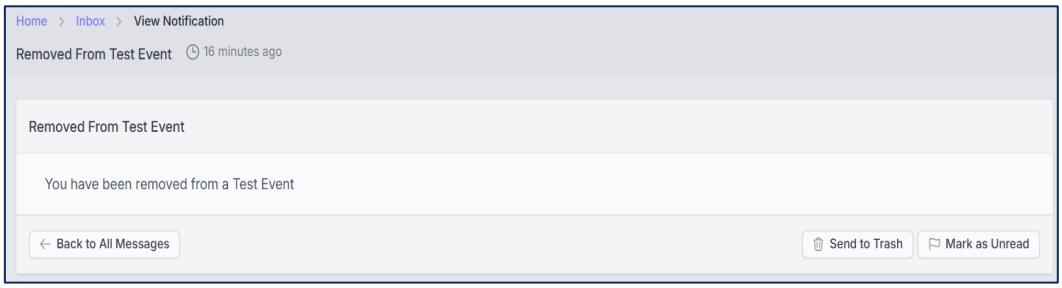
You may reschedule an exam date online in your TMU© account at **tn.tmutest.com** up to one (1) business day, **excluding** Saturdays, Sundays, and Holidays, before your scheduled exam date.

- If you need to reschedule your test date, under **Actions**, click on **Reschedule** to select another test date.



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

The following message will be in your notifications:



Test Confirmation Letter

Your test confirmation letter will provide important information regarding where you are scheduled to test (date, time, and address). You can access it anytime.

The body of the test confirmation letter will refer you to the candidate handbook, which provides specific instructions on arrival time, 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 that you read this letter!

See the next page for an example test confirmation letter.

Test Confirmation Example:

Scheduled Test Confirmation

Get Map | Print Page

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

Click on- **Get Map** *to get directions to the test site.*

Test Date: 09/09/2026
Test Time: **4:43 PM CDT**
Test Exam: **Medication Aide – Certified - Knowledge**
Test Site: **SAMPLE TEST SITE**
12345 Practice Street
Memphis, TN 55555

SAMPLE CANDIDATE
123 Sunflower Lane
Memphis, TN 55555

TESTING BEGINS AT **4:43 PM CDT** ON **09/03/2026**:

- ***FOR SKILLS TESTING AND/OR ON-SITE KNOWLEDGE EXAM CANDIDATES:*** You **MUST** be at your confirmed test site location waiting area/room **20 minutes before** your scheduled exam start time, **4:43 PM CDT**, to check in.
  - *Testing **begins** promptly at the start time noted on this test confirmation.*
- ***FOR REMOTELY PROCTORED KNOWLEDGE EXAM CANDIDATES:*** You **MUST** be signed in to the remotely proctored exam link (for example, Zoom, etc., waiting room) **20 minutes** before **4:43 PM CDT** for the check-in process with the remote test proctor. Please see the **Remotely Proctored Knowledge Exam section** of the **Candidate Handbook** for detailed information.

If you cannot access your account, go to https://tn.tmutest.com, click 'Forgot Password', enter your Email, click 'Send Reset Password Link', and follow the directions. If you need further assistance, please call D&SDT-Headmaster at 1.800.393.8664.

MEDICATION AIDE: Refer to the **Medication Aide Competency Exam** section of the **Tennessee Medication Aide Candidate Handbook** for 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 Aide Candidate Handbook

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

D&SDT does not send test confirmation letters by mail.

-CONTINUED ON THE NEXT PAGE-

VIEW YOUR NOTIFICATIONS

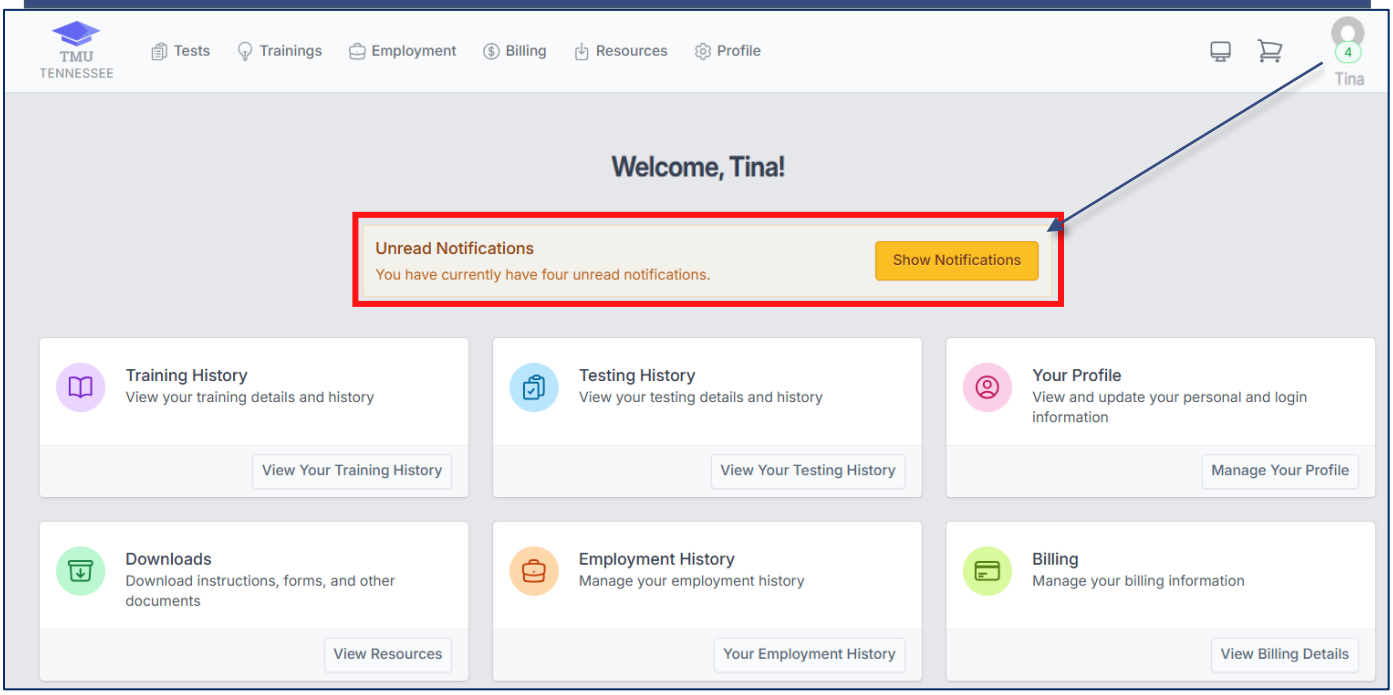
Remember to check your 'notifications' in your TMU© account for important notices regarding your selected test events and other information. See the instructions that follow:

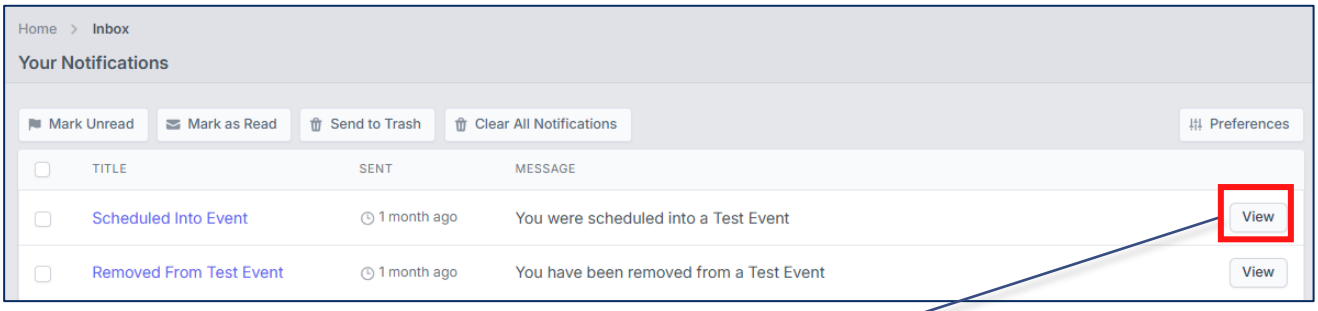
When you have 'notifications', they will show up when you click on your profile pic. The number represents the number of notifications you have to view.

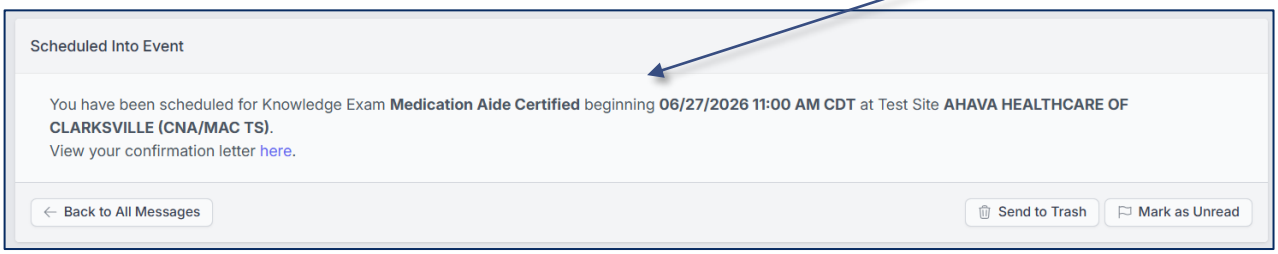
Click on-
Your Profile Pic to open your profile and notifications.

Or click on-
Show Notifications to view all of your notifications.

Click on-
VIEW to open each of your notifications.







Time Frame for Testing from Training Program Completion

You will be scheduled to take your knowledge and skill tests on the same day. You must schedule a test **within one year of completing your training program**. After one year, you must complete another TBON-approved 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 Tennessee TMU© page at **tn.tmutest.com**.

If you have questions about your test schedule, call D&SDT at (877) 201-0758, Monday through Friday, 7:00AM to 6:00PM Central Time/8:00AM to 7:00PM Eastern Time, excluding holidays.

TEST DAY

Exam Check-In

You must arrive at your confirmed test site waiting area/room at least 20 minutes before your test is scheduled to begin. No one will be admitted after the 20-minute cutoff. Anyone arriving after that time will be considered a no-show and will forfeit their testing fees.

- 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 at least 20 minutes before your test is scheduled to begin to allow time to get checked in with the RN Test Observer.

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, including clinical shoes.
  - No open-toed shoes (flip-flops or sandals) are allowed.
  - Scrubs and shoes can be any color/design.
- Bluetooth-connected devices such as smartwatches, smart glasses, fitness monitors, or any wearable technology are not allowed.
- Long hair must be pulled back.

NOTE: You will not be admitted for testing if you are not wearing scrubs, appropriate shoes, and pulled-back hair. You will be considered a no-show status. You will forfeit your testing fees and must pay for another exam date.

Identification

Mandatory: You must bring a **U.S. GOVERNMENT-ISSUED, PHOTO-BEARING, *SIGNED, NON-EXPIRED FORM OF IDENTIFICATION, and your ** Proof of Approval to test from the Tennessee Board of Nursing (TBON)**.

Only original IDs are accepted. Photocopies, images, faxes, emails, screenshots, and electronic or digitally stored forms (for example – Apple or Google Wallet, etc.) of identification ***will not be accepted***.

Examples of the forms of non-expired, US government-issued, *signed, acceptable photo IDs are:

- State-issued Driver's License
- State-issued Identification Card
- Signed U.S. Passport (Foreign Passports and Passport Cards *are not* acceptable)
    - *Exception: A signed foreign passport with a US VISA within the passport is acceptable (the VISA does not have a signature)*
- Permanent Resident Card (Green Card or Alien Registration Card) / Employment-Work Authorization Card issued by the U.S. Citizenship and Immigration Services (USCIS)
    - *Accepted without a signature or fingerprint IF ISSUED from January 30, 2023, to the present day. If issued before January 1, 2023, it may contain a fingerprint instead of a signature.*
- U.S. Military Identification Card
    - *Accepted without a signature or fingerprint but will have a bar code or may contain a fingerprint in place of a signature*
- Concealed Handgun Carry Permit *(that meets all identification requirements)*

****You must also bring your Proof of Approval to test from the Tennessee Board of Nursing (TBON).**

The **FIRST** and **LAST** names listed on the ID presented to the RN Test Observer during check-in at your test event ***MUST EXACTLY MATCH*** the FIRST and LAST names entered in the Tennessee TMU© database.

You may call D&SDT at (877) 201-0758 to confirm that your name of record matches your US government-issued ID and second form of ID, or log in at **tn.tmutest.com** using your Email or Username and Password to check on 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 and your Proof of Approval to test from TBON**.
    - Be sure your identification is not expired and that it is signed.
    - Check to ensure that the FIRST and LAST printed names on your identification match your current name of 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.
- In cases where names do not match, or your IDs are not proper/valid, this is considered a no-show status, and you will have to reschedule and pay for another test date.

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

DEMOGRAPHIC UPDATES / CORRECTIONS / CHANGES

Name changes (marriage/divorce, etc.), date-of-birth changes, and Social Security number corrections 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 Tennessee TMU© main web page (before you log in to your account).

Test Instructions

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

These instructions explain the process and what to expect during your exam. Please read the instructions ***before*** entering the testing room. The instructions will be left in the waiting area during testing for you to refer to throughout your time at the test site. The RN Test Observer and Knowledge Test Proctor will ask questions about the instructions you read when entering the testing rooms.

The **Knowledge Exam and Skill Test Instructions** are available under the **'RESOURCES'** tab in your TMU© account. Refer to the **Access the Candidate Handbook and Testing Instructions** section of this handbook.

Testing Policies

The following policies are observed at each test event:

- Make sure you have signed in to your TMU© account at **tn.tmutest.com** well before your test date to update your password and complete your demographic information. Refer to this handbook's **Complete Your TMU© Profile** 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 at the on-site test site waiting area/room to **check in 20 minutes before your scheduled start time**. (*For example*: if your test start time is 8:00AM, you must be at the test site waiting area at 7:40AM.) If you are not present at the on-site test waiting area/room 20 minutes before your test start time, you will not be admitted to the exam; you will be considered a NO SHOW, and any exam fees paid *will NOT be refunded*.
- If you do not bring a valid and appropriate US government-issued, non-expired, *signed photo ID and your Proof of Approval to test from TBON *(see details in this handbook's* **Identification** *section)*, you will not be admitted to the exam, and any exam fees paid *will NOT be refunded*.
  - If the **FIRST** and **LAST** names listed on your IDs 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 Tennessee TMU© database, you will not be admitted to the exam, and any exam fees paid *will NOT be refunded*.
- If you do not adhere to the testing attire as outlined in the **Testing Attire** section and conform to all testing policies, 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 for any reason *(see details in this handbook's* **No-Show Status** *section)*, 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.
- **ELECTRONIC DEVICES AND PERSONAL ITEMS:** Bluetooth-connected devices of any type (cell phones, smartwatches, smart glasses, wearable technology, etc.), electronic recording devices, and personal

items (such as water bottles, purses, bags, study materials, books, or papers) are not permitted to be on or near you in either testing room. The testing team will tell you where to place your personal items and electronic devices, and you will collect them when you complete your test(s).

- All electronic devices must be **turned off**.
  - → Bluetooth-connected devices of any type (smartwatches, smart glasses, fitness monitors, wearable technology) must be removed from your wrist, fingers, or body and **turned off**.

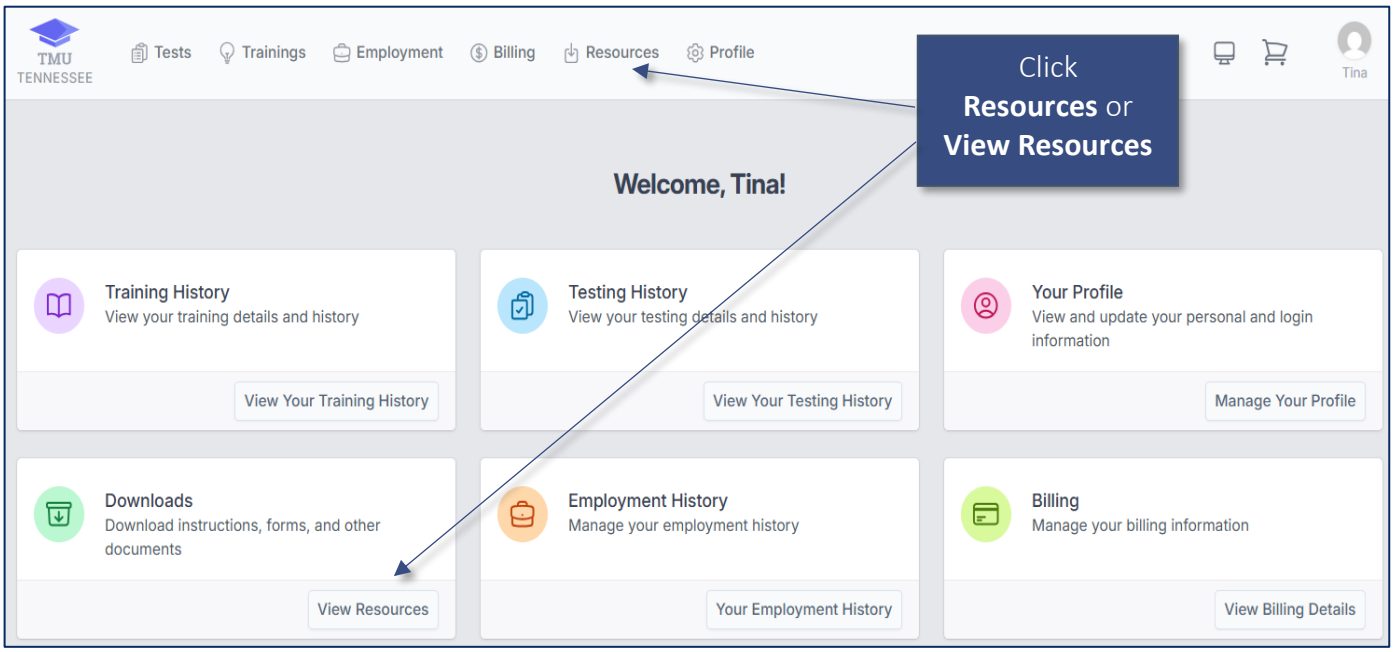
- Anyone caught using any electronic recording device during the knowledge exam will be dismissed from the exam and testing room, and your test will be scored as a failed attempt; you will forfeit all testing fees paid, and you will be reported to your training program and the Tennessee Board of Nursing. You may, however, use personal devices during your free time in the waiting area. Please see the **Security** section of this handbook.
- You are encouraged to bring a jacket, snack, drink, or study material while waiting to test.
- **LANGUAGE TRANSLATION DICTIONARIES:** Word-for-word language translation dictionaries are allowed during testing. You must show the foreign translation dictionary to the RN Test Observer/Knowledge Test Proctor before you start your knowledge exam. No documentation or writing can be in the translation dictionary. If there is, it will not be allowed. **Using unapproved language translators and electronic dictionaries is not allowed.**
- **SCRATCH PAPER:** If needed for math calculations, the KTP will provide you with scratch paper.
- 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/remotely proctored test event) 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/event to finish your exam.
- Behavioral misconduct or unlawful acts by test candidates are strictly prohibited at any stage of the licensure evaluation. Such actions may result in dismissal from the test site, denial of testing privileges, and reporting to your training program and the Tennessee Board of Nursing (TBON). Please see the **Security** section of this handbook.
- D&SDT, RN Test Observers, Knowledge Test Proctors, Actors, and test sites 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 at (877) 201-0758 or by email at tennessee@hdmaster.com after you schedule a test date so 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 at (877) 201-0758 immediately to reschedule.

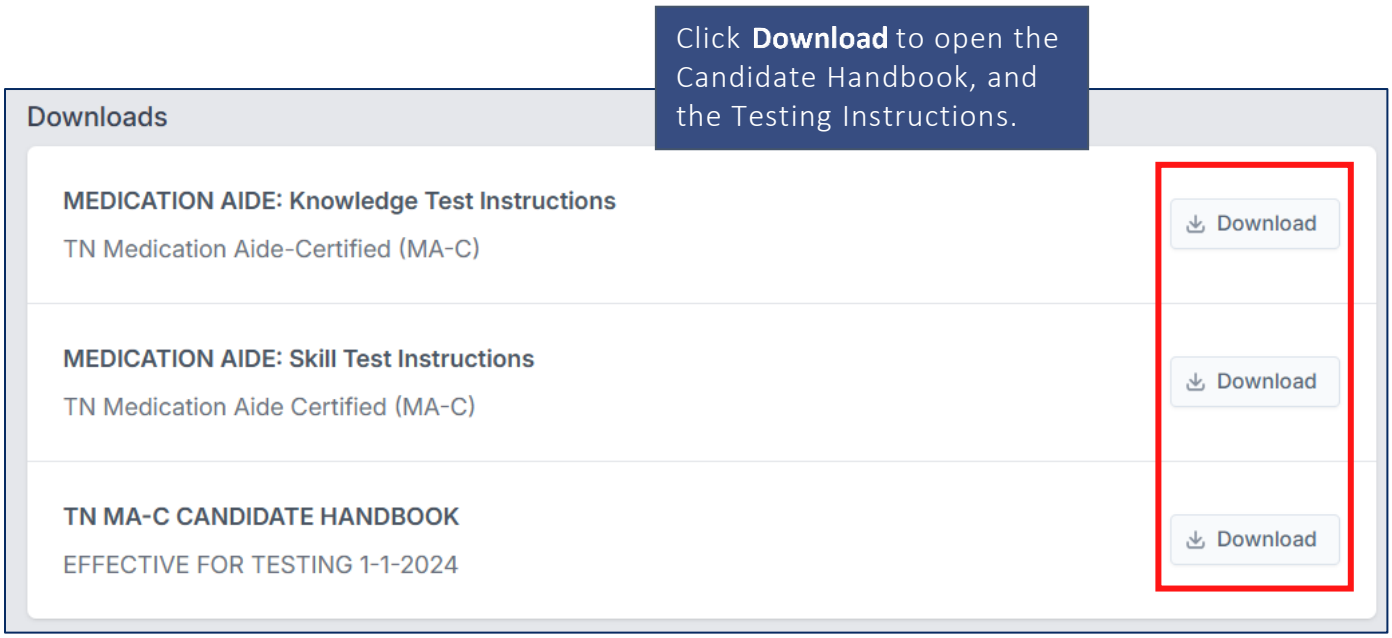
  NOTE: Please see the **Rescheduling Policy** and **No-Show Exceptions** sections in this handbook.

  → *Reschedules will not be granted less than one (1) full business day before a scheduled test date.*
- **Please review this 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 'Resources' tab.

Access the Candidate Handbook and Testing Instructions





Security

Behavioral misconduct or unlawful acts by test candidates are strictly prohibited. Such actions may result in dismissal from the onsite or remotely proctored test locations, denial of testing privileges, and reporting you to your training program and the Tennessee Board of Nursing (TBON).

Reportable misconduct includes, but is not limited to, the following:

- Cheating
- Refusing to follow directions
- Using abusive language or threatening others
- Disrupting the examination environment
- Visibly impaired
- Engaging in unprofessional or aggressive behavior
- Attempting to remove test material, take notes, or copy information
- Giving or receiving unauthorized help during testing, including using electronic devices (e.g., cell phones, smartwatches, smart glasses, wearable technology) or navigating to other browsers during your exam

POLICY: If you commit one of these acts, 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.

A report of your behavior will be sent to your training program and the TBON and will be subject to legal prosecution to the fullest extent of the law. You may not be eligible to retest for at least 6 months and may need to obtain the TBON's permission to retest.

Rescheduling Policy

All candidates may reschedule to a new test date up to one (1) business day before the scheduled test day, 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 by signing in to your TMU© account using your Email or Username and Password. (See instructions with screenshots under **Schedule or Reschedule a Test Event**.)

Example: If you are scheduled to take your exam on a Friday, you must reschedule by the close of business on Wednesday before your scheduled exam. D&SDT's regular business hours are 7:00AM to 6:00PM CT/8:00AM to 7:00PM ET, Monday through Friday, excluding holidays.

The scheduled test date is on a:	**Reschedule before 6:00PM CT/7:00PM ET 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 less than one (1) full business day before a 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 means that you are not interested in taking the Tennessee medication aide certification exam at all.

Scheduled in a Test Event

1. If you are scheduled in a test event, a refund request for testing fees paid must be made by filling out and submitting the **Refund Request Form** on D&SDT's main webpage 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 Friday, you must request a refund by submitting the Refund Request Form by the close of business (D&SDT is open until 6:00PM CT/7:00PM ET, Monday through Friday, excluding holidays) the Wednesday before your scheduled exam.

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 paying the original testing fees with D&SDT. Refund requests made after 30 days will not be processed.

Not Scheduled in a Test Event

1. Refund requests must be made within thirty (30) days of the original payment of testing fees with D&SDT. Refund requests made after 30 days will not be processed.
2. To request a refund for testing fees paid, submit the **Refund Request Form** on D&SDT's main webpage 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 an unforeseen circumstance, D&SDT staff will make every effort to contact you using the contact information (phone number/email) we have on file to reschedule you for a mutually agreed-upon new test date at no charge.

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 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 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 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 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, proper attire, 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 yourself into a new test event.

These fees partially offset D&SDT's costs incurred for requested services and resulting work performed. If you do not submit or we do not receive a reschedule or refund request before the one (1) full business day preceding a scheduled test event, excluding Saturdays, Sundays, and holidays (see examples under **Schedule or Reschedule a Test Event** and **Refund of Testing Fees Paid**), we will assign a no-show status. 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 the knowledge exam 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 the **No Show Exception Form** (**within the required time frames outlined below**) available on the Tennessee TMU© main page under 'APPLICATIONS'.

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

- **Weather or road condition-related issue**: D&SDT must be contacted within one business day via phone call, fax, or email, and 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 three business days, you will be required to pay as if you were a no-show.

- **Medical emergency or illness**: D&SDT must be contacted within one business day via phone call, fax, or email, and a doctor's note showing your name and the provider's 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 three business days, you will be required to pay as if you were a no-show.

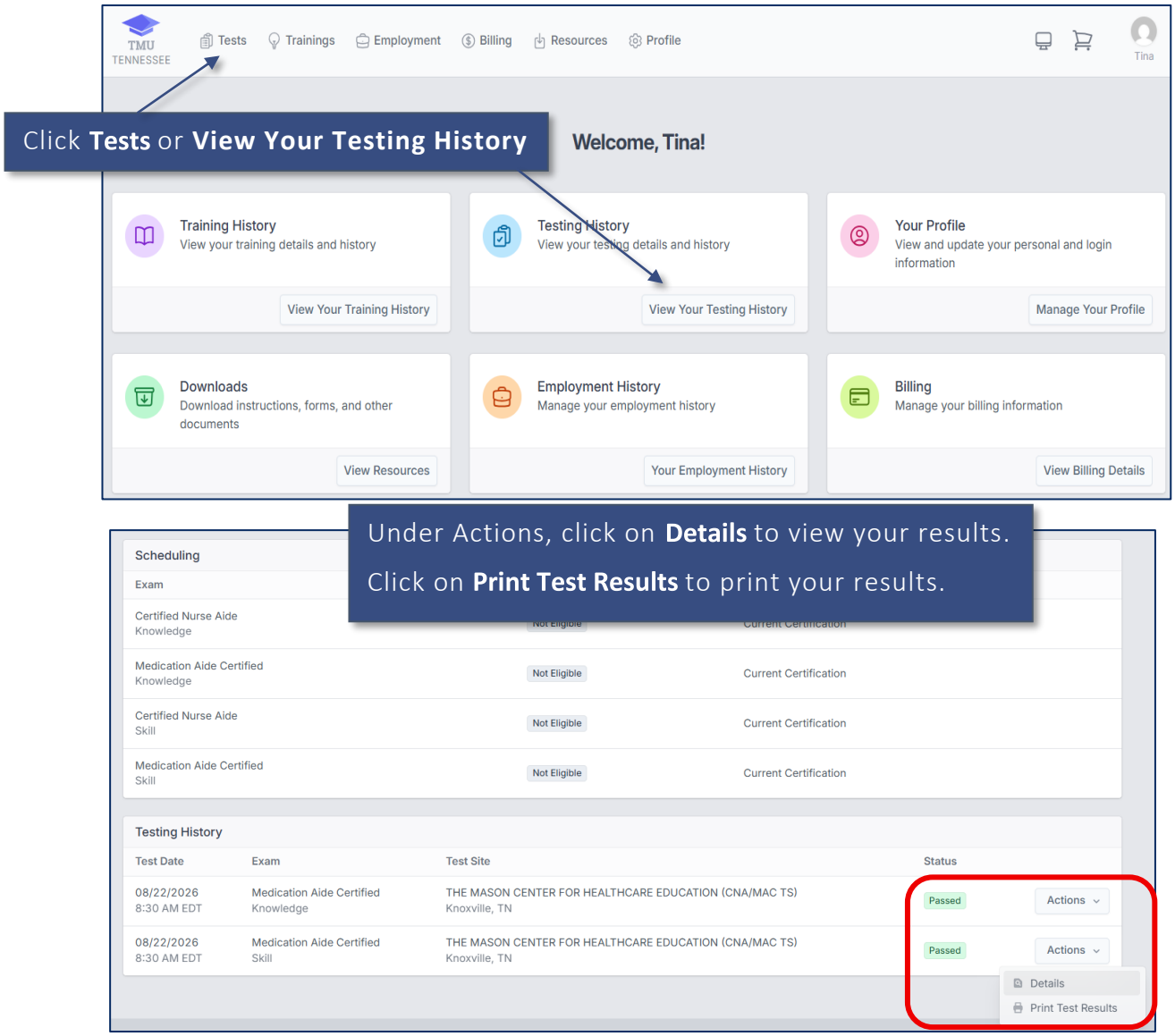
- **Death in the family**: D&SDT must be contacted within one business day via phone call, fax, or email, and an obituary showing your name and the provider's name, or a letter on your behalf from the funeral home for immediate family only, must be submitted within **seven (7) business days** from a missed exam date. If we do not receive proof within seven business days, you will be required to pay as if you were a no-show. (Immediate family includes parents, grandparents, great-grandparents, siblings, children, spouse, or significant other.)

Test Results

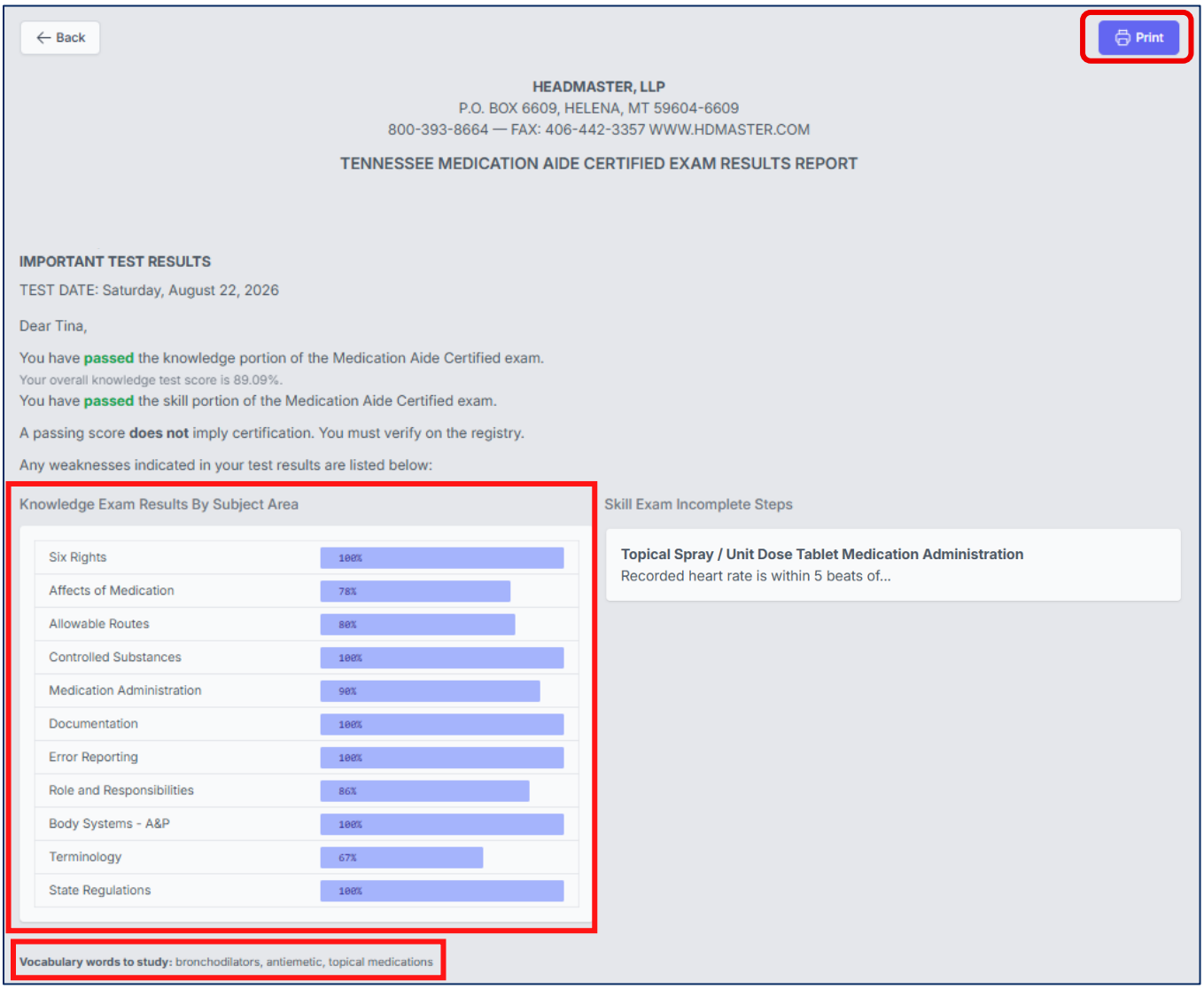
After you have completed both the Knowledge Exam and Skill Test components of the competency exam, your test results will be officially scored and double-checked by D&SDT scoring teams. Official test results will be available when you sign in to your TMU© account (**tn.tmutest.com**) after 6:00PM (CT)/7:00 (ET) the business day after your test event.

D&SDT does not send postal mail test result letters to candidates.

Access your Test Results



Sample Tennessee Medication Aide exam results report:



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800-393-8664 — FAX: 406-442-3357 WWW.HDMASTER.COM

TENNESSEE MEDICATION AIDE CERTIFIED EXAM RESULTS REPORT

IMPORTANT TEST RESULTS

TEST DATE: Saturday, August 22, 2026

Dear Tina,

You have **passed** the knowledge portion of the Medication Aide Certified exam.
Your overall knowledge test score is 89.09%.
You have **passed** the skill portion of the Medication Aide Certified exam.

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

Six Rights	100%
Affects of Medication	78%
Allowable Routes	80%
Controlled Substances	100%
Medication Administration	90%
Documentation	100%
Error Reporting	100%
Role and Responsibilities	86%
Body Systems - A&P	100%
Terminology	67%
State Regulations	100%

Skill Exam Incomplete Steps

Topical Spray / Unit Dose Tablet Medication Administration
Recorded heart rate is within 5 beats of...

Vocabulary words to study: bronchodilators, antiemetic, topical medications

Test Attempts

You have **two (2) attempts** to pass the knowledge and skill test portions of the exam within one (1) year from your date of medication aide training program completion. If you do not complete testing within one year from completion of training, you must complete a new TBON-approved training program in order to become eligible to further attempt Tennessee medication aide examinations.

Applying for a Tennessee Medication Aide Certification

After successfully passing both the Knowledge and Skill Test components of the medication aide exam, your test results will be sent electronically to the Tennessee Board of Nursing by D&SDT. The Tennessee Board of Nursing will officially notify you when you have met all the criteria to be a certified medication aide in Tennessee. One requirement is passing both the knowledge and skill test components of the TBON-approved, D&SDT-delivered medication aide test. If you fail either test component, you must reapply to retake the component that you failed.

Expediting your Medication Aide Application for Certification with the Tennessee Board of Nursing

You may be able to expedite your Medication Aide application for certification with the Tennessee Board of Nursing by following the steps outlined below:

- Before you apply:
  - Complete a medication aide training program.
  - Pass the medication aide certification exam: tn.tmutest.com
- Request that an official transcript indicating the medication assistant training completion date be mailed (no e-scripts) directly to the Tennessee Board of Nursing.
- Complete the Criminal Background Check https://www.tn.gov/health/health-professionals/criminal-background-check/cbc-instructions.html
  - *Find the application online:* https://www.tn.gov/content/dam/tn/health/healthprofboards/nursing/applications/Medication%20Aide%20Certification%20Application.pdf
- Declaration of Citizenship:
  - https://www.tn.gov/content/dam/tn/health/healthprofboards/PH-41833.pdf
  - Submit a notarized Declaration of Citizenship
  - Include proof of citizenship (e.g., current, unexpired driver's license)
  - Not a US citizen - #7 requires that you circle a category in "a-h" and submit two (2) items of proof (listed on the form)
- If positive criminal history – submit with application:
  - Letter of explanation
  - Certified copies of arresting document (warrant), judgment (disposition), completion of judgment (receipt of payment of fines, letter of completion of probation)
- Do not submit the application without payment

Note: Do not practice in the role of a Medication Aide until certified by the Tennessee Board of Nursing.

Retaking the Medication Aide Test

In the event that your test results inform you that you failed the knowledge and/or skill portion of the examination, you will be provided with detailed test diagnostics in your test results. You will have to retake the portion you failed. When you want to apply for a retest, you will need to repay for the portion that you failed before you can schedule an exam date.

You can schedule a test or retest in your TMU© account with your Email or Username and Password at **tn.tmutest.com**. You must pay with a Visa or Mastercard before you can schedule. (See instructions under **Schedule or Reschedule a Test Event**.)

Call D&SDT at (877) 201-0758 during regular business hours (7:00AM to 6:00PM CT/8:00AM to 7:00PM ET, Monday through Friday, excluding holidays) if you need assistance. We can help you schedule a test or retest date, provided you pay your fees first.

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 you fill out the Test Review Request:

- Please call D&SDT at (877) 201-0758 during regular business hours, 7:00AM to 6:00PM CT/8:00AM to 7:00PM ET, Monday through Friday, excluding holidays, to discuss the test outcome you are questioning before committing to paying the $25 non-refundable test review request deposit.
- After you learn the details about the scoring of your test, you may better understand the scoring process and learn how to prepare more effectively for subsequent exam attempts.
- If, after discussing your concerns with D&SDT staff, you still have concerns about your testing process that affected the outcome of your exam, you may submit a Test Review Request.

To request a review:

- Complete the **Test Review Request and Payment Application**, available on the Tennessee TMU© main page under 'APPLICATIONS' (before logging in to your account) at **tn.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.
- **There is a $25 non-refundable test review deposit fee.**
- D&SDT will review your detailed recollection, 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 skill test if that is what the review request is about. We will interview the RN Test Observer about the facts detailed in your dispute documentation. D&SDT will recheck your test scoring and may contact you, the RN Test Observer, the Actor, the KTP, and other candidates who were on-site at your test event for additional information.
- D&SDT will complete your review request **within ten business days of receiving it** within the required timeframe. We will send the final determination of the review results to the email address listed in your TMU© account, along with a notification to the Tennessee Board of Nursing (TBON).
- The 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 review findings are *not in your favor*, the $25 test review deposit will remain, and the fee is non-refundable.

THE KNOWLEDGE EXAM

Knowledge Exam Content

The Knowledge Exam consists of 55 multiple-choice questions. Questions are selected from subject areas based on the TBON-approved Tennessee Medication Aide Test Plan. The subject areas and number of items from each area are as follows on the next page.

Subject Area	# of Questions
Affects of Medication on Body Systems	9
Allowable Routes	5
Body Systems – A&P	3
Documentation	5
Error Reporting	3
Medication Administration	9
Regulation of Controlled Substances	4
Role and Responsibility	7
Six Rights of Medication Administration	5
State Regulations	2
Terminology	3

Knowledge Exam Information

The Knowledge Test Proctor will hand out materials and give instructions for taking the Knowledge Exam. You will have a maximum of **60 minutes** to complete the **55-question** Knowledge Exam. 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 score 75% or higher to pass the knowledge exam.

All test sites in Tennessee utilize electronic TMU© testing using Internet-connected computers. The Knowledge Test will be displayed on a computer screen for you to read and enter your answers.

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

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© Profile** to sign in to your TMU© account.

LANGUAGE TRANSLATION DICTIONARIES: Word-for-word language translation dictionaries are allowed during testing. You must show the foreign translation dictionary to the RN Test Observer/Knowledge Test Proctor before you start your knowledge exam. No documentation or writing can be in the translation dictionary. If there is, it will not be allowed. **Using unapproved language translators and electronic dictionaries is not allowed.**

SCRATCH PAPER: If needed for math calculations, the KTP will provide you with scratch paper.

- *Any scratch paper must be left with the KTP when finished with your test.*

Anyone who takes or tries to take materials, notes, or information from the testing room is subject to prosecution and will be reported to their training program and the Tennessee Board of Nursing (TBON).

Sample Questions

Candidates may also purchase complete, randomly generated medication aide practice tests. A mastery learning method is used, and each practice test will be unique. This means candidates must answer the question correctly before moving on to the next question. A first-attempt percentage score and vocabulary feedback are supplied upon completion of the practice test. A list of vocabulary words to study is provided at the end of each test. Single- or group-purchase plans are available at **www.hdmaster.com**.

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

1. An order for Colace qd would require that you to 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 aide
   a. a regularly scheduled oral hypertensive agent
   b. an antibiotic cream applied to the skin
   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-C

THE MANUAL SKILL TEST

- The purpose of the Skill Test is to evaluate your performance when demonstrating Tennessee-approved medication aide skill tasks. You will find a complete list of skill tasks in this handbook.

- You will be asked to re-present your ID that 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.
  - One of the tasks will be a controlled substance administration task.

- Each of your randomly selected tasks will have scenarios associated with them. 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 open and use the MAR to determine what medications to obtain from the locked medication box or locked controlled substance file box. You will administer the medications obtained to a live resident actor.

- You will be allowed a maximum of **twenty-five (25) minutes** to complete the two medication administration tasks. 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 **75%** 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, say so.
  - You will need to demonstrate the step or steps on the task you believe you performed incorrectly for the correction to be noted for the step.

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

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.

If you fail a single task, you will have to take another skill test with two tasks, one of which will be a controlled substance task. The skill tasks included in your skill test are randomly chosen so that every skill test is comparable in difficulty and has an average length of time to complete.

The RN Test Observer will observe the demonstrations of your medication administration tasks and record what they see you do. D&SDT scoring teams will officially score and double-check your test.

Please note: The skill task steps in this handbook are guidelines to help prepare candidates for the Tennessee medication aide skill test. They are not intended to provide complete care that includes all best practices used in an actual work setting.

Controlled Substance

1) Perform hand hygiene.
2) Locate the correct individual in the MAR from the scenario that was read.
3) **Check #1: Verbally verify the MAR contains the correct resident, drug, dose, time, and route (five rights).**
4) Unlock the controlled substance medication file box.
5) **Obtain the correct medication from the controlled substance medication box.**
6) **Check #2: Match the drug label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).**
7) Open the container or pop the medication from the bubble pack.
8) **Pour the correct number of tablets.**
9) Do not contaminate the medication.

10) **Check #3: Match the drug obtained and the prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).**
11) Open the count book to the correct page.
12) Documentation Count Book: Record the appropriate date format (month/day/year) on the correct page in the count book.
13) Documentation Count Book: Record the right time on the correct page in the count book.
14) Documentation Count Book: Record the right route on the correct page in the count book.
15) Documentation Count Book: Record the right number of tablets on hand on the correct page in the count book.
16) Documentation Count Book: Record the right number of tablets used on the correct page in the count book.
17) Documentation Count Book: Record the right number of tablets remaining on the correct page in the count book.
18) Documentation Count Book: Sign your name on the correct page in the count book.
19) Close the count book.
20) Return the drug to the controlled substance medication box.
21) Lock the controlled substance medication box.
22) Secure the medication box keys on your person.
23) Greet the resident.
24) Introduce yourself as a Medication Aide.
25) Verify the right resident by comparing the MAR with the appropriate method of identification, e.g., picture, wristband, or facility-appropriate method of identification.
26) Explain the procedure.
27) Give the resident a glass of water.
28) Assist the resident in taking the medication.
29) Verify the medication has been swallowed.
30) Maintain interpersonal communication throughout the administration.
31) Place the call light within reach or verbalize verification of the call light for wrist/necklace call devices.
32) Perform hand hygiene.
33) **Documentation MAR: Initial the correct medication sheet under the right date after administering the medication.**
34) **Documentation MAR: Initial the correct MAR across from the right time after administering the medication.**
35) **Documentation MAR: Initial the correct medication sheet across from the right medication after administering the medication.**
36) **Initial and sign the MAR in the signature area. (Sixth right)**
37) Close the MAR.

Ear Drops / Oral Liquid Administration

1) Perform hand hygiene.
2) Open the MAR. Find the resident for the scenario that was read.
3) **For the oral liquid (1st) medication, verbally verify the MAR contains the correct resident, drug, dose, time, and route (five rights).**
4) Unlock the medication box.

5) **For the oral liquid (1st) medication, obtain the correct drug from the correct resident's drawer in the medication box, match the label to the MAR, and verbally identify all five rights (resident, drug, dose, time, and route).**
6) Set the medication cup on a level surface.
7) **Pour the correct amount of medication into the medication cup.**
8) Check for the correct amount of medication at eye level.
9) Return unused medication to the medication box.
10) Do not contaminate the medication.
11) **For the ear drop (2nd) medication, verbally verify the MAR contains the correct resident, drug, dose, time, and route (five rights).**
12) **For the ear drop (2nd) medication, obtain the correct drug from the correct resident's drawer in the medication box, match the label to the MAR, and verbally identify all five rights (resident, drug, dose, time, and route).**
13) **For the ear drop medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).**
14) Greet the resident.
15) Introduce yourself as a Medication Aide.
16) **Verify the right resident by comparing the MAR with the appropriate method of identification, e.g., picture, wristband, or facility-appropriate method of identification.**
17) Explain the procedure.
18) Assist the resident in taking oral medication.
19) Lower the head of the bed.
20) The head is turned toward the right, and the left ear is upward.
21) Hold the external ear flap and pull up and back.
22) **Instill the correct number of drops of medication into the ear.**
23) Ensure the dropper tip does not touch the inside of the ear canal.
24) Tell the resident not to move their head for a few minutes.
25) Replace all unused medications back in the medication box.
26) Lock the medication box.
27) Secure the medication box keys on person.
28) Maintain interpersonal communication during administration.
29) Place the call light within reach or verbalize verification of the call light for wrist/necklace call devices.
30) Perform hand hygiene.
31) **Document administration correctly on the MAR (resident, drug, dose, time and route). [Sixth right]**
32) **Initial and sign the MAR in the signature area. [Sixth right]**
33) Close the MAR.

Ear Drops / Tablet Administration

1) Perform hand hygiene.
2) Open the MAR. Find the resident for the scenario that was read.
3) **For the tablet (1st) medication, verbally verify the MAR contains the correct resident, drug, dose, time, and route (five rights).**
4) Unlock the medication box.

5) **For the tablet (1st) medication, obtain the correct drug from the correct resident's drawer in the medication box, match the label to the MAR, and verbally identify all five rights (resident, drug, dose, time, and route).**
6) Open the tablet container or pop the medication from the bubble pack.
7) **Put the correct number of tablets into the medication cup.**
8) **For the tablet (1st) medication, match the drug obtained and the prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).**
9) Return the first drug to the correct resident's drawer in the medication box.
10) Do not contaminate the medication.
11) **For the ear (2nd) medication, verbally verify the MAR contains the correct resident, drug, dose, time, and route (five rights).**
12) **For the ear (2nd) medication, obtain the correct drug from the correct resident's drawer in the medication box, match the label to the MAR, and verbally identify all five rights (resident, drug, dose, time, and route).**
13) **For the ear (2nd) medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).**
14) Greet the resident.
15) Introduce yourself as a Medication Aide.
16) **Verify the right resident by comparing the MAR with the appropriate method of identification, e.g., picture, wristband, or facility-appropriate method of identification.**
17) Explain the procedure.
18) Give the resident a glass of water.
19) Assist the resident in taking the tablet medication.
20) Ensure the resident swallows the tablet(s).
21) Lower the head of the bed.
22) Shake the ear medication before use.
23) Turn the head to the right with the left ear upward.
24) Hold the external ear flap and pull up and back.
25) **Instill the correct number of drops of medication into the left ear.**
26) Ensure the dropper tip does not touch the inside of the ear canal.
27) Tell the resident not to move their head for a few minutes.
28) Place all unused medications back in the medication box.
29) Lock the medication box.
30) Secure the medication box keys on person.
31) Maintain interpersonal communication during administration.
32) Place the call light within reach or verbalize verification of the call light for wrist/necklace call devices.
33) Perform hand hygiene.
34) **Document administration correctly on the MAR (resident, drug, dose, time, and route). [Sixth right]**
35) **Initial and sign the MAR in the signature area. [Sixth right]**
36) Close the MAR.

Eye Drops / Oral Tablet Administration

1) Perform hand hygiene.
2) Open the MAR. Find the resident for the scenario that was read.
3) **For the tablet (1st) medication, verbally verify the MAR contains the correct resident, drug, dose, time, and route (five rights).**
4) Unlock the medication box.
5) **For the tablet (1st) medication, obtain the correct drug from the correct resident's drawer in the medication box, match the label to the MAR, and verbally identify all five rights (resident, drug, dose, time, and route).**
6) Open the tablet container or pop the medication from the bubble pack.
7) **Put the correct number of tablets into the medication cup.**
8) **For the tablet (1st) medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).**
9) Return the first drug to the correct resident's drawer in the medication box.
10) Do not contaminate the medication.
11) **For the eye (2nd) medication, verbally verify the MAR contains the correct resident, drug, dose, time, and route (five rights).**
12) **For the eye (2nd) medication, obtain the correct drug from the correct resident's drawer in the medication box, matching the label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).**
13) **For the eye (2nd) medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).**
14) Greet the resident.
15) Introduce yourself as a Medication Aide.
16) **Verify the right resident by comparing the MAR with the appropriate method of identification, e.g., picture, wristband, or facility-appropriate method of identification.**
17) Explain the procedure.
18) Give the resident a glass of water.
19) Assist the resident in taking the tablet medication.
20) Ensure the resident swallows the tablet(s).
21) Gently tilt the resident's head back with chin up.
22) Pull down on the lower eyelid of the right eye, making a pocket.
23) Ask the resident to look up toward the forehead.
24) **Drop the correct number of drops of medication into the pocket.**
25) Ensure the dropper tip does not touch the eye.
26) Use a tissue to remove excess fluid around the eye.
27) Place all unused medications back in the medication box.
28) Lock the medication box.
29) Secure the medication box keys on person.
30) Maintain interpersonal communication during administration.
31) Place the call light within reach or verbalize verification of the call light for wrist/necklace call devices.
32) Perform hand hygiene.
33) **Document administration correctly on the MAR (resident, drug, dose, time, and route). [Sixth right]**
34) **Initial and sign the MAR in the signature area. [Sixth right]**
35) Close the MAR.

Eye Drops / Unit Dose Administration

1) Perform hand hygiene.
2) Open the MAR. Find the resident for the scenario that was read.
3) **For the unit dose (1st) medication, verbally verify the MAR contains the correct resident, drug, dose, time, and route (five rights).**
4) Greet the resident.
5) Introduce yourself as a Medication Aide.
6) **Verify the right resident by comparing the MAR with the appropriate method of identification, e.g., picture, wristband, or facility-appropriate method of identification.**
7) Explain the procedure.
8) Listen to the apical heart rate for 60 seconds with a teaching stethoscope.
9) Record the heart rate on the MAR.
10) The candidate's recorded heart rate is within five (5) beats of the RN Test Observer's.
11) **Verbalize whether or not to proceed with unit dose medication administration based on the heart rate obtained and administer it if it is at an appropriate level.**
12) Unlock the medication box.
13) **If administering the unit dose (1st) medication, obtain the correct drug from the correct resident's drawer in the medication box, matching the label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).**
14) If administering, open the container or pop the medication from the bubble pack.
15) **If administering, put the correct number of tablets into the medication cup.**
16) **If administering the unit dose medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).**
17) If administering, return the unit dose medication to the correct resident's drawer in the medication box.
18) If administering, do not contaminate the unit dose medication.
19) **For the eye (2nd) medication, verbally verify the MAR contains the correct resident, drug, dose, time, and route (five rights).**
20) **For the eye (2nd) medication, obtain the correct drug from the correct resident's drawer in the medication box, match the label to the MAR, and verbally identify all five rights (resident, drug, dose, time, and route).**
21) **For the eye (2nd) medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).**
22) If proceeding with the unit dose, give the resident a glass of water.
23) If proceeding with the unit dose, assist the resident in taking the medication.
24) If proceeding with the unit dose, ensure the resident swallows the tablet(s).
25) Gently tilt the resident's head back with chin up.
26) Pull down on the lower eyelid of the right eye, making a pocket.
27) Ask the resident to look up toward the forehead.
28) **Drop the correct number of drops of medication into the pocket.**
29) Ensure the dropper tip does not touch the eye.
30) Use a tissue to remove excess fluid around the eye.
31) Place all unused medications back in the medication box.
32) Lock the medication box.
33) Secure the medication box keys on your person.
34) Maintain interpersonal communication during administration.
35) Place the call light within reach or verbalize verification of the call light for wrist/necklace call devices.

36) Perform hand hygiene.
37) Document administration correctly on the MAR (resident, drug, dose, time, and route). [Sixth right]
38) Initial and sign the MAR in the signature area. [Sixth right]
39) Close the MAR.

Nasal Spray / Tablet Administration

1) Perform hand hygiene.
2) Open the MAR. Find the resident for the scenario that was read.
3) For the tablet (1st) medication, verbally verify the MAR contains the correct resident, drug, dose, time, and route (five rights).
4) Unlock the medication box.
5) For the tablet (1st) medication, obtain the correct drug from the correct resident's drawer in the medication box, match the label to the MAR, and verbally identify all five rights (resident, drug, dose, time, and route).
6) Open the tablet container or pop the medication from the bubble pack.
7) Put the correct number of tablets into the medication cup.
8) For the tablet (1st) medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).
9) Return the first drug to the correct resident's drawer in the medication box.
10) Do not contaminate the medication.
11) For the nasal (2nd) medication, verbally verify the MAR contains the correct resident, drug, dose, time, and route (five rights).
12) For the nasal (2nd) medication, obtain the correct drug from the correct resident's drawer in the medication box, match the label to the MAR, and verbally identify all five rights (resident, drug, dose, time, and route).
13) For the nasal (2nd) medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).
14) Greet the resident.
15) Introduce yourself as a Medication Aide.
16) Verify the right resident by comparing the MAR with the appropriate method of identification, e.g., picture, wristband, or facility-appropriate method of identification.
17) Explain the procedure.
18) Give the resident a glass of water.
19) Assist the resident in taking the tablet medication.
20) Ensure the resident swallows the tablet(s).
21) Ask the resident to blow their nose.
22) Administer one spray in the correct nostril only.
23) Replace all unused medications back in the medication box.
24) Lock the medication box.
25) Secure the medication box keys on person.
26) Maintain interpersonal communication during administration.

27) Place the call light within reach or verbalize verification of the call light for wrist/necklace call devices.
28) Perform hand hygiene.
29) Document administration correctly on the MAR (resident, drug, dose, time, and route). [Sixth right]
30) Initial and sign the MAR in the signature area. [Sixth right]
31) Close the MAR.

Oral Capsule Administration

1) Perform hand hygiene.
2) Open the MAR. Find the resident for the scenario that was read.
3) For the 1st medication, verbally verify the MAR contains the correct resident, drug, dose, time, and route (five rights).
4) Unlock the medication box.
5) For the 1st medication, obtain the correct drug from the correct resident's drawer in the medication box, match the label to the MAR, and verbally identify all five rights (resident, drug, dose, time, and route).
6) Open the first container or pop the medication from the bubble pack.
7) Pour the correct number of capsules into the medication cup.
8) Do not touch the medication.
9) For the 1st medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).
10) Return the first drug to the correct resident's drawer in the medication box.
11) For the 2nd medication, verbally verify the MAR contains the correct resident, drug, dose, time, and route (five rights).
12) For the 2nd medication, obtain the correct drug from the correct resident's drawer in the medication box, match the label to the MAR, and verbally identify all five rights (resident, drug, dose, time, and route).
13) Open the second container or pop the medication from the bubble pack.
14) Pour the correct number of capsules into the medication cup.
15) Do not touch the medication.
16) For the 2nd medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).
17) Return the second drug to the correct resident's drawer in the medication box.
18) Lock the medication box.
19) Secure the medication box keys on your person.
20) Greet the resident.
21) Introduce yourself as a Medication Aide.
22) Verify the right resident by comparing the MAR with the appropriate method of identification, e.g., picture, wristband, or facility-appropriate method of identification.
23) Explain the procedure.
24) Give the resident a glass of water.
25) Assist the resident in taking the medication.
26) Ensure the medication has been swallowed.
27) Maintain interpersonal communication throughout the administration.
28) Place the call light within reach or verbalize verification of the call light for wrist/necklace call devices.

29) Perform hand hygiene.
30) Document administration correctly on the MAR (resident, drug, dose, time, and route). [Sixth right]
31) Initial and sign the MAR in the signature area. [Sixth right]
32) Close the MAR.

Oral Liquid / Ointment Administration

1) Perform hand hygiene.
2) Open the MAR. Find the resident for the scenario that was read.
3) For the oral liquid (1st) medication, verbally verify the MAR contains the correct resident, drug, dose, time, and route (five rights).
4) Unlock the medication box.
5) For the oral liquid (1st) medication, obtain the correct drug from the correct resident's drawer in the medication box, match the label to the MAR, and verbally identify all five rights (resident, drug, dose, time, and route).
6) Set the medication cup on a level surface.
7) Pour the correct amount of medication.
8) Check for the correct amount of medication at eye level.
9) Return unused medication to the medication box.
10) Do not contaminate the medication.
11) For the ointment (2nd) medication, verbally verify the MAR contains the correct resident, drug, dose, time, and route (five rights).
12) For the ointment (2nd) medication, obtain the correct drug from the correct resident's drawer in the medication box, match the label to the MAR, and verbally identify all five rights (resident, drug, dose, time, and route).
13) For the ointment (2nd) medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).
14) Greet the resident.
15) Introduce yourself as a Medication Aide.
16) Verify the right resident by comparing the MAR with the appropriate method of identification, e.g., picture, wristband, or facility-appropriate method of identification.
17) Explain the procedure.
18) Assist the resident in taking oral medication.
19) Inspect the right forearm skin area where ointment medication is to be applied.
20) Put on at least one glove.
21) Open the ointment.
22) Do not contaminate the lid.
23) Apply ointment with a gloved hand to the right forearm.
24) Spread the ointment to cover the area to be treated.
25) Replace the ointment lid.
26) Remove glove(s) turning inside out.
27) Discard glove(s) in appropriate container.
28) Place all unused medications back in the medication box.
29) Lock the medication box.
30) Secure the medication box keys on person.
31) Maintain interpersonal communication during administration.

32) Place the call light within reach or verbalize verification of the call light for wrist/necklace call devices.
33) Perform hand hygiene.
34) Document administration correctly on the MAR (resident, drug, dose, time, and route). [Sixth right]
35) Initial and sign the MAR in the signature area. [Sixth right]
36) Close the MAR.

Topical Ointment / Oral Capsule Medication Administration

1) Perform hand hygiene.
2) Open the MAR. Find the resident for the scenario that was read.
3) For the capsule (1st) medication, verbally verify the MAR contains the correct resident, drug, dose, time, and route (five rights).
4) Unlock the medication box.
5) For the capsule (1st) medication, obtain the correct drug from the correct resident's drawer in the medication box, match the label to the MAR, and verbally identify all five rights (resident, drug, dose, time, and route).
6) Open the container or pop the medication from the bubble pack.
7) Pour the correct amount of medication.
8) Do not contaminate the medication.
9) Return unused medication to the medication box.
10) For the ointment (2nd) medication, verbally verify the MAR contains the correct resident, drug, dose, time, and route (five rights).
11) For the ointment (2nd) medication, obtain the correct drug from the correct resident's drawer in the medication box, match the label to the MAR, and verbally identify all five rights (resident, drug, dose, time, and route).
12) For the ointment (2nd) medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).
13) Greet the resident.
14) Introduce yourself as a Medication Aide.
15) Verify the right resident by comparing the MAR with the appropriate method of identification, e.g., picture, wristband, or facility-appropriate method of identification.
16) Explain the procedure.
17) Give the resident a glass of water.
18) Assist the resident in taking the capsule medication.
19) Ensure the resident swallows the capsule(s).
20) Inspect the right forearm skin area where medication is to be applied.
21) Put on at least one glove.
22) Open the ointment.
23) Does not contaminate the lid.
24) Apply ointment with a gloved hand to the right forearm.
25) Spread ointment to cover the area to be treated.
26) Replace the ointment lid.
27) Remove glove(s) turning inside out.
28) Discard glove(s) in appropriate container.
29) Place all unused medications back in the medication box.
30) Lock the medication box.

31) Secure the medication box keys on person.
32) Maintain interpersonal communication during administration.
33) Place the call light within reach or verbalize verification of the call light for wrist/necklace call devices.
34) Perform hand hygiene.
35) Document administration correctly on the MAR (resident, drug, dose, time and route). [Sixth right]
36) **Initial and sign the MAR in the signature area. [Sixth right]**
37) Close the MAR.

Topical Spray Medication / Unit Dose Administration

1) Perform hand hygiene.
2) Open the MAR. Find the resident for the scenario that was read.
3) For the unit dose (1st) medication, verbally verify the MAR contains the correct resident, drug, dose, time, and route (five rights).
4) Greet the resident.
5) Introduce yourself as a Medication Aide.
6) Verify the right resident by comparing the MAR with the appropriate method of identification, e.g., picture, wristband, or facility-appropriate method of identification.
7) Explain the procedure.
8) Listen to the apical heart rate for 60 seconds with a teaching stethoscope.
9) Record the heart rate on the MAR.
10) The candidate's recorded heart rate is within five (5) beats of the RN Test Observer's.
11) Verbalize whether or not to proceed with unit dose medication administration based on the heart rate obtained and administer it if it is at an appropriate level.
12) Unlock the medication box.
13) If administering the unit dose (1st) medication, obtain the correct drug from the correct resident's drawer in the medication box, matching the label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).
14) If administering, open the container or pop the medication from the bubble pack.
15) If administering, put the correct number of tablets into the medication cup.
16) If administering the unit dose medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).
17) If administering, return the unit dose medication to the correct resident's drawer in the medication box.
18) If administering, do not contaminate the unit dose of medication.
19) For the spray (2nd) medication, verbally verify the MAR contains the correct resident, drug, dose, time, and route (five rights).
20) For the spray (2nd) medication, obtain the correct drug from the correct resident's drawer in the medication box, match the label to the MAR, and verbally identify all five rights (resident, drug, dose, time, and route).
21) For the spray medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time, and route).
22) If proceeding with the unit dose, give the resident a glass of water.
23) If proceeding with the unit dose, ensure the resident swallows the tablet(s).
24) Put on at least one glove.
25) Inspect the right forearm skin area where medication is to be applied.
26) Instruct the resident to turn their face away while spraying.

27) Spray the correct number of sprays on the area on the right forearm.
28) Remove glove(s) turning inside out.
29) Dispose of glove(s) in appropriate container.
30) Return the spray bottle to the medication box.
31) Lock the medication box.
32) Secure the medication box keys on person.
33) Maintain interpersonal communication during administration.
34) Place the call light within reach or verbalize verification of the call light for wrist/necklace call devices.
35) Perform hand hygiene.
36) Document administration correctly on the MAR (resident, drug, dose, time, and route). [Sixth right]
37) Initial and sign the MAR in the signature area. [Sixth right]
38) Close the MAR.

KNOWLEDGE EXAM VOCABULARY LIST

absorption	depression	osteoporosis
administering medication	diuretic	overdose
adverse reactions	electrolyte	placebo effect
aging	excretion	potassium
allowable routes	extrapyramidal symptoms (EPS)	prednisone
Alzheimer's	eye medications	PRN
analgesic	FDA	psoriasis
antiarrhythmics	glipizide (Glucotrol XL)	psychotropic
antibiotics	herbal remedy	rules
anticoagulants	histamines	scabies
antihistamines	hormones	scope of practice
antipruritic	hypoglycemia	self-terminating order
antitussives	immunocompromised	sensitivity to medications
bronchodilators	inflammation	side effects
calcium	integumentary system	stimulants
chemical name	liver damage	suspension
chewable tablets	medication administration	thyroid
congestive heart failure	medication distribution	toxicity
controlled substance	oral antibiotics	
delegation		

Notes: