



New Mexico Mock Skills

Effective for testing: April 2026

Please note: The skill task steps in this document are provided as guidelines to help candidates prepare for the New Mexico nurse aide skill test. They are not intended to provide complete care that would be all-inclusive of the best care in an actual work setting.

D&S Diversified Technologies (D&SDT), LLP – Headmaster, LLP

MANDATORY TASKS

1. Assist a Resident with the use of a Bedpan with Hand Washing

(One of the possible mandatory first tasks)

(ASSISTING RESIDENT WITH THE USE OF A BEDPAN, MEASURING AND RECORDING THE URINE OUTPUT, AND HAND WASHING)

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide for the resident's privacy.	
Put on gloves.	
Position the resident on the bedpan safely and correctly. <i>(Pan not upside down, it is centered, etc.)</i>	
Raise the head of the bed to a comfortable level.	
Leave tissue within reach of the resident.	
Leave the call light or signaling device within easy reach of the resident.	
Step behind the privacy curtain to provide privacy for the resident.	
When the RN Test Observer indicates, the candidate returns.	
Lower the head of the bed.	
Gently remove the bedpan.	
Return equipment to storage.	
Wash/assist the resident in washing/cleaning their hands with soap and water, hand sanitizer, or disposable wipes.	
Dry/assist the resident to dry their hands. <i>(If a wet washcloth with soap was used, dry/assist the resident to dry their hands. If using a disposable wipe or hand sanitizer, ensure the resident's hands are dry.)</i>	
Place soiled linen in a designated laundry hamper.	
Remove gloves, turn them inside out as you remove them, and dispose of them in a trash container.	
Place the call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Turn on the water.	
Wet hands and wrists thoroughly BEFORE applying soap.	
Apply soap to hands.	
Rub hands together using friction with soap.	
Scrub/wash hands together with soap for at least twenty (20) seconds or more.	
Scrub/wash with interlaced fingers pointing downward with soap.	
Wash all surfaces of your hands with soap.	
Wash wrists with soap.	

Clean fingernails by rubbing fingertips against the palm of the opposite hand.	
Rinse fingers, hands, and wrists thoroughly under running water with fingers pointed downward.	
Starting at the fingertips, dry fingers, hands, and wrists with a clean paper towel(s).	
Discard paper towels in a trash container as used.	
Turn off the faucet with a clean, dry paper towel, then discard it in a trash container as you use it.	
Do not re-contaminate hands at any time during the hand-washing procedure. <i>(For example, do not touch the sides of the sink during the procedure or crumple up the paper towel used to turn off the faucet with both hands before discarding it.)</i>	

2. Catheter Care for a Female with Hand Washing

(One of the possible mandatory first tasks) [DEMONSTRATED ON A MANIKIN]

(PROVIDING CATHETER CARE FOR A FEMALE RESIDENT/MANIKIN WITH HAND WASHING)

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide for the resident's privacy.	
Fill a basin with comfortably warm water.	
Put on gloves.	
Expose the area surrounding the catheter, only exposing the resident between the hip and knee.	
Hold the catheter where it exits the urethra with one hand.	
Use a clean washcloth with soap and water.	
While holding the catheter, clean with soap at least 3-4 inches down the drainage tube.	
Using soap, clean with strokes only away from the urethra (at least two strokes).	
Use a clean portion of the washcloth for each stroke.	
While holding the catheter, rinse at least 3-4 inches down the drainage tube.	
Rinse using strokes only away from the urethra.	
Rinse using a clean portion of the washcloth for each stroke.	
Pat dry.	
Do not allow the tube to be tugged/pulled at any time during the procedure.	
Replace the top cover over the resident.	
Place soiled linen in a designated laundry hamper.	
Empty equipment.	
Rinse equipment.	
Dry equipment.	
Return equipment to storage.	
Remove gloves, turn them inside out as you remove them, and dispose of them in a trash container.	
Place the call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Turn on the water.	
Wet hands and wrists thoroughly BEFORE applying soap.	
Apply soap to hands.	

Rub hands together using friction with soap.	
Scrub/wash hands together with soap for at least twenty (20) seconds or more.	
Scrub/wash with interlaced fingers pointing downward with soap.	
Wash all surfaces of your hands with soap.	
Wash wrists with soap.	
Clean fingernails by rubbing fingertips against the palm of the opposite hand.	
Rinse fingers, hands, and wrists thoroughly under running water with fingers pointed downward.	
Starting at the fingertips, dry fingers, hands, and wrists with a clean paper towel(s).	
Discard paper towels in a trash container as used.	
Turn off the faucet with a clean, dry paper towel, then discard it in a trash container as you use it.	
Do not re-contaminate hands at any time during the hand-washing procedure. <i>(For example, do not touch the sides of the sink during the procedure or crumple up the paper towel used to turn off the faucet with both hands before discarding it.)</i>	

3. Don [PUT ON] PPE (Gown and Gloves), Empty a Urinary Drainage Bag, Measure and Record Urine Output, and Doff [REMOVE] PPE with Hand Washing

(One of the possible mandatory first tasks)

(PUTTING ON A GOWN AND GLOVES, EMPTYING A URINARY DRAINAGE BAG, MEASURING AND RECORDING THE URINE OUTPUT, REMOVING THE GOWN AND GLOVES, AND HAND WASHING)

Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	
Unfold the gown.	
Face the back opening of the gown.	
Place arms through each sleeve.	
Secure the neck opening.	
Secure the gown at the waist, ensuring the back flaps cover the clothing as completely as possible.	
Put on gloves.	
The gloves' cuffs overlap the gown's cuffs.	
Explain the procedure to the resident.	
Provide for the resident's privacy.	
Place a barrier on the floor under the drainage bag.	
Place the graduate on the previously placed barrier.	
Open the drain to allow the urine to flow into the graduate until the bag is completely empty.	
Avoid touching the graduate with the tip of the tubing.	
Close the drain.	
Wipe the drain with an alcohol wipe AFTER emptying the drainage bag.	
Place the graduate on a level, flat surface.	
With the graduate at eye level, measure output.	
Empty the graduate into the designated toilet/commode.	
Rinse equipment, emptying rinse water into the designated toilet/commode.	
Return equipment to storage.	
Record the output in mL on the previously signed recording form.	
The candidate's recorded measurement is within 25mL of the RN Test Observer's pre-measured amount.	
Place the call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Remove the gloves BEFORE removing the gown.	

	With one gloved hand, grasp the other glove at the palm to remove it.	
	Slip fingers from the ungloved hand underneath the cuff of the remaining glove at the wrist and remove it, turning it inside out as you do so.	
	Dispose of gloves in the trash container without contaminating yourself.	
	Unfasten the gown at the waist.	
	Unfasten the gown at the neck.	
	Remove the gown without touching the outside of the gown.	
	While removing the gown, hold the gown away from the body without touching the floor.	
	While removing the gown, turn the gown inward and keep it inside out.	
	Dispose of the gown in a designated container without contaminating yourself.	
	Turn on the water.	
	Wet hands and wrists thoroughly BEFORE applying soap.	
	Apply soap to hands.	
	Rub hands together using friction with soap.	
	Scrub/wash hands together with soap for at least twenty (20) seconds or more.	
	Scrub/wash with interlaced fingers pointing downward with soap.	
	Wash all surfaces of your hands with soap.	
	Wash wrists with soap.	
	Clean fingernails by rubbing fingertips against the palm of the opposite hand.	
	Rinse fingers, hands, and wrists thoroughly under running water with fingers pointed downward.	
	Starting at the fingertips, dry fingers, hands, and wrists with a clean paper towel(s).	
	Discard paper towels in a trash container as used.	
	Turn off the faucet with a clean, dry paper towel, then discard it in a trash container as you use it.	
	Do not re-contaminate hands at any time during the hand-washing procedure. <i>(For example, do not touch the sides of the sink during the procedure or crumple up the paper towel used to turn off the faucet with both hands before discarding it.)</i>	

4. Perineal Care for a Female with Hand Washing

(One of the possible mandatory first tasks) [DEMONSTRATED ON A MANIKIN]

(PROVIDING PERINEAL CARE FOR A FEMALE RESIDENT/MANIKIN)

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide for the resident's privacy.	
Fill a basin with comfortably warm water.	
Raise bed height.	
Put on gloves.	
Turn the resident or raise their hips and place a waterproof pad under the resident's buttocks.	
Expose the perineal area only.	
Separate labia. <i>(It is helpful if you verbalize separating the labia as you demonstrate separating the labia.)</i>	
Use water and a soapy washcloth <i>(no peri-wash or no-rinse soap allowed)</i> .	
Clean one side of the labia from front to back.	
Use a clean portion of the washcloth to clean the other side of the labia from front to back.	
Use a clean portion of the washcloth, and clean the vaginal area from front to back.	
Use a clean washcloth and rinse from one side of the labia from front to back.	
Use a clean portion of the washcloth and rinse the other side of the labia from front to back.	
Use a clean portion of the washcloth, rinse the vaginal area from front to back.	
Pat dry.	
Assist the resident (manikin) in turning onto their side away from the candidate toward the center of the bed. a. <i>RN Test Observer may help hold the manikin on their side ONLY after the candidate has turned the manikin.</i>	
Use a clean washcloth with water and soap <i>(no peri-wash or no-rinse soap allowed)</i> .	
Wash from the vagina to the rectal area.	
Use a clean portion of the washcloth with any stroke.	
Use a clean washcloth and rinse the rectal area from front to back.	
Use a clean portion of the washcloth with any stroke.	
Pat dry.	

Safely remove the waterproof pad from under the resident's buttocks.	
Position the resident (manikin) on its back.	
Place soiled linen in a designated laundry hamper.	
Empty equipment.	
Rinse equipment.	
Dry equipment.	
Return equipment to storage.	
Remove gloves, turn them inside out as you remove them, and dispose of them in a trash container.	
Lower bed.	
Place the call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Turn on the water.	
Wet hands and wrists thoroughly BEFORE applying soap.	
Apply soap to hands.	
Rub hands together using friction with soap.	
Scrub/wash hands together with soap for at least twenty (20) seconds or more.	
Scrub/wash with interlaced fingers pointing downward with soap.	
Wash all surfaces of your hands with soap.	
Wash wrists with soap.	
Clean fingernails by rubbing fingertips against the palm of the opposite hand.	
Rinse fingers, hands, and wrists thoroughly under running water with fingers pointed downward.	
Starting at the fingertips, dry fingers, hands, and wrists with a clean paper towel(s).	
Discard paper towels in a trash container as used.	
Turn off the faucet with a clean, dry paper towel, then discard it in a trash container as you use it.	
Do not re-contaminate hands at any time during the hand-washing procedure. <i>(For example, do not touch the sides of the sink during the procedure or crumple up the paper towel used to turn off the faucet with both hands before discarding it.)</i>	

5. Apply a Knee-High Anti-embolic (Elastic) Stocking to a Resident's Leg

(APPLYING A KNEE-HIGH ANTI-EMBOLIC (ELASTIC) STOCKING TO ONE OF THE RESIDENT'S LEGS)

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Raise bed height.	
Provide for the resident's privacy.	
Provide for the resident's privacy by only exposing one leg.	
Roll, gather, or turn the stocking down inside out to at least the heel.	
Place the foot of the stocking over the resident's toes, foot, and heel.	
Roll or pull the top of the stocking over the resident's foot, heel, and up the leg.	
Check toes for possible pressure from the stocking.	
Adjust stocking as needed.	
Leave the resident with a stocking that is smooth/wrinkle-free.	
Lower bed.	
Place the call light or signal calling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

6. Assist a Resident to Ambulate using a Gait Belt

(ASSISTING THE RESIDENT TO AMBULATE AT LEAST TEN STEPS TO THEIR WHEELCHAIR USING A GAIT BELT)

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Obtain a gait belt for the resident.	
Assist the resident in putting on non-skid shoes/footwear.	
Adjust the bed height to ensure the resident's feet are flat on the floor when sitting on the edge of the bed.	
Lock the bed brakes to ensure the resident's safety.	
Lock the wheelchair brakes to ensure the resident's safety.	
Bring the resident to a sitting position.	
Place a gait belt around the resident's waist to stabilize the trunk.	
Tighten the gait belt.	
Check the gait belt for tightness by slipping fingers between the gait belt and the resident.	
Face the resident.	
Grasp the gait belt on both sides with an upward grasp.	
Bring the resident to a standing position.	
Stabilize the resident.	
Ask the resident if they are dizzy or light-headed.	
While holding the gait belt, position yourself behind and slightly to the resident's side.	
Ambulate the resident at least ten steps to the wheelchair.	
Assist the resident in pivoting/turning and sitting in the wheelchair in a controlled manner that ensures safety.	
Use proper body mechanics at all times.	
Remove the gait belt.	
Place the call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

7. Denture Care – Clean an Upper or Lower Denture

(CLEANING ONE DENTURE PLATE, UPPER OR LOWER)

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Line the bottom of the sink with a protective lining that will help prevent damage to the denture. <i>(Use a towel, washcloth, or paper towels.)</i>	
Put on gloves.	
Apply denture cleanser (paste) to denture brush (or toothbrush).	
Remove the denture from the cup.	
Handle the denture carefully to avoid damage.	
Rinse the denture under cool running water.	
Thoroughly brush the inner surfaces of the denture.	
Thoroughly brush the outer surfaces of the denture.	
Thoroughly brush the chewing surfaces of the denture.	
Rinse all surfaces of the denture under cool running water.	
Rinse the denture cup and lid.	
Place the denture in the rinsed cup.	
Add cool, clean water to the denture cup and replace the lid on the denture cup.	
Rinse equipment.	
Return equipment to storage.	
Discard the sink protective lining in an appropriate container.	
Remove gloves, turn them inside out as you remove them, and dispose of them in a trash container.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Place the call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	

8. Dress a Resident with an Affected (weak) Side in Bed

(DRESSING A RESIDENT IN BED WITH AN AFFECTED SIDE IN A BUTTON-UP SHIRT, PANTS/SHORTS, AND SOCKS)

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

9. Feed a Dependent Resident a Meal in Bed

(FEEDING A DEPENDENT RESIDENT FOOD FROM A SINGLE-SERVE FOOD ITEM AND OFFERING FLUID FROM TWO GLASSES, MEASURING AND RECORDING THE PERCENTAGE OF TOTAL FOOD CONSUMED AND THE SUM OF THE TOTAL FLUID CONSUMED IN ML)

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Ask the resident to state their name and verify that it matches the name on the diet card.	
Position the resident in an upright, sitting position BEFORE feeding. At least 75-90 degrees.	
Protect clothing from soiling by using a napkin, clothing protector, or towel.	
Provide hand hygiene for the resident BEFORE feeding. <i>(Candidate may use a disposable wipe and dispose of it in a trash can, or wash the resident's hands with soap and a wet washcloth, or they may rub hand sanitizer over all surfaces of the resident's hands until dry.)</i>	
Ensure the resident's hands are dry BEFORE feeding. <i>(If a wet washcloth with soap was used, the candidate must dry the resident's hands. If a disposable wipe or hand sanitizer was used, ensure hands are dry.)</i>	
If used, place soiled linen in the designated laundry hamper, or if a disposable wipe was used, dispose of it in an appropriate container.	
Sit in a chair, facing the resident, while feeding the resident.	
Describe the food and fluid being offered to the resident.	
Offer each fluid frequently.	
Offer small amounts of food at a reasonable rate.	
Allow resident time to chew and swallow.	
Wipe the resident's hands and mouth AFTER done feeding.	
Remove the clothing protector and place it in the designated laundry hamper. If a napkin is used, dispose of it in a trash container.	
Leave the resident sitting upright in bed with the head of the bed set up to at least 75-90 degrees.	
Record intake as a percentage of solid food eaten on the previously signed recording form.	
The candidate's calculation must be within 25 percentage points of the RN Test Observer's calculation.	
Record estimated intake as the sum of total fluid consumed in mL on the previously signed recording form.	
The candidate's calculation must be within 30 mL of the RN Test Observer's calculation.	
Place the call light or signaling device within easy reach of the resident.	

	Maintain respectful, courteous interpersonal interactions at all times.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

10. Foot Care for a Resident's Foot

(PROVIDING FOOT CARE TO ONE OF THE RESIDENT'S FEET)

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Fill a basin with comfortably warm water.	
Remove a sock from the resident's (right/left) foot. <i>(The scenario read to you will specify whether it is left or right.)</i>	
Immerse the resident's foot in warm water. a. You must verbalize the 5 to 20 minutes of soaking time after you begin soaking the foot. The RN Test Observer will acknowledge and say, 'You may continue your demonstration.'	
Use water and a soapy washcloth.	
Wash the entire foot.	
Wash between toes.	
Rinse the entire foot.	
Rinse between toes.	
Dry foot thoroughly.	
Dry thoroughly between the toes.	
Apply lotion to the top and bottom of the foot.	
Avoid getting lotion between the resident's toes.	
If any excess lotion is on the resident's foot, wipe it with a towel/washcloth.	
Replace the sock on the resident's foot.	
Empty equipment.	
Rinse equipment.	
Dry equipment.	
Return equipment to storage.	
Place soiled linens in a designated laundry hamper.	
Place the call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

11. Make an Occupied Bed

(MAKING THE RESIDENT'S BED WHILE THE RESIDENT IS IN THE BED)

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Gather clean linen.	
Transport clean linen away from your body.	
Place clean linen on a clean surface. (<i>Bedside stand, chair, or overbed table.</i>)	
Provide for the resident's privacy.	
Raise bed height.	
The resident is to remain covered at all times.	
Assist the resident to roll onto their side.	
Roll or fan-fold the soiled linen, soiled side inside, to the center of the bed.	
Place a clean bottom sheet on the mattress.	
Secure two fitted corners.	
Roll or fan-fold clean linen against the resident's back.	
Assist the resident in rolling over the bottom linen, preventing trauma and avoidable pain to the resident.	
Remove the soiled linen without shaking.	
Avoid touching the linen to your uniform.	
Places removed linen in a designated laundry hamper.	
Secure the other two fitted corners.	
Place clean top linen over the covered resident.	
Ensure the bottom linen is smooth and/or tight and wrinkle-free.	
Place a clean blanket or bedspread over the covered resident.	
Remove the soiled top linen while keeping the resident unexposed.	
Tuck the clean top linen in at the foot of the bed, leaving room for the resident's feet to move.	
Tuck the clean blanket or bedspread in at the foot of the bed, leaving room for the resident's feet to move.	
Apply a clean pillowcase.	
Gently lift the resident's head while replacing the pillow.	
Lower the bed.	
Place the call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

12. Modified Bed Bath –Face and One Arm, Hand and Underarm

(PROVIDING A MODIFIED BED BATH TO THE RESIDENT’S FACE, ONE ARM, HAND, AND UNDERARM)

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide for the resident’s privacy.	
Raise bed height.	
Cover the resident with a bath blanket.	
Remove the remaining top covers. Fold to the bottom of the bed or place aside.	
Remove the resident's gown without exposing the resident and place the soiled gown in a designated laundry hamper.	
Fill a basin with comfortably warm water.	
Beginning with the eyes, wash the eyes WITHOUT SOAP.	
Use a clean portion of the washcloth for each stroke, and wash the inner aspect of the eye to the outer aspect.	
Wash face WITHOUT SOAP.	
Pat dry face.	
Place a towel under the arm, exposing one arm.	
Wash the resident’s arm with soap.	
Wash the resident’s hand with soap.	
Wash the resident’s underarm with soap.	
Rinse the resident’s arm.	
Rinse the resident’s hand.	
Rinse the resident’s underarm.	
Pat the resident’s arm dry.	
Pat the resident’s hand dry.	
Pat the resident’s underarm dry.	
Assist the resident in putting on a clean gown.	
Empty equipment.	
Rinse equipment.	
Dry equipment.	
Return equipment to storage.	
Place soiled linen in a designated laundry hamper.	
Lower bed.	
Place the call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

13. Mouth Care – Brush Resident’s Teeth

(BRUSHING ALL SURFACES OF THE RESIDENT’S TEETH AND TONGUE)

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide for the resident’s privacy.	
Drape the resident's chest with a towel to prevent soiling.	
Put on gloves BEFORE cleaning the resident’s mouth.	
Wet the toothbrush and apply a small amount of toothpaste.	
Gently brush the inner surfaces of the resident’s upper and lower teeth.	
Gently brush the outer surfaces of the resident’s upper and lower teeth.	
Gently brush the chewing surfaces of the resident’s upper and lower teeth.	
Gently brush the resident's tongue.	
Assist the resident in rinsing their mouth.	
Wipe the resident's mouth.	
Remove soiled linen.	
Place soiled linen in the designated laundry hamper.	
Empty container. <i>(The container may be an emesis basin or a disposable cup.)</i>	
Rinse the emesis basin, if used, or discard disposable items in the trash can.	
Dry emesis basin, if used.	
Rinse the toothbrush.	
Return equipment to storage.	
Remove gloves, turn them inside out as you remove them, and dispose of them in a trash container.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Place the call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	

14. Nail Care for a Resident's Hand

(PROVIDING HAND CARE TO ONE OF THE RESIDENT'S HANDS)

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Fill a basin with comfortably warm water.	
Immerse the resident's (left/right) hand in warm water. <i>(The scenario read to you will specify whether it is left or right.)</i>	
Soak the resident's nails for at least five (5) minutes. a. You must verbalize the at least 5 minutes of soaking time after you begin soaking the nails. The RN Test Observer will acknowledge and say, 'You may continue your demonstration.'	
Dry the resident's hand thoroughly.	
Specifically dry between the resident's fingers.	
Gently clean under the resident's nails with an orange stick.	
File each fingernail.	
Apply lotion to the resident's hand.	
Empty equipment.	
Rinse equipment.	
Dry equipment.	
Return equipment to storage.	
Place soiled linens in a designated laundry hamper.	
Place the call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

15. Passive Range of Motion for a Resident's Hip and Knee

(PERFORMING PASSIVE RANGE OF MOTION TO THE RESIDENT'S HIP AND KNEE ON ONE SIDE)

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide for the resident's privacy.	
Raise bed height.	
Position the resident supine (bed flat).	
Correctly support joints at all times by placing one hand under the resident's knee and the other hand under the resident's ankle.	
Gently move the resident's entire leg away from the body. a. <i>Abduction</i>	
Gently return the resident's leg toward the body. a. <i>Adduction</i>	
Gently complete abduction and adduction of the hip at least three times.	
Continue to correctly support joints at all times by placing one hand under the resident's knee and the other hand under the resident's ankle.	
Gently bend the resident's knee and hip toward the resident's trunk a. <i>Flexion of the hip and knee at the same time</i>	
Gently straighten the resident's knee and hip. a. <i>Extension of the hip and knee at the same time</i>	
Gently complete flexion and extension of the knee and hip at least three times.	
Do not force any joint beyond the point of free movement.	
The candidate <u>must ask</u> at least once during the PROM exercise if there is/was any discomfort/pain.	
Lower bed.	
Place the call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

16. Passive Range of Motion for a Resident's Shoulder

(PERFORMING PASSIVE RANGE OF MOTION TO THE RESIDENT'S SHOULDER ON ONE SIDE)

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide for the resident's privacy.	
Raise bed height.	
Position the resident supine (bed flat).	
Correctly support joints at all times by placing one hand under the resident's elbow and the other hand under the resident's wrist.	
Gently raise the resident's straightened arm up and over the resident's head to ear level. <i>a. Flexion</i>	
Gently bring the resident's arm back down to the side of the resident's body. <i>a. Extension</i>	
Gently complete flexion and extension of the shoulder at least three times.	
Continue the same support for the shoulder joints by placing one hand under the resident's elbow and the other hand under the resident's wrist.	
Gently move the resident's entire arm away from the side of the resident's body to shoulder level. <i>a. Abduction</i>	
Gently return the resident's arm to the side of the resident's body. <i>a. Adduction</i>	
Gently complete abduction and adduction of the shoulder at least three times.	
Do not force any joint beyond the point of free movement.	
The candidate <i>must ask</i> at least once during the ROM exercise if there is/was any discomfort/pain.	
Lower bed.	
Place the call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

17. Position a Resident in Bed on their Side

(POSITIONING AND TURNING A RESIDENT IN BED ONTO THE CORRECT SIDE STATED, AND PLACING SUPPORT DEVICES -SUCH AS PILLOWS, WEDGES, OR BLANKETS- TO MAINTAIN PROPER BODY ALIGNMENT AND PROTECT BONY PROMINENCES)

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide for the resident's privacy.	
Position the bed flat.	
Raise bed height.	
Ensure that the resident's face never becomes obstructed by the pillow.	
Directs the RN Test Observer to stand on the opposite side of the bed for safety, or always turn the resident toward yourself.	
To center the resident in the bed before turning from the working side of the bed, gently move the resident's upper body toward yourself.	
To center the resident in the bed before turning from the working side of the bed, gently move the resident's hips toward yourself.	
To center the resident in the bed before turning from the working side of the bed, gently move the resident's legs toward yourself.	
The candidate may remain on the working side of the bed and turn the resident toward the previously positioned RN Test Observer. If the RN Test Observer wasn't directed to the side opposite the working side of the bed, the candidate moves to the opposite side of the bed and turns the resident toward self.	
The resident is placed on the correct side, as read by the RN Test Observer in the scenario.	
Ensure the resident is centered in the bed.	
Place or adjust the pillow under the resident's head for support.	
Reposition the resident's arm and shoulder so that the resident is not lying on their arm.	
Place a support device under the resident's upside arm.	
Place a support device behind the resident's back.	
Place a support device between the resident's knees.	
Lower bed.	
Place the call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

18. Transfer Resident from their Bed to a Wheelchair using a Gait Belt

(TRANSFERRING A RESIDENT FROM THEIR BED TO A WHEELCHAIR USING A GAIT BELT)

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide for the resident's privacy.	
Obtain a gait belt for the resident.	
Assist the resident in putting on non-skid shoes/footwear.	
Adjust the bed height to ensure the resident's feet are flat on the floor when sitting on the edge of the bed.	
Lock the bed brakes to ensure the resident's safety.	
Lock the wheelchair brakes to ensure the resident's safety.	
Bring the resident to a sitting position.	
Place a gait belt around the resident's waist to stabilize the trunk.	
Tighten the gait belt.	
Check the gait belt for tightness by slipping fingers between the gait belt and the resident.	
Face the resident.	
Grasp the gait belt on both sides with an upward grasp.	
Bring the resident to a standing position.	
Assist the resident in pivoting in a controlled manner that ensures safety.	
Lower the resident into the wheelchair in a controlled manner that ensures safety.	
Remove the gait belt.	
Place the call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

19. Vital Signs: Count and Record the Resident’s Radial Pulse and Respirations

(COUNTING THE RESIDENT’S RADIAL PULSE AND RECORDING THE NUMBER OF THE RESIDENT’S PULSE BEATS, AND THEN COUNTING THE RESIDENT’S RESPIRATIONS AND RECORDING THE NUMBER OF THE RESIDENT’S RESPIRATION BREATHS)

- * THE RN TEST OBSERVER WILL COUNT AT THE SAME TIME AS THE CANDIDATE FOR THE PULSE AND RESPIRATIONS
- * YOU MUST TELL THE RN TEST OBSERVER WHEN YOU START AND STOP COUNTING THE RADIAL PULSE AND THE RESPIRATIONS, WHICH ARE TAKEN SEPARATELY DURING TESTING

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Locate the resident’s radial pulse by placing fingertips on the thumb side of the resident's wrist.	
Count the resident’s radial pulse for one full minute. <i>a. Tell the RN Test Observer when you start counting and tell them when you stop counting.</i>	
Record your radial pulse rate reading on the previously signed recording form.	
The candidate’s recorded radial pulse rate is within four (4) beats of the RN Test Observer's recorded rate.	
Count the resident’s respirations for one full minute. <i>a. Tell the RN Test Observer when you start counting and tell them when you stop counting.</i>	
Record your respiration reading on the previously signed recording form.	
The candidate’s recorded respiratory rate is within two (2) breaths of the RN Test Observer's recorded rate.	
Place the call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	