



D&S Diversified Technologies LLP

Headmaster LLP

Arkansas Nursing Assistant Candidate Handbook

EFFECTIVE: July 6, 2020

Version 2



Contact Information

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Introduction

In 1987, the Nursing Home Reform Act was adopted by Congress as part of the Omnibus Budget Reconciliation Act (OBRA '87). It was designed to improve the quality of care in long-term health care facilities and to define training and evaluation standards for Nursing Assistants who work in such facilities. Each state is responsible for following the terms of this federal law.

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

This handbook describes the process of taking the nurse aide competency examination and is designed to help prepare candidates for testing. There are two parts to the nurse aide competency examination—a multiple-choice, knowledge test and a skill test. Candidates must pass both parts of the nurse aide competency exam to be identified and listed on the Arkansas Nurse Aide Registry.

Arkansas Department of Human Services (DHS) has approved D&S Diversified Technologies (D&SDT)-HEADMASTER, LLP to provide tests and scoring services for nurse aide testing. For questions not answered in this handbook, please contact D&SDT-HEADMASTER at (888)401-0462 or go to the [Arkansas webpage](#). The information in this handbook will help you prepare for your examination.

Nurse Aide Registry Requirements

The Arkansas Nurse Aide Registry (ARNAR) lists the name of nurse aides who, through training, testing and experience meet federal and/or state requirements to work as a nurse aide in Arkansas. The Registry includes substantiated findings of nurse aide abuse, neglect, misappropriation of resident property, or exploitation involving a nurse aide at a DHS regulated facility.

A nurse aide candidate, upon successful completion of training, passing both the knowledge and skills portions of the competency exam, and meeting federal and/or state requirements will be listed on the ARNAR. A newly trained nurse aide candidate must successfully pass both the knowledge and skills exams within one (1) year of successfully completing a training program. Review the Nurse Aide Competency Exam section below to help prepare for the exam.

Registry Maintenance

Once placed on the Arkansas Registry, it is your responsibility to maintain your demographic information so that renewal notifications/alerts can be delivered to you in a timely manner. You must renew electronically by signing in to your TMU© account at <https://ar.tmuniverse.com>. Use your Email or Username and Password to sign in. If you are new to the system or have forgotten your password, refer to the 'Forget my Password?' section in this handbook to reset your password. If you need assistance signing in to your record, call D&SDT-HEADMASTER at (888)401-0462. Renewal reminders are emailed to your email address of record and/or texted to your SMS capable phone, so it is important to keep your contact information up to date.

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Note: Renewal notifications/alerts are sent 60 days before your certification expiration date via email and text message. No renewal certifications are sent via USPS mail. It is important to keep your TMU© demographic information updated to receive your renewal notification.

You can check your registry status at any time, update your address and phone number and check your eligibility expiration date from any Internet capable device.

Registry name changes (marriage/divorce, etc.) must be verified with appropriate documentation. Copies of documentation must be emailed (hdmaster@hdmaster.com), faxed (406)442-3357, or mailed to D&SDT-HEADMASTER, P.O. Box 6609, Helena, MT 59604.

Registry Renewal

To maintain eligibility to work you must renew your eligibility every 24 months. To be eligible to renew, you must work for pay as a nurse aide performing nursing or nursing-related services at least eight (8) consecutive hours during the previous 24 months. Nurse aides with misconduct restrictions on the Registry are not eligible for renewal.

To renew, sign in to your TMU© record at <https://ar.tmuniverse.com> and list your work hours and where you were employed. An email verification link will be sent to the employer contact you choose from the list of employers. When the employer verifies your work experience, your eligibility will be extended an additional 24 months.

Under federal regulations, a nurse aide becomes ineligible for employment if they do not perform at least 8 hours of nursing related services for pay in a health care setting during a period of 24 consecutive months. To reestablish employment eligibility on the ARNAR, you must successfully pass both components of the approved Arkansas nurse aide competency examination. Contact D&SDT-HEADMASTER for authorization to schedule the competency test to regain employment eligibility status.

Registry Reciprocity

This information is for applicants who want to be entered on the ARNAR through the Arkansas Reciprocity/Out-of-State registry placement process.

Out-of-State Reciprocity Process

There are multiple methods by which you may be eligible for placement on the ARNAR via the out-of-state registry process. In any case, you must be current and in good standing on a nurse aide registry in a state other than Arkansas to be considered.

To apply for reciprocity placement on the ARNAR, you must complete an Out-of-State reciprocity form 9110AR. You may fill out an Out-of-State reciprocity form 9110AR by browsing to the D&SDT-HEADMASTER's [Arkansas webpage](#).

Once your completed application, processing fee and all required documentation has been received, D&SDT-HEADMASTER staff will determine if you are eligible to be added to the Arkansas Nurse Aide Registry. You

must have a valid email address in order to receive your TMU© login user name and temporary password. You may check your listing on the Arkansas Nurse Aide Registry at <https://ar.tmuniverse.com>. Any personal information entered into TMU© will only be used to determine whether you can work as a nurse aide in Arkansas. Failure to provide complete and accurate information during the reciprocity determination process may delay or even prevent you from being listed on the ARNAR.

- If you have successfully passed a nurse aide competency exam that is the same or substantially similar to the Arkansas competency examination within one (1) year of completing your training program, your name may be placed on the ARNAR. You must have a valid email address in order to receive a username and temporary password. Once you have received your username and password, you must log into TMU© at <https://ar.tmuniverse.com> to verify all your Arkansas registry information and this is where you will renew your registry listing every 24 months with good and sufficient Nursing Assistant work in Arkansas.
- If you are a nurse aide candidate from another state who has completed a training program of at least 90 hours but have not successfully completed a nurse aide competency exam that is the same or substantially similar to the Arkansas examination, you will be required to successfully complete the Arkansas competency examination within one (1) year of your documented completion of comparable training. You must have a valid email address in order to receive a user name and temporary password. Once you have received your username and password you must log into TMU© at <https://ar.tmuniverse.com> and pick a test event and location of your choosing. Upon passing both the knowledge and skill exams within three attempts your name will be placed on the ARNAR.

Student Nurse / Graduate Nurse Training

Requirements

A Student Nurse (SN) currently enrolled in a state-approved nursing education program preparing for registered nurse or practical nurse licensure, or a Graduate Nurse (GN) who has completed a state-approved nursing education program who has not taken the National Council Licensure Examination for Registered Nurses (NCLEX-RN*) or Practical Nurses (NCLEX-PN*) must submit an image of an original transcript to verify s(he) has met all training requirements for a nurse aide program. Include an image of your transcript with your reciprocity form 9110AR.

Americans with Disabilities Act (ADA)

ADA Compliance

The Arkansas Department of Human Services and D&SDT-HEADMASTER provide reasonable accommodations for candidates with disabilities or limitations that may affect their ability to perform the nurse aide competency examination. Accommodations are granted in accordance with the Americans with Disabilities Act (ADA).

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If you have a qualified disability or limitation, you may request special accommodations for examination. Accommodations must be approved by D&SDT-HEADMASTER in advance of examination. The request for accommodations can be found on the [Arkansas webpage](#) and clicking on the PDF Fillable [ADA Accommodation Form 1404](#). This form must be electronically submitted to D&SDT-HEADMASTER with required documentation listed on the second page of the ADA application in order to be reviewed for an accommodation. Please allow additional time for your request to be approved. If you have any questions regarding the ADA review process or specific required documentation please call D&SDT-HEADMASTER at (888)401-0462.

The Arkansas Nurse Aide Competency Exam

Payment Information

Exam Description	Price
Knowledge Test or Retake	\$30
Oral Knowledge Test or Retake	\$40
Skill Test or Retake	\$95

Completing your Initial Login

Your initial information will be entered in D&SDT-HEADMASTER’s TestMaster Universe© (TMU©) software. You must sign in to TMU© at <https://ar.tmuniverse.com> using your secure email or username and password and complete your demographic information. If you do not know your username and/or password, enter your email address and click on “Forgot Your Password?” You will be asked to re-enter your email and then click “Recover Your Account” a ‘reset password link’ will be sent to your email (**see instructions under ‘Forgot your Password and Recover your Account’**). If you are unable to sign in for any reason, contact D&SDT-HEADMASTER at (888)401-0462 during regular business hours 7:00AM to 7:00PM Monday through Friday, excluding Holidays.

Schedule an Exam

Once your completed record is in the D&SDT-HEADMASTER TestMaster Universe© (TMU©) database, you may schedule your exam date online at the Arkansas TMU© webpage at <https://ar.tmuniverse.com> using your email and password (**see instructions under ‘Schedule/Reschedule into a Test Event’**). If you are unable to sign in with your email, please call D&SDT-HEADMASTER for assistance at (888)401-0462 during regular business hours 7:00AM to 7:00PM Monday through Friday, excluding Holidays.

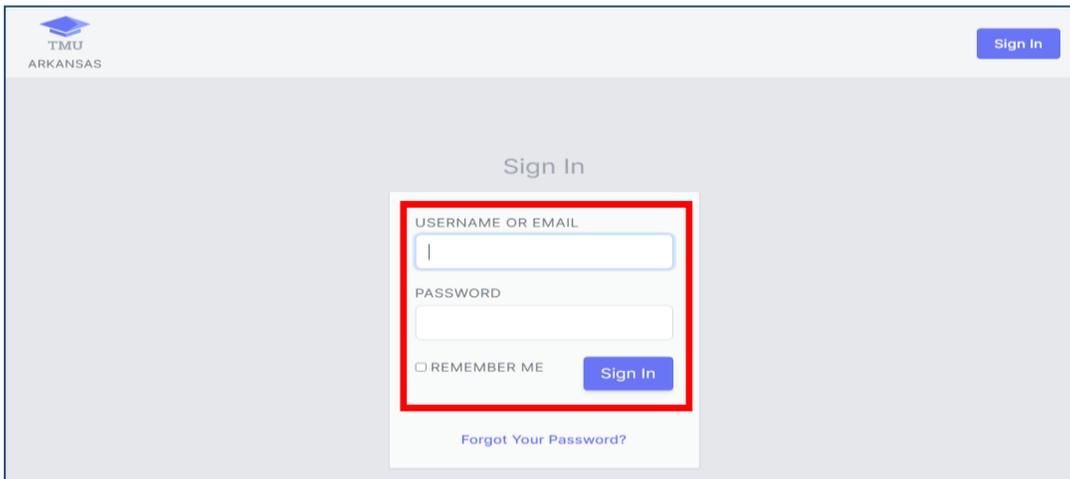
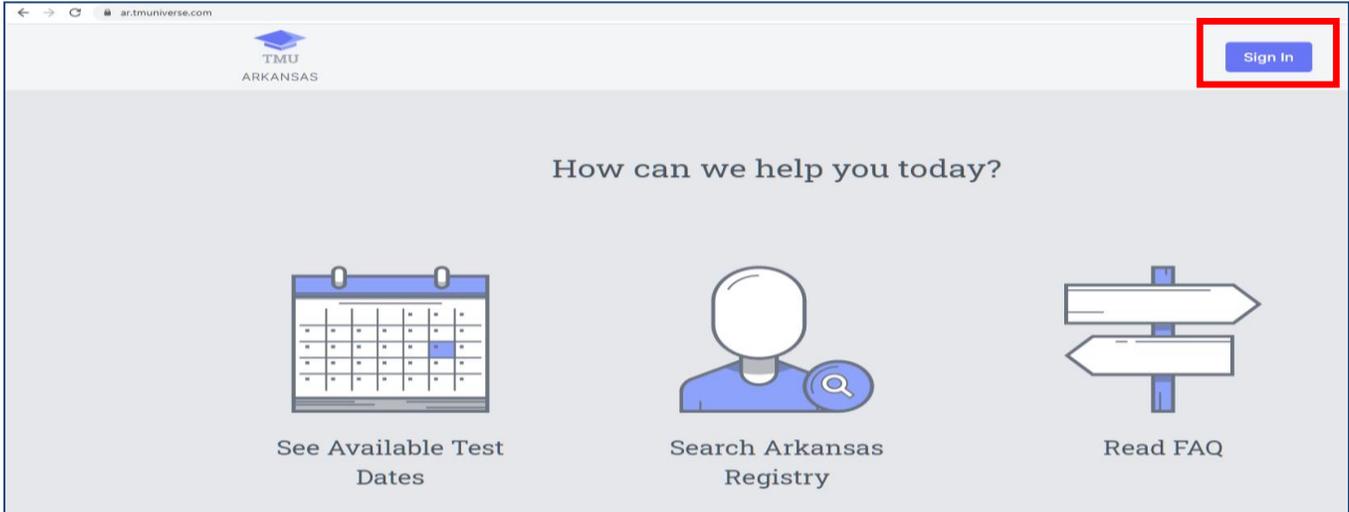
Securely processed Visa or MasterCard credit card or debit card information is required when scheduling online, if you are not a DHS paid for candidate. After testing fees are paid, you will be able to schedule and/or reschedule your test event up to the business day prior to a scheduled test date of your choice and receive your test confirmation notification online or on the screen while you are logged in. You may login with any Internet connected device. You will be scheduled to take your initial knowledge and skill tests on the same day. To schedule or reschedule your test date, sign in to the Arkansas TMU© webpage at <https://ar.tmuniverse.com> with your email and password. If you are unable to schedule/reschedule on-line,

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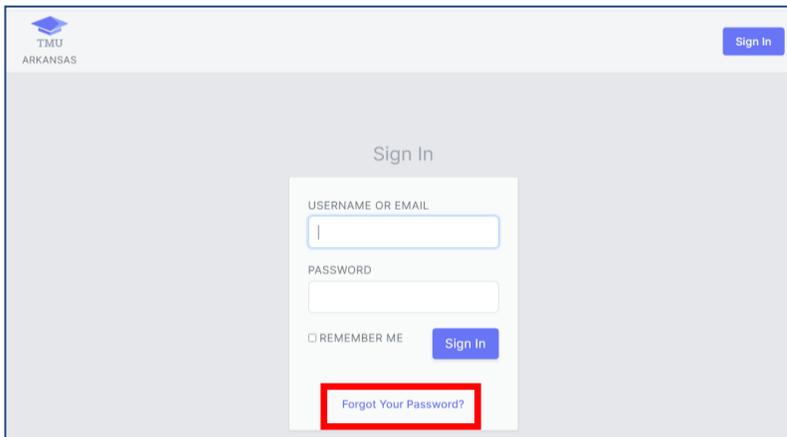
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please call D&SDT-HEADMASTER at (888)401-0462 during regular business hours 7:00AM to 7:00PM Monday through Friday, excluding Holidays, for assistance.

This is the Arkansas TMU© home page:



Forgot your Password and Recover your Account



Click on
Forgot Your Password?

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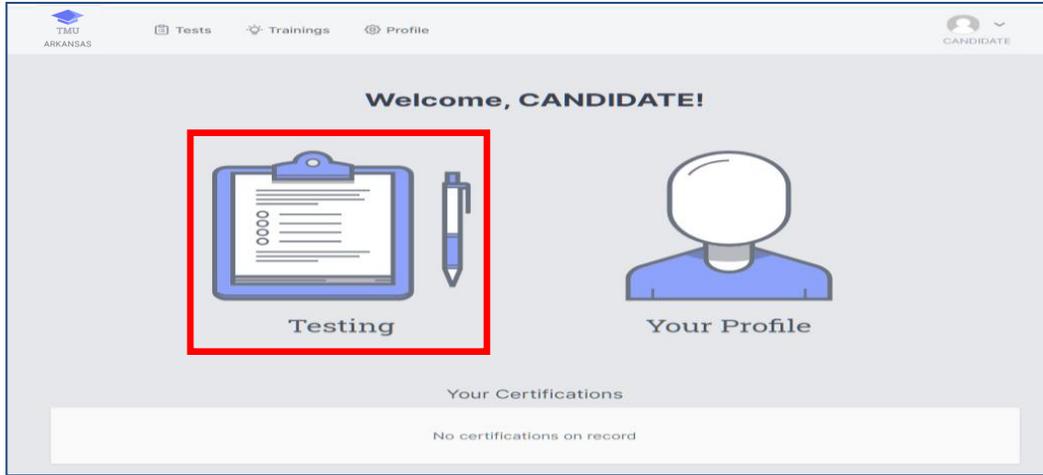
Type in your **Email Address**
Click on **Recover Account**
An email with the reset link will be emailed to you
Click on the reset link in your email to reset your password.
-OR-
You can type in the requested data under **Using other information**
Click on **Recover Account**

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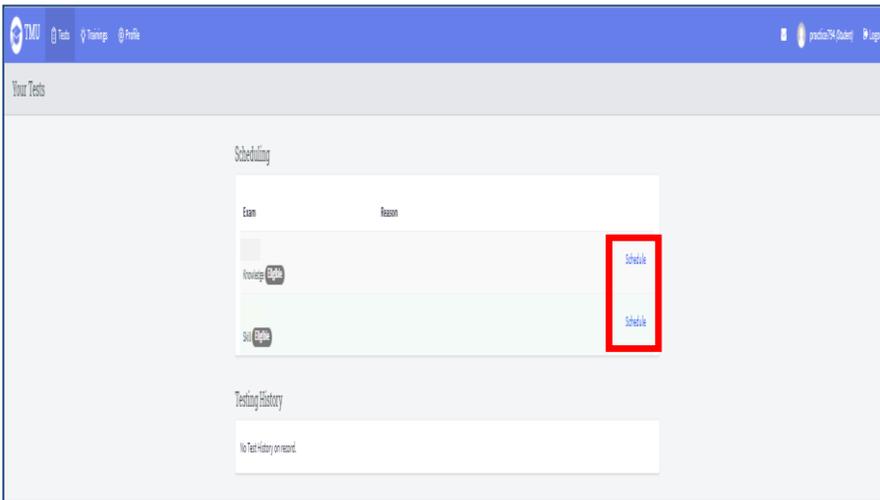
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Schedule/Reschedule into a Test Event

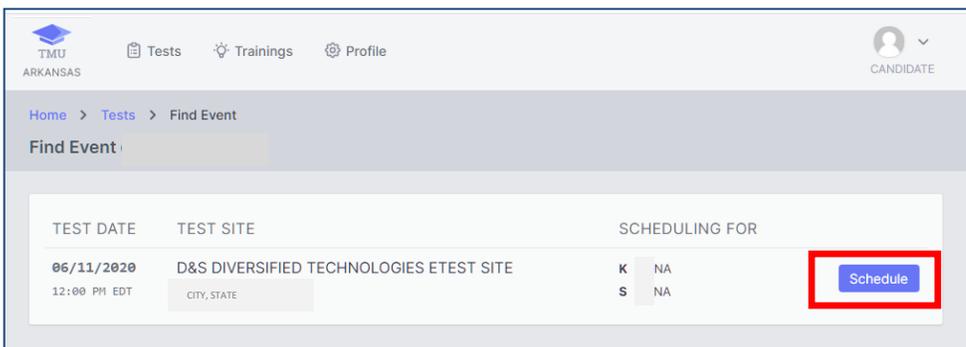
This is the home screen you will see once you have signed in:



Click on **Testing**



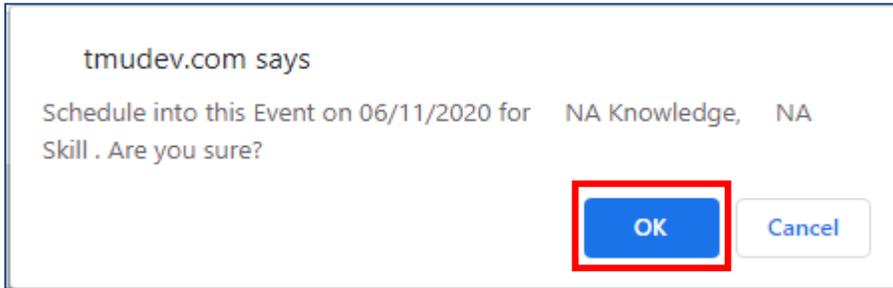
All eligible test events will appear in this format.
 To select a test, click on **Schedule** next to the corresponding desired test component, knowledge or skills.



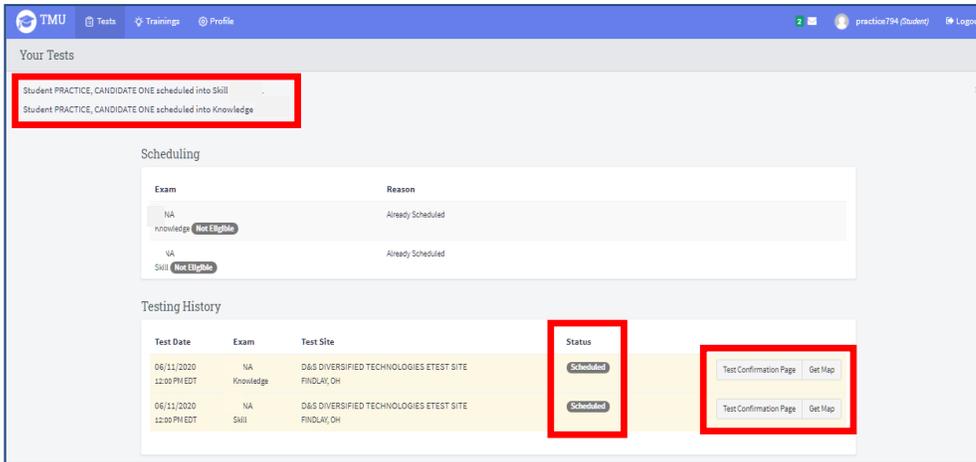
To select a test site and date, click on **Schedule**

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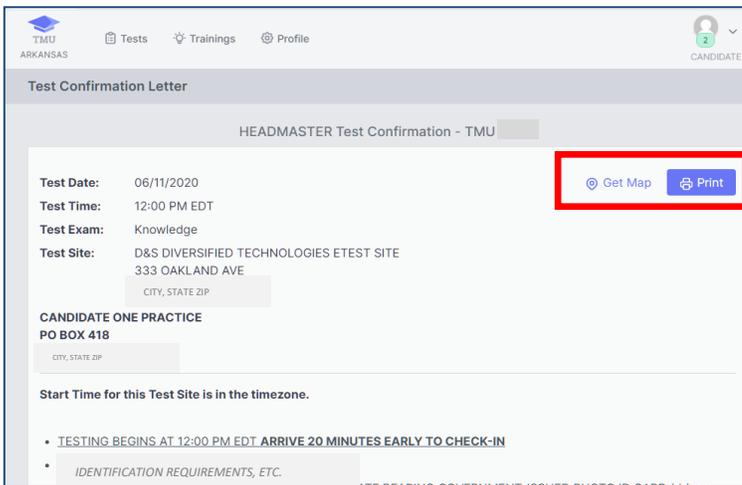


Click **OK** on the screen that pops up confirming this is the date and site you wish to schedule into.



This screen confirms you are scheduled into a test date to take your knowledge and skills exams. Your status shows **Scheduled** and a note at the top of your screen also shows you are scheduled. Click on **Test Confirmation Page** to see your test confirmation with important reminders for testing.

Test Confirmation Letter



Your test confirmation letter will provide you with important information regarding where you are scheduled to test (date, time and address). It can be accessed at any time. You can print your confirmation letter by clicking on **Print**. Click on **Get Map** to get directions to the test site. The body of the test confirmation letter will give you state specific instructions on what time to arrive by, ID requirements, dress code, etc. It is important you read this letter.

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

Time Frame for Testing from Training Program Completion

You must schedule a test **within one year of your date of training program completion**. After one year, you must complete another Arkansas DHS approved training program in order to be eligible to schedule testing.

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Many training programs host and pre-schedule in-facility test dates for their graduating students. Your program/instructor will have informed you if this is the case. Prior to 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 Arkansas TMU© site.

If you have any questions regarding your test scheduling, call D&SDT-HEADMASTER at (888)401-0462, during regular business hours 7:00AM to 7:00PM Monday through Friday, excluding Holidays.

Exam Check-In

You need to arrive at your confirmed test site between 20 to 30 minutes before your exam is scheduled to start. (For example: if your test start time is 8:00AM – you need to be at the test site for check-in no later than 7:40AM.) If you arrive late, you will not be allowed to test.

Testing Attire

You must be in full clinical attire (scrubs). No opened toed shoes are allowed. Scrubs and shoes can be any color/design. You may bring a standard watch with a second hand. *No smart watches or fitness monitors are allowed.* Long hair must be pulled back.

Please note: You will not be admitted for testing if you are not wearing scrubs attire and appropriate shoes with long hair pulled back. You will be considered a NO SHOW. You will forfeit your testing fees and have to pay for another exam date.

Identification

You must bring a **United States (US) government issued, signed, non-expired photo bearing form of identification.** Some examples here:

- State or Other United States Government Issued Driver's License
 - *You may use your letter issued from the Department of Motor Vehicles (DMV) that you receive when you apply for or renew your driver's license while waiting to receive your new license.*
- State issued Identification Card (that meets all identification criteria)
- Signed US Passport (Foreign Passports and Passport Cards *are not* acceptable)
- Alien Registration Card (that meets all identification criteria)
- Tribal Identification Card (that meets all identification criteria)
- Military Identification Card (that meets all identification criteria)
- Work Authorization Card (that meets all identification criteria)
- Concealed Hand Gun Carry Permit (that meets all identification criteria)

Please note: *A driver's license or state-issued ID card that has a hole punched in it is NOT VALID and will not be accepted as an acceptable form of ID. You will not be admitted for testing and you will be considered a NO SHOW. You will forfeit your testing fees and have to pay for another exam date.*

The **FIRST** and **LAST** names listed on the mandatory United States (US) government issued, signed, non-expired photo bearing form of identification presented to the RN Test Observer during sign-in at your test

event **MUST EXACTLY MATCH** the FIRST and LAST names that were entered in the TMU© database. You may call D&SDT-HEADMASTER at (888)401-0462, during regular business hours 7:00AM to 7:00PM Monday through Friday, excluding Holidays, to confirm that your name of record matches your United States (US) government issued, signed, non-expired photo bearing form of identification, or sign in to your record in TMU© to check or change your demographic information.

Please note: You will not be admitted for testing if you do not bring the mandatory identification. Be sure your identification is not expired and that it is signed. Check to be positive that both your FIRST and LAST printed names on your form of ID match your current name of record in TMU©. In cases where names do not match, this is considered a NO SHOW and you will forfeit your testing fees and have to pay for another exam date.

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

Instructions for the Knowledge and Skill Tests

Test instructions for the knowledge and skill tests will be provided in written and oral format in the waiting area when you sign-in for your test. Oral and PDF versions are also available anytime from your smart phone via the knowledge test and skill test instruction links on the D&SDT-HEADMASTER Arkansas webpage, www.hdmaster.com under the Candidate column.

These instructions detail the process and what you can expect during your exams. Please read through the instructions (or listen to them on your smart phone) **before** entering the knowledge test room or skill demonstration lab. The instructions will be left in the waiting area during testing for you to refer to throughout your time at the test event. The RN Test Observer and Knowledge Test Proctor will ask you questions about the instructions you read when you enter the knowledge test room and/or skill test lab.

Testing Policies

The following policies are observed at each test site:

- Plan to be at the test site up to 5 hours, in the worst-case scenario. *(Due to COVID, scheduling time frames have been altered and the time at the test site may be significantly shorter.)*
- If you arrive late for your confirmed exam (you need to be at the test site to check in at least 20 to 30 minutes before your scheduled start time – if your test start time is 8:00AM, you need to be at the test site by 7:40AM at the latest), you will not be admitted to the exam and any exam fees paid **will NOT be refunded**.
- If you do not bring a valid and appropriate United States (US) government issued, signed, non-expired photo bearing form of identification, you will not be admitted to the exam and any exam fees paid **will NOT be refunded**.
- If the FIRST and LAST names on your United States (US) government issued, signed, non-expired photo bearing form of identification do not match the FIRST and LAST names in your TMU© record, you will not be admitted to the exam and any exam fees paid **will NOT be refunded**.
- If you do not wear scrubs with appropriate shoes and have long hair pulled back, and conform to all testing policies, you will not be admitted to the exam and any exam fees paid **will NOT be refunded**.

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- If you NO SHOW for your exam day, any test fees paid *will NOT be refunded*.
- Cell phones, watches of any kind, smart watches, fitness monitors, electronic recording devices, Bluetooth-connected devices and personal items (such as briefcases, large bags, study materials, extra books, or papers) are not permitted to be on or near you in either testing room. You will be informed by the testing team of the designated area to place your personal items and electronic devices in the designated area and you are to collect these items when you complete your test(s).
- All electronic devices must be **turned off**. Watches of any kind, smart watches and fitness monitors must be removed from your wrist.
- Anyone caught using any type of electronic recording device during testing will be removed from the testing room(s) have their test scored as a fail, forfeit all testing fees and will be reported to the Arkansas DHS and their training program. You may, however, use personal devices during your free time in the waiting area.
- You are encouraged to bring a jacket, snack, drink or study material to have while waiting to test.
- Foreign language translation dictionaries in any form are not allowed during testing.
- You may not remove any notes or other materials from the testing room.
- You are not permitted to eat, drink, smoke (e-cigarettes or vape) during the exam.
- You are not allowed to leave the testing room (knowledge test room or skills lab) once the exam has begun **for any reason**. If you do leave during your test event, you will not be allowed back into the testing room to finish your exam.
- If you are discovered causing a disturbance of any kind, engaging in any kind of misconduct or try to take any notes or testing materials from the testing room, you will be dismissed from the exam, your test will be scored as a fail and you will be reported to your training program and the Arkansas Department of Human Services.
- Test sites, RN Test Observers, Knowledge Test Proctors and Actors are not responsible for candidate personal belongings at the test site.
- No visitors, guests, pets (including companion animals) or children are allowed. Service animals with an approved ADA accommodation in place are allowed.
- You may not test if you have any type of physical limitation (excluding pre-arranged ADA's) that would prevent you from performing your duties as an STNA (examples: cast, arm/leg braces, crutches, etc.) Call D&SDT-HEADMASTER immediately if you are on doctor's orders. You must fax a signed doctor's order **within 3 business days** of your scheduled exam day to qualify for a free reschedule.
- ***Please review this Arkansas Candidate Handbook before your test day for any updates to testing and/or policies.***

Inclement Weather Policy and Unforeseen Circumstances

If an exam date is cancelled due to weather or other unforeseen circumstances, D&SDT-HEADMASTER staff will make every effort to contact you via email, text message and phone call using the contact information we have on file to reschedule you, for no charge, to a mutually agreed upon new test date. Therefore, you must keep your contact information up to date in case we need to contact you.

Candidate Feedback – Exit Survey

Candidates are provided the opportunity to complete an exit survey via a link to a Google Docs Survey when checking their test results in their TMU© record. The survey is confidential and will not have any bearing on

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the outcome of any test. You are encouraged to complete the survey questions with honest feedback regarding the examination process to help improve the testing process.

Security

If you refuse to follow directions, use abusive language or disrupt the examination environment, your test will be stopped and scored as a failure. You will be dismissed from the testing room and will forfeit any testing fees paid and a report of your behavior will be given to the Arkansas DHS. You will not be allowed to retest for a minimum period of six (6) months.

Anyone who removes or tries to remove test material or takes notes or information from the test site will be reported to the Arkansas DHS and is subject to prosecution to the full extent of the law. Your test will be scored as a test failure and you will forfeit any testing fees paid. You will not be allowed to retest for a minimum period of six (6) months. You must obtain permission from the Arkansas DHS in order to be eligible to test again.

If you give or receive help from anyone during testing (which also includes the use of any electronic recording devices such as cell phones, smart watches, or navigating to other browsers/sites during an electronic exam, etc.), your test will be stopped, you will be dismissed from the testing room and your test will be scored as a failure. You will forfeit any testing fees paid. You will be reported to the Arkansas Department of Human Services and you must obtain permission from DHS in order to be eligible to test again.

Reschedules

All candidates may reschedule for free online at <https://ar.tmuniverse.com> any time up until one (1) business day before a scheduled test day, excluding Saturdays, Sundays and Holidays. Reschedules are subject to a \$35 fee that must be paid in full prior to a D&SDT-HEADMASTER staff assisted reschedule.

If you must reschedule your exam date, please do so as soon as possible. You may reschedule an exam date online by signing in to your record at <https://ar.tmuniverse.com>. (See instructions under 'Schedule/Reschedule into a Test Event'.)

- Example: If you are scheduled to take your exam on a Saturday, Sunday or Monday, you would need to reschedule by close of business the Thursday before your scheduled exam. D&SDT-HEADMASTER is open 7:00AM to 7:00PM Monday through Friday Central time, excluding Holidays.

Scheduled test date is on a:	Reschedule 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

Please note: Reschedules will not be granted less than one full business day prior to 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 Arkansas nurse aide certification test at all.

Scheduled in a Test Event

- 1) If you are scheduled in a test event, a refund request of testing fees paid must be made by filling out and submitting the [Refund Request Fillable Form 1405](#) on D&SDT-Headmaster's main webpage at www.hdmaster.com at least **one (1) full business day** prior to your scheduled test event (excluding Saturdays, Sundays and Holidays). No phone calls will be accepted.

Example: If you are scheduled to take your exam on a Saturday, Sunday or Monday, you would need to request a refund by filling out and submitting the Refund Request Fillable Form on the D&SDT-Headmaster main webpage at www.hdmaster.com by close of business the Thursday before your scheduled exam. D&SDT-Headmaster is open until 6:00PM Mountain time.

- 2) Refund requests made in the required time frame qualify for a full refund of any testing fees paid minus a \$35 refund fee.
- 3) Refund requests must be made within thirty (30) days of payment of original testing fees with D&SDT-Headmaster. Any requests for refunds made beyond the 30 days of original payment of testing fees with D&SDT-Headmaster will not be issued.

Not Scheduled in a Test Event

- 1) Refund requests must be made within thirty (30) days of original payment of testing fees with D&SDT-Headmaster. Any requests for refunds made beyond the 30 days of original payment of testing fees with D&SDT-Headmaster will not be issued.
- 2) A refund request of testing fees paid must be made by filling out and submitting the [Refund Request Fillable Form 1405](#) on D&SDT-Headmaster'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.

No Shows

If you are scheduled for your exam and do not show up without notifying D&SDT-HEADMASTER at least one (1) full business day prior to 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**. You will forfeit all fees paid and must submit a new testing fee to schedule yourself into a new test event.

These fees partially offset D&SDT-HEADMASTER cost incurred for services requested and resulting work that is performed. If a reschedule or refund request is not received at least one full business day before a scheduled test event, excluding Saturdays, Sundays and Holidays (see examples under Reschedules and Refunds of Testing Fees Paid), a NO SHOW status will exist and you will forfeit your testing fees and must repay the full testing fee to secure a new test event.

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No Show Exceptions

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

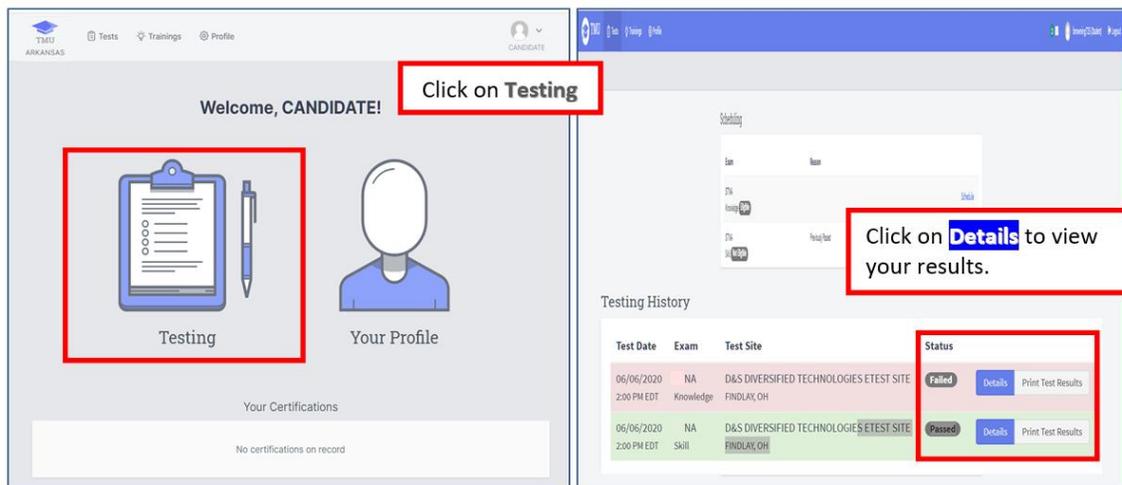
- **Car breakdown:** D&SDT-HEADMASTER must be contacted within one business day via phone call fax or email and a tow bill, mechanic bill or other appropriate documentation must be submitted within **three (3) business days** of the exam date. If we do not receive proof within the 3-business day time frame, you will have to pay as though you were a No Show.
- **Medical emergency:** D&SDT-HEADMASTER must be contacted within one business day via phone call, fax or email and a doctor’s note must be submitted within **three (3) business days** of the missed exam date. If we do not receive proof within the 3-business day time frame, you will have to pay as though you were a No Show.
- **Death in the family:** D&SDT-HEADMASTER must be contacted within one business day via phone call, fax or email and an obituary for **immediate family only** submitted within **seven (7) business days** from a missed exam date. If we do not receive proof within the 7-business day time frame, you will have to pay as though you were a No Show. (Immediate family is parents, grand and great-grand parents, siblings, children, spouse or significant other.)

Test Results

After you have completed both the Knowledge Test and Skill Test components of the competency exam, your test results will be officially scored and double checked. Official test results will be available by signing in to your TMU© record after 7:00PM the business day after your test event.

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

To view your test results, sign in to your record in TMU© at <https://ar.tmuniverse.com>. (Refer to the screen shots below.)



Test Attempts

You have **3 attempts** to pass the knowledge and skill test portions of the exam within one year from your date of nurse aide training program completion. If you do not complete testing within one year from completion of training, you must retrain in order to become eligible to further attempt Arkansas nursing assistant examinations.

Retaking the Nursing Assistant Test

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

You can schedule a test or re-test online by signing in to your TMU© record at <https://ar.tmuniverse.com>. (See screen shots under “Schedule/Reschedule into a Test Event” for rescheduling instructions.)

You will need to pay with a Visa, Master Card or debit card before you are able to schedule.

If you need assistance scheduling your re-test, please call D&SDT-HEADMASTER at (888)401-0462 during regular business hours 7:00AM to 7:00PM Monday through Friday, excluding Holidays. We are able to assist you in scheduling a test or re-test date as long as your fees have been paid first.

Test Review Requests

You may request a review of your test results or dispute any other condition of your testing. **There is a \$25 test review deposit fee.** To request a review, you must submit the PDF fillable [Test Review Request and Payment Form 1403](#) available on D&SDT-HEADMASTER’s main webpage at www.hdmaster.com. Submit the Test Review Fee of \$25 (Visa, MasterCard or debit card) and a detailed explanation of why you feel your dispute is valid **within three (3) business days** from official scoring of your test (excluding Saturdays, Sundays and Holidays). Late requests will be returned and will not be considered.

Note: Please call D&SDT-HEADMASTER at (888)401-0462 during regular business hours 7:00AM to 7:00PM Monday through Friday, excluding Holidays, and discuss the test outcome you are questioning before committing to sending the \$25 test review request deposit. Many times, once you have further details about the scoring of your test, you will understand the scoring process and learn how you can better prepare yourself for subsequent exam attempts. If, after discussion with D&SDT-HEADMASTER staff, you still have a concern with your testing process that affected the outcome of your exam, you may submit a Test Review Request. If, after investigation, the finding of the review is in your favor, you will receive your \$25 test review deposit back in full.

Since one qualification for certification as an Arkansas nurse aide is demonstration by examination of minimum nurse aide knowledge and skills, the likely outcome of your review will determine who pays for your re-test. If the results of the review are in your favor, D&SDT-HEADMASTER will pay your re-test fee. D&SDT-HEADMASTER will review your detailed recollection, your knowledge test markings and any skill task measurements you recorded at the time of your test, in addition to reviewing markings, notations and measurements recorded by the RN Test Observer at the time of your test. D&SDT-HEADMASTER will re-check the scoring of your test and may contact you and/or the RN Test Observer and professional Actor for any

additional recollection of your test(s). After a candidate reaches the age of 18, D&SDT-HEADMASTER will only discuss test results or test disputes with the candidate or the candidate's training program/instructor. D&SDT-HEADMASTER will not review test results or disputes with family members or anyone else on behalf of the candidate once the candidate is 18 years of age. D&SDT-HEADMASTER will complete your review request within 10 business days of the receipt of your timely review request and will email the review results to your email address and to Arkansas DHS.

The Knowledge/Oral Test

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

The Knowledge Test Proctor will hand out materials and give instructions for taking the Knowledge Test. You will have a maximum of 60 minutes (one hour) to complete the 75 question Knowledge Test. You will be told when fifteen (15) minutes remain. You may not ask questions about the content of the Knowledge Test (such as "What does this question mean?"). **You must have a score of 76% or better to pass the knowledge portion of the exam.**

Electronic testing using TMU© internet connected computers is utilized at all sites in Arkansas. The Knowledge test portion of your exam will be displayed on a computer screen for you to read and key/tap or click in your answers.

An audio (Oral) version of the knowledge test is available. However, you must request an Oral test before you submit your testing fee payment. There is an additional \$10 charge for an Oral Test. The questions are read to you, in a neutral manner, and can be heard through headphones/ear buds plugged into the computer. When taking an electronic Oral exam, the oral control buttons will be displayed on the computer screen enabling you to play, rewind or pause questions as needed.

Please note: On the Oral Knowledge Test, only the first 67 questions will be read orally, the remaining 8 questions will have to be answered without oral assistance to assess English reading comprehension.

No foreign translation dictionaries in any format are allowed during testing.

All test materials (including scratch paper and calculator) must be left in the testing room. Anyone who takes or tries to take materials, notes or information from the testing room is subject to prosecution and will be reported to the Arkansas DHS.

COVID Procedure: Virtual Knowledge Exam Option

You will have the option to take the knowledge exam virtually.

- You will need a smart phone to download the facetime app that D&SDT-HEADMASTER will provide you information for.

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- You will also need a reliable internet connection and a laptop/tablet/desktop computer to take your virtual knowledge exam from a distraction and interruption free area of your home, etc.
- The night before your scheduled virtual knowledge exam, D&SDT-HEADMASTER will email you a reminder with the password protected link to join the test event.
- You will need to show your mandatory forms of identification to the test proctor at sign in before starting your virtual knowledge exam.

Knowledge Test Content

The Knowledge Test consists of 75 multiple-choice questions. Questions are selected from subject areas based on the DHS approved Arkansas test plan and include questions from all the required categories as defined in the federal regulations. The subject areas are as follows:

SUBJECT AREA	NUMBER OF QUESTIONS
Aging Process and Restorative Care	5
Basic Nursing Skills	11
Care Impaired	3
Communication	5
Data Collection	4
Disease Process	5
Infection Control	9
Mental Health	4
Personal Care	8
Resident Rights	6
Role and Responsibility	7
Safety	8

Knowledge Practice Test

D&SDT-HEADMASTER offers a free knowledge test question of the day and a ten question on-line static practice test available on our web site at www.hdmaster.com. Candidates may also purchase complete practice tests that are randomly generated, based on the state test plan. A mastery learning method is used and each practice test taken will be unique. This means candidates must get the question they are attempting correct before they may move onto the next question. A first attempt percentage score and vocabulary feedback are supplied upon completion of the practice test. A list of vocabulary words to study is provided at the end of each test. Single or group purchase plans are available.

The following are a sample of the kinds of questions that you will find on the Knowledge/Oral test.

1. Clean linens that touch the floor should be:
 - (A) Picked up quickly and placed back on the clean linen cart
 - (B) Used immediately on the next resident bed
 - (C) Considered dirty and placed in the soiled linen hamper
 - (D) Used only in the room with the floor the linen fell on
 2. A soft, synthetic fleece pad placed beneath the resident:
 - (A) Takes pressure off the back
 - (B) Provides warmth for the resident
 - (C) Gives the resident a sense of security
 - (D) Should only be used with bedridden residents
 3. A resident's psychological needs:
 - (A) Should be given minor consideration
 - (B) Make the resident withdrawn and secretive
 - (C) Are nurtured by doing everything for the resident
 - (D) Are nurtured when residents are treated like individuals
- ANSWERS: 1-C 2-A 3-D

The Manual Skill Test

- The purpose of the Skill Test is to evaluate your performance when demonstrating Arkansas DHS approved nurse 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 sign-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.
- Each of your randomly selected 3 or 4 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.
- You will be allowed a maximum of **30 minutes** to complete your three or four tasks. After 15 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 of the **key** steps (in bold font) and 80% of all steps on each task assigned in order to pass the Skill Test.
- If you believe you made a mistake while performing a task, tell the RN Test Observer you would like to make a correction. You will need to correctly demonstrate the step or steps on the task you believe you performed incorrectly in order to receive credit for the correction.
- You may repeat or correct **any step** or **steps** on any task you believe you have performed incorrectly at **any time** during your allotted 30 minutes or until you tell the RN Test Observer you are finished with the Skill Test.

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

Skill Test Recording Form

The RN test observer will provide a recording form similar to the one displayed below if your skill test includes a skill task which requires recording a count or measurement.

RECORDING FORM →

Candidate's Name: _____	
PLEASE PRINT	
PULSE: _____	RESPIRATIONS: _____
URINARY OUTPUT: _____ ml	
GLASS 240ml: _____	
GLASS 120ml: _____	
TOTAL FLUID INTAKE: _____ ml	FOOD INTAKE: _____ %
Candidate's Signature: _____	

Skill Test Tasks

You will be assigned one of the following mandatory tasks as your first task:

- Bedpan and Output with Hand Washing
- Catheter Care for a Female with Hand Washing
- Donning an Isolation Gown and Gloves then Emptying a Urinary Drainage Bag with Hand Washing
- Perineal Care for a Female with Hand Washing

Please note: Hand washing with soap and water is embedded in each of the mandatory tasks and must be demonstrated at the end of each mandatory task.

You will also receive an additional two or three randomly selected tasks from the Skill Task listing below. These selected tasks will make up your personalized and unique skill test. Each skill test randomly assigned by the TMU© skill test assignment algorithm will be comparable in overall difficulty. That is why some skill tests will have a differing number of tasks.

Skill Tasks Listing

Every step must actually be performed and demonstrated during your skill test demonstration in order to receive credit.

The steps that are listed for each task are the steps required for a nurse aide candidate to successfully demonstrate minimum proficiency of the skill task for the RN Test Observer. The steps will be performed on a live resident actor for most of the tasks. The catheter care and perineal care for a female task will be done on a manikin. You will be scored only on the steps listed. **You must have a score of 80% on each task without missing any key steps (the Bolded steps) to pass the skill component of your competency evaluation.** If you

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fail the Skill Test, one of the tasks on your retest will be a task you previously failed. There will always be the one of the four mandatory tasks to start each Skill Test. The other tasks included on your Skill Test are randomly chosen so that every Skill Test is comparable in difficulty and average length of time to complete. The RN Test Observer will observe your demonstrations of your skill tasks and record what she/he sees you do. D&SDT-HEADMASTER scoring teams will officially score and double check your test.

Please note: The skill task steps included in this handbook are offered as guidelines to help prepare candidates for the Arkansas nurse aide skill test and the steps included herein are not intended to be used to provide complete care that would be all inclusive of best care practiced in an actual work setting.

Ambulation from Bed to Wheelchair using a Gait Belt

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain the procedure to resident.
- 3) Obtain gait belt for the resident.
- 4) Lock bed brakes to ensure resident's safety.**
- 5) Adjust bed height to ensure resident's feet will be flat on the floor.
- 6) Bring resident to a sitting position with resident's feet flat on the floor.
- 7) Properly place gait belt around resident's waist to stabilize trunk.
- 8) Tighten gait belt. Check gait belt for tightness by slipping fingers between gait belt and resident.
- 9) Assist resident to put on non-skid footwear BEFORE standing.
- 10) Bring resident to a standing position using proper body mechanics at all times.
- 11) Grasp gait belt.
- 12) Stabilize resident.
- 13) Ambulate resident at least 10 steps to the wheelchair.**
- 14) Lock wheelchair brakes to ensure resident's safety.**
- 15) Assist resident to pivot/turn and sit in wheelchair.
- 16) Sit resident in the wheelchair in a controlled manner that ensures safety at all times.
- 17) Remove gait belt.
- 18) Place resident within easy reach of the call light or signaling device and water.
- 19) Maintain respectful, courteous interpersonal interactions at all times.
- 20) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Ambulation from Wheelchair to Bed using a Gait Belt

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain the procedure to resident.
- 3) Obtain gait belt for the resident.

- 4) **Lock bed brakes to ensure resident's safety.**
- 5) Adjust bed height to ensure resident's feet will be flat on the floor.
- 6) **Lock wheelchair brakes to ensure resident's safety.**
- 7) Properly place gait belt around resident's waist to stabilize trunk.
- 8) Tighten gait belt. Check gait belt for tightness by slipping fingers between gait belt and resident.
- 9) Ask resident to place hands on wheelchair arm rests.
- 10) Grasp gait belt with both hands.
- 11) Bring resident to a standing position using proper body mechanics at all times.
- 12) Continue grasping gait belt.
- 13) Stabilize resident.
- 14) **Ambulate resident at least 10 steps to the bed.**
- 15) Assist resident to pivot/turn and sit on the bed.
- 16) Sit resident on the bed in a controlled manner that ensures safety at all times.
- 17) Remove gait belt.
- 18) Remove resident's non-skid footwear.
- 19) Assist resident to lie down in the center of the bed making sure the resident is comfortable and in good body alignment.
- 20) Lowers bed.
- 21) Place call light or signaling device within easy reach of the resident.
- 22) Maintain respectful, courteous interpersonal interactions at all times.
- 23) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Bed Bath- Whole Face and One Arm, Hand and Underarm

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.
- 3) Provide for privacy.
- 4) Fill basin with warm water.
- 5) Raise bed height.
- 6) Cover resident with a bath blanket.
- 7) Fan fold bed linens at least down to the waist or moves linens to opposite side.
- 8) Remove resident's gown without exposing resident.
- 9) Dispose of gown in designated laundry hamper.
- 10) Wash face WITHOUT SOAP.
- 11) Pat dry face.
- 12) Place towel under arm, only expose one arm.
- 13) Wash arm, hand and underarm using soap and water.
- 14) Rinse arm, hand, and underarm.
- 15) Pat dry arm, hand and underarm.
- 16) Assist resident to put on a clean gown.

- 17) Empty, rinse, dry and return to storage.
- 18) Dispose of soiled linen in designated laundry hamper.
- 19) Lower bed.
- 20) Place call light or signaling device within easy reach of the resident.
- 21) Maintain respectful, courteous interpersonal interactions at all times.
- 22) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Bedpan and Output with Hand Washing

(One of the possible mandatory first tasks)

- 1) Knock on door.
- 2) Introduce yourself to the resident.
- 3) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 4) Explain the procedure to resident.
- 5) Provide for privacy.
- 6) Candidate puts on gloves.
- 7) Position resident on bedpan correctly (pan not upside down, is centered, etc.) using correct body mechanics.
- 8) Raise head of bed to comfortable level.
- 9) Leave call light or signaling device and tissue within reach of resident.
- 10) Step away to area of room away from resident.
- 11) When the RN Test Observer indicates, the candidate returns.
- 12) Wash/assist resident to wash hands.
- 13) Dry/assist resident to dry hands.
- 14) Discard soiled linen in designated laundry hamper.
- 15) Gently remove bedpan/fracture pan and hold while the RN Test Observer pours an unknown quantity of fluid into bedpan/fracture pan.
- 16) Place graduate on level, flat surface.
- 17) With graduate at eye level, read output.
- 18) Empty equipment used into designated toilet.
- 19) Rinse equipment used (bedpan/fracture pan and graduate) and empty rinse water into designated toilet.
- 20) Return equipment to storage.
- 21) Remove gloves turning inside out and dispose of gloves in appropriate container.
- 22) Record output on the provided, previously signed recording form.
- 23) Candidate's recorded output is within 25ml's of RN Test Observer's recorded output.**
- 24) Place call light or signaling device within easy reach of the resident.
- 25) Maintain respectful, courteous interpersonal interactions at all times.
- 26) Wash hands: Begin by wetting hands.
- 27) Wash hands: Apply soap to hands.

- 28) Wash hands: Rub hands together using friction for at least 20 seconds with soap.
- 29) Wash hands: Interlace fingers pointing downward with soap.
- 30) Wash hands: Wash all surfaces of hands and wrists with soap.
- 31) Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.
- 32) Wash hands: Dry hands on clean paper towel(s).
- 33) Wash hands: Turn off faucet with a clean dry paper towel.
- 34) Wash hands: Discard paper towels into trash container as used.
- 35) Wash hands: Do not re-contaminate hands by touching the faucet or sink at any time during/after the hand washing procedure.**

Catheter Care for a Female with Hand Washing

(One of the possible mandatory first tasks)

- 1) Knock on door.
- 2) Introduce yourself to the resident.
- 3) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 4) Explain the procedure to resident.
- 5) Provide for privacy.
- 6) Fill basin with warm water.
- 7) Candidate puts on gloves.
- 8) Avoid over exposure throughout the procedure.
- 9) Check to see that urine can flow, unrestricted, into the drainage bag (helpful to verbalize checking while looking for kinks in tubing, etc.).
- 10) Use soap and water to carefully wash around the catheter where it exits the urethra.
- 11) Hold catheter where it exits the urethra with one hand.**
- 12) While holding the catheter where it exits the urethra, clean 3-4 inches down the catheter tube.
- 13) Clean with strokes only away from the urethra. (At least two strokes.)**
- 14) Use a clean portion of the wash cloth for each stroke.
- 15) Rinse using strokes only away from the urethra.
- 16) Rinse using a clean portion of the wash cloth for each stroke.
- 17) Pat dry.
- 18) Do not allow the tube to be pulled at any time during the procedure.
- 19) Replace the resident's gown over the perineal area.
- 20) Replace top cover over the resident.
- 21) Leave resident in a position of safety and comfort.
- 22) Empty, rinse, dry and return basin to storage.
- 23) Remove gloves turning inside out and dispose of gloves in appropriate container.
- 24) Place call light or signaling device within easy reach of the resident.
- 25) Maintain respectful, courteous interpersonal interactions at all times.
- 26) Wash hands: Begin by wetting hands.
- 27) Wash hands: Apply soap to hands.
- 28) Wash hands: Rub hands together using friction for at least 20 seconds with soap.

- 29) Wash hands: Interlace fingers pointing downward with soap.
- 30) Wash hands: Wash all surfaces of hands and wrists with soap.
- 31) Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.
- 32) Wash hands: Dry hands on clean paper towel(s).
- 33) Wash hands: Turn off faucet with a clean dry paper towel.
- 34) Wash hands: Discard paper towels into trash container as used.
- 35) Wash hands: Do not re-contaminate hands by touching the faucet or sink at any time during/after the hand washing procedure.**

Isolation Gown and Gloves, then Emptying a Urinary Drainage Bag with Hand Washing

(One of the possible mandatory first tasks)

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Face the back opening of the gown.
- 3) Unfold the gown.
- 4) Place arms through each sleeve.
- 5) Secure the neck opening.
- 6) Secure the waist making sure that the back flaps cover clothing as completely as possible.
- 7) Put on gloves.
- 8) Gloves overlap sleeves at the wrist.
- 9) Knock on door.
- 10) Introduce yourself to the resident.
- 11) Explain the procedure to resident.
- 12) Place a barrier on the floor under the drainage bag.
- 13) Place the graduate on the previously placed barrier.
- 14) Open the drain to allow the urine to flow into the graduate.
- 15) Avoid touching the graduate with the tip of the tubing.
- 16) Close the drain.
- 17) Wipe the drain with alcohol wipe AFTER emptying the drainage bag.
- 18) Replace drain in holder.
- 19) Place graduate on level, flat surface.
- 20) With graduate at eye level, read output.
- 21) Empty graduate into designated toilet.
- 22) Rinse graduate and empty rinse water into designated toilet.
- 23) Return graduate to storage.
- 24) Leave resident in a position of comfort and safety.
- 25) Record output on the provided, previously signed recording form.
- 26) Candidate's measured output reading is within 25ml's of RN Test Observer's output reading.**
- 27) Place call light or signaling device within easy reach of the resident.
- 28) Maintain respectful, courteous interpersonal interactions at all times.
- 29) Remove gloves, turning inside out.
- 30) Remove gloves BEFORE removing gown.

- 31) Dispose of the gloves in the appropriate container.
- 32) Unfasten gown at the neck.
- 33) Unfasten gown at the waist.
- 34) Remove gown by folding soiled area to soiled area.
- 35) Dispose of the gown in the appropriate container.
- 36) Wash hands: Begin by wetting hands.
- 37) Wash hands: Apply soap to hands.
- 38) Wash hands: Rub hands together using friction for at least 20 seconds with soap.
- 39) Wash hands: Interlace fingers pointing downward with soap.
- 40) Wash hands: Wash all surfaces of hands and wrists with soap.
- 41) Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.
- 42) Wash hands: Dry hands on clean paper towel(s).
- 43) Wash hands: Turn off faucet with a clean dry paper towel.
- 44) Wash hands: Discard paper towels into trash container as used.
- 36) Wash hands: Do not re-contaminate hands by touching the faucet or sink at any time during/after the hand washing procedure.**

Perineal Care of a Female with Hand Washing

(One of the possible mandatory first tasks)

- 1) Knock on door.
- 2) Introduce yourself to the resident.
- 3) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 4) Explain the procedure to resident.
- 5) Provide for privacy.
- 6) Raise the bed height.
- 7) Fill basin with warm water.
- 8) Candidate puts on gloves.
- 9) Direct the RN Test Observer to stand on the opposite side of the bed or raise side rail on opposite side of the bed to provide for safety.
 - a. RN Test Observer does not move into position unless directed to do so by the candidate.
- 10) Turn resident or raise hips and place barrier under buttocks. (Candidate will choose barrier such as a towel, water proof pad, chux, etc.)
- 11) Expose perineum only.
- 12) Separate labia. (*Candidate must also verbalize separating.*)
- 13) Use water and soapy wash cloth.
- 14) Clean one side of labia from top to bottom.
- 15) Using a clean portion of a wash cloth, clean other side of labia from top to bottom.
- 16) Using a clean portion of a wash cloth, clean the vaginal area from top to bottom.**
- 17) Use a clean wash cloth, rinse one side of labia from top to bottom.
- 18) Using a clean portion of a wash cloth, rinse the other side of labia from top to bottom.
- 19) Using a clean portion of a wash cloth, rinse the vaginal area from top to bottom.

- 20) Pat dry.
- 21) Covers the exposed area with the bath blanket.
- 22) Assist resident to turn onto side away from the candidate.
 - a. RN Test Observer may help hold the manikin on her side ONLY after the candidate has turned the manikin.
- 23) With a clean wash cloth.
- 24) Uses water, wash cloth and soap.
- 25) Clean from vagina to rectal area.**
- 26) Use a clean portion of the wash cloth with any stroke.
- 27) Use a clean wash cloth, rinse from vagina to rectal area.
- 28) Use a clean portion of a wash cloth with any stroke.
- 29) Using a clean portion of a wash cloth, rinse the rectal area from vagina to rectal area.
- 30) Uses a clean portion of a wash cloth with any stroke.
- 31) Pat dry.
- 32) Safely remove barrier from under buttocks.
- 33) Position resident (manikin) on her back.
- 34) Dispose of soiled linen in designated laundry hamper.
- 35) Empty, rinse, dry and return equipment to storage.
- 36) Remove gloves turning inside out and dispose of gloves in appropriate container.
- 37) Lowers bed.
- 38) Place call light or signaling device and water within easy reach of the resident.
- 39) Maintain respectful, courteous interpersonal interactions at all times.
- 40) Wash hands: Begin by wetting hands.
- 41) Wash hands: Apply soap to hands.
- 42) Wash hands: Rub hands together using friction for at least 20 seconds with soap.
- 43) Wash hands: Interlace fingers pointing downward with soap.
- 44) Wash hands: Wash all surfaces of hands and wrists with soap.
- 45) Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.
- 46) Wash hands: Dry hands on clean paper towel(s).
- 47) Wash hands: Turn off faucet with a clean dry paper towel.
- 48) Wash hands: Discard paper towels into trash container as used.
- 49) Wash hands: Do not re-contaminate hands by touching the faucet or sink at any time during/after the hand washing procedure.**

Denture Care

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.
- 3) Line bottom of sink with a protective lining that would help prevent damage to the dentures. (Towel, wash cloth or paper towels are allowed for lining.)
- 4) Put on gloves.
- 5) Apply denture cleanser.

- 6) Remove denture from cup.
- 7) Handle dentures carefully to avoid damage.
- 8) Handle dentures carefully to avoid contamination.
- 9) Rinse denture cup.
- 10) Thoroughly brush dentures including the inner, outer, and chewing surfaces of upper and lower dentures. (Only one plate is used during testing.)
- 11) Rinse dentures using clean cool water.
- 12) Place dentures in rinsed denture cup.
- 13) Add cool clean water to denture cup.
- 14) Rinse equipment.
 - a. Denture brush or toothbrush.
- 15) Return equipment to storage.
- 16) Discard protective lining in an appropriate container.
- 17) Remove gloves inside out and dispose of gloves in an appropriate container.
- 18) Place call light or signaling device within easy reach of the resident.
- 19) Maintain respectful, courteous interpersonal interactions at all times.
- 20) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Dressing a Bedridden Resident

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain the procedure to the resident.
- 3) Provide for privacy.
- 4) Raise bed height.
- 5) Keep resident covered while removing gown.
- 6) Remove gown from unaffected side first.
- 7) Place used gown in designated laundry hamper.
- 8) When dressing the resident in a button-up shirt, insert your hand through the sleeve of the shirt and grasp the hand of the resident.
- 9) When dressing the resident in a button-up shirt, always dress from the affected (weak) side first.**
- 10) Assist the resident to raise their buttocks or turn resident from side to side and draw the pants over the buttocks and up to the resident's waist.
- 11) When dressing the resident in pants, always dress from the affected (weak) side first.**
- 12) When putting on the resident's socks, draw the socks up the resident's foot until they are smooth.
- 13) Leave the resident in comfortably/properly dressed and in a position of safety.
- 14) Lower the bed.
- 15) Place call light or signaling device within easy reach of the resident.

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

Feeding a Dependent Resident

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.
- 3) Ask the resident to state name and verify name matches the name on the diet card.
- 4) Protect clothing from soiling by using napkin, clothing protector, or towel.
- 5) Provide hand hygiene for the resident BEFORE feeding. (Candidate may use a disposable wipe to clean hands –or– wash the resident’s hands with a wet wash cloth –or– may use hand sanitizer on the resident covering all surfaces of the resident’s hands and rubbing the sanitizer in until dry.)
- 6) Ensure resident’s hands are dry BEFORE feeding. (If candidate uses a wet wash cloth to wash the resident’s hands, they will need to dry the resident’s hands. If hand sanitizer or a disposable wipe was used, make sure the hands are dry.)
- 7) Position yourself at eye level facing the resident while feeding resident.
- 8) Describe the food being offered to the resident.
- 9) Offer each fluid frequently from each glass.
- 10) Offer food in small amounts at a reasonable rate, allowing resident to chew and swallow.
- 11) Wipe resident's face during meal at least one time.
 - a. Actor will say, “I’m full” before all the solid food and fluids are gone.
- 12) Leave resident clean.
 - a. Remove the clothing protector.
- 13) Record intake in percentage of total solid food eaten on provided, previously signed recording form.
- 14) Candidate’s recorded consumed food intake is within 25 percentage points of the RN Test Observer’s recorded food intake.**
- 15) Record intake of sum total fluid consumed in ml on provided, previously signed recording form.
- 16) Candidate’s recorded total consumed fluid intake is within 60ml’s of the RN Test Observer’s recorded fluid intake.**
- 17) Place call light or signaling device within easy reach of the resident.
- 18) Maintain respectful, courteous interpersonal interactions at all times.
- 19) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Foot Care One Foot

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.

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- 3) Fill foot basin with warm water.
- 4) Remove a sock from the (right/left) foot. (The scenario read to you will specify right or left.)
- 5) Immerse foot in warm water.
 - a. You may verbalize the 5 to 20 minutes soaking time after you begin soaking the foot.
 - b. Once the 5 to 20 minutes soaking time is verbalized, the RN Test Observer will acknowledge the stated time and say, "You may continue with your demonstration now."
- 6) Use water and soapy wash cloth.
- 7) Wash entire foot.
- 8) Wash between toes.
- 9) Rinse entire foot.
- 10) Rinse between toes.
- 11) Dry foot thoroughly.
- 12) Dry thoroughly between toes.**
- 13) Warm lotion by rubbing it between hands.
- 14) Massage lotion over entire foot.
- 15) Avoid getting lotion between the toes.
- 16) If any excess lotion, wipe with a towel.
- 17) Replace sock on foot.
- 18) Empty, rinse, dry and return basin to storage.
- 19) Place dirty linen in designated laundry hamper.
- 20) Leave resident in a position of safety in proper body alignment in the chair.
- 21) Place call light or signaling device within easy reach of the resident.
- 22) Maintain respectful, courteous interpersonal interactions at all times.
- 23) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Making an Occupied Bed

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.
- 3) Gather linen.
- 4) Transport linen away from body.
- 5) Place linen on a clean surface. (May place linen on the overbed table, chair or bedside stand.)
- 6) Provide for privacy.
- 7) Raise bed height.
- 8) Resident is to remain covered at all times.
- 9) Assist resident to roll onto side.
- 10) Roll or fan fold soiled linen, soiled side inside, to the center of the bed.
- 11) Place clean bottom sheet on mattress.
- 12) Secure two fitted corners.
- 13) Roll or fan fold clean linen against the resident's back.

- 14) Assist the resident to roll over the bottom linen, preventing trauma and avoidable pain to resident.
- 15) Remove soiled linen without shaking.
- 16) Avoid touching linen to uniform.
- 17) Dispose of soiled linen in designated laundry hamper.
- 18) Pull through and smooth out the clean bottom linen.
- 19) Secure the other two fitted corners.
- 20) Place clean top linen and blanket or bed spread over covered resident.
- 21) Remove used linen keeping resident unexposed at all times.
- 22) Tuck in clean top linen at the foot of bed while providing room for feet to move.
- 23) Tuck in clean blanket or bed spread at the foot of the bed while providing room for feet to move.
- 24) Apply clean pillow case.
- 25) Gently lift resident's head while replacing the pillow.
- 26) Lower bed.
- 27) Return side rails to lowered position, if side rails were used.
- 28) Place the call light or signaling device within easy reach of the resident.
- 29) Maintain respectful, courteous interpersonal interactions at all times.
- 30) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Mouth Care—Brushing Teeth

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.
- 3) Provide for privacy.
- 4) Put on gloves only AFTER supplies have been gathered.
- 5) Drape the resident's chest with towel (cloth or paper) to prevent soiling.
- 6) Wet toothbrush.
- 7) Apply toothpaste to toothbrush.
- 8) Brush resident's teeth, including the inner, outer, and chewing surfaces of all upper and lower teeth.**
- 9) Clean tongue.
- 10) Assist resident in rinsing mouth.
- 11) Wipe resident's mouth.
- 12) Remove soiled chest barrier.
- 13) Place soiled chest barrier (cloth or paper) in the appropriate container.
- 14) Empty, rinse and dry emesis basin.
- 15) Rinse toothbrush.
- 16) Return equipment to storage.
- 17) Remove gloves turning inside out and dispose in appropriate container.
- 18) Leave resident in position of comfort.

- 19) Place call light or signaling device within easy reach of the resident.
- 20) Maintain respectful, courteous interpersonal interactions at all times.
- 21) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Nail Care One Hand

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.
- 3) Fill basin with warm water.
- 4) Immerse right/left hand nails in warm water. (The scenario read to you will specify right or left.)
 - a. You may verbalize the at least 5 minutes soaking time after you begin soaking the nails.
 - b. Once the at least 5 minutes soaking time is verbalized, the RN Test Observer will acknowledge the stated time and say, "You may continue with your demonstration now."
- 5) Dry hand thoroughly.
- 6) Specifically, dry between the fingers.
- 7) Gently cleans under nails with an orange stick.
- 8) Gently pushes cuticles back with a towel or wash cloth.
- 9) Files each fingernail.
- 10) Empty, rinse and dry basin.
- 11) Return equipment to storage.
- 12) Discard soiled linen in designated laundry hamper.
- 13) Place call light or signaling device within easy reach of the resident.
- 14) Maintain respectful, courteous interpersonal interactions at all times.
- 15) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Pivot-Transfer a Weight Bearing, Non-Ambulatory Resident from Bed to Wheelchair using a Gait Belt

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.
- 3) Obtain a gait belt.
- 4) Lock bed brakes to ensure resident's safety.**
- 5) Assist resident in putting on non-skid footwear.
- 6) Adjust bed height to ensure resident's feet will be flat on the floor.
- 7) Assist resident to a sitting position.
- 8) Position wheelchair at the foot or head of the bed with the wheelchair arm/wheel touching the side of the bed.

9) Lock wheelchair brakes to ensure resident's safety.

- 10) Properly place gait belt around the resident's waist to stabilize trunk.
- 11) Tighten gait belt. Check gait belt for tightness by slipping fingers between gait belt and resident.
- 12) Grasp the gait belt with both hands.
- 13) Bring resident to a standing position using proper body mechanics.

14) Assist resident to pivot and sit in the wheelchair in a controlled manner that ensures safety.

- 15) Remove gait belt.
- 16) Place resident within easy reach of the call light or signaling device.
- 17) Maintain respectful, courteous interpersonal interactions at all times.
- 18) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Pivot-Transfer a Weight Bearing, Non-Ambulatory Resident from Wheelchair to Bed using a Gait Belt

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.
- 3) Obtain a gait belt.
- 4) Lock bed brakes to ensure resident's safety.**
- 5) Adjust bed height to ensure resident's feet will be flat on the floor.
- 6) Position wheelchair at foot or head of bed with wheelchair arm/wheel touching the side of the bed.
- 7) Lock wheelchair brakes to ensure resident's safety.**
- 8) Properly place gait belt around the resident's waist to stabilize trunk.
- 9) Tighten gait belt. Check gait belt for tightness by slipping fingers between gait belt and the resident.
- 10) Ensure the resident's feet are flat on the floor.
- 11) Ask resident to place hands on the wheelchair arm rests.
- 12) Grasp the gait belt with both hands.
- 13) Bring resident to standing position using proper body mechanics.
- 14) Assist resident to pivot and sit on the bed in a controlled manner that ensures safety.**
- 15) Remove gait belt.
- 16) Remove non-skid footwear.
- 17) Assist resident to lie down in the center of the bed.
- 18) Make sure resident is comfortable and in good body alignment.
- 19) Lower bed.
- 20) Place call light or signaling device with easy reach of the resident.
- 21) Maintain respectful, courteous interpersonal interactions at all times.
- 22) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Position Resident on Side

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.
- 3) Provide for privacy.
- 4) Position bed flat.
- 5) Raise bed height.
- 6) **Direct the RN Test Observer to stand on the side of the bed opposite working side of bed –or- raises side rail on side of the bed opposite working side of the bed to provide for safety.**
- 7) From the working side of the bed, move upper body, hips and legs toward self to provide room on the bed that will be used to safely turn the resident on his/her side.
- 8) Assist/turn resident on his/her side.
- 9) Ensure that the resident's face never becomes obstructed by the pillow.
- 10) Check to be sure that resident is not lying on his/her downside arm.
- 11) Ensure resident is in correct body alignment.
- 12) Place support devices such as pillows, wedges, blankets, etc., to maintain correct body alignment and protect bony prominences- under the resident's head, the upside arm, behind the back and between the knees.
- 13) Leave resident in a position of comfort and safety.
- 14) Lower bed.
- 15) Place call light or signaling device within easy reach of the resident.
- 16) Maintain respectful, courteous interpersonal interactions at all times.
- 17) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Range of Motion for Hip and Knee

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.
- 3) Raise bed height.
- 4) Provide for privacy.
- 5) Position resident supine (bed flat).
- 6) Position resident in good body alignment.
- 7) Place one hand under the knee.
- 8) Place the other hand under the ankle.
- 9) **Do not cause discomfort/pain any time during ROM.**
- 10) ROM for hip: Move the entire leg away from the body.
 - a. abduction
- 11) Move the entire leg back toward the body.
 - a. adduction

- 12) Complete abduction and adduction of the hip at least three times.
- 13) Continue to correctly support joints by placing one hand under the resident's knee and the other hand under the resident's ankle.
- 14) Bend the resident's knee and hip toward the resident's trunk.
 - a. flexion of hip and knee at the same time
- 15) Straighten the knee and hip.
 - a. extension of knee and hip at the same time
- 16) Complete flexion and extension of knee and hip at least three times.
- 17) Do not force any joint beyond the point of free movement.
- 18) Candidate *must ask* at least once during the ROM exercise if there is/was any discomfort/pain.**
- 19) Leave resident in a comfortable position.
- 20) Lower bed.
- 21) Place call light or signaling device within easy reach of the resident.
- 22) Maintain respectful, courteous interpersonal interactions at all times.
- 23) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Range of Motion for Shoulder

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.
- 3) Provide for privacy.
- 4) Raise bed height.
- 5) Position resident supine (bed flat).
- 6) Position resident in good body alignment.
- 7) Place one hand under the elbow.
- 8) Place the other hand under the resident's wrist.
- 9) Do not cause discomfort/pain at any time during ROM.**
- 10) Raise resident's arm up and over the resident's head.
 - a. flexion
- 11) Bring the resident's arm back down to the resident's side.
 - a. extension
- 12) Complete flexion and extension of the shoulder at least three times.
- 13) Continue same support of for shoulder joints by placing one hand under the resident's elbow and one hand under the resident's wrist.
- 14) Move the resident's entire arm out away from the body.
 - a. abduction
- 15) Return the resident's arm to the resident's side.
 - a. adduction
- 16) Complete abduction and adduction of the shoulder at least three times.
- 17) Do not force any joint beyond the point of free movement.

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- 18) Candidate ***must ask*** at least once during the ROM exercise if there is/was any discomfort/pain.
- 19) Leave resident in a comfortable position.
- 20) Lower bed.
- 21) Place call light or signaling device within easy reach of the resident.
- 22) Maintain respectful, courteous interpersonal interactions at all times.
- 23) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Vital Signs - Pulse and Respirations

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to resident.
- 3) Locate the radial pulse by placing tips of fingers on thumb side of the resident's wrist.
- 4) Count pulse for 60 seconds or 30x2.
 - a. Tell the RN Test Observer when you start counting and tell her/him when you stop counting.
- 5) Record pulse rate on the provided, previously signed recording form.
- 6) **Candidate's recorded pulse rate is within 4 beats of RN Test Observer's recorded pulse rate.**
- 7) Count respirations for 60 seconds or 30x2.
 - a. Tell the RN Test Observer when you start counting and tell her/him when you stop counting.
- 8) Record respirations on the provided, previously signed recording form.
- 9) **Candidate's recorded respiratory rate is within 2 breaths of the RN Test Observer's recorded respiratory rate.**
- 10) Place call light or signaling device within easy reach of the resident.
- 11) Maintain respectful, courteous interpersonal interactions at all times.
- 12) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Knowledge Test Vocabulary List

abandonment	acute	afebrile
abdominal thrust	adaptive	affected side
abductor wedge	adaptive devices	aging process
abnormal vital signs	adaptive equipment	agitation
absorption	adduction	AIDS
abuse	ADL	Alzheimer's
accidents	admission	ambulation
accountable	admitting resident	amputees
activities	advance directives	anatomy

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anemia	body language	clergy
angina	body mechanics	cognitively impaired
anterior	body temperature	cold pack
anti-embolitic stocking	bone loss	colostomy
antibiotics	bowel program	colostomy care
antisepsis	brain stem	coma
anxiety	breathing	combative resident
aphasia	brittle bones	communicable
apical	burnout	communication
apnea	call light	competency evaluation
arthritis	cancer	conduct
aspiration	cardiac arrest	confidentiality
assault	cardiopulmonary resuscitation	conflict
assistive device	cardiovascular system	conflict resolution
atrophy	care impaired	confused resident
audiologist	care plan	congestive heart failure
autoclave	care planning	constipation
axillary temperature	cast	contamination
bacteria	cataract	contracture
basic needs	catheter	converting measures
bathing	catheter care	COPD
bed height	cc's in an ounce	coughing excessively
bed making	central nervous system	cultural
bedrails	chain of command	culture
bedrest	charge nurse	CVA
behavior	chemical disinfection	cyanotic
behavioral care plan	chemical restraint	dangling
beliefs	chemotherapy	de-escalation
biohazard	choking	death and dying
bladder training	chronic	decubitus ulcer
bleeding	circulation	deeper tissue
blindness	circulatory system	dehydration
blood pressure	cleaning	delegation
body alignment	cleaning spills	demanding resident
body fluid	clear liquid diet	dementia

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denture care	elastic stockings	frayed cord
dentures	elderly	gait belt
dependability	elimination	gastric feedings
depression	emesis	gastrostomy tube
development	emesis basin	geriatrics
developmental disability	emotional abuse	gerontology
diabetes	emotional lability	gestures
diaphragm	emotional needs	gifts
diastolic	emotional stress	gloves
diet	emotional support	grieving process
diets	empathy	group settings
digestion	emphysema	hand care
dilate	enema	hand tremors
dirty linen	epilepsy	hand washing
discharging resident	essential behaviors	health-care team
disease	ethics	hearing aid
disease process	etiquette	hearing impaired
disinfection	eye glasses	hearing loss
disoriented	falls	heart attack
disposing of contaminated materials	fasting	heart muscle
disrespect	fecal impaction	Heimlich maneuver
dizziness	feces	helping residents
DNR	feeding	hemiplegia
documentation	fire	hereditary
domestic abuse	fire safety	hip prosthesis
dorsiflexion	first aid	HIPAA
dressings	flatus	HIV
droplets	Foley catheter	holistic care
drowsy	foot board	hormones
dying	foot care	hospice
dysphagia	foot drop	Huntington's
dyspnea	Fowler's	hyperglycemia
dysuria	fracture pan	hypertension
edema	fractures	hyperventilation
	fraud	I&O

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immobility	material safety data sheets	oral care
impaired	measuring height	oral hygiene
impairment	measuring temperature	oral temperature
in-house transfer	mechanical lift	orientation
in-service programs	medical asepsis	oriented
incontinence	medical record	osteoporosis
indwelling catheter	medication administration	output
infection	medications	overbed table
infection control	memory loss	oxygen
infection prevention	mental health	oxygen use
initial observations	mentally impaired	palliative care
insomnia	microorganism	paralysis
intake	military time	paranoia
intake and output	minerals	Parkinson's
integumentary system	mistakes	passive
interpersonal skills	mobility	pathogen
invasion of privacy	mouth care	patience
ischemia	moving	perineal care
isolation	MSDS	peripheral vascular disease
isolation precautions	mucous membrane	peristalsis
jaundice	Multiple Sclerosis	personal care
job application	musculoskeletal	personal items
job description	nail care	personal protective equipment
lactose intolerance	nasal cannula	personal values
laxatives	neglect	pet therapy
life support	non-contagious disease	phone etiquette
lift/draw sheet	non-verbal communication	physical needs
linen	NPO	physical therapist
living will	nursing assistant's role	physician's authority
log roll	nutrition	plaque
log rolling	objective	plate rim
loose teeth	objective data	podiatrist
male perineal care	OBRA	positioning
Maslow	occupied bed	postmortem care
masturbation	ombudsman	postural hypotension

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PPE	resident pictures	sexual harassment
precautions	resident right	sexual needs
pressure ulcer	resident treatment	sharing information
preventing falls	resident trust	Sharp's container
privacy	Resident's Bill of Rights	shaving
progressive	resident's chart	shearing
pronation	resident's environment	side rails
prostate gland	resident's families	Sitz bath
prosthesis	residents	skin observation
psychiatrist	respectful treatment	slander
psychological needs	respiration	smoking
psychosocial	respiratory symptoms	social needs
pulse	respiratory system	social worker
pureed diet	responding to resident behavior	specimen
quadriplegia	responsibility	spills
quality of life	restorative care	spiritual needs
RACE (acronym)	restraint	sputum specimen
radial	resuscitation	stages of grief
range of motion	rights	standard precautions
reality orientation	rigor mortis	state tested
rectal	risk factor	stealing
rectal temperature	role	stereotypes
refusal	rotation	stethoscope
regulation	safety	stress
rehabilitation	safety procedures	stroke
religious service	sanitizer	subjective
reminiscence therapy	scale	subjective data
reminiscing	seclusion	sundowning
renewal	secretions	supine
reporting	seizure	supplemental feedings
reposition	self-esteem	survey
resident abuse	semi fowlers	swelling
resident belongings	sensory system	tachycardia
resident independence	sexual abuse	TED hose
resident pain		

