



Missouri Mock Skills

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Please note: The skill task steps included in this document are offered as guidelines to help prepare candidates for the Missouri 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.

ABBREVIATED BED BATH- WHOLE FACE AND ONE ARM, HAND AND UNDERARM

✓	#	Skill Task Step	Notes
	1.	Knock on the door.	
	2.	Introduce yourself to the resident.	
	3.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	4.	Explain the procedure to the resident.	
	5.	Provide for privacy; pull the privacy curtain.	
	6.	Fill a basin with warm water.	
	7.	Raise bed height.	
	8.	Cover the resident with a bath blanket.	
	9.	Fan-fold bed linens at least down to the waist or move linens to the opposite side.	
	10.	Put on gloves.	
	11.	Remove the resident's gown without exposing the resident.	
	12.	Place the soiled gown in the designated laundry hamper.	
	13.	Wash face WITHOUT SOAP.	
	14.	Pat dry face.	
	15.	Place a towel under the resident's arm; only expose one arm.	
	16.	Wash arm, hand and underarm using soap and water.	
	17.	Rinse arm, hand, and underarm.	
	18.	Pat dry arm, hand, and underarm.	
	19.	Assist the resident in putting on a clean gown.	
	20.	Empty, rinse, dry, and return equipment to storage.	
	21.	Place the soiled linen in a designated laundry hamper.	
	22.	Remove gloves, turning them inside out as you remove them, and dispose of them in the designated container.	
	23.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	24.	Lower bed.	
	25.	Place the call light or signaling device within easy reach of the resident.	
	26.	Maintain respectful, courteous interpersonal interactions at all times.	

AMBULATION FROM BED TO WHEELCHAIR USING A GAIT BELT

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

AMBULATION FROM WHEELCHAIR TO BED USING A GAIT BELT

✓	#	Skill Task Step	Notes
	1.	Knock on the door.	
	2.	Introduce yourself to the resident.	
	3.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	4.	Explain the procedure to the resident.	
	5.	Provide for privacy; pull the privacy curtain.	
	6.	Obtain a gait belt for the resident.	
	7.	Lock bed brakes to ensure the resident's safety.	
	8.	Lock wheelchair brakes to ensure the resident's safety.	
	9.	Adjust bed height to ensure the resident's feet will be flat on the floor.	
	10.	Properly place a gait belt around the resident's waist to stabilize the trunk.	
	11.	Tighten the gait belt. Check the gait belt for tightness by slipping fingers between it and the resident.	
	12.	Ensure the resident's feet are flat on the floor.	
	13.	Ask the resident to place hands on wheelchair armrests.	
	14.	Grasp the gait belt with both hands.	
	15.	Bring the resident to a standing position using proper body mechanics at all times.	
	16.	Continue grasping the gait belt.	
	17.	Stabilize the resident.	
	18.	Ambulate the resident at least 10 steps to the bed.	
	19.	Assist the resident in pivoting/turning and sitting on the bed.	
	20.	Sit the resident on the bed in a controlled manner that ensures safety at all times.	
	21.	Remove gait belt.	
	22.	Assist the resident in lying down in the center of the bed, making sure the resident is comfortable and in good body alignment.	
	23.	Lower bed.	
	24.	Place the call light or signaling device within easy reach of the resident.	
	25.	Maintain respectful, courteous interpersonal interactions at all times.	
	26.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	

CATHETER CARE FOR A FEMALE WITH HAND WASHING

(ONE OF THE POSSIBLE MANDATORY FIRST TASKS) DEMONSTRATED ON MANIKIN

✓	#	Skill Task Step	Notes
	1.	Knock on the door.	
	2.	Introduce yourself to the resident.	
	3.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	4.	Explain the procedure to the resident.	
	5.	Provide privacy; pull the privacy curtain.	
	6.	Fill a basin with warm water.	
	7.	Raise the bed height.	
	8.	Put on gloves.	
	9.	Avoid overexposure throughout the procedure.	
	10.	Check to see that urine can flow, unrestricted, into the drainage bag (it is helpful to verbalize checking while looking for kinks in tubing, etc.).	
	11.	Use a clean washcloth, water, and soap.	
	12.	Carefully wash around the urethral opening where it exits.	
	13.	Hold the catheter where it exits the urethra with one hand.	
	14.	While holding the catheter, clean 3-4 inches down the catheter tube.	
	15.	Clean with strokes only away from the urethra. (At least two strokes.)	
	16.	Use a clean portion of the washcloth for each stroke.	
	17.	Rinse using strokes only away from the urethra.	
	18.	Rinse using a clean portion of the washcloth for each stroke.	
	19.	Pat dry.	
	20.	Do not allow the tube to be pulled at any time during the procedure.	
	21.	Remove gloves, turning them inside out as you remove them, and dispose of them in designated container.	
		Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	22.		
	23.	Replace the resident's gown over the perineal area.	
	24.	Replace the top cover over the resident.	
	25.	Leave the resident in a position of safety and comfort.	
	26.	Lower bed.	
	27.	Empty, rinse, dry, and return basin to storage.	
	28.	Place the call light or signaling device within easy reach of the resident.	
	29.	Maintain respectful, courteous interpersonal interactions at all times.	
	30.	Wash hands: Begin by wetting your hands.	
	31.	Wash hands: Apply soap to hands.	
	32.	Wash hands: Rub hands together using friction for at least 20 seconds with soap.	
	33.	Wash hands: Interlace fingers pointing downward with soap.	
	34.	Wash hands: Wash all surfaces of your hands with soap.	
	35.	Wash hands: Wash all surfaces of wrists with soap.	
	36.	Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.	

	37.	Wash hands: Dry hands with a clean paper towel(s).	
	38.	Wash hands: Turn off the faucet with a paper towel.	
	39.	Wash hands: Discard paper towels in the trash container as used.	
	40.	Wash hands: Do not re-contaminate hands by touching the faucet or sink at any time during or after the hand washing procedure.	

DENTURE CARE

[only one plate is used for testing]

✓	#	Skill Task Step	Notes
	1.	Knock on the door.	
	2.	Introduce yourself to the resident.	
	3.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	4.	Explain the procedure to the resident.	
	5.	Provide for privacy; pull the privacy curtain.	
	6.	Line the bottom of the sink with a protective lining that will help prevent damage to the denture. <i>(Towels, washcloths, or paper towels are allowed for lining.)</i>	
	7.	Put on gloves.	
	8.	Apply denture cleanser.	
	9.	Remove the denture from the cup.	
	10.	Handle the denture carefully to avoid damage.	
	11.	Handle the denture carefully to avoid contamination.	
	12.	Rinse the denture cup.	
	13.	Thoroughly brush the denture, including the inner, outer, and chewing surfaces. <i>(Only one plate is used during testing.)</i>	
	14.	Rinse denture using clean, cool water.	
	15.	Place the denture in the rinsed denture cup.	
	16.	Add cool, clean water to the denture cup.	
	17.	Rinse equipment. <i>(Denture brush or toothbrush.)</i>	
	18.	Return equipment to storage.	
	19.	Discard the protective lining in an appropriate container.	
	20.	Remove gloves, turning them inside out as you remove them, and dispose of them in the designated container.	
	21.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	22.	Place the call light or signaling device within easy reach of the resident.	
	23.	Maintain respectful, courteous interpersonal interactions at all times.	

DONN PPE [PUT ON] AN ISOLATION GOWN & GLOVES, EMPTY A URINARY DRAINAGE BAG, MEASURE AND RECORD URINE OUTPUT, DOFF [REMOVE] PPE, WITH HAND WASHING

(ONE OF THE POSSIBLE MANDATORY FIRST TASKS)

✓	#	Skill Task Step	Notes
	1.	Perform hand hygiene BEFORE touching the gown. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they 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 the clothing as completely as possible.	
	7.	Put on gloves.	
	8.	Gloves overlap sleeves at the wrist.	
	9.	Knock on the door.	
	10.	Introduce yourself to the resident.	
	11.	Explain the procedure to the resident.	
	12.	Provide for privacy; pull the privacy curtain.	
	13.	Place a barrier on the floor under the drainage bag.	
	14.	Place the graduate on the previously placed barrier.	
	15.	Open the drain to allow the urine to flow into the graduate.	
	16.	Avoid touching the graduate with the tip of the tubing.	
	17.	Close the drain.	
	18.	Wipe the drain with an alcohol wipe AFTER emptying the drainage bag.	
	19.	Replace the drain in the holder.	
	20.	Place the graduate on a level, flat surface.	
	21.	With the graduate at eye level, read the output.	
	22.	Empty the graduate into the designated toilet/commode.	
	23.	Rinse the graduate and empty rinse water into the designated toilet/commode.	
	24.	Return the graduate to storage.	
	25.	Leave the resident in a position of comfort and safety.	
	26.	Record the output on the provided, previously signed recording form.	
	27.	The candidate's measured output reading is within 25mls of the RN Test Observer's output reading.	
	28.	Place the call light or signaling device within easy reach of the resident.	
	29.	Maintain respectful, courteous interpersonal interactions at all times.	
	30.	Remove gloves, turning them inside out as you remove them.	
	31.	Remove gloves BEFORE removing the gown.	
	32.	Dispose of the gloves in the appropriate container.	
	33.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	

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

DESSING A DEPENDENT RESIDENT

✓	#	Skill Task Step	Notes
	1.	Knock on the door.	
	2.	Introduce yourself to the resident.	
	3.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	4.	Explain the procedure to the resident.	
	5.	Provide for privacy; pull the privacy curtain.	
	6.	Raise bed height.	
	7.	Keep the resident covered while removing the gown.	
	8.	Remove the gown from the unaffected side first.	
	9.	Place the soiled gown in the designated laundry hamper.	
	10.	When dressing the resident in a button-up shirt, insert your hand through the sleeve of the shirt and grasp the resident's hand.	
	11.	When dressing the resident in a button-up shirt, always dress from the affected (weak) side first.	
	12.	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.	
	13.	When dressing the resident in pants, always dress from the affected (weak) side first.	
	14.	When putting on the resident's socks, draw the socks up the resident's foot until they are smooth.	
	15.	Leave the resident comfortably/properly dressed and in a position of safety.	
	16.	Lower the bed.	
	17.	Place the 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 your hands together until they are completely dry.	

FEEDING A DEPENDENT RESIDENT

✓	#	Skill Task Step	Notes
	1.	Knock on the door.	
	2.	Introduce yourself to the resident.	
	3.	Perform hand hygiene. <ol style="list-style-type: none"> Cover all surfaces of hands with hand sanitizer. Rub your hands together until they are completely dry. 	
	4.	Explain the procedure to the resident.	
	5.	Provide for privacy; pull the privacy curtain.	
	6.	Position the resident in an upright position, at least 45 degrees.	
	7.	Ask the resident to state their name and verify that the name matches the name on the diet card.	
	8.	Protect clothing from soiling using a napkin, clothing protector, or towel.	
	9.	Provide hand hygiene for the resident BEFORE feeding. (Candidates may use a disposable wipe and dispose of it in a trash can, wash the resident's hands with a wet washcloth, or rub hand sanitizer over all surfaces of the resident's hands.)	
	10.	Ensure the resident's hands are dry BEFORE feeding. (If a wipe was used, verify hands are dry-or- if a wet washcloth was used, then dry-or- if sanitizer is used, it is rubbed in until dry.)	
	11.	Position yourself at eye level, facing the resident, while feeding them.	
	12.	Describe the food being offered to the resident.	
	13.	Offer fluids frequently from each glass.	
	14.	Offer food in small amounts at a reasonable rate, allowing the resident to chew and swallow.	
	15.	Wipe the resident's face during the meal at least once.	
	16.	The actor will say, "I'm full" before all the solid food and fluids are gone.	
	17.	Leave the resident clean.	
	18.	Leave the resident in bed with the head of the bed up to at least 30 degrees.	
	19.	Record intake as a percentage of total solid food eaten on the previously signed recording form.	
	20.	The candidate's recorded consumed food intake is within 25 percentage points of the RN Test Observer's recorded food intake.	
	21.	Record the sum total of estimated fluid intake on the previously signed recording form.	
	22.	The candidate's recorded sum total consumed fluid intake is within 60mls of the RN Test Observer's recorded fluid intake.	
	23.	Place the call light or signaling device within easy reach of the resident.	
	24.	Maintain respectful, courteous interpersonal interactions at all times.	
	25.	Perform hand hygiene. <ol style="list-style-type: none"> Cover all surfaces of hands with hand sanitizer. Rub your hands together until they are completely dry. 	

FOOT CARE - ONE FOOT

✓	#	Skill Task Step	Notes
	1.	Knock on the door.	
	2.	Introduce yourself to the resident.	
	3.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	4.	Explain the procedure to the resident.	
	5.	Provide for privacy; pull the privacy curtain.	
	6.	Fill a basin with warm water.	
	7.	Put on gloves.	
	8.	Remove the sock from the right or left foot. <i>(The scenario read to you will specify right or left.)</i>	
	9.	Immerse the resident's foot in warm water. a. You may verbalize the 5 to 20 minutes of soaking time after you begin soaking the foot. b. Once the 5 to 20-minute soaking time is verbalized, the RN Test Observer acknowledges the stated time and says, "You may continue with your demonstration now."	
	10.	Use water and a soapy washcloth.	
	11.	Wash entire foot.	
	12.	Wash between toes.	
	13.	Rinse entire foot.	
	14.	Rinse between toes.	
	15.	Dry foot thoroughly.	
	16.	Dry thoroughly between toes.	
	17.	Warm lotion by rubbing it between your hands.	
	18.	Massage lotion over the entire foot.	
	19.	Avoid getting lotion between the toes.	
	20.	If any excess lotion is present, wipe it with a towel.	
	21.	Replace the sock on the foot.	
	22.	Empty, rinse, dry, and return basin to storage.	
	23.	Place soiled linen in the designated laundry hamper.	
	24.	Remove gloves, turning them inside out as you remove them, and dispose of them in the designated container.	
	25.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	26.	Leave the resident in a position of safety in proper body alignment in the chair.	
	27.	Place the call light or signaling device within easy reach of the resident.	
	28.	Maintain respectful, courteous interpersonal interactions at all times.	

MOUTH CARE – BRUSHING A RESIDENT’S TEETH

✓	#	Skill Task Step	Notes
	1.	Knock on the door.	
	2.	Introduce yourself to the resident.	
	3.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	4.	Explain the procedure to the resident.	
	5.	Provide for privacy; pull the privacy curtain.	
	6.	Put on gloves only AFTER supplies have been gathered.	
	7.	Drape the resident’s chest with a towel (cloth or paper) to prevent soiling.	
	8.	Wet toothbrush.	
	9.	Apply toothpaste to the toothbrush.	
	10.	Brush the resident's teeth, including the inner, outer, and chewing surfaces of all upper and lower teeth.	
	11.	Clean tongue.	
	12.	Assist resident in rinsing mouth. (May use an emesis basin or a disposable cup to spit in.)	
	13.	Wipe the resident's mouth.	
	14.	Remove the soiled chest barrier.	
	15.	Place the soiled chest barrier (cloth or paper) in the appropriate container.	
	16.	Empty, rinse, and dry the emesis basin, if used, or dispose of the cup in an appropriate container.	
	17.	Rinse the toothbrush.	
	18.	Return equipment to storage.	
	19.	Remove gloves, turning them inside out as you remove them, and dispose of them in the designated container.	
	20.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	21.	Leave the resident in a position of comfort.	
	22.	Place the call light or signaling device within easy reach of the resident.	
	23.	Maintain respectful, courteous interpersonal interactions at all times.	

MOUTH CARE FOR A COMATOSE RESIDENT

✓	#	Skill Task Step	Notes
	1.	Knock on the door.	
	2.	Introduce yourself to the resident.	
	3.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	4.	Explain the procedure to the resident.	
	5.	Provide for privacy; pull the privacy curtain.	
	6.	Put on gloves only AFTER supplies have been gathered	
	7.	Turn the resident to a side-lying position -OR- turns the resident's head to the side to avoid choking or aspiration.	
	8.	Drape the chest or bed as needed to protect it from soiling.	
	9.	Use swab(s) and cleaning solution (water). (You may not use a toothbrush or toothpaste.)	
	10.	Gently and thoroughly clean the inner, outer, and chewing surfaces of all upper and lower teeth.	
	11.	Gently and thoroughly clean the gums and tongue.	
	12.	Wipe the resident's mouth.	
	13.	Return the resident to a position of comfort and safety.	
	14.	Discard swab(s) in designated container.	
	15.	Place soiled linen in the designated laundry hamper.	
	16.	Remove gloves, turning them inside out as you remove them, and dispose of them in the designated container.	
	17.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	18.	Place the call light or signaling device within easy reach of the resident.	
	19.	Maintain respectful, courteous interpersonal interactions at all times.	

NAIL CARE - ONE HAND

✓	#	Skill Task Step	Notes
	1.	Knock on the door.	
	2.	Introduce yourself to the resident.	
	3.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	4.	Explain the procedure to the resident.	
	5.	Provide for privacy; pull the privacy curtain.	
	6.	Fill a basin with warm water.	
	7.	Put on gloves.	
	8.	Immerse the resident's (right or left hand) nails in warm water. <i>(The scenario read to you will specify right or left.)</i> a. You may verbalize at least 5 minutes of soaking time after you begin soaking the nails. b. Once at least 5 minutes of soaking time is verbalized, the RN Test Observer acknowledges the stated time and says, "You may continue with your demonstration now."	
	9.	Dry the resident's hand thoroughly.	
	10.	Specifically, dry between the fingers.	
	11.	Gently clean the nails with an orange stick.	
	12.	Gently push cuticles back with a towel or washcloth.	
	13.	Files each fingernail.	
	14.	Empty, rinse, and dry basin.	
	15.	Return equipment to storage.	
	16.	Place soiled linen in the designated laundry hamper.	
	17.	Remove gloves, turning them inside out as you remove them, and dispose of them in the designated container.	
	18.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	19.	Place the call light or signaling device within easy reach of the resident.	
	20.	Maintain respectful, courteous interpersonal interactions at all times.	

PERINEAL CARE FOR A FEMALE WITH HAND WASHING

(ONE OF THE POSSIBLE MANDATORY FIRST TASKS) DEMONSTRATED ON MANIKIN

✓	#	Skill Task Step	Notes
	1.	Knock on the door.	
	2.	Introduce yourself to the resident.	
	3.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	4.	Explain the procedure to the resident.	
	5.	Provide for privacy; pull the privacy curtain.	
	6.	Raise the bed height.	
	7.	Fill a basin with warm water.	
	8.	Put on gloves.	
	9.	Direct the RN Test Observer to stand on the opposite side of the bed or raise the side rail on the opposite side of the bed to provide for safety. <i>(The RN Test Observer does not move into position unless directed to do so by the candidate.)</i>	
	10.	Turn the resident or raise the hips and place the barrier under the buttocks. The candidate will choose a barrier, such as a towel, waterproof pad, or Chux.	
	11.	Expose the perineum only.	
	12.	Separate labia.	
	13.	Use water and a soapy washcloth.	
	14.	Clean one side of the labia from front to back.	
	15.	Using a clean portion of a washcloth, clean the other side of the labia from front to back.	
	16.	Using a clean portion of a washcloth, clean the vaginal area from front to back.	
	17.	Use a clean washcloth and water to rinse the front side.	
	18.	Rinse one side of the labia from front to back.	
	19.	Rinse the other side of the labia from front to back using a clean portion of the washcloth.	
	20.	Using a clean portion of a washcloth, rinse the vaginal area from front to back.	
	21.	Pat dry.	
	22.	Remove gloves, turning them inside out as you remove them, and dispose of them in the designated container.	
	23.	Perform hand hygiene AFTER disposing of gloves.	
	24.	Cover all surfaces of hands with hand sanitizer.	
	25.	Rub your hands together until they are completely dry.	
	26.	Put on new gloves.	
	27.	Assist the resident in turning to the side away from the candidate. <i>(The RN Test Observer may help hold the manikin on their side ONLY after the candidate has turned it.)</i>	
	28.	Use a clean washcloth with water and soap.	
	29.	Clean from the vagina to the rectal area.	
	30.	Use a clean portion of the washcloth with any cleaning stroke.	
	31.	Use a clean washcloth and water to rinse.	
	32.	Rinse from the vagina to the rectal area.	
	33.	Use a clean portion of the washcloth with any rinsing stroke.	

	34.	Pat dry.	
	35.	Safely remove the barrier from under the resident's buttocks.	
	36.	Position the resident (manikin) on its back.	
	37.	Lower bed.	
	38.	Place soiled linen in the designated laundry hamper.	
	39.	Empty, rinse, dry, and return equipment to storage.	
	40.	Remove gloves, turning them inside out as you remove them, and dispose of them in the designated container.	
	41.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are dry.	
	42.	Place the call light or signaling device and water within easy reach of the resident.	
	43.	Maintain respectful, courteous interpersonal interactions at all times.	
	44.	Wash hands: Begin by wetting your hands.	
	45.	Wash hands: Apply soap to hands.	
	46.	Wash hands: Rub hands together using friction for at least 20 seconds with soap.	
	47.	Wash hands: Interlace fingers pointing downward with soap.	
	48.	Wash hands: Wash all surfaces of your hands with soap.	
	49.	Wash hands: Wash all surfaces of wrists with soap.	
	50.	Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.	
	51.	Wash hands: Dry hands with a clean paper towel(s).	
	52.	Wash hands: Turn off the faucet with a paper towel.	
	53.	Wash hands: Discard paper towels in the trash container as used.	
	54.	Wash hands: Do not re-contaminate your hands by touching the faucet or sink at any time during or after the hand-washing procedure.	

PERINEAL CARE FOR A MALE WITH HAND WASHING

(ONE OF THE POSSIBLE MANDATORY FIRST TASKS) DEMONSTRATED ON MANIKIN

✓	#	Skill Task Step	Notes
	1.	Knock on the door.	
	2.	Introduce yourself to the resident.	
	3.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	4.	Explain the procedure to the resident.	
	5.	Provide for privacy; pull the privacy curtain.	
	6.	Raise the bed height.	
	7.	Fill a basin with warm water.	
	8.	Put on gloves.	
	9.	Direct the RN Test Observer to stand on the opposite side of the bed or raise the side rail on the opposite side of the bed to provide for safety. <i>(The RN Test Observer does not move into position unless directed to do so by the candidate.)</i>	
	10.	Turn the resident or raise the hips and place the barrier under the buttocks. The candidate will choose a barrier, such as a towel, waterproof pad, or Chux.	
	11.	Expose the perineum only.	
	12.	Gently grasp the penis.	
	13.	Use a clean, soapy washcloth.	
	14.	Clean the tip of the penis, starting at the urethral opening, working outward away from the urethral opening.	
	15.	Clean the shaft of the penis away from the tip of the penis.	
	16.	Use a clean portion of a washcloth with each cleaning stroke.	
	17.	With a clean washcloth with soap and water, clean the scrotum.	
	18.	Clean the scrotum with a clean portion of a washcloth with any stroke.	
	19.	Use a clean washcloth and water to rinse.	
	20.	Rinse the penis using a clean portion of a washcloth with each stroke.	
	21.	Rinse the scrotum using a clean portion of a washcloth with each stroke.	
	22.	Pat dry.	
	23.	Remove gloves, turning them inside out as you remove them, and dispose of them in the designated container.	
	24.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	25.	Put on new gloves.	
	26.	Assist the resident in turning to the side away from the candidate. <i>(The RN Test Observer may help hold the manikin on his side ONLY after the candidate has turned the manikin.)</i>	
	27.	Use a new soapy washcloth to clean the rectal area.	
	28.	Clean the area from the scrotum to the rectal area using a clean portion of a Washcloth with each stroke.	
	29.	With a clean washcloth, rinse the area from the scrotum to the rectal area.	

	30.	Use a clean portion of a washcloth with any stroke when rinsing.	
	31.	Pat dry.	
	32.	Safely remove the barrier from under the resident's buttocks.	
	33.	Dispose of all soiled linen in the designated container.	
	34.	Position the resident on their back.	
	35.	Lower bed.	
	36.	Empty, rinse, dry, and return equipment to storage.	
	37.	Remove gloves, turning them inside out as you remove them, and dispose of them in the designated container.	
	38.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	39.	Leave the resident in a position of comfort and safety.	
	40.	Place the call light or signaling device within easy reach of the resident.	
	41.	Maintain respectful, courteous interpersonal interactions at all times.	
	42.	Wash hands: Begin by wetting your hands.	
	43.	Wash hands: Apply soap to hands.	
	44.	Wash hands: Rub hands together using friction for at least 20 seconds with soap.	
	45.	Wash hands: Interlace fingers pointing downward with soap.	
	46.	Wash hands: Wash all surfaces of your hands with soap.	
	47.	Wash hands: Wash all surfaces of wrists with soap.	
	48.	Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.	
	49.	Wash hands: Dry hands with a clean paper towel(s).	
	50.	Wash hands: Turn off the faucet with a paper towel.	
	51.	Wash hands: Discard paper towels in the trash container as used.	
	52.	Wash hands: Do not re-contaminate your hands by touching the faucet or sink at any time during or after the hand-washing procedure.	

PIVOT-TRANSFER A WEIGHT-BEARING, NON-AMBULATORY RESIDENT FROM THEIR BED TO A WHEELCHAIR USING A GAIT BELT

✓	#	Skill Task Step	Notes
	1.	Knock on the door.	
	2.	Introduce yourself to the resident.	
	3.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	4.	Explain the procedure to the resident.	
	5.	Provide for privacy; pull the privacy curtain.	
	6.	Obtain a gait belt.	
	7.	Lock the bed brakes to ensure the resident's safety.	
	8.	Assist the resident in putting on non-skid footwear.	
	9.	Adjust the bed height to ensure the resident's feet are flat on the floor.	
	10.	Assist the resident to a sitting position.	
	11.	Position the wheelchair at the foot or head of the bed with the wheelchair arm/wheel touching the side of the bed.	
	12.	Lock the wheelchair brakes to ensure the resident's safety.	
	13.	Properly place the gait belt around the resident's waist to stabilize the trunk.	
	14.	Tighten the gait belt. Check the gait belt for tightness by slipping fingers between the gait belt and the resident.	
	15.	Grasp the gait belt with both hands.	
	16.	Bring the resident to a standing position using proper body mechanics.	
	17.	Assist the resident in pivoting and sitting in the wheelchair in a controlled manner that ensures safety.	
	18.	Remove gait belt.	
	19.	Place the resident within easy reach of the call light or signaling device.	
	20.	Maintain respectful, courteous interpersonal interactions at all times.	
	21.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	

PIVOT-TRANSFER A WEIGHT-BEARING, NON-AMBULATORY RESIDENT FROM A WHEELCHAIR TO THEIR BED USING A GAIT BELT

✓	#	Skill Task Step	Notes
	1.	Knock on the 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 dry.	
	4.	Explain the procedure to the resident.	
	5.	Provide for privacy; pull the privacy curtain.	
	6.	Obtain a gait belt.	
	7.	Lock the bed brakes to ensure the resident's safety.	
	8.	Adjust the bed height to ensure the resident's feet are flat on the floor.	
	9.	Position the wheelchair at the foot or head of the bed with the wheelchair arm/wheel touching the side of the bed.	
	10.	Lock the wheelchair brakes to ensure the resident's safety.	
	11.	Properly place the gait belt around the resident's waist to stabilize the trunk.	
	12.	Tighten the gait belt. Check the gait belt for tightness by slipping fingers between the gait belt and the resident.	
	13.	Ensure the resident's feet are flat on the floor.	
	14.	Ask the resident to place their hands on the wheelchair armrests.	
	15.	Grasp the gait belt with both hands.	
	16.	Bring the resident to a standing position using proper body mechanics.	
	17.	Assist the resident in pivoting and sitting on the bed in a controlled manner that ensures safety.	
	18.	Remove gait belt.	
	19.	Assist the resident in lying down in the center of the bed.	
	20.	Make sure the resident is comfortable and in good body alignment.	
	21.	Lower bed.	
	22.	Place a call light or signaling device within easy reach of the resident.	
	23.	Maintain respectful, courteous interpersonal interactions at all times.	
	24.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	

POSITION RESIDENT ON THEIR SIDE IN BED

✓	#	Skill Task Step	Notes
	1.	Knock on the door.	
	2.	Introduce yourself to the resident.	
	3.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	4.	Explain the procedure to the resident.	
	5.	Provide for privacy; pull the privacy curtain.	
	6.	Position the bed flat.	
	7.	Raise bed height.	
	8.	Direct the RN Test Observer to stand on the side of the bed opposite the working side of the bed, or raise the side rail on the side of the bed opposite the working side of the bed to provide for safety. <i>(Note: the candidate's working side of the bed must be opposite the side read to turn the resident on.)</i>	
	9.	From the working side of the bed, move the resident's upper body, hips, and legs toward yourself to provide room on the bed that will be used to safely turn the resident on their side. <i>(Note: the candidate's working side of the bed must be opposite the side read to turn the resident on.)</i>	
	10.	Assist/turn the resident to their correct side, read to the candidate in the scenario by the RN Test Observer. <i>(Note: the resident must be placed on the side read in the scenario.)</i>	
	11.	Ensure that the resident's face never becomes obstructed by the pillow.	
	12.	Check to be sure that the resident is not lying on their downside arm.	
	13.	Ensure the resident is in correct body alignment.	
	14.	Place support devices, such as pillows, wedges, blankets, etc., under the resident's head to maintain correct body alignment and protect bony prominences.	
	15.	Place support devices, such as pillows, wedges, or blankets, under the resident's arm to maintain correct body alignment and protect bony prominences.	
	16.	Place support devices, such as pillows, wedges, or blankets, behind the resident's back to maintain correct body alignment and protect bony prominences.	
	17.	Place support devices, such as pillows, wedges, or blankets, between the resident's knees to maintain correct body alignment and protect bony prominences.	
	18.	Leave the resident in a position of comfort and safety.	
	19.	Lower bed.	
	20.	Place the 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 your hands together until they are completely dry.	

RANGE OF MOTION FOR THE HIP AND KNEE

✓	#	Skill Task Step	Notes
	1.	Knock on the door.	
	2.	Introduce yourself to the resident.	
	3.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	4.	Explain the procedure to the resident.	
	5.	Provide for privacy; pull the privacy curtain.	
	6.	Raise bed height.	
	7.	Position the resident supine (bed flat).	
	8.	Position the resident in good body alignment.	
	9.	Place one hand under the resident's knee.	
	10.	Place the other hand under the resident's ankle.	
	11.	Do not cause discomfort or pain at any time during ROM.	
	12.	ROM for hip: Move the entire leg away from the body. (<i>abduction</i>)	
	13.	Move the entire leg back toward the body. (<i>adduction</i>)	
	14.	Complete abduction and adduction of the hip at least three times.	
	15.	Continue to support the joints correctly by placing one hand under the resident's knee and the other hand under the resident's ankle.	
	16.	Bend the resident's knee and hip toward the resident's trunk. (<i>flexion of the hip and knee at the same time</i>)	
	17.	Straighten the knee and hip. (<i>extension of the knee and hip at the same time</i>)	
	18.	Complete flexion and extension of the knee and hip at least three times.	
	19.	Do not force any joint beyond the point of free movement.	
	20.	The candidate <u>must ask</u> at least once during the ROM exercise if there is/was any discomfort/pain.	
	21.	Leave the resident in a comfortable position.	
	22.	Lower bed.	
	23.	Place the call light or signaling device within easy reach of the resident.	
	24.	Maintain respectful, courteous interpersonal interactions at all times.	
	25.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	

RANGE OF MOTION FOR THE SHOULDER

✓	#	Skill Task Step	Notes
	1.	Knock on the door.	
	2.	Introduce yourself to the resident.	
	3.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	4.	Explain the procedure to the resident.	
	5.	Provide for privacy; pull the privacy curtain.	
	6.	Raise bed height.	
	7.	Position the resident supine (bed flat).	
	8.	Position the resident in good body alignment.	
	9.	Place one hand under the resident's elbow.	
	10.	Place the other hand under the resident's wrist.	
	11.	Do not cause discomfort or pain at any time during ROM.	
	12.	Raise the resident's arm up and over the resident's head. (<i>flexion</i>)	
	13.	Bring the resident's arm back down to the resident's side. (<i>extension</i>)	
	14.	Complete flexion and extension of the shoulder at least three times.	
	15.	Continue to correctly support the shoulder joints by placing one hand under the resident's elbow and the other hand under the resident's wrist.	
	16.	Move the resident's entire arm out away from the body. (<i>abduction</i>)	
	17.	Return the resident's arm to the resident's side. (<i>adduction</i>)	
	18.	Complete abduction and adduction of the shoulder at least three times.	
	19.	Do not force any joint beyond the point of free movement.	
	20.	The candidate <u>must ask</u> at least once during the ROM exercise if there is/was any discomfort/pain.	
	21.	Leave the resident in a comfortable position.	
	22.	Lower bed.	
	23.	Place the call light or signaling device within easy reach of the resident.	
	24.	Maintain respectful, courteous interpersonal interactions at all times.	
	25.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	

VITAL SIGNS - BLOOD PRESSURE

✓	#	Skill Task Step	Notes
	1.	Knock on the 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 dry.	
	4.	Explain the procedure to the resident.	
	5.	Provide for privacy; pull the privacy curtain.	
	6.	Assist the resident into a comfortable sitting or recumbent position with the forearm relaxed and supported in a palm-up position.	
	7.	Roll the resident's sleeve about 5 inches above the elbow.	
	8.	Apply the cuff around the upper arm, just above the elbow, and align the cuff arrows with the brachial artery.	
	9.	Clean the earpieces of the stethoscope appropriately and place them in your ears.	
	10.	Clean the diaphragm of the stethoscope.	
	11.	Place the stethoscope over the brachial artery.	
	12.	Hold the stethoscope snugly in place.	
	13.	Inflate the cuff to 160-180 mmHg.	
	14.	Slowly release air from the cuff to the disappearance of pulsations.	
	15.	Remove cuff.	
	16.	Record reading on the previously signed recording form.	
	17.	The candidate's recorded systolic blood pressure is within 6 mmHg of the RN Test Observer's recorded systolic blood pressure.	
	18.	The candidate's recorded diastolic blood pressure is within 6 mmHg of the RN Test Observer's recorded diastolic blood pressure.	
	19.	Place the 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 your hands together until they are completely dry.	

VITAL SIGNS – PULSE AND RESPIRATIONS

✓	#	Skill Task Step	Notes
	1.	Knock on the door.	
	2.	Introduce yourself to the resident.	
	3.	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub your hands together until they are completely dry.	
	4.	Explain the procedure to the resident.	
	5.	Provide for privacy; pull the privacy curtain.	
	6.	Locate the radial pulse by placing the tips of fingers on the thumb side of the resident's wrist.	
	7.	Count pulse for 60 seconds-or- for 30 seconds times two. a. Tell the RN Test Observer if you will be counting for 60 or 30 seconds. b. Tell the RN Test Observer when you start counting and tell them when you stop counting.	
	8.	Count respirations for 60 seconds-or- for 30 seconds times two. a. Tell the RN Test Observer if you will be counting for 60 or 30 seconds. b. Tell the RN Test Observer when you start counting and tell them when you stop counting. c. stop counting.	
	9.	Record the pulse rate on the previously signed recording form.	
	10.	The candidate's recorded pulse rate is within 4 beats of the RN Test Observer's recorded pulse rate.	
	11.	Record respirations on the previously signed recording form.	
	12.	The candidate's recorded respiratory rate is within 2 breaths of the RN Test Observer's recorded respiratory rate.	
	13.	Place the 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 your hands together until they are completely dry.	