

MISSOURI NURSE AIDE CANDIDATE HANDBOOK

Effective for Testing September 2025 Updated November 2025 VERSION 12.0

UPDATES NOVEMBER 2025:

The following sections have been updated: Exam Check-In, Testing Policies, Security, and Remotely Proctored Knowledge Exam Check-in

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Contact Information

Questions regarding: testing process • test scheduling • eligibility to test • name and address Questions regarding: nurse aide certification • renewals • Nurse Aide Registry... (888) 401-0465 D&S Diversified Technologies (D&SDT), LLP-Monday through Friday Phone #: (888) 401-0462 Headmaster, LLP PO Box 6609 7:00AM - 7:00PM Phone #: (888) 401-0465 Central Time Zone Helena, MT 59604 Missouri TMU© Webpage: Email: missouri@hdmaster.com Fax #: (406) 442-3357 mo.tmutest.com Website: www.hdmaster.com Missouri Department of Health and Senior Services (DHSS) Monday through Friday Phone #: (573) 526-5686 Health Education Unit 9:00AM -3:30PM PO Box 570 Central Time Zone Jefferson City, MO 65102 Email: cnaregistry@health.mo.gov Missouri Nurse Aide Web Site: https://cna.dhss.mo.gov

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INTRODUCTION

Congress adopted the Nursing Home Reform Act in 1987 as part of the Omnibus Budget Reconciliation Act (OBRA '87). This federal law was designed to improve the quality of care in long-term healthcare facilities and define training and evaluation standards for nursing aides 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. This program aims to ensure that candidates 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 nurse aide competency examination process and is designed to help prepare candidates for testing. The examination has two parts: a multiple-choice knowledge test and a skill test. Candidates must pass both parts to be identified and listed on the Missouri Nurse Aide Registry.

The Missouri Department of Health (DHSS) has approved D&S Diversified Technologies, LLP (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 D&SDT-HEADMASTER's <u>Missouri Nurse Aide webpage</u> or at <u>www.hdmaster.com</u> and click on 'Missouri CNA'. The information in this handbook will help you prepare for your examination.

MISSOURI NURSE AIDE REGISTRY REQUIREMENTS

The Missouri Nurse Aide Registry (MOCNAR) lists the names of certified nurse aides who, through training, testing, and experience, meet federal and/or state requirements to work as a certified nurse aide in Missouri. The Registry also identifies candidates who have been placed on the EDL (Employee Disqualification List) or who have a Federal Indicator (a CNA employed in a certified facility that has been found guilty of abuse, neglect, or misappropriation of property) on their license.

Upon successful completion of training, passing both the knowledge and skills portions of the competency exam, and meeting federal and/or state requirements, a nurse aide candidate will be listed on the Missouri Certified Nurse Aide Registry (MOCNAR). A newly trained nurse aide candidate must pass both the knowledge and skills exams within one (1) year of the training start date.

Review the Nurse Aide Competency Exam section to help prepare for the exam.

Registry Maintenance

Once placed on the Missouri CNA 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 mo.tmutest.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 'Forgot Your Password and Recover your Account' section in this handbook to reset your password. If you need assistance signing in to your TMU© account, call D&SDT-HEADMASTER at (888)401-0462. Renewal reminders are emailed to your TMU© account email address of record and/or texted to your SMS-capable phone, so it is important to keep your contact information up to date.

Note: Renewal notifications/alerts are sent via email and text message 60 days before your certification expiration date. 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, update your address and phone number, and check your eligibility expiration date from any Internet-capable device at any time at <u>mo.tmutest.com</u>.

DEMOGRAPHIC UPDATES / CHANGES / CORRECTIONS

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

Registry Renewal

To maintain eligibility to work, you must renew your eligibility every twenty-four months. To be eligible to renew, you must work for pay as a certified nurse aide performing nursing or nursing-related services at least eight (8) consecutive hours during the previous twenty-four months.

Note: If the documentation of work hours is unrelated to nursing services, your renewal may be denied. If denied, you may be allowed 15 business days to provide the correct documentation before you will be required to pay another renewal fee. Please ensure the documentation for the renewal includes 8 hours of nursing services provided within the last 24 months.

To renew, sign in to your TMU© account at <u>mo.tmutest.com</u> and list your work hours and where you were employed. You will be self-attesting that you have worked as a CNA for at least 8 hours during the last certification period at the facility (employer) you listed. Your eligibility will be extended an additional twenty-four months.

Under federal regulations, a certified 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 for a period of 24 consecutive months. To reestablish employment eligibility on the MOCNAR, you must successfully pass both components (knowledge and skills) of the approved Missouri nurse aide competency examination.

Renewal Instructions

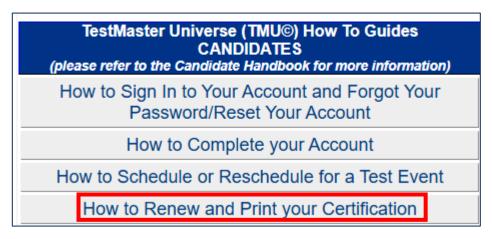
To renew your certification, sign in to your TMU© account at mo.tmutest.com.

If you do not know your Email or Username and Password, enter your email address and click on 'Forgot Your Password?' You will be asked to re-enter your email, and a 'reset password link' will be sent to your email (see the 'Forgot Your Password and Recover your Account' section). If you are unable to sign in for any reason, contact D&SDT-HEADMASTER at (888)401-0462.

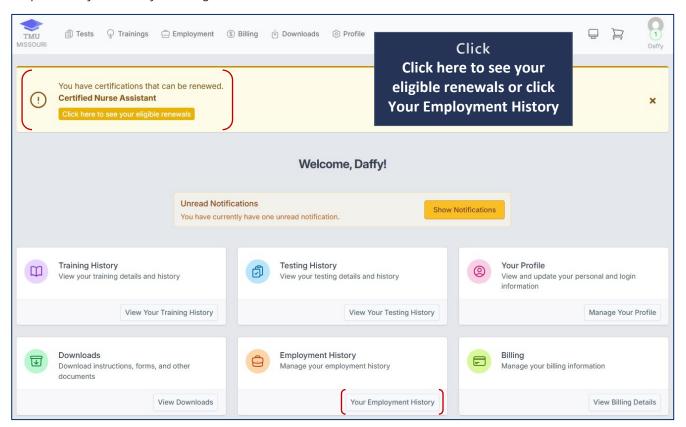
There are two options to pay the renewal fee:

- **Self-Pay:** pay the fee yourself with a credit card.
- **Sponsor Payment:** your employer pays the fee for you.

Please see detailed instructions on <u>D&SDT-HEADMASTER's Missouri website</u>. Click <u>How to Renew and Print your</u> <u>Certification in TMU©</u>.

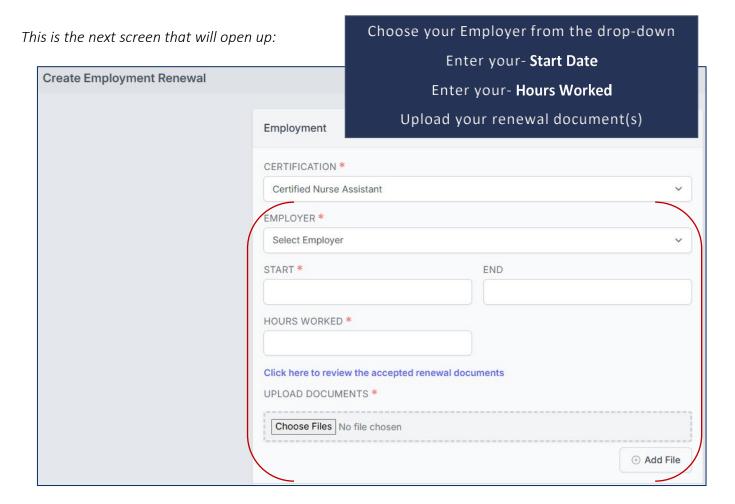


OR - please refer to the following instructions:



This screen will open up:





The rest of this screen continues on the next page:

If your employer pays the renewal fee for you, select-SPONSOR PAYMENT -- SEE EXAMPLE ON THE NEXT PAGE

For SELF-PAY: Complete the credit/debit card information to pay the non-refundable renewal fee of \$20.00

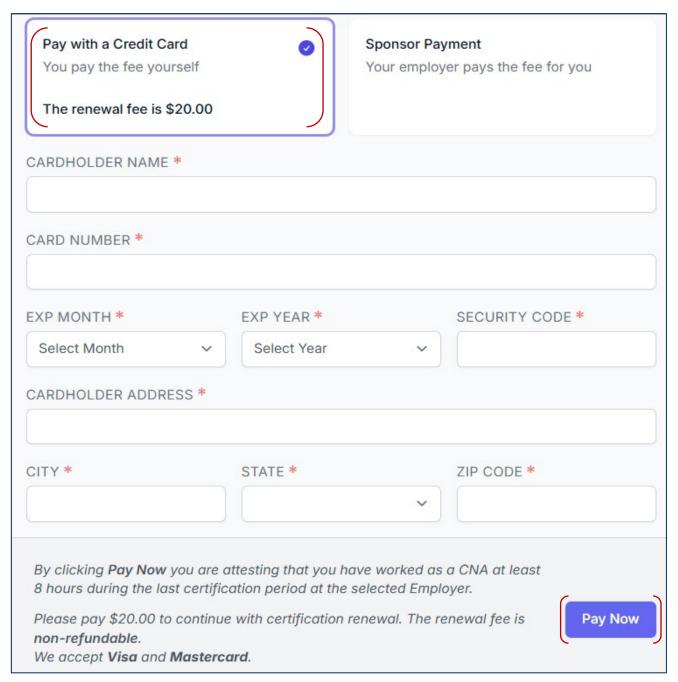
Click on- PAY NOW

(NOTE: The renewal fee is non-refundable.)

(You are self-attesting that you have worked as a CNA for at least 8 hours during the last certification period at the facility (employer) you listed.)

Your eligibility will be extended an additional 24 months.

Self-pay option:



Sponsor payment option:



REGISTRY RECIPROCITY

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

How to Transfer your Certified Nurse Aide (CNA) Certification to Missouri from another State

To be considered for placement on the MOCNAR, you must be current and in good standing on a certified nurse aide registry in a state other than Missouri.

You must complete an out-of-state reciprocity application to meet the criteria and apply for reciprocity placement on the MOCNAR. The Missouri CNA Reciprocity Application can be found on the Missouri main TMU© page under 'APPLICATIONS' at https://mo.tmutest.com/apply/2.

Once DHSS has received your completed application and all required documentation, they will determine if you are eligible to be added to the Missouri Certified Nurse Aide Registry. You must have a valid email address to receive your TMU© login username and temporary password. You may check your Missouri Nurse Aide Registry (MOCNAR) listing at mo.tmutest.com. Any personal information entered into TMU© will only be used to determine whether you can work as a certified nurse aide in Missouri. Failure to provide complete and accurate information during the reciprocity determination process may delay or even prevent you from being listed on the MOCNAR.

Criteria to Challenge the Certified Nurse Aide Training Requirement

Individuals who meet special criteria may be eligible to take just the final certification examination (both knowledge and skills) without taking the certified nursing assistant course. A challenge will only be approved for one attempt to take the test. If either the skills test or the knowledge test is failed, then the individual will need to retake the whole course. For detailed information on the criteria to challenge the exam, follow the Missouri Department of Health and Senior Services link: health.mo.gov/safety/cnaregistry/

AMERICANS WITH DISABILITIES ACT (ADA)

ADA Compliance

The Missouri State Department of Health (DHSS) 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).

If you have a qualified disability or limitation, you may request special accommodations for the examination. D&SDT-HEADMASTER must approve accommodations in advance of the examination. Complete the <u>ADA Accommodation</u> Request Application found on the Missouri Nurse Aide TMU© main page under 'APPLICATIONS' to be reviewed for accommodation.

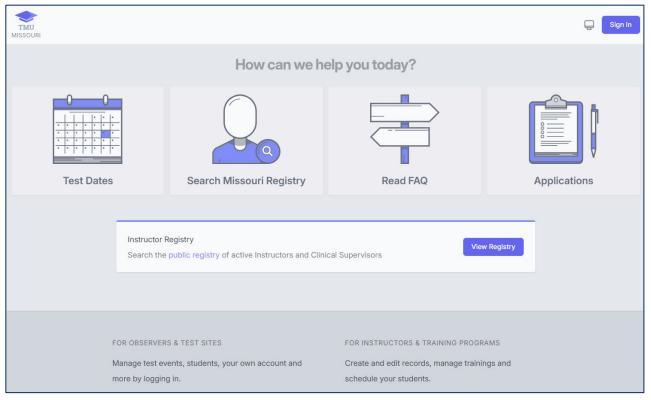
ADA Accommodation Request Applications submitted without the required supporting documentation of a diagnosed disability will not be reviewed until the required documentation is provided. D&SDT-HEADMASTER will email you if further documentation or information is required using the email in your TMU©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

Please allow additional time for your request to be approved. If you have questions regarding the ADA review process or specific required documentation, please call D&SDT-HEADMASTER at (888)401-0462.

MISSOURI TESTMASTER UNIVERSE© (TMU©)

Missouri TMU© Home Page

This is the Missouri TMU© main page, mo.tmutest.com



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

- → Click on 'Search Missouri Registry' to search the Registry
- → Click on 'Read FAQ' for frequently asked questions
- → Click on 'Applications' for frequently used applications

Complete your TMU© Account

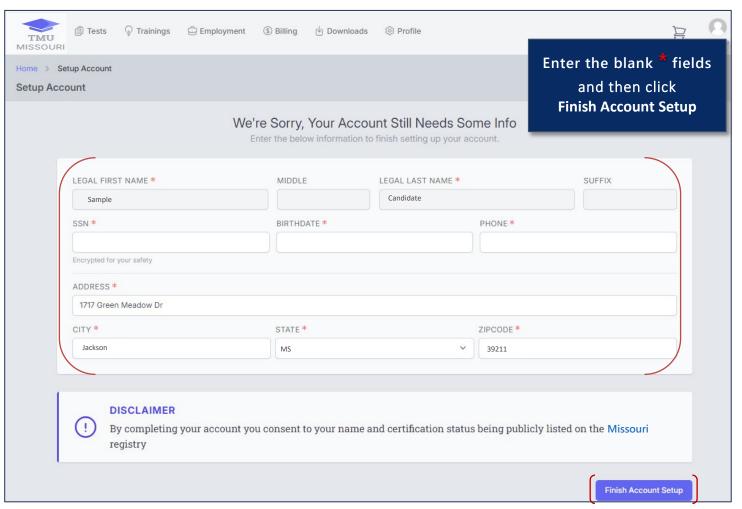
Your training program will enter your initial registration information in D&SDT-HEADMASTER's Missouri TestMaster Universe (TMU©) software.

<u>IMPORTANT</u>: Before you can test, you must sign in to your TMU© account using your secure Email or Username and Password and complete the missing demographic information <u>prior to testing</u>. Failure to do so may result in your being turned away from testing. You will be a no-show status for your event and forfeit your testing fees.

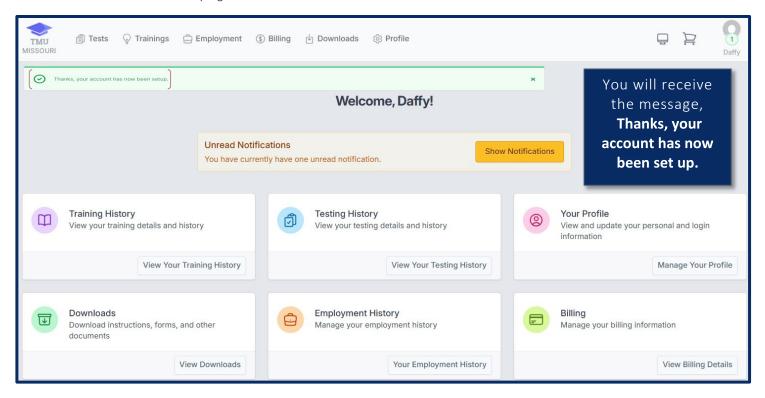
Upon receiving your confirmation email from TMU© (check your junk/spam mail) that your account has been created, you need to sign in to your account, update your password, and complete your demographic information. This must be done before scheduling a test event

If you do not know your Email or Username and Password, enter your email address and click "Forgot Your Password?" You will be asked to re-enter your email, and a 'reset password link' will be sent to your email (see instructions under 'Forgot your Password and Recover your Account'). If you cannot sign in, contact D&SDT-HEADMASTER at (888)401-0462.

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



This is the candidate's home page:

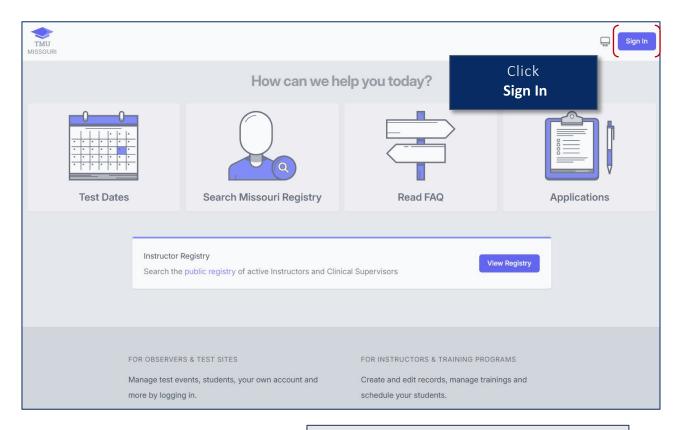


Forgot your Password and Recover your Account

If you have forgotten your password, follow the instructions with screenshots provided in this section.

Go to mo.tmutest.com.

-continued on the next page-





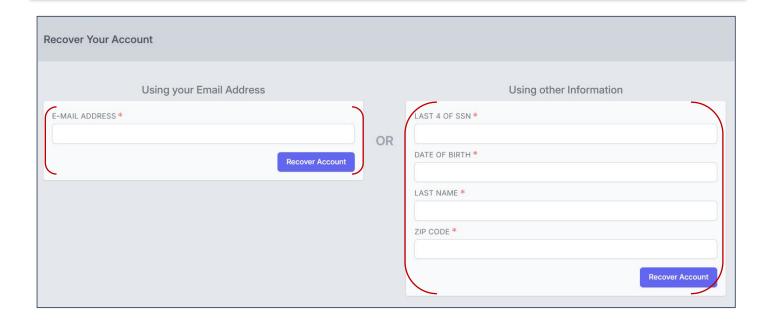
Type in your Email Address

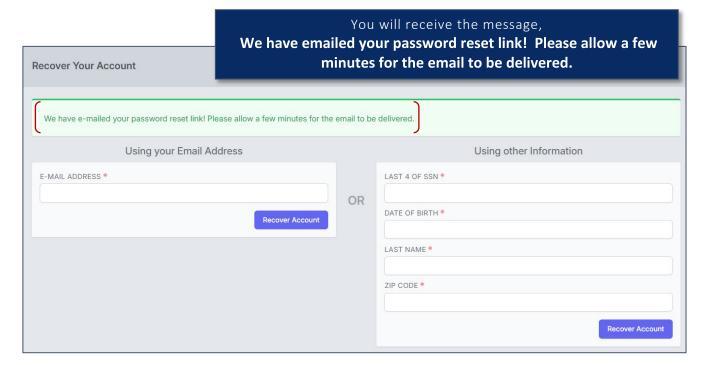
Click Recover Account

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

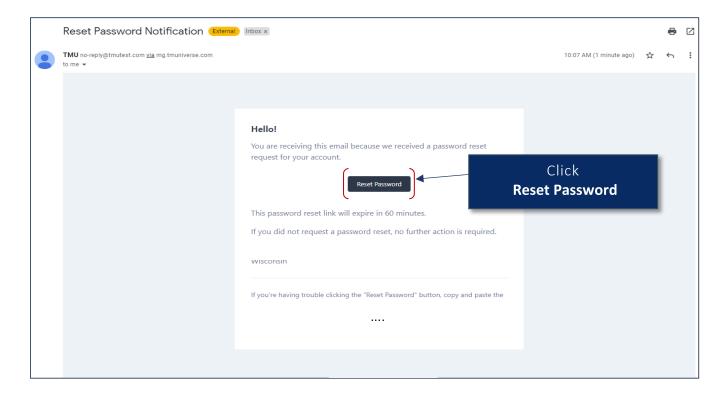
(-OR- You can type in the requested data under Using other Information if you have already updated your demographic information in your account)

Click Recover Account

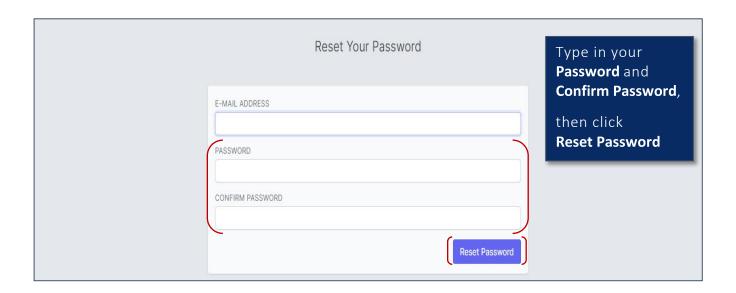




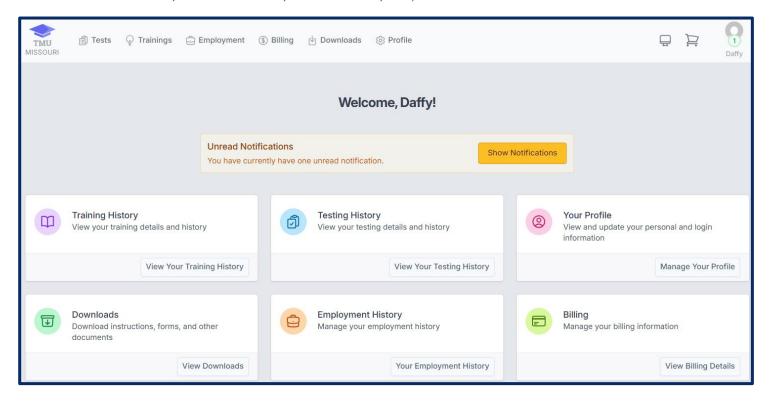
This is what the email will look like (check your junk/spam folder for the email):



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



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



THE MISSOURI NURSE AIDE COMPETENCY EXAM

Alternate Testing Languages for the Knowledge/Audio Exam

In addition to English, the Knowledge Exam *only* is offered in the following alternate languages:

Spanish

For more information, please refer to the instructions on toggling between English and one of the alternate languages in the 'Knowledge/Audio Exam Alternate Language Versions' section of this handbook.

Payment Information

Exam Description	Price
Knowledge Exam	\$30.00
-or- Knowledge Retake	730.00
Knowledge Exam – Alternate Language Version	\$30.00
-or- Knowledge Exam Alternate Language Version Retake	730.00
Audio Version of the Knowledge Exam	
-or- Audio Knowledge Retake [\$30 + \$10 = \$40]	\$40.00
(The knowledge test questions and answers are read through the computer and	340.00
listened to through headphones/earbuds while you read along.)	
Alternate Language Audio Version of the Knowledge Exam	\$40.00
-or- Alternate Language Audio Knowledge Retake [\$30 + \$10 = \$40]	340.00
Skills Test	\$95.00
-or- Skills Retake	333.00

Note: If a credit card payment is processed for testing fees payment and then later disputed by the candidate or credit/debit card holder, upon passing both portions of the competency exam, the candidate would not be placed on the Registry until the disputed fee and charges are paid. If listed on the Registry and then the card charge is disputed, the candidate will be removed from the Registry until the disputed fee and charges are paid.

Schedule a Missouri Nurse Aide Exam

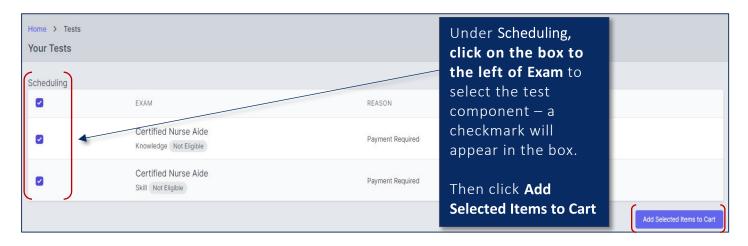
Once you have completed your program, your instructor has entered your training record in the D&SDT-HEADMASTER TestMaster Universe© (TMU©) database, and your testing fee has been paid (see instructions under 'Self-Pay of Testing Fees'), you may schedule your exam date online at the Missouri TMU© webpage at mo.tmutest.com using your email and password (see instructions under 'Schedule / Reschedule a Test Event'). If you cannot sign in or schedule/reschedule online using your email, please call D&SDT-HEADMASTER for assistance at (888) 401-0462 during regular business hours, 7:00 AM to 7:00 PM CT, Monday through Friday, excluding holidays.

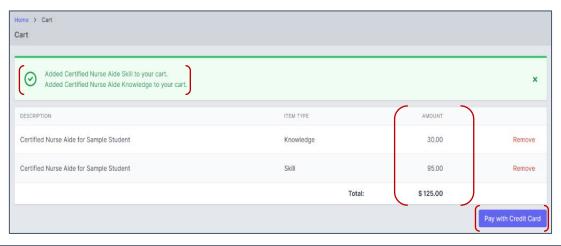
Upon receiving your confirmation email from TMU© (check your junk/spam mail) that your account has been created, you need to sign in to your TMU© account, update your password, and complete your demographic information. This must be done before scheduling a test event. See instructions under 'Complete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

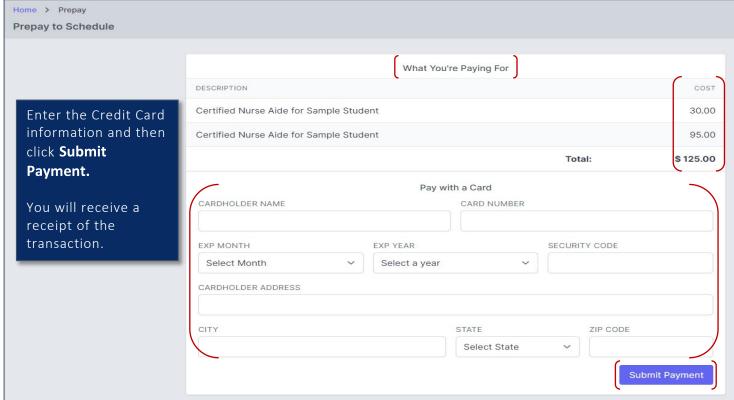
SELF-PAY OF TESTING FEES IN TMU©

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

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

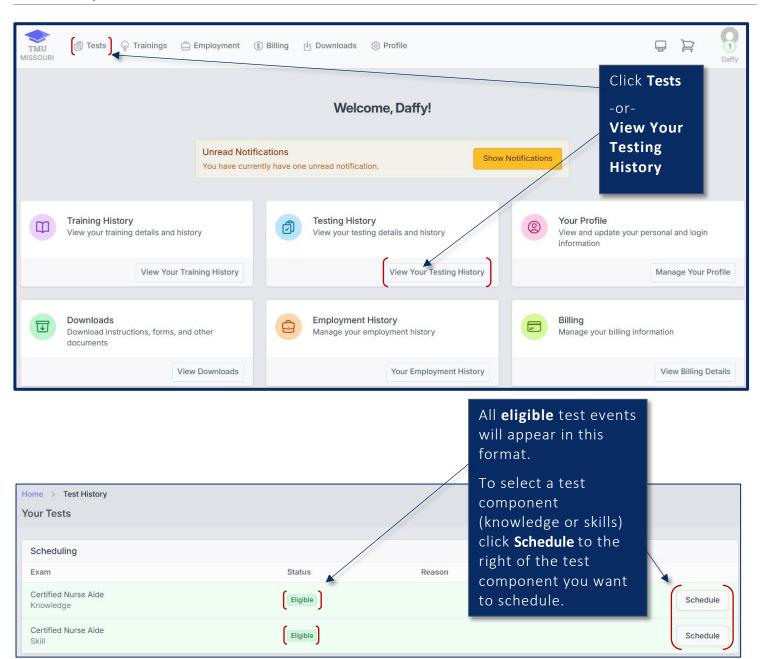


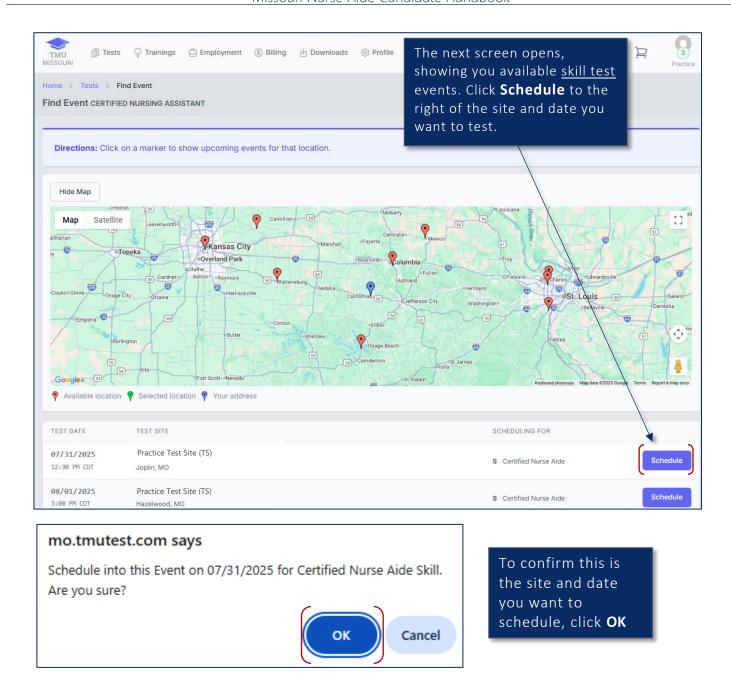




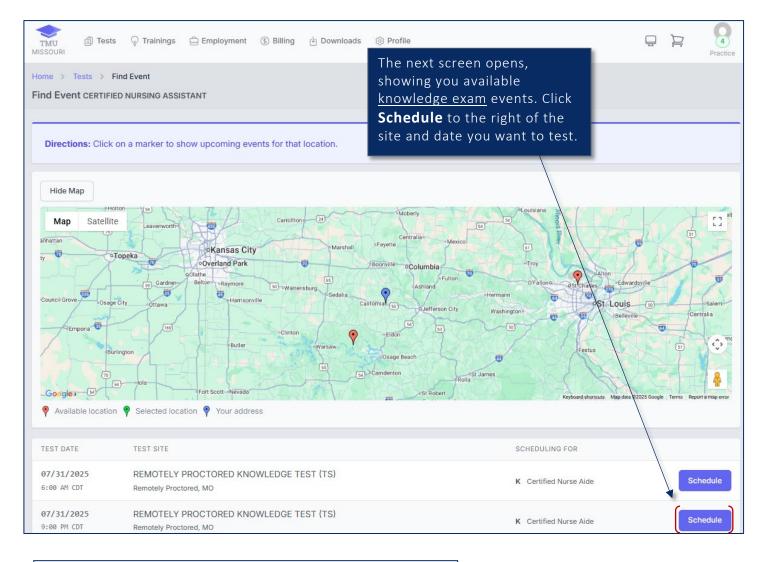
Once your testing fees are paid, you will be eligible to choose a test site and date. Follow the instructions in the next section to schedule or reschedule a test event.

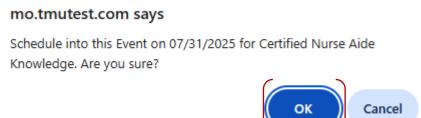
SCHEDULE / RESCHEDULE A TEST EVENT





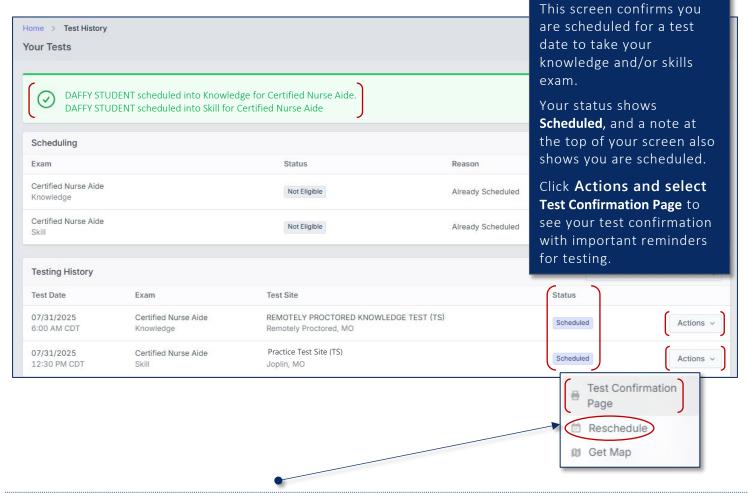
Information for scheduling a knowledge exam is on the next page.





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

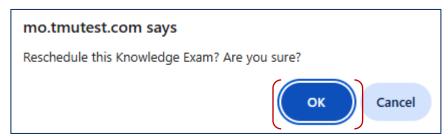
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RESCHEDULE A TEST EVENT SCREENSHOTS

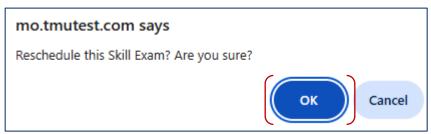
You may reschedule an exam date online in your TMU© account at mo.tmutest.com up until one (1) business day, excluding Saturdays, Sundays, and Holidays, before your scheduled exam date.

If you need to reschedule your test date, click Reschedule under Actions to select an alternative test date.



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

It is the same process to reschedule the skills exam.



TEST CONFIRMATION LETTER

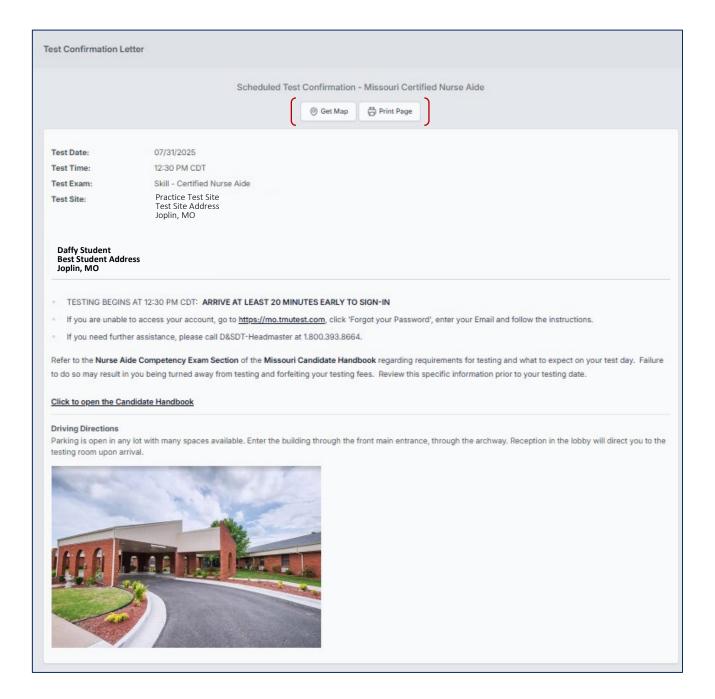
Your test confirmation letter will provide you with important information regarding where you are scheduled to test (date, time, and address). It can be accessed at any time.

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

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



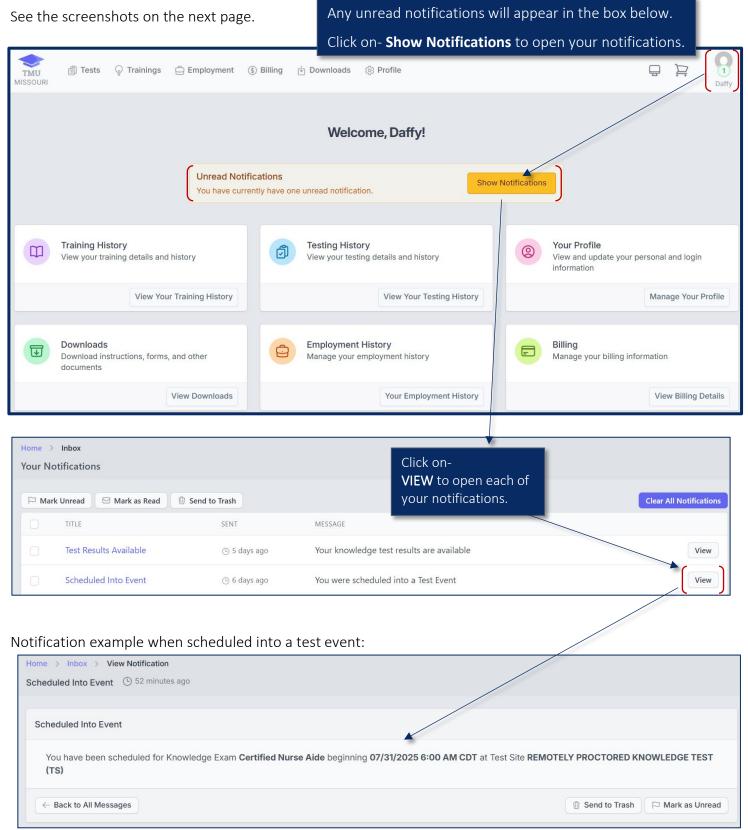
Skill Test Confirmation:



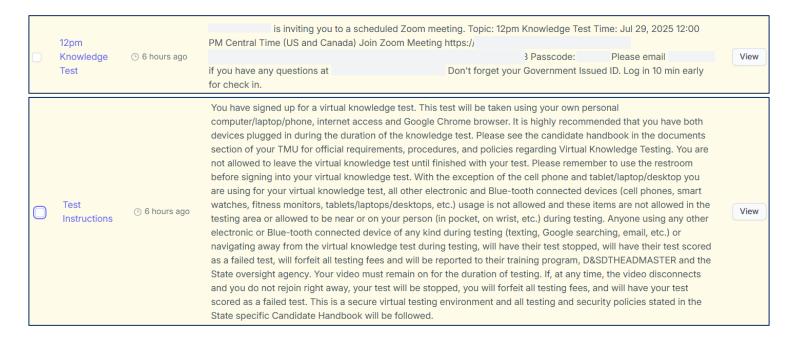
Note: Candidates who self-schedule online or are scheduled by their training programs will receive their test confirmation at the time they are scheduled.

View your Notifications in TMU©

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



Notification example if scheduled for a Remotely Proctored Knowledge Exam, showing the type of information received when the Zoom invite is sent:



Time Frame for Testing from Training Program Completion

You must schedule a test within one year of your training program start date. After one year, you must complete another Missouri DHSS-approved nurse aide training program to be eligible to schedule testing. Any individual who fails the final examination, except those who have been permitted to challenge the examination, shall have the opportunity to retake the examination twice within ninety (90) calendar days of the initial examination. If the individual fails the final examination a third time, the entire basic course shall be retaken before another examination can be given.

Test Day

EXAM CHECK-IN

You <u>must</u> arrive at your confirmed test site waiting area/room <u>20 minutes in advance</u> of your scheduled exam start time.

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

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

If you are scheduled for a remotely proctored knowledge exam, please see procedures/policies under 'Remotely Proctored Knowledge Exam Option' in the Knowledge/Audio Exam section.

TESTING ATTIRE

The following testing attire requirements will be followed at testing sites:

- You must be in full clinical attire (scrubs).
 - Scrubs and shoes can be any color/design.
- No open-toed shoes are allowed.
- Long hair must be pulled back.

Other testing attire information:

- You may bring a standard watch with a second hand.
- Smartwatches, fitness monitors, or any type of Bluetooth-connected devices are not allowed.

Note: You will not be admitted for testing if you are not wearing scrubs, the appropriate shoes, and long hair pulled back. You will be considered a NO-SHOW status. You will forfeit your testing fees and will be required to pay for an alternative exam date.

IDENTIFICATION

<u>Mandatory</u>: You must bring a **United States (US) government-issued, signed, non-expired photo-bearing form of identification.**

- ◆ A photocopy/picture of your ID *is acceptable* for testing.
- ◆ Secure digital IDs or digital identities are virtual systems (for example, Apple or Google Wallet) that allow identity verification and secure authentication. They can replace physical IDs and <u>will be allowed</u> to do so for identification purposes.

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

- State-issued Driver's License
 - You may use the letter issued by the Department of Motor Vehicles (DMV) that you receive when you apply for or renew your driver's license while waiting to receive your new license.
- State-issued Identification Card
- **Signed U.S. Passport** (Foreign Passports and Passport Cards *are not* acceptable)
 - * Exception: A signed foreign passport with a US VISA within the passport is acceptable (the VISA does not have a signature)
- **Permanent Resident Card** (Green Card or Alien Registration Card) / Employment-Work Authorization Card issued by the U.S. Citizenship and Immigration Services (USCIS)
 - * Accepted without a signature or fingerprint IF ISSUED from January 30, 2023, to the present day. If issued before January 1, 2023, it may contain a fingerprint instead of a signature.
- U.S. Military Identification Card
 - * Accepted without a signature or fingerprint, but will have a barcode or may contain a fingerprint in place of a signature
- **Tribal Identification Card** (a signed photo ID with an expiration date (not expired) issued by a <u>federally</u> recognized Tribal Nation/Indian Tribe)

Identification Criteria: US Government-issued, non-expired, signed, photo-bearing form of identification.

NOTE: A photocopy/picture or secure digital form of your ID is acceptable for testing.

The **FIRST** and **LAST** names printed on your mandatory United States (US) government-issued, *signed, non-expired, photo-bearing form of identification presented to the RN Test Observer during check-in at your test event **MUST EXACTLY MATCH** the FIRST and LAST names entered in your TMU© account. You may call D&SDT-HEADMASTER at (888)401-0462 during regular business hours, 7:00AM to 7:00PM CT, Monday through Friday, excluding holidays, to confirm that your name of record matches your *signed, non-expired, photo-bearing form of identification, or sign in to your TMU© account to check or change your demographic information. See more information under 'Demographic Updates / Changes / Corrections'.

Note:

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

If you are taking the knowledge and skills exams together, you will be required to present your ID again when entering the knowledge test room and the skills lab. Please keep your ID with you during the entire exam event.

DEMOGRAPHIC UPDATES / CHANGES / CORRECTIONS

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

INSTRUCTIONS FOR THE KNOWLEDGE, REMOTELY PROCTORED KNOWLEDGE, AND SKILL EXAMS

Test instructions for the knowledge and skills exams will be provided in written format in the waiting area when you check in for your test. If you are taking a remotely proctored knowledge exam, the Remotely Proctored Knowledge Exam Instructions can be found in your TMU© account under the Downloads tab (*see paragraph below).

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

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

TESTING POLICIES

The following policies are observed at each test site:

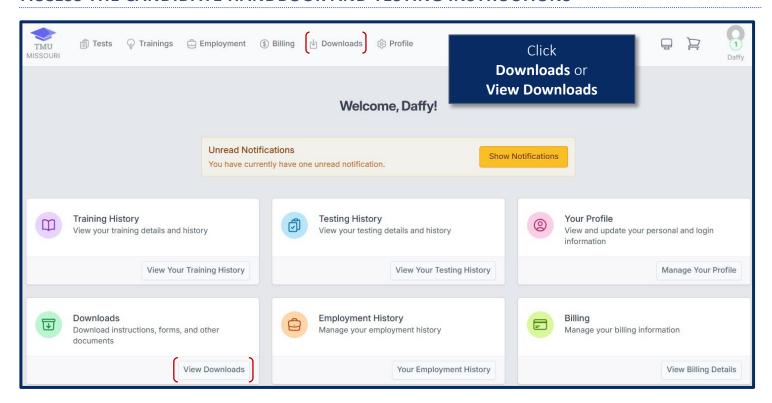
- Make sure you have signed in to your TMU© account at mo.tmutest.com well before your test date to update your password and complete your demographic information. Refer to this handbook's 'Complete Your TMU© Account' section for instructions and information.
 - If you have not signed in and completed/updated your TMU© account when you arrive for your test, you may not be admitted to the exam, and any exam fees paid will NOT be refunded.
- Plan to be at the test site for up to five (5) hours (if taking both components on-site) in the worst-case scenario.
 - Scheduling time frames and the time at the test site may be significantly shorter.
- Testing begins promptly at the start time noted on your confirmation. You <u>must</u> be at the test site waiting area/room to **check in 20 minutes before your scheduled start time** if your test start time is 8:00AM, you must be at the test site **by 7:40AM**). If you arrive late for your confirmed exam, you will not be admitted to the exam. Any exam fees paid will NOT be refunded.
 - If you are scheduled for a remotely proctored knowledge exam, please see procedures/policies under 'Remotely Proctored Knowledge Exam Option' in the Knowledge/Audio Exam section.
- 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 listed on your ID presented to the RN Test Observer during check-in at your test event **DO NOT MATCH** the FIRST and LAST names that were entered in the Missouri nurse aide TMU© database, 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, 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.
- If you do not show up for your exam day, or are considered a NO-SHOW STATUS (see details in this handbook's 'No-Show Status' section) for any reason, any test fees paid will NOT be refunded. You must repay your testing fees online in your TMU© account using your Email or Username and Password to schedule another exam date.
- **ELECTRONIC DEVICES AND PERSONAL ITEMS:** Cell phones, smartwatches, fitness monitors, electronic recording devices, Bluetooth-connected devices, and personal items (such as water bottles, purses, briefcases, large bags, study materials, extra books, or papers) are not permitted to be on or near you in either testing room. The testing team will inform you of the designated area to place your personal items and electronic devices, and you will collect these items when you complete your test(s).
 - All electronic devices must be **turned off**, including smartwatches, fitness monitors, and Bluetooth-connected devices, which must be removed from your wrist or body.
 - If you are scheduled for a remotely proctored knowledge exam, please see procedures/policies under 'Remotely Proctored Knowledge Exam Option' in the Knowledge/Audio Exam section.
- Anyone caught using any electronic recording device during either component (knowledge or skills) of the exam will be dismissed from the exam and testing room(s), your test will be scored as a failed attempt, you will forfeit all testing fees, and you will be reported to your training program and the Missouri Department of Health and Senior Services (DHSS). 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 while waiting to test.

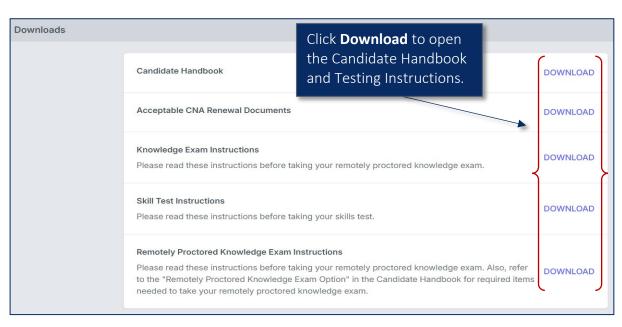
- LANGUAGE TRANSLATION DICTIONARIES: Foreign language paper word-for-word translation dictionaries are allowed and must be shown to the RN Test Observer at check-in (for both a remotely proctored knowledge test and an on-site test event) and to the Knowledge Test Proctor when you enter the knowledge test room (on-site test event). A translation dictionary will not be permitted during testing if there are any writing or definitions. Translators, using language translators that are not pre-approved, and electronic dictionaries, are not allowed.
- **SCRATCH PAPER AND CALCULATORS:** If needed, you may do math calculations on scratch paper or with the basic calculator provided by the KTP.
- You may not remove any notes or other materials from the testing room.
- You are not permitted to eat, drink, or smoke (e-cigarettes or vape) during the exam.
- You are not allowed to leave the testing room (on-site knowledge test room, remotely proctored knowledge exam, or skills lab) once the exam has begun *for any reason*. If you do leave during your test event, you will not be allowed back into the testing room to finish your exam.
- Behavioral misconduct or unlawful acts by test candidates are strictly prohibited at any stage of the competency evaluation. Such actions may result in dismissal from the test site, denial of testing privileges, and reporting to your training program and the Missouri Department of Health and Senior Services (DHSS). Please see this handbook's 'Security' section for detailed information.
- Test sites, RN Test Observers, Knowledge Test Proctors, and Actors are not responsible for the candidate's personal belongings at the test site.
- No visitors, guests, pets (including companion and emotional support animals), or children are allowed.
 - Service animals (a dog that has been individually trained to perform specific tasks for people with disabilities) are allowed. We encourage you to contact D&SDT-HEADMASTER at (888) 401-0462 or via email at missouri@hdmaster.com once you have scheduled a test date, so that we can notify the testing team.
 - If you attend your event with guests, pets (including companion or emotional support animals), or children of any age, you will not be permitted to test and will forfeit all testing fees paid.
- You may not test if you are ill (sick). Call D&SDT-Headmaster at (888)401-0462 immediately to reschedule (see the **note** below).
 - You may not test if you have any physical limitation (excluding pre-arranged ADAs) that would prevent you from performing your duties as a nurse aide. (Examples: cast, arm/leg braces, crutches, etc.) Call D&SDT-Headmaster at (888)401-0462 immediately to reschedule if you are on doctor's orders (see the <u>note</u> below).

NOTE: Please see this handbook's 'Reschedule a Test Event' and 'No-Show Exceptions' sections.

- \rightarrow Reschedules will not be granted less than one (1) full business day before a scheduled test date.
- Please review this Missouri NA Candidate Handbook before your test day for any testing and/or policy updates.
- The Candidate Handbook and testing instructions can also be accessed within your TMU© account under your 'Downloads' tab.

ACCESS THE CANDIDATE HANDBOOK AND TESTING INSTRUCTIONS





Security

Behavioral misconduct or unlawful acts by test candidates are strictly prohibited at any stage of the competency evaluation. Such actions may result in dismissal from the test site, denial of testing privileges, and reporting to your training program and the Missouri Department of Health and Senior Services (DHSS).

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

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

A report of your behavior will be sent to your training program and DHSS, and you are subject to legal prosecution to the fullest extent of the law. You may not be allowed to retest for at least six months and may require permission from DHSS to be eligible to retake the test.

Reschedule a Test Event

All candidates may reschedule for free online at **mo.tmutest.com** any time up until one (1) business day before a scheduled test day, excluding Saturdays, Sundays, and holidays.

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

- **Example:** If you are scheduled to take your exam on a Saturday, Sunday, or Monday, you would need to reschedule by the close of business on the Thursday before your scheduled exam. D&SDT-HEADMASTER is open 7:00AM to 7:00PM CT, Monday through Friday, excluding holidays.
- ❖ Please see the **Reschedule a Test Event Screenshots** for a visual of rescheduling an exam date.

The scheduled test date is on a:	Reschedule before 7:00PM CT the previous:
Monday	The previous Thursday
Tuesday	The previous Friday
Wednesday	The previous Monday
Thursday	The previous Tuesday
Friday	The previous Wednesday
Saturday	The previous Thursday
Sunday	The previous Thursday

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

Refund of Testing Fees Paid

Requesting a refund of testing fees paid is different than rescheduling a test date. Requesting a refund means you are not interested in taking the Missouri nurse aide certification exam.

SCHEDULED IN A TEST EVENT

- 1) If you are scheduled for a test event, you can request a refund of the testing fees paid by filling out and submitting the <u>CANDIDATE-Refund Request Fillable Form</u> on D&SDT-HEADMASTER's Missouri webpage at <u>Missouri webpage</u> at least one (1) full business day before your scheduled test event (excluding Saturdays, Sundays, and holidays). No phone calls will be accepted.
 - <u>Example</u>: If you are scheduled to take your exam on a Saturday, Sunday, or Monday, you would need to request a refund by the close of business on the Thursday before your scheduled exam. D&SDT-HEADMASTER is open until 7:00PM CT, Monday through Friday, excluding holidays.
- 2) Refund requests made in the required time frame qualify for a full refund of any testing fees paid minus a \$35 refund processing fee.
- 3) Refund requests must be made within thirty (30) days of payment of the original testing fees with D&SDT. Any requests for refunds made more than 30 days after the original payment of testing fees with D&SDT will not be issued.

NOT SCHEDULED IN A TEST EVENT

- 1) Refund requests must be made within thirty (30) days of the original payment of testing fees with D&SDT. Any requests for refunds made more than 30 days after the original payment of testing fees with D&SDT will not be issued.
- To request a refund for testing fees paid, you must fill out and submit the <u>CANDIDATE-Refund Request Fillable</u> <u>Form</u> on D&SDT-HEADMASTER's Missouri main webpage at <u>Missouri webpage</u>. No phone calls will be accepted.
- 3) Refund requests made in the required time frame qualify for a full refund of any testing fees paid minus a \$35 refund processing fee.

Unforeseen Circumstances Policy

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

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

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

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

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

See more information under 'No-Show Exceptions'.

No-Show Status

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

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

No-Show Exceptions

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

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

https://mo.tmutest.com/apply/14

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

- Medical emergency or illness: D&SDT-HEADMASTER must be contacted via phone, fax, or email within one business day. A doctor's note showing your name and the provider of the service name, or on the provider's letterhead, must be submitted within three (3) business days of the missed exam date. If we do not receive proof within the 3-business-day timeframe, you will be required to pay as if you were a no-show.
- Death in the family: D&SDT-HEADMASTER must be contacted via phone call, fax, or email within one business day. An immediate family obituary or letter on your behalf from the funeral home showing your name must only be submitted within seven (7) business days from a missed exam date. If we do not receive proof within the 7-business-day timeframe, you will be required to pay as if you were a no-show. (The immediate family includes the parent, grandparent, great-grandparent, sibling, children, spouse, or significant other.)
- **Remotely proctored testing issues:** D&SDT-HEADMASTER must be contacted via phone, fax, or email within one business day. Appropriate documentation showing your name and the provider of the service name must be submitted within **three (3) business days** of the exam date. If we do not receive proof within the 3-business-day timeframe, you will be required to pay as if you were a no-show.
 - **Internet outage or issue:** Documentation showing your name and the provider of the service, including the Internet provider's name, showing the outage date and times.
 - **Computer or cell phone issue:** If the computer or cell phone fails to work, documentation from a computer repair technician/shop or other appropriate documentation showing your name and the provider of the service is required.

Candidate Feedback - Exit Survey

Candidates can complete an exit survey via a link when they check their test results in their TMU© account. The survey is confidential and will not affect 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.

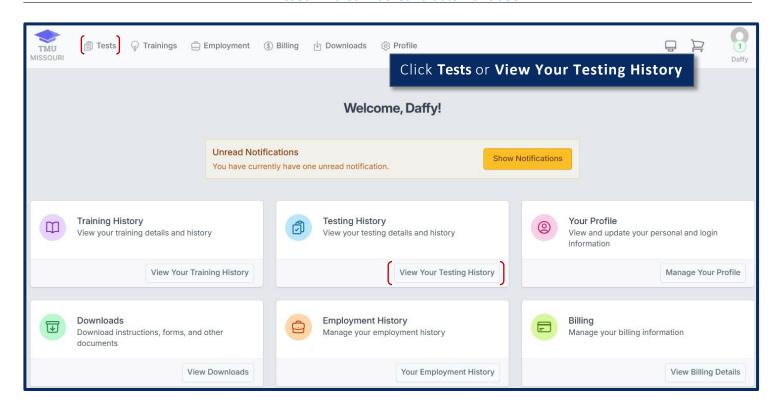
Test Results

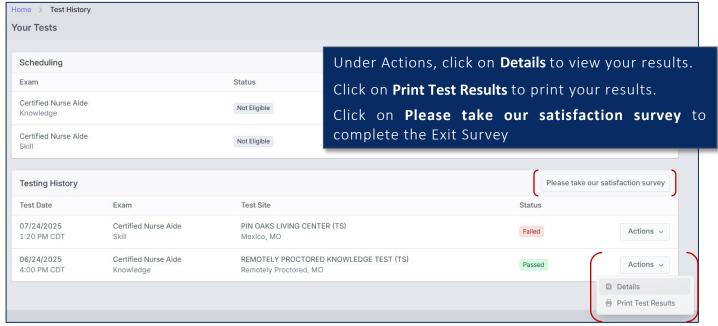
After you have completed both the Knowledge Exam and Skill Test components of the competency exam, your test results will be officially scored and double-checked by D&SDT-HEADMASTER scoring teams. Official test results will be available by signing in to your TMU© account after 7:00PM (CT) on the business day following your test event. D&SDT-HEADMASTER cannot release test results over the phone.

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

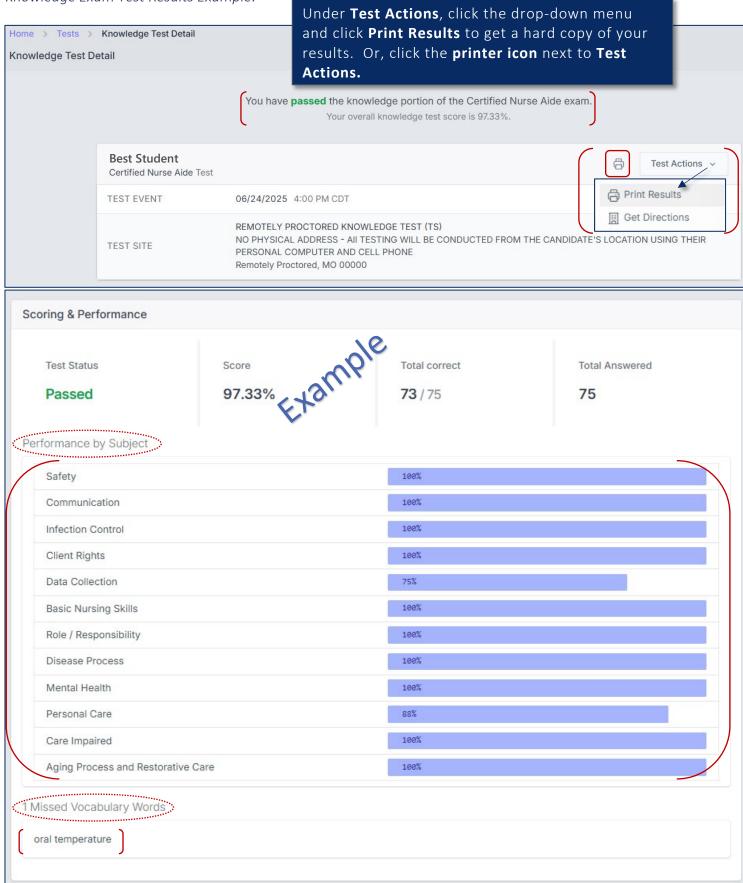
Sign in to your TMU© account at mo.tmutest.com to view your test results. The screenshots below show the results.

-continued on the next page-



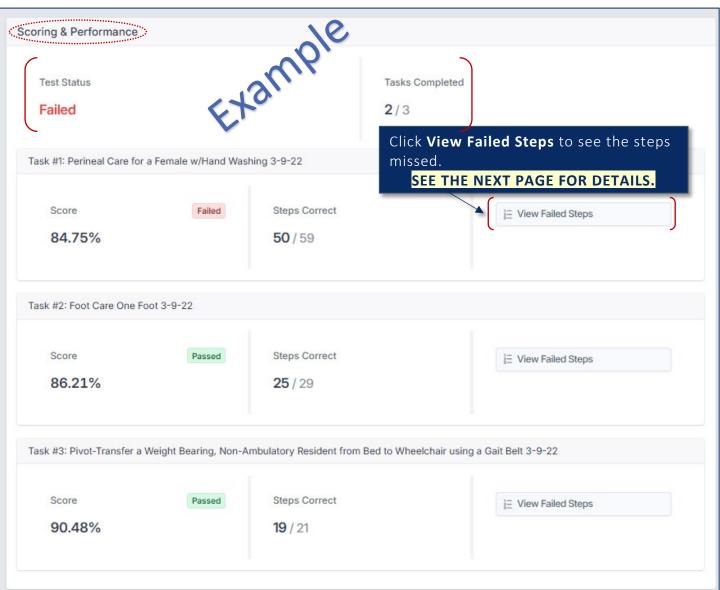


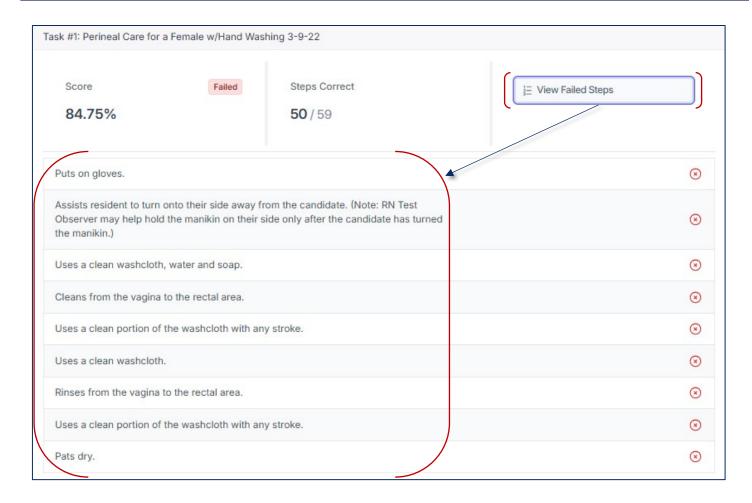




Skill Exam Test Results Example:







Test Attempts

You have **three attempts** to pass the knowledge and skill test portions of the exam.

Any individual who fails the final examination, except those who have been permitted to challenge the examination, shall have the opportunity to retake the examination twice within ninety (90) calendar days of the initial examination. If the individual fails the final examination a third time, the entire basic course shall be retaken before another examination can be given.

Retaking the Nurse Aide Exam

If you fail the knowledge and/or skill portion of the examination, you will need to pay for the portion you failed before scheduling a new exam date when you apply for a retest.

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

You will need to pay with a Visa or Master Card before you can schedule.

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

Test Review Requests

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

*PLEASE READ BEFORE FILLING OUT THE TEST REVIEW REQUEST: Please call D&SDT-HEADMASTER at (888)401-0462 during regular business hours, Monday through Friday, 7:00AM to 7:00PM CT, excluding holidays, and discuss the test outcome you are questioning before committing to sending the \$25 test review request deposit fee. Once you have further details about the scoring of your test, you will often understand the scoring process and learn how to better prepare yourself for subsequent exam attempts. If, after discussion with D&SDT-HEADMASTER staff, you still have a concern with your testing process that affected the outcome of your exam, you may submit a Test Review Request.

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

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

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

D&SDT-HEADMASTER cannot review test results or reviews with the candidate's instructor/training program. After a candidate reaches the age of 18, D&SDT-HEADMASTER will only discuss test results or test reviews with the candidate. D&SDT-HEADMASTER will not review test results or reviews with family members or anyone else on behalf of the candidate once the candidate reaches 18 years of age.

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

THE KNOWLEDGE/AUDIO EXAM

Knowledge Exam Content

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

The subject areas are as follows.

SUBJECT AREAS

Subject Area	Number of Questions	Subject Area	Number of Questions
Aging Process and Restorative Care	5	Infection Control	8
Basic Nursing Skills	8	Mental Health	6
Care Impaired	5	Personal Care	8
Communication	6	Resident Rights	5
Data Collection	4	Role and Responsibility	5
Disease Process	6	Safety	9

KNOWLEDGE EXAM SUBJECT AREA DEFINITIONS

<u>Aging Process and Restorative Care</u>: Questions concerning the process and progression of humans becoming what they will be as they move along the timeline of their lives and the maintenance of physical, mental, and psychosocial function.

Basic Nursing Skills: Questions concerning any act or activity that would be considered a basic skill necessary to perform the job of a CNA.

<u>Care Impaired</u>: Questions concerning dealing with residents who are physically or mentally limited from receiving "standard" care. CNAs must perform more extensively or differently to accommodate these residents.

<u>Communication</u>: Questions concerning any type of communication, verbal and nonverbal, written, spoken, or any communication related to hearing, seeing, feeling, tasting, or smelling.

<u>Data Collection</u>: Questions concerning data acquisition, handling, and routing.

<u>Disease Process</u>: Questions concerning the stages of diseases and/or the theory of diseases and the detection, prevention, or treatment of diseases.

<u>Infection Control</u>: Questions concerning the nature of infections, infection causes and prevention, and correct methods and procedures for dealing with infections.

<u>Mental Health</u>: Questions concerning the mental processes of residents, the signs and stages of mental states of residents, both normal and care impaired, or the mental well-being and interaction of the CNA and their co-workers.

<u>Personal Care</u>: Questions concerning activities or acts performed by the CNA for or to residents that are personal in nature.

<u>Resident Rights</u>: Questions concerning the rights to which the residents are legally entitled and the facility and CNA's role in ensuring those rights.

Role and Responsibility: Questions concerning any act or activity that would be considered part of the basic role of the CNA in the workplace or a basic responsibility of a CNA in the workplace.

<u>Safety</u>: Questions concerning the safety of residents, CNAs, facility safety issues, and the safety of facility personnel in general.

Knowledge Exam Information

If taking both the knowledge and skill tests on-site on the same day, you will be required to present your ID when entering the knowledge test room and the skills lab. Please keep your ID with you during the entire exam day.

The Knowledge Test Proctor will provide instructions for taking the Knowledge Exam. You will have **60 minutes** to complete the **75 multiple-choice questions** Knowledge Exam. You will be told when fifteen (15) minutes remain. You may not ask questions about the content of the Knowledge Exam, such as "What does this question mean?"

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

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

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

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

TRANSLATION DICTIONARIES

Foreign language paper word-for-word translation dictionaries <u>are allowed</u> and must be shown to the RN Test Observer at check-in and to the Knowledge Test Proctor when you enter the knowledge test room. A translation dictionary will not be permitted during testing if there are any writing or definitions. Translators, using language translators that are not pre-approved, and electronic dictionaries, <u>are not allowed.</u>

SCRATCH PAPER AND CALCULATOR

If needed, you may do math calculations on the scratch paper provided by the KTP. If you need a calculator, please quietly alert the Knowledge Test Proctor; one will be provided.

Any scratch paper and/or provided calculator must be left with the KTP when testing is done.

When you leave the testing room, you must leave all test materials. Anyone who takes or attempts to take materials, notes, or information from the room is subject to prosecution and will be reported to their training program and the Missouri Department of Health and Senior Services (DHSS).

ALTERNATE LANGUAGE VERSION

Besides English, the knowledge and audio knowledge exams are available in Spanish. Please refer to the instructions in the 'Knowledge/Audio Exam Alternate Language Versions' section of this handbook.

Knowledge Exam Audio Version

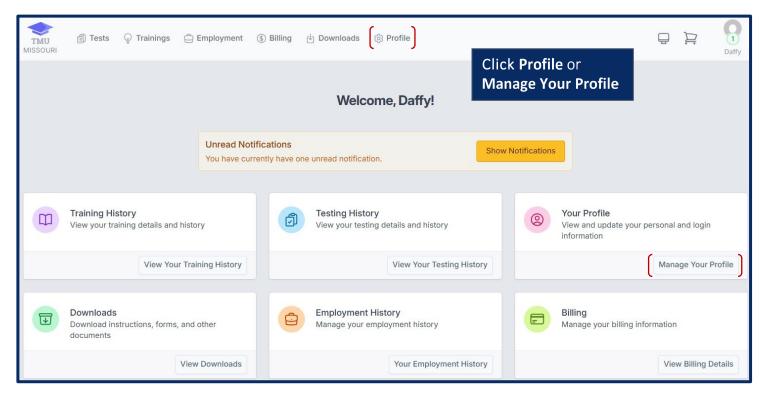
An audio (oral) version of the knowledge exam is available. However, there is an additional \$10 charge for the audio version (\$40 total), and you must request an Audio version before submitting your testing fee payment.

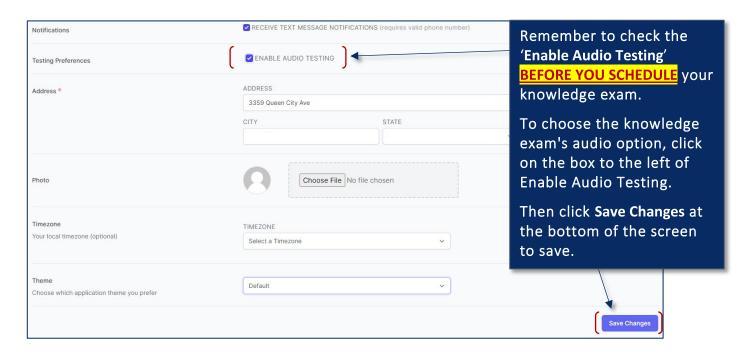
NOTE: On the Audio version of the English and Spanish Knowledge Exam, only the first 67 questions will be read orally; the remaining eight (8) questions must be answered without audio assistance to assess English reading comprehension.

SFLECTING AN AUDIO VERSION OF THE KNOWLEDGE EXAM

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

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





The questions are read to you neutrally and can be heard through wired headphones or earbuds plugged into the computer. Bluetooth-connected devices are not allowed. When taking an electronic Audio exam, the audio control buttons will be displayed on the computer screen, enabling you to play, rewind, or pause questions as needed.

Knowledge/Audio Exam Alternate Language Versions

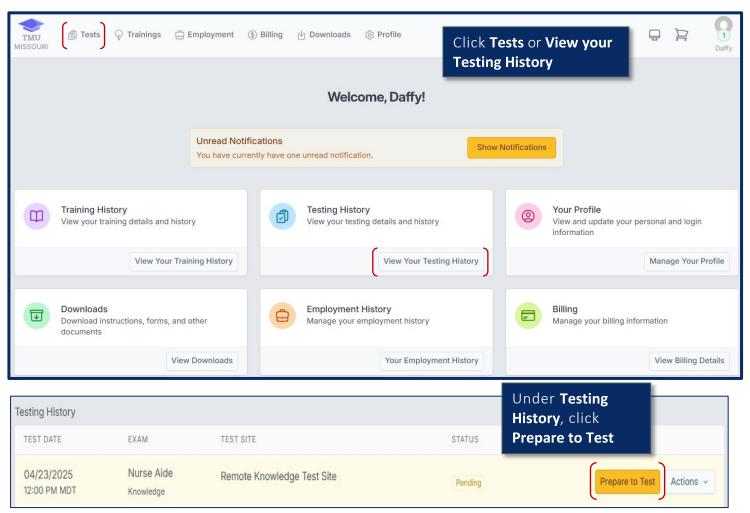
The Knowledge/Audio Exam is available in English and the following Missouri DHSS-approved alternate language:

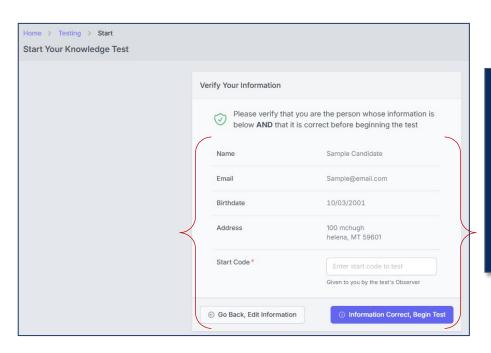
♦ Spanish

When you log in to take your knowledge exam, you can select English or a DHSS-approved alternate language from a drop-down list. During the exam, you can switch back and forth between your preferred language and English.

-continued on the next page-

Please see the instructions below for an example of how to toggle between English and DHSS-approved alternate languages.





Check that your information is correct before beginning the test. If it is not, click Go **Back, Edit Information**

If it is correct, you will enter the **Start Code** provided to you by the test observer, then click Information Correct. **Begin Test**

You will choose your alternate language from the drop-down list of DHSS-approved alternate languages.



Remotely Proctored Knowledge Exam Option

You can take the knowledge exam with a remote proctor from your home, etc.

REMOTELY PROCTORED KNOWLEDGE EXAM CANDIDATE REQUIREMENTS

Candidates must have:

- An updated version of Google Chrome as your Internet browser.
 - TMU© does not support Internet Explorer.
- A reliable Internet (Wi-Fi) connection.
- A personal computer/tablet/laptop to log into TMU© to access the knowledge exam.
- Your Email or Username and Password to take the remotely proctored TMU© Knowledge exam. The remote Proctor will provide you with a 'code' to start your test.
- A smartphone to access the 'video conferencing app' (for example, Zoom, etc.) that you **must download**.
 - An email will be sent to you and in your notifications (in your TMU© account) with information about the 'video conferencing app' (for example, Zoom, etc.) you will need to download before test day.
 - The night before your scheduled remotely proctored knowledge exam, you will be emailed, along with a notification (in your TMU© account), a reminder with the password-protected link to join the test event.
- During your test, your smartphone must be positioned so that the remote Proctor can clearly see you, your keyboard, mouse (if used), and the entire screen of your computer/tablet/laptop.
- You may not use a video filter, such as a background or blurring your screen.
- **IMPORTANT NOTE:** On testing day, you <u>will not be allowed to receive any assistance with your setup</u> from anyone in your environment (room/area).
- You must be **alone (by yourself during the entire time while testing)** in a quiet, isolated, secured room/area free of distractions, interruptions, and any other people, children, or pets.
- Along with showing the remote Proctor your surroundings/entire room during check-in, the remote Proctor may also ask you to show your room/entire surroundings at any time during your test.
- If you have selected the Audio version of the knowledge exam, you will provide your own <u>wired</u> earbuds or headphones (*Bluetooth-connected devices are not allowed*) to plug into the computer.
 - The questions are read neutrally to you and will be heard through wired headphones or earbuds plugged into the computer.
 - When taking an Audio exam, the audio control buttons will be displayed on the computer screen, enabling you to play, rewind, or pause questions as needed.
 - <u>NOTE</u>: On the Audio version of the English and Spanish Knowledge Exam, only the first 67 questions will be read orally; the remaining eight (8) questions must be answered without audio assistance to assess English reading comprehension.
- Failure to adhere to any of these remote testing conditions will require the remote Proctor to stop your test, which will be scored as a failed attempt.

SCHEDULE A REMOTELY PROCTORED KNOWLEDGE EXAM

You will need to sign in to your TMU© account using your Username or Email and Password and follow the instructions to 'Schedule / Reschedule a Test Event'. Please ensure you have met the 'Remotely Proctored Knowledge Exam Candidate Requirements' listed above before scheduling a remotely proctored knowledge exam.

- The test site location for a remotely proctored knowledge exam will be 'Remotely Proctored Test'.
- Once scheduled, a test confirmation will be sent via email and/or text. A notification will be generated in your TMU© account for you to view (see the 'Schedule / Reschedule a Test Event', 'Test Confirmation Letter', and the 'View your TMU© Notifications' section for information to access your test confirmation.)
- Instructions and the link to download the 'video conferencing app' (for example, Zoom, etc.), including the meeting ID and Password for the remotely proctored knowledge event you are scheduled for, will be emailed to you and in your notifications.
 - Remember, for this information, check your **'NOTIFICATIONS'** in your TMU© account. Please refer to the **'View your TMU© Notifications'** section.

Please call D&SDT-HEADMASTER at (888) 401-0462 if you have any questions or concerns, or need assistance scheduling a remotely proctored knowledge exam.

REMOTELY PROCTORED KNOWLEDGE EXAM INSTRUCTIONS

It is important that you read the Remotely Proctored Knowledge Exam Instructions before signing in to your remotely proctored knowledge exam. Please see the instructions for the Remotely Proctored Knowledge Exam under 'Access the Candidate Handbook and Testing Instructions'.

REMOTELY PROCTORED KNOWLEDGE EXAM CHECK-IN

You must be signed in to the remotely proctored exam link (for example, Zoom, etc., waiting room) **20 minutes in advance** of the start time listed on your test confirmation for the check-in process with the remote test proctor. If you are not signed into the remotely proctored exam waiting room 20 minutes in advance of the start time listed on your test confirmation, you will not be allowed to test, considered a No Show, forfeit your testing fees paid, and have to pay for another test date.

- You must show your mandatory form of identification to the remote Proctor at check-in before starting your remotely proctored knowledge exam. Please see the **'Identification'** section for specifics.
- You must be **alone (by yourself during the entire time while testing)** in a quiet, isolated, secured room/area free of distractions, interruptions, and any other people, children, or pets.
- You must show your surroundings/entire room to the remote Proctor during check-in before starting your remotely proctored knowledge exam.
 - Along with showing the remote Proctor your surroundings/entire room during check-in, the remote Proctor may also ask you to show your room/entire surroundings at any time during your test.
- Then, you must position your smartphone so the remote Proctor can clearly see you, your keyboard, mouse (if used), and the entire screen of your computer/tablet/laptop.
 - You may not use a video filter, such as a background or blurring your screen.
- **NOTE:** On testing day, you <u>will not be allowed to receive any assistance with your setup</u> from anyone in your environment (room/area).
- Failure to adhere to any of these remote testing conditions will require the remote Proctor to stop your test, which will be scored as a failed attempt.

REMOTELY PROCTORED KNOWLEDGE EXAM POLICIES

All 'Testing Policies' and 'Security' policies apply and are followed during the remotely proctored knowledge exam. Please refer to those sections for information.

- On testing day, you will not be allowed to receive any assistance with your setup from anyone in your environment (room/area). If someone else is in the room with you, the remote Proctor will remove you from the meeting, and you will be considered a no-show status. You will forfeit any testing fees paid and must repay to reschedule a new test.
- You must be **alone (by yourself during the entire time while testing)** in a quiet, isolated, secured room/area free of distractions, interruptions, and any other people, children, or pets.
- Along with showing the remote Proctor your surroundings/entire room during check-in, the remote Proctor may also ask you to show your room/entire surroundings at any time during your test.
- During your test, your smartphone must be positioned so that the remote Proctor can clearly see you, your keyboard, mouse (if used), and the entire screen of your computer/tablet/laptop.
 - You may not use a video filter, such as a background or blurring your screen.
- The 'video conferencing app' (for example, Zoom, etc.) link must be maintained during the entire knowledge exam.
 - If the 'video conferencing app' (for example, Zoom, etc.) connection is lost, you must immediately reconnect, or you will be disconnected from the test event by the remote Proctor, and your test will be scored as a failed attempt.
- Your device must <u>not be muted</u> during testing so that the remote Proctor can hear if there are any distractions or other interruptions during your test. **REMEMBER:** You need to test in an isolated, secure room/area that is free of distractions and interruptions, just as you would if you were sitting in the knowledge test room at a test site.
- If the remote Proctor has any inclination that you are cheating or not following instructions, your test will be ended and scored as a failed attempt.
- Please see the information on remotely proctored testing issues under the 'No-Show Exceptions' section.
- SCRATCH PAPER AND BASIC CALCULATOR: If needed, you may do math calculations on scratch paper or
 with a basic calculator. Before starting your exam, you will be asked to show both sides of the scratch paper
 and the basic calculator to the remote Proctor.
 - At the end of your exam, you will be asked to show both sides of the scratch paper and the calculator to the remote Proctor *again*. You will then be instructed to tear up the scratch paper in view of the remote Proctor and to mute your phone before doing so.
- TRANSLATION DICTIONARIES: Published foreign language word-for-word translation dictionaries are allowed.
 - You will need to show the remote Proctor the dictionary during check-in.
 - Electronic, non-approved language translators or dictionaries that contain writing or definitions <u>are not</u> allowed.
- If you have requested an AUDIO version of the Knowledge Exam, you will need to have <u>wired</u> earbuds or headphones (*Bluetooth-connected devices are not allowed*) that plug into the computer.

Failure to adhere to any of these remote testing conditions/policies will require the remote Proctor to stop your test, which will be scored as a failed attempt.

Self-Assessment Reading Comprehension Exam

The following passages and corresponding questions will assess your reading comprehension required for the knowledge portion of the state competency evaluation. If you miss more than three (3) questions, you should consider utilizing the audio option for the knowledge exam.

PASSAGE 1

Paul and Ben are twins. They are identical in features but opposite in personality. Paul likes to wear dark colors. Ben likes to wear bright colors. Paul likes to read quietly, and Ben likes to watch football games with friends.

- 1. Paul can be classified as an
 - a. omnivert
 - b. extrovert
 - c. introvert
 - d. ambivert
- 2. Ben can be classified as an
 - a. omnivert
 - b. extrovert
 - c. introvert
 - d. ambivert
- 3. Paul and Ben have identical
 - a. noses
 - b. shoes
 - c. earrings
 - d. tattoos

PASSAGE 2

Amy is from the state of Montana. Amy lives in an apartment with her parents and her brother, Nick. Tomorrow, Amy is flying to the state of Oregon. Amy is bringing three books of 3 different colors with her. Nick doesn't understand why she needs three books. The yellow one is a Spanish-English dictionary. The red one is a tourist guide to Oregon. The blue one is about horses, which Amy feels is the most important.

Amy will not need her United States of America passport because she won't be leaving the country.

- 4. Amy is from
 - a. Wisconsin
 - b. Montana
 - c. Oregon
 - d. Wyoming

- 5. Amy resides in a(n)
 - a. house
 - b. farm
 - c. condo
 - d. apartment
- 6. Amy lives in
 - a. Canada
 - b. America
 - c. Mexico
 - d. Peru
- 7. Amy lives with her
 - a. aunt
 - b. grandmother
 - c. father
 - d. sister
- 8. Amy's brother's name is
 - a. Nick
 - b. Loren
 - c. Chad
 - d. Jared
- 9. Tomorrow, she is going to
 - a. Montana
 - b. Canada
 - c. Wisconsin
 - d. Oregon
- 10. The type of book that is yellow is a(n)
 - a. dictionary
 - b. animal interest
 - c. tourist
 - d. guidebook
- 11. Amy believes the most important book is the color
 - a. red
 - b. black
 - c. yellow
 - d. blue

PASSAGE 3

Katherine did not like being called by her full name. She preferred to be called Katie. Katherine's mother wanted her to understand why she was given that legal name. Her mother shared a story about a strong-willed woman who overcame adversities, and her name was Katherine. Katherine then embraced her given name.

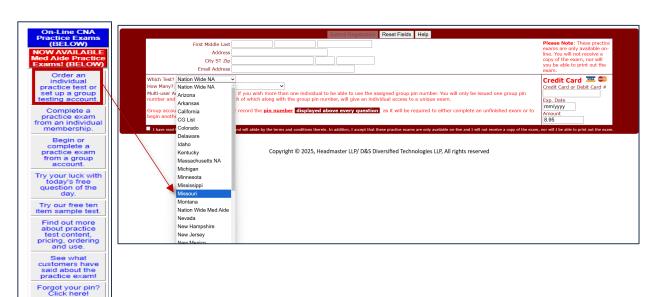
- 12. Katherine is a
 - a. last name
 - b. middle name
 - c. legal name
 - d. nickname
- 13. The purpose of Katherine's mother sharing the story with Katherine is to
 - a. entertain
 - b. persuade
 - c. inform
 - d. describe

Answers: 1. C | 2. B | 3. A | 4. B | 5. D | 6. B | 7. C | 8. A | 9. D | 10. A | 11. D | 12. C | 13. C

Knowledge Practice Test

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

NOTE: Make sure you select **MISSOURI** from the drop-down list.



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

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's 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. When you are communicating with residents, you need to remember to:

- (A) Face the resident and make eye contact
- (B) Speak rapidly and loudly
- (C) Look away when they make direct eye contact
- (D) Finish all their sentences for them

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

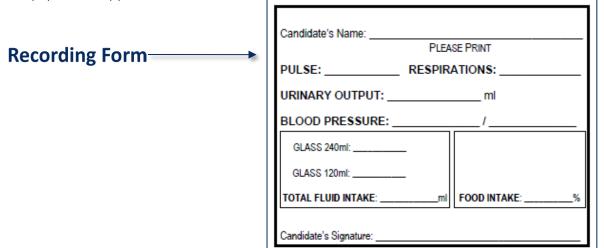
THE MANUAL DEMONSTRATION SKILL TEST

- The purpose of the Skill Test is to evaluate your performance when demonstrating DHSS-approved nurse aide skill tasks. You will find a complete list of skill tasks in this handbook.
- You will be asked to present your ID, which you showed the RN Test Observer at check-in.
- Be sure you understand all instructions you read while in the waiting area before you begin your skill task demonstrations. You may not ask questions once the Skill Test begins and the timer starts. Once the Skill Test begins, the RN Test Observer may not answer questions.
- Each of your randomly selected three (3) or four (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 **thirty (30) minutes** to complete your three or four tasks. After fifteen (15) minutes have elapsed, you will be alerted when 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 successfully complete 100% of the tasks you are assigned. You may not miss any key steps (the **bolded** steps) and must achieve 80% or higher on the non-key steps on each task to pass the Skill Test.
- If you believe you made a mistake while performing a task, tell the RN Test Observer you would like to make a correction. You will need to correctly demonstrate the step or steps on the task you believe you performed incorrectly to receive credit for the correction.

- You may repeat or correct any step or steps on any task you believe you have performed incorrectly at any time during your allotted 30 minutes or until you tell the RN Test Observer you are finished with the Skill Test.
- The skill task steps are not order dependent unless the words BEFORE or AFTER are used in a step.
- When you finish each task, verbally tell the RN Test Observer you are finished and move to the designated "relaxation area." When the RN Test Observer and actor have set up and are ready for your next skill task demonstration, the RN Test Observer will read the scenario for your next task.
- All steps must actually be demonstrated. Steps that are only verbalized or simulated WILL NOT COUNT.

Skill Test Recording Form

If your skill test includes a skill task that requires recording a count or measurement, the RN test observer will provide a recording form similar to the one displayed. You are required to sign the recording form during the demonstration of the equipment/supplies.



Skill Test Tasks

You will be assigned one of the following mandatory tasks with embedded hand washing using soap and water as your first task:

- Catheter Care for a Female Resident with Hand Washing (DEMONSTRATED ON A MANIKIN)
- Don PPE [Put On] (Gown and Gloves), Empty a Urinary Drainage Bag, Measure and Record Urine Output,
 Doff [Remove] PPE, with Hand Washing
- Perineal Care for a Female Resident with Hand Washing (DEMONSTRATED ON A MANIKIN)
- Perineal Care for a Male Resident with Hand Washing (DEMONSTRATED ON A MANIKIN)

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

You will also receive an additional two (2) or three (3) 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.

Skill Tasks Listing

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

The steps listed for each task are required for a nurse aide candidate to successfully demonstrate minimum proficiency in the skill task for the RN Test Observer. The steps will be performed on a live resident actor for all but three tasks: catheter care and perineal care for a female resident, and perineal care for a male resident, which will be performed on a manikin. You will be scored only on the steps listed.

If you fail the Skill Test, there will always be one of the first mandatory tasks to start each Skill Test. The other tasks included in your Skill Test are randomly chosen to ensure that every Skill Test is comparable in difficulty and has an average time to completion. The RN Test Observer will observe your demonstrations of your skill tasks and record what they see you do. D&SDT-HEADMASTER scoring teams will officially score and double-check your test.

Note: The skill task steps included in this handbook are offered as guidelines to help prepare candidates for the 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

- 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

- 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 the bed brakes to ensure the resident's safety.
- 8) Lock the 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 the gait belt. Check the gait belt for tightness by slipping fingers between the gait belt and the resident.
- 13) Assist the 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 the 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

- 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 the bed brakes to ensure the resident's safety.
- 8) Lock the 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 their hands on the 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 the 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 RESIDENT WITH HAND WASHING

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

- 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) Use a clean washcloth and water.
- 18) Rinse using strokes only away from the urethra.
- 19) Rinse using a clean portion of the washcloth for each stroke.
- 20) Pat dry.

21) Do not allow the tube to be pulled at any time during the procedure.

- 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) Replace the resident's gown over the perineal area.
- 25) Replace the top cover over the resident.
- 26) Leave the resident in a position of safety and comfort.
- 27) Lower bed.
- 28) Empty, rinse, dry, and return basin to storage.
- 29) Place the call light or signaling device within easy reach of the resident.
- 30) Maintain respectful, courteous interpersonal interactions at all times.
- 31) Wash hands: Begin by wetting your hands.
- 32) Wash hands: Apply soap to hands.
- 33) Wash hands: Rub hands together using friction for at least 20 seconds with soap.
- 34) Wash hands: Interlace fingers pointing downward with soap.
- 35) Wash hands: Wash all surfaces of your hands with soap.
- 36) Wash hands: Wash all surfaces of wrists with soap.
- 37) Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.
- 38) Wash hands: Dry hands with a clean paper towel(s).
- 39) Wash hands: Turn off the faucet with a paper towel.
- 40) Wash hands: Discard paper towels in the trash container as used.
- 41) 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 – CLEAN AN UPPER OR LOWER DENTURE

[only one plate is used for testing]

- 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. (Towels, washcloths, or paper towels are allowed for lining.)
- 7) Put on gloves.
- 8) Apply denture cleanser to the denture brush/toothbrush.

- 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. (Only one plate is used during testing.)
- 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. (Denture brush or toothbrush.)
- 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.

DON [PUT ON] A GOWN AND GLOVES, EMPTY A URINARY DRAINAGE BAG, MEASURE AND RECORD URINE OUTPUT, DOFF [REMOVE] THE GOWN AND GLOVES, WITH HAND **WASHING**

(One of the possible mandatory first tasks)

- 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. (Candidate chooses the barrier. It may be a paper towel, washcloth, chux, etc.)
- 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 pre-measured 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.

DRESS A DEPENDENT RESIDENT IN BED

- 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.

FEED A DEPENDENT RESIDENT IN BED

- 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 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.
 - a. The actor will say, "I'm full" before all the solid food and fluids are gone.
- 16) Leave the resident clean.

17) Leave the resident in bed with the head of the bed up to at least 30 degrees.

- 18) Record intake as a percentage of total solid food eaten on the previously signed recording form.
- 19) The candidate's recorded consumed food intake is within 25 percentage points of the RN Test Observer's recorded food intake.
- 20) Record the sum total of estimated fluid intake on the previously signed recording form.

- 21) The candidate's recorded sum total consumed fluid intake is within 60mls of the RN Test Observer's recorded fluid intake.
- 22) Place the 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.

FOOT CARE - ONE FOOT

- 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. (The scenario read to you will specify right or left.)
- 9) Immerse the resident's foot in warm water.
 - a. You must verbalize the 5 to 20 minutes of soaking time after you begin soaking the foot.
 - 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—BRUSH A RESIDENT'S TEETH

- 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 the resident in rinsing their 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

- 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- turn 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 a 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

- 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 left or right hand nails in warm water. (The scenario read to you will specify left or right.)
 - a. You must 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 the 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 RESIDENT WITH HAND WASHING

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

- 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. (The RN Test Observer does not move into position unless directed to do so by the candidate.)
- 10) Turn the resident or raise their hips and place the barrier under their buttocks. (The candidate will choose a barrier, such as a towel, waterproof pad, or Chux.)
- 11) Expose the perineum only.
- 12) Separate the labia.
- 13) Use a clean washcloth, water, and soap.
- 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.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub your hands together until they are completely dry.
- 24) Put on new gloves.
- 25) Assist the resident in turning to the side away from the candidate.
- 26) Use a clean washcloth with water and soap.

27) Clean from the vagina to the rectal area.

- 28) Use a clean portion of the washcloth with any cleaning stroke.
- 29) Use a clean washcloth and water to rinse.
- 30) Rinse from the vagina to the rectal area.
- 31) Use a clean portion of the washcloth with any rinsing stroke.
- 32) Pat dry.
- 33) Safely remove the barrier from under the resident's buttocks.
- 34) Position the resident (manikin) on its back.
- 35) Lower bed.
- 36) Place soiled linen in the designated laundry hamper.

- 37) Empty, rinse, dry, and return equipment to storage.
- 38) Remove gloves, turning them inside out as you remove them, and dispose of them in the designated container.
- 39) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are dry.
- 40) Place the call light or signaling device and water 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.

PERINEAL CARE FOR A MALE RESIDENT WITH HAND WASHING

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

- 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. (The RN Test Observer does not move into position unless directed to do so by the candidate.)
- 10) Turn the resident or raise their hips and place the barrier under their 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 washcloth, water, and soap.
- 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, 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 the front side.
- 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.
- 27) Use a clean washcloth, soap, and water 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 and water, 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) Places all soiled linen in a 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

- 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 the 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

- 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 the 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 A RESIDENT ON THEIR SIDE IN BED

- 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. (Note: the candidate's working side of the bed must be opposite the side read to turn the resident on.)
- 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. (Note: the candidate's working side of the bed must be opposite the side read to turn the resident on.)

10) Assist/turn the resident to their correct side, read to the candidate in the scenario by the RN Test

Observer. (Note: the resident must be placed on the side read in the scenario.)

- 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

- 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.
 - a. abduction
- 13) Move the entire leg back toward the body.
 - a. adduction
- 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.
 - a. flexion of the hip and knee at the same time
- 17) Straighten the knee and hip.
 - a. extension of the knee and hip at the same time
- 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

- 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.
 - a. flexion
- 13) Bring the resident's arm back down to the resident's side.
 - a. extension
- 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.
 - a. abduction
- 17) Return the resident's arm to the resident's side.
 - a. adduction
- 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 *must ask* 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 - COUNT AND RECORD A RESIDENT'S PULSE AND RESPIRATION

- 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.
- 9) Record the pulse rate on the previously signed recording form.
- 10) The candidate's recorded pulse rate is within four (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 two (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.

VITAL SIGNS – TAKE AND RECORD A RESIDENT'S MANUAL BLOOD PRESSURE

- 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 until 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 six (6) mmHg of the RN Test Observer's recorded systolic blood pressure.
- 18) The candidate's recorded diastolic blood pressure is within six (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.

KNOWLEDGE EXAM VOCABULARY LIST

adduction
abandonment
abdominal thrust
abduction
abductor wedge
abnormal vital signs
abuse
acceptance
accidents
accountable
activities
acute
adaptive devices
adduction
ADL
admitting resident
advance directives
afebrile
affected side
aging process
agitation
AIDS

airborne transmitted diseases
diseases
Alzheimer's
ambulation
amputees
anemia
anger
angina
anterior
anti-embolic stocking
antibacterial
antibiotics
anxiety
aphasia
apical
apnea
arthritis
aseptic
aspiration
assault
assistive device
atrophy
axillary temperature

bacteria
bargaining
basic needs
bathing
bed height
bed making
bedpan
bedrails
bedrest
behavior
beliefs
biohazard
bladder training
bleeding
blindness
blood pressure
bloodborne pathogen
body alignment
body fluid
body language
body mechanics
body system
body temperature

bone loss	conflict	dizziness
bowel program	confused resident	DNR
brain stem	congestive heart failure	documenta
breathing	constipation	domestic al
brittle bones	contamination	dorsiflexion
burnout	contracture	dressing
call light	converting measures	droplets
cancer	COPD	dry skin
cardiac arrest	coughing excessively	dying
cardiopulmonary	cross-contamination	dysphagia
resuscitation	CVA	dyspnea
cardiovascular system	cyanotic	dysuria
care impaired	dangling	edema
care plan	de-escalation	elastic stock
cast	death and dying	elderly
cataract	decubitus ulcer	electrical ed
catheter	deeper tissue	elimination
cc's in an ounce	dehydration	elopement
central nervous system	delegation	emesis
chain of command	demanding resident	emotional a
charge nurse	dementia	emotional r
chemical restraint	denial	emotional s
chemical safety	denture care	empathy
chemotherapy	dentures	emphysema
choking	dependability	enema
chronic	depression	epilepsy
circulation	development	essential be
cleaning	developmental disability	ethics
clear liquid diet	diabetes	eyeglasses
clergy	diaphragm	falls
cognitively impaired	diet	fecal impac
colostomy	digestion	feces
coma	dilate	feeding
combative resident	disease	fire
communicable	disinfection	first aid
communication	disoriented	flatus
competency evaluation	disposing of contaminated	flexed
conduct	materials	foot board
confidentiality	disrespect	foot care
	NA:a	couri Nurco Aido Candidata II

dizziness
DNR
documentation
domestic abuse
dorsiflexion
dressing
droplets
dry skin
dying
dysphagia
dyspnea
dysuria
edema
elastic stockings
elderly
electrical equipment
elimination
elopement
emesis
emotional abuse
emotional needs
emotional stress
empathy
emphysema
enema
epilepsy
essential behaviors
ethics
eyeglasses
falls
fecal impaction
feces
feeding
fire
first aid
flatus
flexed
foot board
foot care

foot drop Fowler's
Lowler's
fracture pan
fractures
fraud
frayed cord
gait belt
gastric feedings
gastrostomy tube
geriatrics
gerontology
gestures
gifts
gloves
grieving process
group settings
hair care
hand care
hand tremors
hand washing
health-care team
hearing aid
hearing impaired
heart attack
heart muscle
helping residents
hemiplegia
hip prosthesis
HIPAA
HIV
holistic care
hormones
hospice
hyperglycemia
hypertension
hyperventilation
immobility
impaired
in-house transfer

ouri Nurse Aide Candidate Handbo
in-service programs
incontinence
indwelling catheter
infection
infection control
infectious disease
initial observations
insomnia
intake and output
integumentary system
interpersonal skills
invasion of privacy
ischemia
isolation
jaundice
job application
job description
lactose intolerance
laxatives
life support
lift/draw sheet
linen
living will
log roll
loose teeth
male perineal care
mask
Maslow
masturbation
measuring height
measuring temperature
mechanical lift
medical asepsis
medical record
medications
memory loss
mental health
microorganism

misappropriation

mistakes
mobility
mouth care
moving
MSDS
musculoskeletal
nail care
nasal cannula
needles
neglect
non-contagious disease
non-verbal
communication
nosocomial infection
NPO
nursing assistant's role
nutrition
nutritional supplement
objective
OBRA
occupied bed
ombudsman
oral care
oral temperature
orientation
osteoporosis
output
oxygen
palliative care
paralysis
paranoia
Parkinson's
partial assistance
passive
pathogen
patience
perineal care
peristalsis
personal care
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personal items
personal protective
equipment (PPE)
personal values
pet therapy
phone etiquette
physical needs
physical therapist
physician's authority
plaque
plate rim
podiatrist
positioning
precautions
pressure ulcer
preventing falls
privacy
progressive
pronation
prostate gland
prosthesis
protective equipment
psychological needs
PTSD
pulse
pureed diet
quadriplegia
quality of life
RACE (acronym)
radial
range of motion
reality orientation
rectal
refusal
regulation
rehabilitation
religious service
reminiscing
renewal

reporting
reposition
resident abuse
resident belongings
resident independence
resident pain
resident pictures
resident right
resident treatment
resident trust
resident's chart
resident's environment
resident's families
residents
respectful treatment
respiration
responding to resident
behavior
responsibility
restorative care
restraint
resuscitation
rights
rigor mortis
risk factor
role
rotation
safety
sanitizer
scale
seclusion
secretions
security
seizure
self-esteem
semi-Fowlers
sensory system
sexual abuse

sexual needs

sexually transmitted
disease
sharing information
Sharp's container
shaving
shearing
side rails
skin observation
slander
smoking
social needs
social worker
soiled linen
specimen
spills
spiritual needs
stages of grief
standard precautions
stealing
stereotypes
stethoscope
stress
stroke
subjective
sundowning
supine
survey
swelling
tachycardia
tendons
terminal illness
terminology
thick fluid
threatening resident
thrombus
TIA
tips
toenails
trachea
A: 1 0 1:1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

transfers
transporting
tub bath
twice daily
tympanic
unaffected
unconscious
unsteady
urethral

urinary
urine specimen
UTI
varicose veins
vision change
vital signs
vomitus
walker
wandering resident

water faucets
weakness
weighing
weight
well-being
wheelchair safety
withdrawn resident

Notes: