



D&S Diversified Technologies LLP

Headmaster LLP

Montana Nursing Assistant Candidate Handbook

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Version 3

Montana Nursing Assistant Candidate Handbook

EFFECTIVE: August 1, 2022

Contact Information

Questions regarding: testing process • test scheduling • eligibility to test
 **(800) 393-8664**

Questions regarding: obtaining information on official regulations and guidelines for nursing assistants • nursing assistant certification • Montana Nursing Assistant Registry
 **(406) 444-4980**

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Introduction

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

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

This handbook describes the process of taking the nurse aide competency examination and is designed to help prepare candidates for testing. There are two parts to the nurse aide competency examination—a multiple-choice, knowledge/oral test and a skill test. Exam candidates must be registered, complete approved training, pass both parts of the exam and meet all other requirements of the Montana Department of Health and Human Services (MT DPHHS) to qualify for certification as a nursing assistant in Montana. Candidates who have not completed a MT DPHHS approved training program may challenge the state exam one time without training. If the candidate passes the state exam, s(he) qualifies to apply for nurse aide certification.

The Montana Department of Health and Human Services has approved Headmaster, LLP to provide tests and scoring services for Montana nurse aide testing. For question not answered in this handbook, please check the Montana webpage at www.hdmaster.com or contact Headmaster at (800)393-8664. The information in this handbook will help you prepare for your examination.

Americans with Disabilities Act (ADA)

ADA Compliance

If you have a qualified disability, you may request special accommodations for examination. Accommodations must be approved by Headmaster in advance of your examination. The PDF fillable/submittable request for [ADA Accommodation Form 1404](#) is available on D&SDT-Headmaster's main website under ADA Accommodations at www.hdmaster.com. This form must be submitted to Headmaster prior to the completion of your nurse aide training program with the required documentation listed on the second page of the ADA application in order to be reviewed for a special accommodation.

ADA Accommodations
[ADA Accommodation Form 1404: Fill in Online and Submit](#)
[Remember to Attach Documentation](#)

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The Montana Nurse Aide Competency Exam

Payment Information

Exam Description	Price
Knowledge Test or Retake	\$20
Oral Knowledge Test or Retake	\$31
Skill Test or Retake	\$77

Schedule an Exam Date

In order to schedule an examination date, you may either have successfully completed a Montana Department of Health and Human Services approved nursing assistant (NA) training program or you may challenge the state exam.

NURSING ASSISTANT TRAINING PROGRAM CANDIDATES

Your instructor or training program will enter your demographic and training information with completion date into the WebETest© database. Your instructor or training program will verify the name entered into WebETest© against the identification you will present when you sign in at a test event. Your photo ID must be a US government issued, signed, non-expired, photo bearing form of identification. If you discover your ID name doesn't match your name as listed in WebETest©, please call Headmaster at (800)393-8664 during regular business hours, Monday through Friday, 8:00AM to 6:00PM, Mountain Time (MT), excluding holidays. Once your instructor or training program enters the date you successfully complete training into WebETest©, you may schedule your exam date online.

Please see instructions under 'Schedule/Reschedule into a Test Date'.

CANDIDATES CHALLENGING THE STATE EXAM

If you are challenging the state exam, Headmaster will not have your demographic information. Therefore, you will need to complete and submit the online fillable [1101 and 1402 Payment and Scheduling Form](#). This form can be found on the Montana CNA Testing and Certification page of our website at www.hdmaster.com in the left-hand column below Candidate Forms (see picture below).



Headmaster will schedule you for the next available date at the test site of your choice. You will receive a confirmation email with your testing instructions.

SCHEDULE/RESCHEDULE INTO A TEST DATE

Once your instructor or training program enters the date you successfully complete training into WebETest©, you may schedule your exam date online at the [Montana webpage](#), click on [Schedule/Reschedule](#) and then log-in with your secure Test ID# and Pin# provided to you by your training program or from Headmaster at (800)393-8664.

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Securely processed MasterCard or Visa credit card or debit card information is required when scheduling online. Once your testing fees are paid for, you will be eligible to choose a test site and date.

You will be able to schedule and/or reschedule up to 1 full business day prior to a scheduled test date of your choice and receive your test confirmation notification online or on the screen while you are logged in. You may login with any Internet connected device. To change or reschedule your test date, login to the [Montana webpage](#), click on [Schedule/Re-Schedule](#) under the “Candidate Forms” column and log in with your secure Test ID# and Pin# no less than 1 full business day before your scheduled test date. If you are unable to schedule/reschedule online, please call Headmaster at (800)393-8664 during regular business hours, Monday through Friday, 8:00AM to 6:00PM, MT, excluding holidays, for assistance.

PAYMENT AND SCHEDULING FORM 1402MT

You may also pay your testing fees by completing and submitting online, or imaging and emailing to hdmaster@hdmaster.com, the [Payment and Scheduling Form 1402](#) with your MasterCard or Visa payment.

If you are paying with a Money Order, Cashier’s check or Facility check, please send the completed 1402MT form and your payment to Headmaster, P.O. Box 6609, Helena, MT 59604. No personal checks or cash are accepted. **Please make money orders or cashier checks payable to HEADMASTER.**

Note: Payment and Scheduling Form 1402’s with missing or incomplete information, payment or signatures will not be processed and will be shredded. If a check/money order was sent with the application, the check/money order will be mailed back to the candidate.

Once we receive your payment and scheduling form and process your payment, you will be notified via email that you are eligible to schedule into a test event. If you do not receive an email within 5 days of submitting your Scheduling and Payment form, please call Headmaster to check on the status at (800)393-8664. You will then need to sign in to your WebETest© record ([Montana webpage](#)) using your ID and PIN#. **Please see instructions under ‘Schedule/Reschedule into a Test Date’.**

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 give you site specific instructions on what time to arrive by, ID requirements, dress code, etc.

You can also view your [confirmation notice](#) any time by logging into your WebETest© account with your secure Test ID# and PIN#. You should have received your Test ID# and PIN# from your training program, or you may call Headmaster at (800)393-8664 during regular business hours, Monday through Friday, 8:00AM to 6:00PM, MT, excluding holidays.

All Headmaster forms can be found on the [Montana CNA webpage](#).

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

Headmaster **does not send** postal mail test confirmation letters to candidates.

Time Frame for Testing from Training Program Completion

You will be scheduled to take your knowledge and skill tests on the same day. You must schedule a test date **within six (6) months of your date of training program completion**. After six months, your training expires and you are no longer eligible to test based on this training cycle.

Many training programs host and pre-schedule in-facility test dates for their graduating students. Your program/instructor will have informed you if this is the case. Prior to scheduling a test, verify with your instructor if the training program has already scheduled and/or prepaid for your test. Regional test seats are open to all candidates. Regional test dates are posted on the [Montana webpage](http://www.hdmaster.com) at www.hdmaster.com, click on Montana CNA.

If you have any questions regarding your test scheduling, call Headmaster at (800)393-8664, during regular business hours 8:00AM to 6:00PM, MT, Monday through Friday, excluding holidays.

Exam Check-In

You should arrive at your confirmed test site between twenty and thirty (20-30) minutes before your exam is scheduled to start. (*For example:* if your test start time is 8:00AM – you need to be at the test site for check-in no later than 7:30 to 7:40AM.)

Testing Attire

There is not a required testing attire, however, it is recommended you wear full clinical attire (scrubs and closed toed shoes).

- No smart watches or fitness monitors are allowed.

Note: You will not be admitted for testing if you are late. You will be considered a NO SHOW. You will forfeit your testing fees and have to pay for another exam date.

Identification

You must bring a **US GOVERNMENT ISSUED, PHOTO-BEARING, SIGNED, NON-EXPIRED FORM OF IDENTIFICATION** and your **ORIGINAL SOCIAL SECURITY CARD*** (*an official letter from the Social Security office is acceptable). Only **original** IDs and social security cards, or official letters from the Social Security office are accepted. No photocopies, faxes or images are allowed. Examples of the forms of US government issued, signed, photo ID's that are acceptable are:

- Driver's License
- State issued Identification Card
- US Passport (Foreign Passports and Passport Cards *are not* acceptable)
 - *Exception:* A Foreign Passport with a **US VISA** is acceptable.

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- Military Identification (*that meets all identification requirements*)
- Work Authorization Card (*that meets all identification requirements*)
- Alien Registration Card (*that meets all identification requirements- a fingerprint in place of a signature is acceptable*)
- Tribal Identification Card (*that meets all identification requirements- a fingerprint in place of a signature is acceptable*)

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

The **FIRST** and **LAST** names printed names on the ID and social security card (or letter from the Social Security office) presented to the RN Test Observer during sign-in at your test event **MUST EXACTLY MATCH** the FIRST and LAST names that were entered in the Montana nurse aide WebETest® database by your instructor, training program or by Headmaster from your application if you are a challenge candidate.

If you need to apply for new social security card, please do not schedule your test date until you have received your new card from the Social Security office.

Note: You will not be admitted for testing if you do not bring proper ID and your original Social Security Card (or letter from the Social Security office), your ID is invalid (see note above) or if your FIRST and LAST printed names on your US government issued photo ID and original social security card (or letter from the Social Security office), do not match your current name of record in the Montana nursing aide database. In cases where names do not match, this is considered a NO SHOW and you will forfeit your testing fees and have to pay for another exam date.

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

Instructions for the Knowledge and Skill Tests

Test instructions for the knowledge and skill tests will be provided in written format in the waiting area when you sign-in for your test.

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

Testing Policies

The following policies are observed at each test site—

- If you arrive late for your confirmed exam (you need to be at the test site to check in at least 20-30 minutes before your scheduled start time – if your test start time is 8:00AM, you need to be at the test site by 7:40AM at the latest), you will not be admitted to the exam, considered a No Show, and any exam fees paid *will NOT be refunded*.

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- If you do not bring valid and appropriate US government issued, non-expired, signed photo ID and original social security card (or letter from the Social Security office), you will not be admitted to the exam, considered a No Show and any exam fees paid *will NOT be refunded*.
- If the FIRST and LAST printed names on your ID and social security card (or letter from the Social Security office) do not match your current name of record, you will not be admitted to the exam, considered a No Show and any exam fees paid *will NOT be refunded*.
- If you NO SHOW for your exam day, any test fees paid *will NOT be refunded*. You must re-pay your testing fees on-line in your own WebETest® record or submit Form 1402MT (Scheduling and Payment Form) to schedule another exam date.
- If you refuse to show the RN Test Observer your required ID and social security card (or letter from the Social Security office) and/or refuse to sign your signature on the required sign-in forms, you will not be allowed to test. You will be asked to leave the test site, considered a No Show and any exam fees paid *will NOT be refunded*.
- Cell phones, smart watches, fitness monitors, electronic recording devices, Bluetooth connected devices and personal items (such as water bottles, purses, large bags, study materials, extra books, or papers) are not permitted to be on or near you in either testing room. You will be informed by the testing team of the designated area to place your personal items and electronic devices and you are to collect these items when you complete your test(s).
 - All electronic devices must be **turned off**.
 - Any smart watches or fitness monitors must be removed from your wrist and turned off.
- Anyone caught using any type of electronic recording device during testing will be removed from the testing room(s), have their test scored as a failed test, forfeit all testing fees and will be reported to your training program and the Montana Department of Health and Human Services.
- You may, however, use personal devices during your free time in the waiting area.
- You are encouraged to bring a jacket, snack, drink or study material to have during your free time in the waiting area.
- You may not remove any notes or other materials from the testing room.
- You are not permitted to eat, drink, smoke, use e-cigarettes or vape during the exam.
- You are not allowed to leave the testing room (knowledge test room or skills lab) once the exam has begun **for any reason**. If you do leave during your test event, you will not be allowed back into the testing room to finish your exam.
- If you are discovered causing a disturbance of any kind, engaging in any kind of misconduct or try to take any notes or testing materials from the testing room, you will be dismissed from the exam, have your test scored as a failed test, and reported to your training program and the Montana Department of Health and Human Services.
- No visitors, guests, pets (including companion animals) or children are allowed.
- You may not test if you have any type of physical limitation (excluding pre-arranged ADA's) that would prevent you from performing your duties as a nursing assistant. (Examples: cast, arm/leg braces, crutches, etc.) Call your instructor or training program, or if scheduled in a regional event, call Headmaster at (800)393-8664 immediately if you are on doctor's orders. You must image and email, montana@hdmaster.com or fax, (406)442-3357, a doctor's order **within three (3) business days** of your scheduled exam day to qualify for a free reschedule.

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- Test sites, RN Test Observers, Knowledge Test Proctors and Actors are not responsible for candidate personal belongings at the test site.
- Liabilities Not Assumed: Headmaster WILL NOT BE LIABLE FOR ANY DAMAGES IN EXCESS OF THE EXAMINATION FEES THAT HAVE BEEN PAID BY YOU OR ON YOUR BEHALF. In no event shall Headmaster, including and without limitation, agents, contractors, test sites, employees and affiliates, be liable for any special, incidental or consequential damages, including, without limitation, loss of profits or income. Headmaster will not be liable for, nor will any adjustment, refund or credit of any kind be given as a result of, any loss, damage, delay, mis-delivery, non-delivery, misinformation or any failure to provide information, except such as may result from our sole negligence. We will not be liable for, nor will any adjustment, refund or credit of any kind be given as a result of any loss, damage, delay, mis-delivery, non-delivery, misinformation or failure to provide information caused by or resulting in whole or in part from:
 - The act, default or omission of any person or entity, other than, including contractors, test sites or any local, state or federal government agencies.
 - Your violation of any of the terms and conditions contained in the applicable candidate handbook for your certification test, as amended or supplemented, or your failure to give proper notice in the manner and time prescribed.
 - Acts of God, public enemies, criminal acts of any person(s) or entities, including, but not limited to, acts of terrorism, civil commotion, local or national weather conditions, national or local disruptions in air or ground transportation networks (as determined solely by us), strikes or anticipated strikes (of any entity, including, but not limited to, delivery services, vendors or suppliers), labor disruptions or shortages caused by pandemic conditions or other public health events or circumstances, natural disasters (earthquakes, floods, tornadoes and hurricanes are examples of natural disasters), conditions that present a danger to our personnel, and disruption or failure of communication and information systems (including, but not limited to, our systems).
 - The loss of personal or financial information submitted to us for payment for services via personal email, fax or phone transmission, the United States Postal Service or other mail carriers except such as is a result of our sole negligence.
- Limitations on Legal Actions: Our certification testing services do not make us an agent for any contractor or any third party for any purpose. Any right you might have to damages, refunds, credits, fees or any other legal or equitable relief whatsoever against us under any cause of action arising from our certification testing services pursuant to the applicable state candidate handbook shall be extinguished unless you file an action within thirty days from the date of your claimed damage or loss. Any right that you might have to damages, refunds, credits, or any other legal or equitable relief whatsoever against us under any cause of action arising from our providing you with certification testing services as outlined in the applicable state candidate certification test handbook shall be extinguished unless you first comply with all applicable notice periods and requirements in these terms and conditions including, but not limited to, the periods and requirements for providing notice as outlined in the applicable state candidate certification test handbook.
 - Finally, you and we agree that you will comply with applicable notice periods and requirements even if you believe that such compliance will not result in relief from us or if you lack knowledge regarding whether such compliance will result in relief from us. To the extent that any court finds that state rather than federal law applies to any

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provision of our agreement to provide you with certification testing services, the controlling law is the substantive law of the state of Montana.

- ***Please refer to this Montana Candidate Handbook before your test day for any updates to testing and/or policies.***

Inclement Weather and Unforeseen Circumstances Policies

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

In the event of inclement weather, you will be expected to attend your scheduled regional exam date unless:

- The county you reside in or the county of the testing site is placed on a weather emergency.
- The test site closes.
- The test observer cancels the test event.
- There is an accident due to weather or other cause on your route to the test site, in which case:
 - Documentation from the Department of Transportation Services or a Police report is required within 3 business days of your scheduled exam day to qualify for a free reschedule.

Note: If the above listed circumstances are not met, failure to attend your scheduled test date will result in a No Show status and any exam fees paid *will NOT be refunded*.

Security

If you refuse to follow directions, use abusive language or disrupt the examination environment, your test will be stopped and scored as a failure. You will be dismissed from the testing room and will forfeit any testing fees paid and a report of your behavior will be given to your training program and the Montana Department of Health and Human Services.

Anyone who removes or tries to remove test material or takes notes or information from the test site will be reported to your training program and the Montana Department of Health and Human Services and is subject to prosecution to the full extent of the law. Your test will be scored as a test failure and you will forfeit any testing fees paid. You will not be allowed to test for a minimum of six (6) months.

If you give or receive help from anyone during testing (which also includes the use of any electronic recording devices such as cell phones, smart watches, etc. or browsing to other sites during your WebETest® electronic exam), your test will be stopped and scored as a failure. You will be dismissed from the testing room and will forfeit any testing fees paid. You will be reported to your training program and the Montana Department of Health and Human Services.

Reschedules

All candidates may reschedule online at the [Montana webpage](#) any time up until one (1) business day before a scheduled test day, excluding Saturdays, Sundays and holidays. All candidates are entitled to

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reschedule up until **one (1) business day** prior to a scheduled regional test day, **excluding** Saturdays, Sundays and holidays.

If you must reschedule your regional exam date, please do so as soon as possible. You may reschedule an exam date online by signing in to your record on the [Montana webpage](#) and clicking on the [Schedule/Reschedule](#) button. **(See instructions under ‘Schedule/Reschedule into a Test Event’.)**

- Example: If you are scheduled to take your exam in a Regional Test Event on a Saturday, Sunday or Monday, you would need to reschedule by close of business (Headmaster’s regular business hours are 8:00AM to 6:00PM Mountain time (MT), Monday-Friday) the Thursday before your scheduled exam.

Scheduled Regional Test Date is on a:	Reschedule the previous:
Monday	The previous Thursday <i>(by 6:00PM MT)</i>
Tuesday	The previous Friday <i>(by 6:00PM MT)</i>
Wednesday	The previous Monday <i>(by 6:00PM MT)</i>
Thursday	The previous Tuesday <i>(by 6:00PM MT)</i>
Friday	The previous Wednesday <i>(by 6:00PM MT)</i>
Saturday	The previous Thursday <i>(by 6:00PM MT)</i>
Sunday	The previous Thursday <i>(by 6:00PM MT)</i>

Note: Reschedules will not be granted less than one (1) full business day prior to a scheduled test date.

Refund of Testing Fees Paid

Requesting a refund of testing fees paid is different than rescheduling a test date. Requesting a refund means that you are not interested in taking the Montana nursing assistant certification exam at all.

SCHEDULED IN A TEST EVENT

- 1) If you are scheduled in a test event, a refund request of testing fees paid must be made by filling out and submitting the [Refund Request Fillable Form 1405](#) on D&SDT- Headmaster’s main webpage at www.hdmaster.com at least **one (1) full business day** prior to your scheduled test event (excluding Saturdays, Sundays and holiday’s). No phone calls will be accepted.
 - Example: If you are scheduled to take your exam on a Saturday, Sunday or Monday, you would need to request a refund by filling out and submitting the Refund Request Fillable Form on the D&SDT-Headmaster main webpage at www.hdmaster.com by close of business (D&SDT-Headmaster is open until 6:00PM Mountain time Monday-Friday) the Thursday before your scheduled exam.
- 2) Refund requests made in the required time frame qualify for a full refund of any testing fees paid minus a \$35 refund fee.
- 3) Refund requests must be made within thirty (30) days of payment of testing fees with Headmaster. Any requests for refunds made beyond the 30 days of payment of testing fees with Headmaster will not be issued.

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NOT SCHEDULED IN A TEST EVENT

- 1) Refund requests must be made within thirty (30) days of payment of testing fees with Headmaster. Any requests for refunds made beyond the 30 days of payment of testing fees with Headmaster will not be issued.
- 2) A refund request of testing fees paid must be made by filling out and submitting the [Refund Request Fillable Form 1405](#) on D&SDT-Headmaster's main webpage at www.hdmaster.com. No phone calls will be accepted.
- 3) Refund requests made in the required time frame qualify for a full refund of any testing fees paid minus a \$35 refund fee.

No Shows

If you do not show up without notifying Headmaster at least one (1) full business day prior to your scheduled testing event, **excluding** Saturdays, Sundays and holidays, OR if you are turned away for arriving late, lack of proper identification, original social security card (or letter from the Social Security office), or any other reason to deem you ineligible to test, you will be considered a **NO SHOW**. You will forfeit all fees paid and must submit a new testing fee to schedule yourself into a new test event.

These fees partially offset Headmaster cost incurred for services requested and resulting work that is performed. If a reschedule or refund request is not received before the one (1) full business day prior to a scheduled test event, excluding Saturdays, Sundays and holidays (see examples under Reschedules and Refund of Testing Fees Paid), a NO SHOW status will exist and you will forfeit your testing fees and must repay the full testing fee to secure a new test event.

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, test fees will be refunded or a free reschedule will be authorized to the remitter of record **with appropriate documentation provided within the required time frame**.

When providing documentation for a No Show exception, it is your responsibility to contact Headmaster to confirm that any documentation faxed, emailed or mailed has been received.

- **Car breakdown or accident:** Headmaster must be contacted within one business day via phone call, fax or email and a tow bill, police 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 time frame you will have to pay as though you were a No Show.
- **Weather or road condition related issue:** Headmaster must be contacted within one business day via phone call, fax or email and a road report, weather report or other appropriate documentation must be submitted within **three (3) business days** of the exam date. If we do not receive proof within the 3-business day time frame you will have to pay as though you were a No Show.

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


Test Results


After you have completed both the Knowledge Test and Skill Test components of the competency exam, your test results will be officially scored and double checked. Official test results will be available online on the Montana webpage by clicking on On-Line Test Results under the Candidate's column after 6:00PM, MT, the business day after your test event. You will enter your Social Security Number or Test ID #, your test date and your birth date.

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

To view your test results, **refer to the screen shots below:**

Go to the [Montana webpage](#) and click on [Online Test Results:](#)



D&S Diversified Technologies LLP
Headmaster LLP

Montana CNA Testing and Certification


Innovative, quality technology solutions
 throughout the United States
 since 1985.

Note: Effective March 1, 2014 - Montana CNA training is valid for 6 months

Next time you're in Helena, stop by and see the Western Region office! Our staff would be happy to give you a tour.

Candidate Forms	Test Observer Forms	On-line Testing	Contacts
Three Month Test Schedule Montana Candidate Handbook Challenge Instructions Testing Application Form 1101 Montana Payment & Scheduling Form 1402 <div style="background-color: #FFD700; padding: 2px; text-align: center; font-weight: bold;">1101 and 1402 Online Fillable, Pay and SUBMIT - No Need to Mail Anything</div> Montana Regional Test Site List ISO Recording Sheet ADA Accommodation Form 1404 Schedule / Re-Schedule On-line TEST RESULTS	Test Observer Application Form 1500 Confidentiality/Nondisclosure Agreement 1501 Test Site Agreement 1502 Test Site Equipment List Form 1503 Test Observer Equipment Check List Form 1504 Test Observer Agreement 1505 Knowledge Test Instructions Skill Test Instructions Actor Affidavit 1511 Actor Training Manual Feedback Form Recording Forms	WebTest @ Instructions WebTest @ On-line Testing <div style="background-color: #FF0000; color: white; text-align: center; font-weight: bold; padding: 2px;">Select the above link to...</div> <ul style="list-style-type: none"> register candidates for the exam complete the exam as a candidate score a skill exam as an administrator submit an exam package for scoring request a paper exam <div style="background-color: #FF0000; color: white; text-align: center; font-weight: bold; padding: 2px;">Please note below!!!</div> <ul style="list-style-type: none"> We do not have test scores available before 6:00PM On THE DAY they are received in our office. You may check your results on-line after 6:00PM. <div style="background-color: #FF0000; color: white; text-align: center; font-weight: bold; padding: 2px;">Fluid Intake Cups</div> <p style="font-size: x-small;">Please see the Fluid Intake Cup order form on our main page under Nurse Aide.</p>	<p style="font-size: x-small;">Please feel free to contact us if you have questions, concerns, or suggestions about our service. We value the feedback we receive from everyone involved in the Montana NA training, testing, and certification process.</p> <div style="background-color: #000080; color: white; text-align: center; font-weight: bold; padding: 2px;">Headmaster</div> <p style="font-size: small;">Danielle Mock Program Manager PO Box 6609 Helena, MT 59604 Phone: (800) 383-8664 Fax: (406) 442-3357 hdmaster@hdmaster.com</p>
<div style="font-size: x-small;">You will need a reader to view and print most of these documents. You may download it here:</div> <div style="text-align: center; margin-top: 5px;">  </div>			
<div style="background-color: #000080; color: white; text-align: center; font-weight: bold; padding: 2px;">Visitors</div>			
<div style="background-color: #FF0000; color: white; text-align: center; font-weight: bold; padding: 2px;">On Line Reports</div> <p style="font-size: x-small; text-align: center;">On-line Training Program Reports</p> <p style="font-size: x-small;">Select above for on-line training program.</p> <ul style="list-style-type: none"> Skill Exam Details Written Exam Details Pass/Fail Reports 			

Directions

To receive your online score report you must complete the fields as indicated below using the **required formats**. If you are certain that you have completed the fields correctly and you do not receive a score report, it is likely that your tests have not been scored. Electronic tests require 1 day for official scoring, while paper tests require 1 to 4 days depending on mail service. If you do not receive a score report, please return at a later date and submit your request. **Please Note:** Results are not available until after 6:00PM on the day they are scored.

Required Login Fields

Please enter your **social security #** or **test ID**

Please enter the **test date**

Please enter your **birthdate**

Submit Score Report Request

- 1) Type in your social security number
- 2) Type in your test date
- 3) Type in your birth date
- 4) Click on Submit Score Report Request

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Test Attempts

You have **three (3) attempts** to pass the knowledge and skill test portions of the exam within six (6) months from your date of nursing assistant training program completion. After six months, your training expires and you are no longer eligible to test based on this training cycle.

Montana Nurse Aide Registry Certification

After you have successfully passed both the Knowledge Test and Skill Test components of the nursing assistant exam, your test results will be sent electronically to the Montana Department of Health and Human Services (DPHHS) by Headmaster.

To receive your certification, you will need to fill out and submit the [Montana DPHHS Certified Nurse Aide Application](#) available on the Montana DPHHS website at:

<https://mt-reports.com/portal/CertificateRequest.aspx?LicenseTypeID=3755>

Note: A link can also be found on Headmaster's [Montana webpage](#) at www.hdmaster.com, click on Montana, then on Montana DPHHS Certified Nurse Aide Application.

Certification is issued by the Montana Department of Health and Human Services (DPHH) after you have completed all requirements. You may check their website at www.cna.mt.gov for your certification number approximately 10-14 days after you successfully submit your Certified Nurse Aide Application on the Montana DPHHS website (see link above).

Retaking the Nursing Assistant Test

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

You can schedule a test or re-test online by signing in to your WebETest© record at the [Montana webpage](#). (See instructions under 'Schedule/Reschedule into a Test Event'.)

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

If you need assistance scheduling your re-test, please call Headmaster at (800)393-8664 during regular business hours 8:00AM to 6:00PM Monday through Friday, MT, excluding holidays. We are able to assist you in scheduling a test or re-test date as long as your fees have been paid first.

Note: Headmaster does not issue certification. (See instructions under 'Montana Nurse Aide Registry Certification'.)

CHALLENGE CANDIDATES

If you are a challenge candidate who has challenged the state exam and you fail any portion of the exam, you will not be allowed to retest until you have completed a MT DPHHS approved training program. A list of approved training programs is available on the MT DPHHS website, www.cna.mt.gov.

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Test Review Requests

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

Note: Please call Headmaster at (800)393-8664 during regular business hours 8:00AM to 6:00PM Monday through Friday, MT, excluding holidays, and discuss the test outcome you are questioning before committing to sending the \$25 test review request deposit. Many times, once you have further details about the scoring of your test, you will understand the scoring process and learn how you can better prepare yourself for subsequent exam attempts. If, after discussion with Headmaster staff, you still have a concern with your testing process that affected the outcome of your exam, you may submit a Test Review Request. If, after investigation, the finding of the review is in your favor, you will not be charged the \$25 test review deposit.

Since one qualification for certification as a nursing assistant in Montana is demonstration by examination of minimum nursing assistant knowledge and skills, the likely outcome of your review will determine who pays for your re-test. If the results of the review are in your favor, Headmaster will pay for your re-test fee and refund your review fee. 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. Headmaster will re-check the scoring of your test and may contact you and/or the RN Test Observer for any additional recollection of your test(s). After a candidate reaches the age of 18, Headmaster will only discuss test results or test disputes with the candidate or the candidate's training program. Headmaster will not review test results or disputes with family members or anyone else on behalf of the candidate once the candidate is 18 years of age. Headmaster will complete your review request within 10 business days of the receipt of your timely review request and will email the review results to your email address of record.

The Knowledge/Oral Test

The knowledge/oral exam is offered in English only.

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

The Knowledge Test Proctor will hand out materials and give instructions for taking the Knowledge Test. You will have a maximum of ninety (90) minutes to complete the 72 question Knowledge Test. You will be told when fifteen (15) minutes remain. You may not ask questions about the content of the Knowledge Test (such as "What does this question mean?") For paper tests, fill in only one (1) oval on the answer sheet for each question. Do not mark in the testing booklet. Marks in the test booklet will

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not be accepted as answers. Your answers must appear on the separate scan form answer sheet. **You must have a score of 75% or better to pass the knowledge portion of the exam.**

- For paper Knowledge tests, you must bring several sharpened Number 2 pencils with erasers. Do not bring or use ink pens.

Electronic testing using WebETest® internet connected computers is utilized at the majority of the test sites in Montana. The knowledge test portion of your exam will be displayed on a computer screen for you to read and key/tap or click in your answers.

An audio (Oral) version of the knowledge test is available in English and is only offered electronically. However, you must request an Oral test before you submit your testing fee payment. For the electronic Oral, questions are read to you, in a neutral manner, and can be heard through headphones/ear buds plugged into the computer and have control buttons on the computer screen (play, rewind, pause etc.).

If you wish to use a basic calculator for any portion of the knowledge exam, you may request one from the test proctor. You may not use a cell phone or computer calculator.

All test materials must be left in the testing room. Anyone who takes or tries to take materials, notes or information from the testing room is subject to prosecution and will be reported to their training program and the Montana Department of Health and Human Services.

Knowledge Test Content

The Knowledge Test consists of 72 multiple-choice questions. Questions are selected from subject areas based on the MT DPHHS approved Montana test plan and include questions from all the required categories as defined in OBRA regulations. The subject areas are as follows:

Knowledge Test Subject Areas:

Basic Nursing Skills	11
Care Impaired	5
Communication	6
Data Collection	3
Disease Process	5
Infection Control	11
Mental Health	4
Older Adult Growth & Development	2
Personal Care	7
Resident Rights	5
Role and Responsibility	5
Safety	8

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Knowledge Practice Test

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

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

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

ANSWERS: 1-C | 2-A | 3-D

The Manual Skill Test

- The purpose of the Skill Test is to evaluate your performance when demonstrating Montana approved nursing assistant skill tasks. You will find a complete list of skill tasks in this handbook.
- You will be asked to present your ID again that you showed the RN Test Observer at sign-in.
- Be sure you understand all instructions you read while in the waiting area before you begin your skill task demonstrations. You may not ask questions once the Skill Test begins and the timer starts. Once the Skill Test begins, the RN Test Observer may not answer questions.
- Each of your randomly selected **three (3) or four (4) tasks (effective 8-1-2022)** will have scenarios associated with them. The scenarios will be read to you by the RN Test Observer immediately before you are asked to do each task.
- You will be allowed a maximum of **thirty-five (35) minutes** to complete your tasks. After 20 minutes have elapsed, you will be alerted that fifteen (15) minutes remain.

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- Listen carefully to all instructions given by the RN Test Observer. You may request to have any of the scenarios repeated **at any time** during your Skill Test up until you run out of time or tell the RN Test Observer that you are finished with your skill task demonstrations.
- You must correctly perform all of the **key (critical)** steps and 80% of all non-key steps on each task assigned in order to pass the Skill Test.
- If you believe you made a mistake while performing a task, say so. You will need to demonstrate the step or steps on the task you believe you performed incorrectly for the correction to be noted for the step.
- You may repeat or correct **any step** or **steps** on any task you believe you have performed incorrectly at **any time** during your allotted thirty-five minutes or until you tell the RN Test Observer you are finished with the Skill Test.
- At any time during any task, you may direct the RN Test Observer to move anywhere needed to assist in providing safety for the resident.
- The skill task steps are generally 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. With the exception of specific steps within some tasks that must be verbalized, all other steps that are only verbalized WILL NOT COUNT.**

Skill Test Recording Form

The RN test observer will provide a recording form similar to the one displayed below if your skill test includes a skill scenario which requires recording a count or measurement. You will be asked to sign your recording form during the equipment/supplies demonstration before you start your skill test.

Recording Form:

CANDIDATE'S NAME: _____	
PLEASE PRINT	
TEMPERATURE: _____	PULSE: _____ RESPIRATIONS: _____
BLOOD PRESSURE: _____ / _____	
URINARY OUTPUT: _____ ml	WEIGHT: _____ lbs.
GLASS 1: _____ GLASS 2: _____ GLASS 3: _____ TOTAL FLUID INTAKE: _____ ml	<u>Feeding Task</u> FOOD INTAKE: _____ % FLUID INTAKE: _____ ml
CANDIDATE'S SIGNATURE: _____	

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Skill Test Tasks

NOTE: Updates have been made to the skill tasks to better align with current practice and will be effective for testing starting on August 1, 2022.

EFFECTIVE 8-1-2022: The following tasks will no longer be tested:

- Abdominal Thrust
- Applying an Adult Brief – stand alone
- Care of Hair
- Emptying a Urinary Drainage Bag – stand alone
- Gown and Gloves – stand alone
- Hand Washing – stand alone
- Perineal Care of an Uncircumcised Male – stand alone

Gown and Gloves and Emptying a Urinary Drainage Bag will be combined and include hand washing.

Perineal Care of an Uncircumcised Male and Applying an Adult Brief will be combined and include hand washing.

Bedpan and Output and Perineal Care of a Female Resident will include hand washing.

EFFECTIVE 8-1-2022: You will be assigned one of the following mandatory tasks as your first task:

- Assisting Resident with a Bedpan and Recording Output with Hand Washing
- Donning an Isolation Gown and Gloves, Emptying a Urinary Drainage Bag and Recording Output with Hand Washing
- Perineal Care of a Female Resident with Hand Washing
- Perineal Care of an Uncircumcised Male Resident and Applying an Adult Brief with Hand Washing

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

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

Skill Tasks Listing

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

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

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If you fail the Skill Test, you will have to take another Skill test with three or four tasks, one of which will be one of the previously failed tasks. Tasks included on your Skill Test are randomly chosen so that every Skill Test is comparable in difficulty and average length of time to complete. The RN Test Observer will observe your demonstrations of your skill tasks and record what she/he sees you do. Headmaster scoring teams will officially score and double check your test.

Note: The skill scenario steps included in this handbook are offered as guidelines to help prepare candidates for the Montana nursing assistant 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.

Ambulating Resident with a Cane or Walker

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Explain procedure to the resident.
3. Position bed so resident's feet will be flat on the floor when sitting on the edge of the bed.
4. Ensure the resident's safety by locking the wheelchair brakes.
5. Bring resident to a sitting position.
6. Assist resident in putting on shoes or non-skid slippers.
7. Position cane or walker correctly.
8. Assist resident to stand using correct body mechanics.
9. Ensure resident stabilizes cane/walker.
10. Position self behind and slightly to side of resident.
11. Safely ambulate resident at least 10 steps to the wheelchair.
12. Assist resident to pivot/back up to the wheelchair.
13. Assist resident to sit in the wheelchair in a controlled manner that ensures safety.
14. Leave resident in a position of comfort and safety.
15. Maintain respectful, courteous interpersonal interactions at all times.
16. Place resident within easy reach of the call light or signaling device.
17. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Ambulating Resident with a Gait Belt

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Explain procedure to the resident.
3. Obtain gait belt.
4. Position bed so resident's feet will be flat on the floor when sitting on the edge of the bed.
5. Ensure the resident's safety by locking the wheelchair brakes.
6. Bring resident to a sitting position.
7. Assist resident to put on shoes or non-skid slippers.
8. Place gait belt around resident's waist.

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9. Tighten gait belt.
10. Check gait belt by slipping fingers between gait belt and resident.
11. Stand in front of and face the resident.
12. Grasp the gait belt on each side of the resident with an underhand grip.
13. Use your legs to stabilize resident.
14. Bring resident to standing position, using correct body mechanics.
15. With one hand grasping gait belt and the other stabilizing resident by holding forearm, shoulder, or using other appropriate method to stabilize, ambulate the resident to the wheelchair.
16. Safely ambulate the resident at least 10 steps to the wheelchair.
17. Assist resident to pivot/back up to the wheelchair.
18. Assist resident to sit in the wheelchair in a controlled manner that ensures safety.
19. Remove gait belt.
20. Leave resident in position of comfort and safety.
21. Maintain respectful, courteous interpersonal interactions at all times.
22. Place resident within easy reach of the call light or signaling device.
23. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Applying an Anti-embolic Stocking on One of Resident's Legs

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Explain procedure to the resident.
3. Provide for resident's privacy by exposing only one leg.
4. Roll, gather, or turn stocking down to heel.
5. Gently place stocking over the resident's toes, foot, and heel.
6. Gently roll or pull stocking up the resident's leg.
7. Check toes for possible pressure from stocking and adjust as needed.
8. Leave resident with a stocking that is smooth and wrinkle free.
9. Leave resident with a stocking that is properly placed.
10. Cover the resident's exposed leg.
11. Maintain respectful, courteous interpersonal interactions at all times.
12. Leave call light or signaling device within easy reach of the resident.
13. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Assisting a Dependent Resident with Eating

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

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3. Look at diet card to check that the resident has received the correct tray.
4. Protect resident's clothing from soiling by using napkin, clothing protector, or towel.
5. Wash resident's hands **before** feeding.
6. Dry resident's hands **before** feeding.
7. Sit down facing the resident while feeding the resident or assume other posture so you are at eye level with the resident.
8. Describe the foods being offered to the resident.
9. Offer the resident fluid frequently.
10. Offer the resident small amounts of food at a reasonable rate.
11. Allow resident time to chew and swallow.
12. Wipe resident's hands and face during meal as needed.
13. Leave resident clean and in a position of comfort.
14. Place soiled linen in linen hamper.
15. Record intake as a percentage of total solid food eaten on the previously signed recording form.
16. Candidate's recorded calculation must be within 25 percentage points of the RN Test Observer's recording.
17. Record fluid consumed in ml's on the previously signed recording form.
18. Candidate's recorded calculation is within 40 ml's of the RN Test Observer's recording.
19. Maintain respectful, courteous interpersonal interactions at all times.
20. Leave call light or signaling device within easy reach of the resident.
21. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Assisting a Resident with a Bedpan and Recording Output with Hand Washing

(One of the possible first mandatory tasks)

1. Knock on door.
2. Introduce self to the resident.
3. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
4. Explain procedure to the resident.
5. Provide for resident's privacy.
6. Adjusts bed to a comfortable working height.
7. Position resident on bedpan correctly.
8. **After** placing bedpan, raise head of bed to a comfortable level.
9. Leave tissue within reach of resident.
10. Leave call light or signaling device within easy reach of the resident.
11. Move to an area of the room away from the resident, to provide privacy for resident.
12. When the RN Test Observer indicates, return to resident.
13. Put on gloves.
14. Lower the head of the bed.
15. Gently remove bedpan.
16. Hold the bedpan while liquid (fake urine) is poured into the bedpan by the RN Test Observer.

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17. Pour liquid (fake urine) from bedpan into a graduate.
18. Place graduate on a flat surface.
19. With graduate at eye level, measure output.
20. Lower bed.
21. Empty, rinse, dry and return equipment to storage.
22. Remove gloves, turning inside out as they are removed.
23. Dispose gloves in trash container.
24. Perform hand hygiene for resident/assist resident to perform hand hygiene.
25. Record urine output on the previously signed recording form.
26. Candidate's recorded output measurement is within 30 ml's of RN Test Observer's pre-measured amount.
27. Wash hands: Turn on water.
28. Thoroughly wet hands.
29. Apply soap to hands.
30. Rub hands together using friction with soap.
31. Rub hands together using friction for at least twenty seconds with soap.
32. Using friction, rub interlaced fingers together while pointing downward with soap.
33. Wash all surfaces of hands with soap.
34. Wash wrists with soap.
35. Rinse hands thoroughly under running water with fingers pointed downward.
36. Rinse wrists thoroughly under running water with fingers pointed downward.
37. Dry hands on clean paper towel(s).
38. Discard paper towel(s) to trash container as used.
39. Turn off faucet with a clean, dry paper towel.
40. Discard paper towel(s) to trash container as used.
41. Do not re-contaminate hands at any time by touching the faucet or sink during/after the hand washing procedure.
42. Leave call light or signaling device within easy reach of the resident.
43. Maintain respectful, courteous interpersonal interactions at all times.

Denture Care of a Resident's Dentures

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Explain procedure to the resident.
3. Provide for resident's privacy.
4. Put on gloves.
5. Line sink with a washcloth or towel. *No paper towels allowed.*
6. Removes dentures from denture cup.
7. Handle dentures carefully to avoid damage.
8. Rinse the denture cup.
9. Apply denture cleanser/cream to a denture brush.
10. Thoroughly brush the inner surfaces of the denture.
11. Thoroughly brush the outer surfaces of the denture.

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12. Thoroughly brush the chewing surfaces of the denture.
13. Thoroughly brush the upper/lower surface of the denture.
14. Rinse dentures using clean cool water.
15. Place dentures in rinsed denture cup.
16. Add cool clean water to denture cup.
17. Empty, rinse, dry and return equipment to storage.
18. Place soiled linen in linen hamper.
19. Remove gloves, turning inside out as they are removed.
20. Dispose gloves in trash container.
21. Maintain respectful, courteous interpersonal interactions at all times.
22. Leave call light or signaling device within easy reach of the resident.
23. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hand together until hands are completely dry.

Donning a Gown and Gloves- Emptying Resident's Urinary Drainage Bag and Recording Output – Removing Gown and Gloves with Hand Washing

(One of the possible first mandatory tasks)

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Face the back opening of the gown.
3. Unfold the gown.
4. Place arms through each sleeve.
5. Secure the neck opening.
6. Secure the gown at the waist, making sure that the back flaps cover the back as completely as possible.
7. Put on gloves
8. Overlap the gloves with the gown sleeves at the wrist.
9. Knock on door.
10. Introduce self to the resident.
11. Explain procedure to the resident.
12. Provide for resident's privacy.
13. Place a barrier on the floor under the drainage bag.
14. Place the graduate on the previously placed barrier.
15. Ensure the bag is below the bladder.
16. Ensure the drainage tube is not kinked. *(It helps if you verbalize while inspecting for kinks, that way the RN Test Observer can be sure that you have checked for kinks.)*
17. Open the drain to allow the urine to flow into the graduate.
18. Allow the urine to flow into the graduate until bag is empty.
19. Avoid touching the tip of the tubing to the graduate.
20. Clamp tubing.
21. Wipe the drain with an antiseptic wipe.
22. Insert a plug or protective cap into tubing or into holder.

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23. Place graduate on flat surface.
24. Measure output at eye level.
25. Empty, rinse, dry and return equipment to storage.
26. Record output reading on the previously signed recording form.
27. Candidate's measurement is within 10 ml's of the RN Test Observer's pre-measured amount.
28. Maintain respectful, courteous interpersonal interactions at all times.
29. Leave call light or signaling device within easy reach of the resident.
30. Remove gloves turning inside out and folding one glove inside the other **-or-** pull/pop gown from neck always keeping gloved hands on the outside (contaminated) portion of the gown.
31. Do not touch outside of gloves with bare hand at any time **-or-** work gown down the arms from the neck and roll gown inside out as it is removed.
32. Dispose of the gloves, without contaminating self, in appropriate container, **-or-** peel gloves off keeping them inside out and rolled up inside the gown.
33. Unfastens gown at the neck with bare hands, if not using alternate method of removal.
34. Unfastens gown at the waist with bare hands, if not using alternate method of removal.
35. Removes gown by folding soiled area to soiled area with either method of removal.
36. Disposes of gown in an appropriate container.
37. Wash hands: Turn on water.
38. Thoroughly wet hands.
39. Apply soap to hands.
40. Rub hands together using friction with soap.
41. Rub hands together using friction for at least twenty seconds with soap.
42. Using friction, rub interlaced fingers together while pointing downward with soap.
43. Wash all surfaces of hands with soap.
44. Wash wrists with soap.
45. Rinse hands thoroughly under running water with fingers pointed downward.
46. Rinse wrists thoroughly under running water with fingers pointed downward.
47. Dry hands on clean paper towel(s).
48. Discard paper towel(s) to trash container as used.
49. Turn off faucet with a clean, dry paper towel.
50. Discard paper towel(s) to trash container as used.
51. Do not re-contaminate hands at any time by touching the faucet or sink during/after the hand washing procedure.

Dressing a Resident with an Affected (Weak) Side

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry
2. Explain procedure to the resident.
3. Provide for resident's privacy.
4. Remove resident's gown while providing for the resident's privacy by appropriately keeping resident covered at all times.
5. Remove gown from unaffected (strong) side first.
6. Place soiled gown in linen hamper.



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7. Starting from the affected (weak) side first, dress the resident in a shirt or blouse by inserting hand through the sleeve of the shirt or blouse and grasping the hand of the resident.
8. Starting from the affected (weak) side first, assist the resident to raise her/his buttocks or rock resident from side-to-side and draw the pants over the buttocks and up to the resident's waist.
9. When putting on the resident's socks, draw the socks up the resident's foot until they are smooth.
10. Leave the resident in a position of comfort.
11. Leave the resident properly dressed.
12. Maintain respectful, courteous interpersonal interactions at all times.
13. Leave call light or signaling device within easy reach of the resident.
14. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Foot Care (One Foot) for a Resident

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Explain procedure to the resident.
3. Fill basin with comfortably warm water.
4. Remove resident's sock from one foot.
5. Immerse one foot in comfortably warm water for 10 to 20 minutes.
(After beginning to soak the foot, verbalize the 10-20 minutes soaking time to the RN Test Observer.)
6. Remove the resident's foot from the water.
7. Use water and soapy washcloth.
8. Wash resident's entire foot.
9. Wash between resident's toes.
10. Rinse resident's entire foot.
11. Rinse between resident's toes.
12. Dry resident's foot thoroughly, being careful to dry between toes.
13. Warm lotion by rubbing it between hands.
14. Massage lotion over resident's entire foot.
15. If there is any excess lotion on the resident's foot, wipe with a towel/washcloth.
16. Replace resident's sock on foot.
17. Place soiled linen in linen hamper.
18. Empty, rinse, dry and return equipment to storage.
19. Leave resident in proper alignment in the chair.
20. Maintain respectful, courteous interpersonal interactions at all times.
21. Leave call light or signaling device within easy reach of the resident.
22. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

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Making a Resident's Occupied Bed

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Gather linen.
3. Transport linen away from the body.
4. Place clean linen on a clean surface. (*Bedside stand, chair, on a barrier.*)
5. Explain procedure to the resident.
6. Provide for resident's privacy.
7. Adjust bed to a comfortable working height.
8. Keep resident covered at all times with the sheet.
9. Remove top linen *except for the sheet*.
10. Gently remove the pillow from under resident's head.
11. Ask the RN Test Observer to stand on the opposite side of bed to provide safety when turning resident toward side of bed.
12. Roll or fan fold soiled linen, soiled side inside, to the center of the bed.
13. Place clean bottom sheet along the center of the bed and roll or fan fold linen against resident's back and unfold remaining half.
14. Pull corners tightly in place and tuck sheet securely under the mattress.
15. Ask the RN Test Observer to move to the opposite side of the bed to provide safety.
16. Assist the resident to roll over the bottom linen, toward the RN Test Observer, preventing trauma and avoidable pain to resident.
17. Remove soiled linen without shaking, and place in linen hamper.
 - a) *Avoid placing dirty linen on the overbed table.*
 - b) *Avoid touching linen to uniform.*
18. Pull through and smooth out the clean bottom linen.
19. Place clean top linen over covered resident.
20. Remove soiled linen keeping resident unexposed at all times.
21. Tuck in top linen.
22. Make toe pleat.
23. Apply a clean pillowcase, with zippers and/or tags to inside.
24. Gently lift resident's head to replace the pillow.
25. Lower bed.
26. Leave resident in position of comfort and safety in a neatly made bed.
27. Maintain respectful, courteous interpersonal interactions at all times.
28. Leave call light or signaling device within easy reach of the resident.
29. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

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Measure and Record Resident's Oral Fluid Intake

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Explain procedure to the resident.
3. Observe dinner tray.
4. Use paper, pencil, mental computation and/or RN Test Observer supplied basic calculator to calculate the grand total of ml's consumed from three different glasses.
5. Record the sum total ml's of fluid consumed on the previously signed recording form.
6. Candidate's calculated total and RN Test Observer's total are within required range.
7. Maintain respectful, courteous interpersonal interactions at all times.
8. Leave call light or signaling device within easy reach of the resident.
9. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Mouth Care (Brushing Resident's Teeth)

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Explain procedure to the resident.
3. Provide for resident's privacy.
4. Drape the resident's chest with a towel to prevent soiling.
5. Put on gloves.
6. Wet toothbrush.
7. Apply toothpaste to toothbrush.
8. Gently brush the inner surfaces of the resident's upper and lower teeth.
9. Gently brush the outer surfaces of the resident's upper and lower teeth.
10. Gently brush the chewing surfaces of the resident's upper and lower teeth.
11. Gently brush the resident's tongue.
12. Assist resident in rinsing mouth.
13. Wipe resident's mouth.
14. Remove soiled linen.
15. Place soiled linen in linen hamper.
16. Empty container. *(Container may be an emesis basin or a disposable cup.)*
17. Rinse emesis basin, if used, or discard disposable items in trash container.
18. Dry emesis basin, if used.
19. Rinse toothbrush.
20. Return equipment to storage.
21. Remove gloves, turning inside out as they are removed.
22. Dispose gloves in trash container.

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23. Perform hand hygiene.

- a. Cover all surfaces of hands with hand sanitizer.
- b. Rub hands together until hands are completely dry.

24. Maintain respectful, courteous interpersonal interactions at all times.

25. Leave call light or signaling device within easy reach of the resident.

Mouthcare of a Comatose Resident

1. Perform hand hygiene.

- a. Cover all surfaces of hands with hand sanitizer.
- b. Rub hands together until hands are completely dry.

2. Provide for resident's privacy.

3. Position resident in a side-lying position to avoid choking or aspiration.

4. Drape chest/bed as needed to protect from soiling.

5. Put on gloves.

6. Use toothettes and prepared mouthwash cleaning solution or water.

7. Squeeze excess water from toothette, if needed.

8. Gently and thoroughly clean the inner surfaces of the resident's upper and lower teeth.

9. Gently and thoroughly clean the outer surfaces of the resident's upper and lower teeth.

10. Gently and thoroughly clean the chewing surfaces of the resident's upper and lower teeth.

11. Gently and thoroughly clean the resident's gums.

12. Gently and thoroughly clean the resident's tongue and roof (palate) of the mouth.

13. Dip a new toothette into clean water.

14. Rinse the resident's mouth with water dipped toothette.

15. Wipe resident's mouth, if needed.

16. Return resident to a position of comfort and safety.

17. Empty, rinse, dry and return equipment to storage, if any used.

18. Discard disposable items in trash container.

19. Place soiled linens in linen hamper.

20. Remove gloves, turning inside out as they are removed.

21. Dispose gloves in trash container.

22. Perform hand hygiene.

- a. Cover all surfaces of hands with hand sanitizer.
- b. Rub hands together until hands are completely dry.

23. Maintain respectful, courteous interpersonal interactions at all times.

24. Leave call light or signaling device within easy reach of the resident.

Nail Care (One Hand) for a Resident

1. Perform hand hygiene.

- a. Cover all surfaces of hands with hand sanitizer.
- b. Rub hands together until hands are completely dry.

2. Explain procedure to the resident.

3. Provide for resident's privacy.

4. Ensure resident's safety by locking wheelchair brakes.

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5. Immerse resident's nails of one hand in comfortably warm water and soaks for at least five (5) minutes.
(After beginning to soak the nails, verbalize at least five minutes soaking time to the RN Test Observer.)
6. Gently clean under the resident's nails of one hand with file, orange stick or nail brush.
7. Dry resident's hand thoroughly.
8. Specifically dry between the resident's fingers.
9. Gently push cuticle back with washcloth/towel or orange stick.
10. Verbalize technique used to cut resident's nails.
11. Verbalize technique used to file resident's nails.
12. Place soiled linen in linen hamper.
13. Empty, rinse, dry and return equipment to storage.
14. Maintain respectful, courteous interpersonal interactions at all times.
15. Places resident within easy reach of the call light or signaling device.
16. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Partial Bed Bath for a Resident: Face, One Underarm and Hand

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Explain procedure to the resident.
3. Provide for resident's privacy.
4. Fill basin with comfortably warm water.
5. Adjust bed to a comfortable working height.
6. Cover resident with a bath blanket.
7. Remove top bed linens by fan-folding to bottom of bed or placing aside.
8. Remove resident's gown.
9. Place soiled gown in linen hamper.
10. Wash resident's face with water and **without soap**.
11. Dry resident's face.
12. Place a towel under one of resident's arms.
13. Wash one hand with water and soap.
14. Rinse hand.
15. Dry hand.
16. Wash underarm with water and soap.
17. Rinse underarm.
18. Dry underarm.
19. Place soiled linen in linen hamper.
20. Put a clean gown on the resident.
21. Empty, rinse, dry and return equipment to storage.
22. Lowers bed.

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

Passing Fresh Water to a Resident

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Assemble equipment as required:
 - a) ice (marbles used as simulated ice)
 - b) scoop
3. Explain procedure to the resident.
4. Obtain water pitcher from resident's room.
5. Empty water pitcher and verbalize cleaning the water pitcher.
6. Scoop ice (marbles) into water pitcher.
7. Properly use ice scoop **-or-** uses ice dispenser without contaminating water or water pitcher.
 - a) Does not allow ice to touch hand and fall back into pitcher or scoop to touch pitcher.
8. Properly store ice scoop, if scoop was used.
 - a) Scoop placed in appropriate receptacle after each use.
9. Add water to pitcher.
10. Return pitcher to resident's bedside stand/table.
11. Pours resident a fresh glass of water.
12. Maintain respectful, courteous interpersonal interactions at all times.
13. Leave call light or signaling device within easy reach of the resident.
14. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Perineal Care for a Female Resident with Hand Washing

(One of the possible first mandatory tasks)

1. Knock on door.
2. Introduce self to the resident.
3. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
4. Explain procedure to the resident (manikin).
5. Provide for resident's privacy.
6. Fill basin with comfortably warm water.
7. Adjust bed to a comfortable working height.
8. Put on gloves.
9. Place a waterproof pad under the resident's buttocks.
10. Expose perineum only.

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11. Separate labia. (*It is helpful if you verbalize separating labia while actually demonstrating separating labia.*)
12. Use water, soap and washcloth **-or-** disposable wipe(s) for cleaning perineum.
13. Clean one side of labia from top to bottom.
14. Use a clean portion of a washcloth **-or-** disposable wipe(s) with each stroke.
15. Clean other side of labia from top to bottom.
16. Use a clean portion of a washcloth **-or-** disposable wipe(s) with each stroke.
17. Pat the perineum dry with a towel/washcloth.
18. Re-cover the exposed area with the bath blanket.
19. Turn resident (manikin) to turn onto her side away from self.
20. Use water, soap and clean washcloth **-or-** disposable wipe(s) for cleaning the rectal area.
21. Clean area from vagina to rectal area with single strokes.
22. Repeat this step as necessary using a different part of the washcloth **-or-** disposable wipe(s) for each stroke. (*May use more than one washcloth or disposable wipe.*)
23. Pat area dry with a towel/washcloth from vagina to anus.
24. Remove waterproof pad from under resident's buttocks.
25. Place soiled linen in linen hamper.
26. Leave resident in a position of comfort in good body alignment.
27. Lower bed, if it was raised.
28. Empty, rinse, dry and return equipment to storage.
29. Remove gloves, turning inside out as they are removed.
30. Dispose of gloves in trash container.
31. Wash hands: Turn on water.
32. Thoroughly wet hands.
33. Apply soap to hands.
34. Rub hands together using friction with soap.
35. Rub hands together using friction for at least twenty seconds with soap.
36. Using friction, rub interlaced fingers together while pointing downward with soap.
37. Wash all surfaces of hands with soap.
38. Wash wrists with soap.
39. Rinse hands thoroughly under running water with fingers pointed downward.
40. Rinse wrists thoroughly under running water with fingers pointed downward.
41. Dry hands on clean paper towel(s).
42. Discard paper towel(s) to trash container as used.
43. Turn off faucet with a clean, dry paper towel.
44. Discard paper towel(s) to trash container as used.
45. Do not re-contaminate hands at any time by touching the faucet or sink during/after the hand washing procedure.
46. Leave call light or signaling device within easy reach of the resident.
47. Maintain respectful, courteous interpersonal interactions at all times.

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Perineal Care for an Uncircumcised Male – Applying an Adult Brief with Hand Washing

(One of the possible first mandatory tasks)

1. Knock on door.
2. Introduce self to the resident.
3. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
4. Explain procedure to the resident (manikin).
5. Choose correct brief and size per facility instructions.
6. Provide for resident's privacy.
7. Fill basin with comfortably warm water.
8. Adjust bed to a comfortable working height.
9. Put on gloves.
10. Place waterproof pad under resident's buttocks.
11. Gently grasp penis.
12. Use water, soap and a washcloth.
13. Demonstrate retracting of the foreskin.
14. Clean tip of penis using single strokes starting at the urethral opening and working outward with a circular motion with each stroke.
15. Use a clean portion of the washcloth with each stroke.
16. Clean the shaft of the penis using single strokes with firm downward motion from the tip to the base of the penis.
17. Clean the shaft of the penis using a clean portion of the washcloth with each stroke.
18. Clean the scrotum using a clean portion of the washcloth with each stroke.
19. Pat the penis and scrotum dry with a towel/washcloth.
20. Demonstrate replacement of the foreskin.
21. Re-cover the exposed area with the bath blanket.
22. Turn resident (manikin) onto his side away from self.
23. Use a clean washcloth with soap and water to clean the rectal area.
24. Clean away from the scrotum to the rectal area with single strokes.
25. Use a clean portion of the washcloth for each stroke. *(May use more than one washcloth.)*
26. Pat area dry with a towel/washcloth from scrotum to anus.
27. Remove waterproof pad from under resident's buttocks.
28. Place soiled linens in linen hamper.
29. Place brief under resident's buttocks with the top of the absorbent pad aligned just above the resident's buttocks crease.
30. Grasp and stretch the leg portion of front panel to extend elastic for groin placement.
31. Roll ruffles away from groin.
32. Snuggly place bottom tabs angled towards abdomen on both sides.
33. Place top tabs on each side angled toward bottom tabs.
34. Leave resident in a position of comfort in good alignment.
35. Empty, rinse, dry and return equipment to storage.
36. Remove gloves, turning inside out as they are removed.
37. Dispose of gloves in trash container.

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38. Wash hands: Turn on water.
39. Thoroughly wet hands.
40. Apply soap to hands.
41. Rub hands together using friction with soap.
42. Rub hands together using friction for at least twenty seconds with soap.
43. Using friction, rub interlaced fingers together while pointing downward with soap.
44. Wash all surfaces of hands with soap.
45. Wash wrists with soap.
46. Rinse hands thoroughly under running water with fingers pointed downward.
47. Rinse wrists thoroughly under running water with fingers pointed downward.
48. Dry hands on clean paper towel(s).
49. Discard paper towel(s) to trash container as used.
50. Turn off faucet with a clean, dry paper towel.
51. Discard paper towel(s) to trash container as used.
52. Do not re-contaminate hands at any time by touching the faucet or sink during/after the hand washing procedure.
53. Leave call light or signaling device within easy reach of the resident.
54. Maintain respectful, courteous interpersonal interactions at all times.
55. Verbalize that the resident's brief should be checked every two hours.
56. Verbalize that brief is to be changed PRN and that facility toileting and bowel and bladder protocol will be followed.

Position Resident on their Side in Bed

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Explain the procedure to the resident and how the resident may help.
3. Provide for resident's privacy.
4. Position bed flat.
5. Adjust bed to a comfortable working height.
6. Ensure resident safety by locking bed brakes.
7. Use a turn sheet and weight shift technique **-or-** move/pull torso of the resident, with proper body mechanics, toward self.
8. Use a turn sheet and weight shift technique **-or-** move/pull resident's hips, with proper body mechanics, toward self.
9. Use a turn sheet and weight shift technique **-or-** move/pull resident's legs, with proper body mechanics, toward self.
10. Cross resident's legs.
11. Assist/turn resident on the correct side read to the candidate in the scenario, either by turning the resident toward the RN Test Observer from the working side of the bed **-or-** by moving to the opposite side of the bed and turning the resident on her/his side toward yourself.
12. Support device is placed under the resident's head.
13. Support device is placed under the resident's up side arm.
14. Support device is placed behind the resident's back.

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15. Support device is placed between the resident's knees.
16. Lower bed.
17. Maintain respectful, courteous interpersonal interactions at all times.
18. Leave call light or signaling device within easy reach of the resident.
19. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Range of Motion Exercises for Resident

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Explain procedure to the resident.
3. Provide for resident's privacy.
4. Position resident supine and in good body alignment.
5. Correctly support the extremity/joint being exercised.
6. Move shoulder through flexion, extension, rotation, abduction, and adduction at least three times.
7. Move elbow through flexion and extension at least three times.
8. Move wrist through flexion, extension, and rotation at least three times.
9. Move hip through flexion, extension, rotation, abduction, and adduction at least three times.
10. Move knee through flexion and extension at least three times.
11. Move ankle joint through flexion, extension, rotation, abduction, and adduction at least three times.
12. Do not cause discomfort or pain and do not force any joint beyond the point of free movement.
13. Maintain respectful, courteous interpersonal interactions at all times.
14. Leaves call light or signaling device within easy reach of the resident.
15. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Transfer Resident from Bed to Wheelchair using a Gait Belt

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Obtain gait belt.
3. Explain procedure to the resident.
4. Position wheelchair at the foot or head of bed.
5. Ensure resident's safety by locking the wheelchair brakes.
6. Bring resident to a sitting position using correct body mechanics.
7. Position bed to a height such that the resident's feet are flat on the floor when sitting on the edge of the bed.
8. Assist resident in putting on shoes or non-skid slippers.

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9. Place gait belt around resident's waist.
10. Tighten gait belt.
11. Check gait belt by slipping fingers between gait belt and resident.
12. Stand in front of and face the resident.
13. Grasp the gait belt on each side of the resident with an underhand grip.
14. Use your legs to stabilize resident.
15. Bring resident to standing position, using correct body mechanics.
16. With one hand grasping gait belt and the other stabilizing resident by holding forearm, shoulder, or using another appropriate method to stabilize, transfer resident from bed to wheelchair.
17. Assist resident to pivot and sit in a controlled manner that ensures safety.
18. Remove gait belt.
19. Maintain respectful, courteous interpersonal interactions at all times.
20. Places resident within easy reach of the call light or signaling device.
21. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Transfer Resident from Wheelchair to Bed using a Gait Belt

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Obtain gait belt.
3. Explain procedure to the resident.
4. Position wheelchair at the foot or head of bed.
5. Ensure resident's safety by locking wheelchair brakes.
6. Position bed to a height such that the resident's feet are flat on the floor when sitting on the edge of the bed.
7. Place gait belt around resident's waist.
8. Tighten gait belt.
9. Check gait belt by slipping fingers between gait belt and resident.
10. Stand in front of and face the resident.
11. Instruct resident to move hips forward to front of wheelchair seat.
12. Instruct resident to place hands on wheelchair arm rests.
13. Use your legs to stabilize resident.
14. Assist resident to standing position using underhand grip on gait belt and proper body mechanics.
15. Assist resident to pivot in a controlled manner that ensures safety.
16. Assist resident to sit on the bed.
17. Remove gait belt.
18. Remove footwear.
19. Assist resident to move to center of bed and lie down, using proper body mechanics.
20. Make sure resident is comfortable and in good body alignment.
21. Maintain respectful, courteous interpersonal interactions at all times.

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22. Leave call light or signaling device within easy reach of the resident.

23. Perform hand hygiene.

- a. Cover all surfaces of hands with hand sanitizer.
- b. Rub hands together until hands are completely dry.

Vital Signs: Taking and Recording a Resident's Manual Blood Pressure

1. Perform hand hygiene.

- a. Cover all surfaces of hands with hand sanitizer.
- b. Rub hands together until hands are completely dry.

2. Explain procedure to the resident.
3. Provide for resident's privacy.
4. Assist resident into a comfortable position with forearm relaxed and supported in a palm-up position, approximately at the level of the heart.
5. Roll resident's sleeve up about 5 inches above the elbow, if the Actor is wearing a shirt with sleeves.
6. Apply the cuff around the resident's upper arm just above the elbow.
7. Clean earpieces of stethoscope appropriately and place in ears.
8. Clean diaphragm.
9. Locate resident's brachial artery with fingertips by feeling resident's brachial pulse just above bend of elbow.
10. Place stethoscope over the resident's brachial artery.
11. Hold stethoscope snugly in place.
12. Inflate cuff.
13. Slowly release air from cuff to disappearance of pulsations.
14. Remove cuff.
15. Record reading on the previously signed recording form.
16. Candidate's recorded systolic and diastolic blood pressure are within 4mmHG of the RN Test Observer's.
17. Maintain respectful, courteous interpersonal interactions at all times.
18. Leave call light or signaling device within easy reach of the resident.

19. Perform hand hygiene.

- a. Cover all surfaces of hands with hand sanitizer.
- b. Rub hands together until hands are completely dry.

Vital Signs: Taking and Recording a Resident's Radial Pulse and Respirations

1. Perform hand hygiene.

- a. Cover all surfaces of hands with hand sanitizer.
- b. Rub hands together until hands are completely dry.

2. Explain procedure to the resident.
3. Locate the resident's radial pulse by placing tips of fingers on thumb side of the resident's wrist.
4. Count pulse for 60 seconds, or 30 seconds x 2.
5. Record resident's pulse rate count on the previously signed recording form.
6. Candidate's recorded pulse rate is within 4 beats of RN Test Observer's recorded rate.

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7. Count respirations for 60 seconds, or 30 seconds x 2.
8. Record count on the previously signed recording form.
9. Candidate's recorded respiratory rate is within 2 breaths of the RN Test Observer's recorded rate.
10. Maintain respectful, courteous interpersonal interactions at all times.
11. Leave call light or signaling device within easy reach of the resident.
12. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Vital Signs : Taking and Recording a Resident's Temperature, Radial Pulse & Respirations

(Using a digital, tympanic or temp dot thermometer)

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Explain procedure to the resident.
3. Correctly turn on digital or tympanic thermometer, **-or-** correctly handle the temp dot thermometer.
4. Gently insert bulb end of thermometer in mouth, under resident's tongue, **-or-** gently insert tympanic in resident's ear **-or-** properly place temp dot thermometer.
5. Hold or leave thermometer in place for appropriate length of time.
6. Remove thermometer.
7. Record the temperature on the previously signed recording form.
8. Candidate's recorded temperature varies no more than 0.1 degrees from the RN Test Observer's recorded temperature.
9. Wipe the thermometer clean with an alcohol pad **-or-** discard sheath or temp dot thermometer appropriately.
10. Locate the resident's radial pulse by placing tips of fingers on thumb side of the resident's wrist.
11. Count pulse for 60 seconds, or 30 seconds x 2.
12. Record count on the previously signed recording form.
13. Candidate's recorded pulse rate is within 4 beats of RN Test Observer's recorded rate.
14. Count respirations for 60 seconds, or 30 seconds x 2.
15. Record count on the previously signed recording form.
16. Candidate's recorded respiratory rate is within 2 breaths of the RN Test Observer's recorded rate.
17. Maintain respectful, courteous interpersonal interactions at all times.
18. Leave call light or signaling device within easy reach of the resident.
19. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.



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Weighing an Ambulatory Resident

1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
2. Explain procedure to the resident.
3. Ensure resident's safety by locking the wheelchair brakes. *(Use of a gait belt is optional but procedure must be performed safely.)*
4. Balance or zero scale, **before** weighing resident.
5. Check that resident is balanced and centered on scale with arms at side.
6. Check that resident is not holding on to anything that would alter reading of the weight.
7. Appropriately adjust weights until scale is in balance.
8. Read weight and record it on the previously signed recording form.
9. Candidate's recorded weight varies no more than 1 lb. from RN Test Observer's reading.
10. Assist resident to sit in the wheelchair and unlocks the wheelchair brakes.
11. Unlock the wheelchair brakes, if they were locked.
12. Maintain respectful, courteous interpersonal interactions at all times.
13. Place resident within easy reach of the call light or signaling device.
14. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Knowledge Test Vocabulary List

abdominal thrust	antibiotics	bed bath
abnormal	anxiety	bed position
accidents	aphasia	bed rest
activity	appropriate response	bedfast
adduction	arteries	bedpan
ADL's	arteriosclerosis	bedsore
admission	arthritis	bladder training
aging process	aseptic	bleeding
AIDS	aspiration	blindness
alarms	atrophy	blood pressure
Alzheimer's	axillary temperature	bodily fluids
ambulate with assistance	back strain	body language
ambulation	bacteria	body mechanics
anemia	bargaining	body temperature
angina pectoris	basic needs	bowel and bladder programs
angry resident	basic skin care	bowel movements
anterior	bathing	brain stem

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break time	confidentiality	organisms
breathing	confused resident	disinfection
broken equipment	congestive heart failure	dizziness
call light	constipation	DNR
cancer	contaminated clothing	documentation
cane	contaminated hands	draw/lift
cardiovascular system	contamination	dressing resident
care plan	contracture	dry skin
caring for elderly	converting units	dying process
cast	coping mechanisms	dysphasia
cataracts	coughing excessively	dyspnea
catheter drainage bag	CPR	edema
central nervous system	CVA resident	elastic stockings
cerebral vascular accident	cyanosis	electrical equipment
charge nurse	decubitus ulcer	elimination of wastes
chart	dehydration	emesis basin
chemotherapy	demanding resident	emotional abuse
choking	dementia	emotional needs
chronic disease	denial	emotional support
circulatory system	dentures	empathy
cleaners	depression	emphysema
cleaning spills	dermatitis	enema
cleaning up of spills	diabetes	ethical code
clear liquid diet	diabetes mellitus	ethical issues
clergy	dialysis	evacuation
cold compress	diaphragm	exercise
colostomy	diarrhea	eye glasses
colostomy bag	diastolic	facility policy
combative resident	diet	falls
communicable	digestion	fatigue
communication	digestive system	feces
communication with depressed resident	discharging resident	feeding resident
compensation	disease producing	feeding tube

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fingernail care	immobility	minerals
fire	impaction	mistakes
fire safety procedures	impairment	mistreatment
fluid intake	in-house	mobility
Foley catheter	in-service programs	money
foot drop	incontinence	mouth care
fractures	indwelling catheter	moving a dependent resident
frequent urination	infection	moving a resident
function with assistance	initial observations	mucous
gait belt	input and output	Multiple Sclerosis
gastrostomy tube	insulin	myocardial infarction
geriatrics	intake and output	nasal cannula
germ transmission	integumentary system	natural disaster
glass thermometer	international time	needles
gloves	interpersonal skills	neglect
grieving process	interventions	new resident
group settings	isolation	non-contagious disease
growth	job description	nonverbal communication
hair care	job interview	nosocomial
hand tremors	lethargy	NPO
hand washing	lift/draw sheets	nurse's station
health-care team	linen	nursing assistant behavior
hearing aid	lying on side	nursing assistant's role
hearing impaired	making occupied bed	nursing station
heart	mask	nutrition
height	Maslow's hierarchy	objective
Heimlich maneuver	material safety data	observation
HIV	mealtime	ombudsman
hug	medical asepsis	oral hygiene
hydration	medications	oral temperature
hypertension	memory loss	osteoarthritis
hyperventilation	mentally impaired	osteoporosis
hypoglycemia	microorganisms	ostomy bag

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oxygen	radial	severe tremors
paralysis	ramps	sexual activity
paranoia	range of motion	sexual advances
Parkinson's	rationalization	sexual expression
partial bath	rectal temperature	sexual needs
patience	reddened/discolored area	sexuality
perineal care	rehabilitation	sexually transmitted diseases
peristalsis	religious service	sharps container
personal care	reminiscence	shaving
personal hygiene	renal failure	shearing of skin
personal items	reporting abnormal changes	side rails
personal possessions	reposition residents	Sim's position
personal stress	resident abuse	skin breakdown
pet therapy	resident belongings	smoking
phantom pain	resident independence	social well being
physical needs	resident rights	soiled linen
physician's authority	resident's bill of rights	specimen
policy book	resident's chart	spilled food
positioning a resident	resident's environment	spills
positive attitude	resident's families	spiritual needs
prefix	residents	standard precautions
pressure sore	respectful treatment	standard/universal precautions
pressure ulcer	respiration	State survey
preventing injury	respirations	stealing
privacy	respiratory condition	stereotypes
prone	responding to resident behavior	stethoscope
prostate gland	restorative care	stomach
prosthesis	restraints	stool specimen
protective equipment	right to equal care	stress
psychological needs	right to refuse care	stroke
pulmonary disease	scale	subjective
pulse	secretions	suicide
quadriplegia	seizure	

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sun-downing	treating residents with respect	urine
supine	tub bath	visually impaired
supplemental feedings	twice daily	vital signs
suspected abuse	tympanic temperatures	vitamins
swelling	ulcers	vomiting
systolic	unconscious	vomitous
TED hose	uncovered food	walker
terminal illness	uniform	wandering resident
threatening resident	universal precautions	water faucets
thrombus	unopened mail	weak side
tips	unsteady	weakness
toenails	urinary catheter bag	weight
toileting schedule	urinary system	wheelchair safety
TPR	urinary tract	white blood cells
transferring		withdrawal

Notes:
