

D&S Diversified Technologies LLP

Headmaster LLP

Ohio Nurse Aide

Candidate Handbook

EFFECTIVE: October 1, 2024

Version 24.5*

This handbook is provided $\underline{\mathsf{FREE}}$ of $\underline{\mathsf{CHARGE}}$ and can be printed or downloaded at

WWW.HDMASTER.COM.

CLICK ON OHIO CNA, THEN ON THE CANDIDATE HANDBOOK.

EFFECTIVE FOR TESTING OCTOBER 1, 2024

*VERSION 24.5: From ODH, the Catheter Care Task will now include PPE (a gown and gloves only, edited 9.20.24) per CMS's updated infection prevention and control guidance related to Enhanced Barrier Precautions (EBP) with indwelling medical devices (urinary catheters - CMS REF: QSO-24-08-NH). See pages 39-41.

The Identification Section has been updated (pages 13-14).

Skill Task Updates from this year's Test Advisory Panel (TAP) are in **red** font (pages 32-49).

The Knowledge Exam Vocabulary Words have been updated (pages 49-53).

EFFECTIVE OCTOBER 24, 2024

ODH will no longer be using the term STNA. Candidates who pass the NA competency exam will be known as CNAs.

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Contact Information

Questions regarding: testing process • test scheduling • eligibility to test: (877) 851-2355				
	uestions regarding: the Nurse Aide Registry • renewals • challenges • demographic changes • ut of state reciprocity:			
D&S Diversified Technologies, LLP PO Box 418 Findlay, OH 45839 Email: ohio@hdmaster.com Web Site: www.hdmaster.com TMU@: https://oh.tmutest.com	Monday through Friday 8:00AM – 8:00PM (EST)	Phone #: (877) 851-2355 Fax #: (406) 442-3357 (applications, scheduling, and payment forms) Fax #: (419) 422-8328 (test review, reschedule, refund, no-show, ADA and other documentation)		
Ohio Department of Health Ohio Nurse Aide Registry (NAR) 246 North High Street Columbus, OH 43215	Monday through Friday 8:00AM – 5:00PM (EST)	Phone #: (800) 582-5908 Fax #: (614) 564-2461		
Chio Department of Health Nurse Aide Training and Competency Evaluation Program (NATCEP) 246 North High Street Columbus, OH 43215 Email: NATCEP@odh.ohio.gov Website: www.odh.ohio.gov	Monday through Friday 8:00AM – 5:00PM (EST)	Phone #: (614) 752-8285 Fax #: (614) 564-2596		

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Introduction

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

As defined in the OBRA regulations, a Nurse Aide Competency Evaluation program provides specific standards for nurse aide-related knowledge and skills. This program aims to ensure that candidates seeking to be nurse aides understand these standards and can competently and safely perform the job of an entry-level nurse aide.

This handbook describes the nurse aide competency examination process and is designed to help prepare candidates for testing. The examination has two parts: a multiple-choice knowledge test and a skill test. Candidates must pass both parts to be identified and listed on the Ohio Nurse Aide Registry.

The Ohio Department of Health (ODH) has approved D&S Diversified Technologies, LLP (D&SDT) to provide tests and scoring services for nurse aide testing. For questions not answered in this handbook, please get in touch with D&SDT-HEADMASTER at (877) 851-2355 or go to D&SDT-HEADMASTER's Ohio CNA webpage or at www.hdmaster.com and click on 'Ohio CNA'. The information in this handbook will help you prepare for your examination.

Nurse Aide Registry Requirements

Ohio's Nurse Aide Registry lists all Certified Nurse Aides (CNAs). The registry also maintains records of those nurse aides who have had a finding of abuse, neglect, or misappropriation of property against them.

The Nurse Aide Registry keeps track of those individuals who have met written and skills test criteria to be certified for employment in long-term care settings, usually nursing homes. Once certified, nurse aides must meet certain requirements to maintain their certification and continue to be listed on the Nurse Aide Registry as able to work in Ohio. Please review the Nurse Aide Registry Requirements. The registry also maintains records of those nurse aides who have had a finding of abuse, neglect, or misappropriation of property against them.

The most significant achievement in this area was giving facilities or individuals the ability to inquire about the status of a certified nurse aide by accessing the registry through the Internet. This gives the customer three options to conduct an inquiry. They can call the nurse aide registry and use the voice automated system, talk to a nurse aide registry customer service technician, or use the web-based verification system. This addition will reduce the time it takes to verify the status of a certified nurse aide (CNA). Select the link to access the Nurse Aide Registry: NURSE AIDE REGISTRY

Additional questions regarding nurse aide registry requirements, lapsed certification, and certification transfer to or from another state may be addressed to the Nurse Aide Registry at (800)582-5908. If you have questions regarding the locations and dates for nurse aide training classes, you may call (614) 752–8285 or view the NATCEP Program information page.

Criteria to Waive the Nurse Aide Training Requirement

Certain individuals who may submit documentation to ODH for approval and written verification to waive the nurse aide training requirement to sit for the Ohio nurse aide exam are outlined below:

- An individual enrolled in a pre-licensure program of nursing education approved by the Board of Nursing
 or by an agency of another state that regulates nursing education who has provided the director or the
 director's designee with a certificate from the program indicating that the individual has successfully
 completed the courses that teach basic nursing skills including infection control, safety and emergency
 procedures, and personal care.
- An individual who has the equivalent of twelve months or more of full-time employment in the preceding
 five years in a position with hospital experience that includes the provision of direct patient care involving
 the performance of daily living activities, such as toileting, bathing, feeding, dressing, etc.
- An individual with military occupational training and experience in the United States Armed Forces in positions including, but not limited to, Medical Specialist, Healthcare Specialist, and Hospital Corpsman may qualify for this waiver if they can provide documentation of at least sixteen hundred (1600) hours of providing direct patient care involving the performance of daily living activities. The documentation can include official training documents and/or a letter on official letterhead that identifies each exact job task that meets the direct care/performance of daily living requirement, totaling a minimum of 1600 hours signed by a supervisor.

Active Duty and Veteran GI Bill Benefits

D&SDT-Headmaster has been approved by the Department of Veterans Affairs (VA) as an approved testing vendor for the Ohio NA exam. If you are an active duty or retired service member, you may be eligible for reimbursement of exam fees if funds are available through your GI Bill. To request VA reimbursement of exam fees, you must provide your receipt for paying your NA exam fees along with a completed VA Application for Reimbursement of Licensing or Certification Test Fees Form 22-0803 to the VA for reimbursement. Additional information regarding the GI Bill can be found on the VA website.

Priority of Service on Test Day

If you are active or retired military, veteran, or spouse of a veteran, you are eligible to receive priority of service on testing day. To qualify, you must provide the following additional proof of service documentation to the RN Test Observer at check-in on test day:

- Department of Defense Identification Card (active, retired, or TDRL).
- DD214 Military Discharge Certificate indicating disposition of discharge.
- Report of Separation from the national archives at the National Personnel Records Center (NPRC) in St. Louis, Missouri.
- Veterans Identification Card from the Department of Veterans Affairs.

Americans with Disabilities Act (ADA)

ADA Compliance

The Ohio Department of Health (ODH), Bureau of Survey and Certification Nurse Aide Training Competency Evaluation Program (NATCEP) Unit and D&SDT-Headmaster provide reasonable accommodations for candidates with disabilities or limitations that may affect their ability to perform

the nurse aide competency examination. Accommodations are granted in accordance with the Americans with Disabilities Act (ADA).

If you have a qualified disability or limitation, you may request special accommodations for examination. D&SDT-Headmaster must approve accommodations in advance of the examination. The request for accommodations can be found on the <u>D&SDT-HEADMASTER webpage</u> and by clicking on the PDF Fillable <u>ADA Accommodation Form</u>. Fill out the ADA Request and attach the required documentation found on the second page of the request form to an email to <u>ohio@hdmaster.com</u> to be reviewed for accommodation.

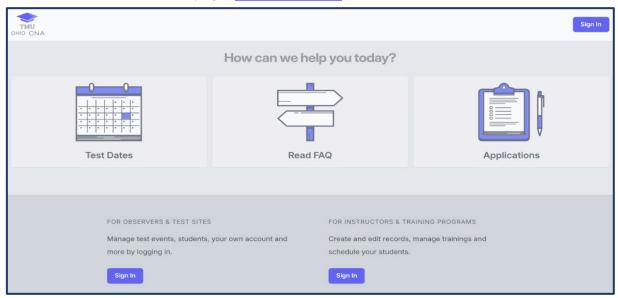
ADA request forms submitted without supporting documentation of a diagnosed disability will not be accepted or reviewed.

Please allow additional time for your request to be approved. If you have questions regarding the ADA review process or specific required documentation, please call D&SDT-Headmaster at (877)851-2355.

Ohio TestMaster Universe© (TMU©)

Ohio CNA TMU© Home Page

This is the Ohio CNA TMU© main page, oh.tmutest.com



- → Click on 'Test Dates' to see the calendar of available test events and their location
- → Click on 'Read FAQ' for frequently asked questions

Complete your TMU© Account

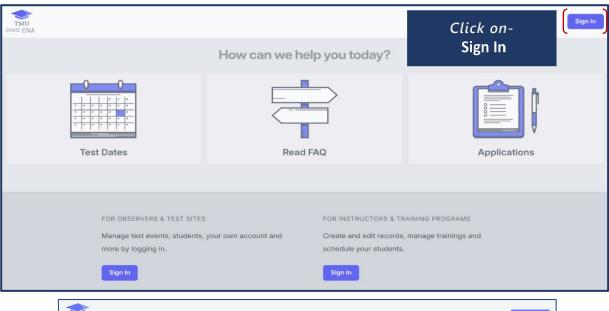
Your initial registration information will be entered in the D&SDT-Headmaster Ohio CNA TestMaster Universe (TMU©) database.

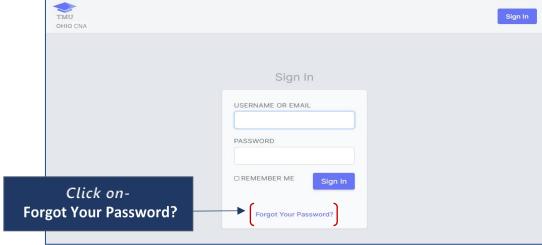
IMPORTANT: Before you can test, you must sign in to TMU© (oh.tmutest.com) using your secure Email or Username and Password and verify that your demographic information is correct.

• It is highly recommended that when you receive your confirmation email from TMU© (check your junk/spam mail) that your account has been created, you sign in to your account, update your password, and verify your demographic information.

If you do not know your Email or Username and Password, enter your email address and click "Forgot Your Password?" You will be asked to re-enter your email, and a 'reset password link' will be sent to your email (see instructions under 'Forgot your Password and Recover your Account'). If you cannot sign in, contact D&SDT-Headmaster at (877)851-2355.

FORGOT YOUR PASSWORD AND RECOVER YOUR ACCOUNT

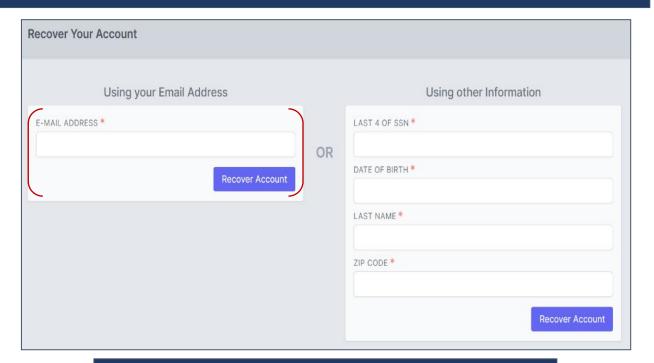




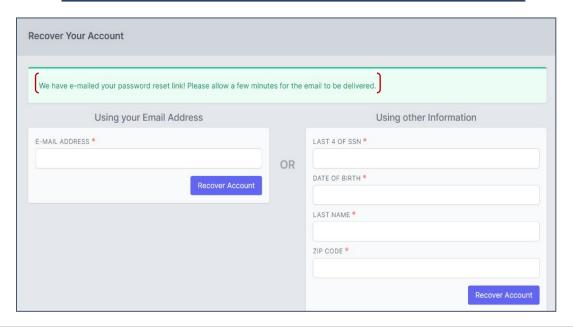
Type in your Email Address. Click on Recover Account. You will receive an email with the reset link.

Click on the reset link in your email to reset your password.

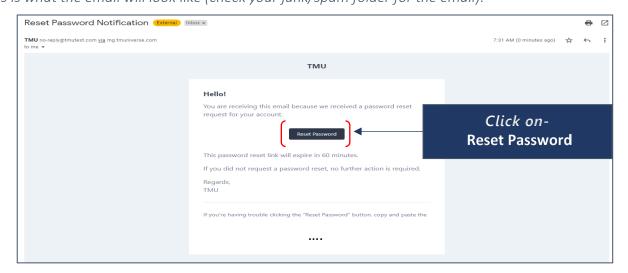
(-OR- You can type in the requested data under Using other Information if you have already updated your demographic information in your account) - Click on - Recover Account



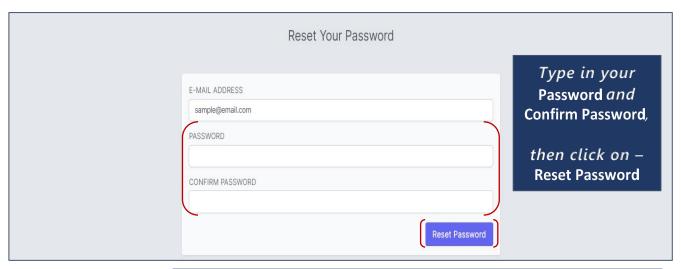
You will receive the message,
We have e-mailed your password reset link! Please allow a few
minutes for the email to be delivered.



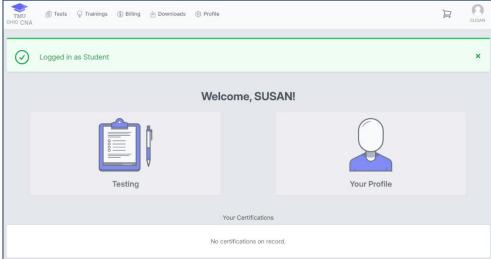
This is what the email will look like (check your junk/spam folder for the email):



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



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



The Ohio Nurse Aide Competency Exam

Payment Information

Exam Description	Price
KNOWLEDGE EXAM -or- Knowledge Retake	\$26.00
OPTIONAL: AUDIO VERSION OF THE KNOWLEDGE EXAM -or- Audio Knowledge Retake (The knowledge test questions and answers are read through the computer and listened to through headphones or earbuds while you read along.)	\$36.00
SKILL TEST -or- Skill Retake	\$78.00

Schedule an Exam

Once your completed record is in the D&SDT-Headmaster Ohio CNA TestMaster Universe© (TMU©) database, you have verified that all information is correct, and your testing fee has been paid (see instructions under 'Self-Pay of Testing Fees'), you may schedule your exam date online at the Ohio CNA TMU© webpage at <a href="https://docs.physiological.org/linearing-testi

REMOTELY PROCTORED KNOWLEDGE EXAM OPTION FOR KNOWLEDGE EXAM RETAKES

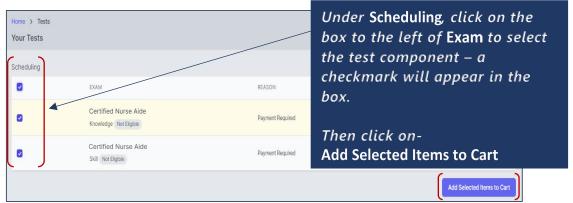
Please see the 'Remotely Proctored Knowledge Exam Option' under the Knowledge/Audio Exam section if you are interested in taking your knowledge exam retake with a remote proctor from your home, etc.

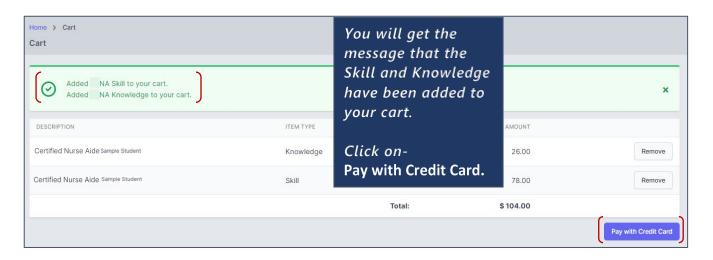
SELF-PAY OF TESTING FEES IN TMU©

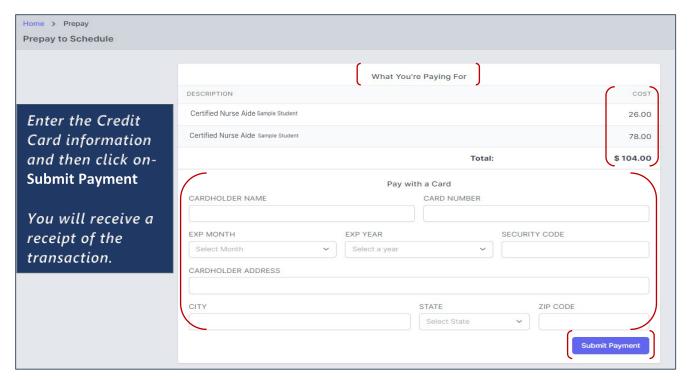
Testing fees must be paid *before* you can schedule a test date. Some training programs pre-pay testing fees for their graduating students. Your program/instructor will inform you if this is the case. Before scheduling a test, verify with your instructor if the training program has already prepaid for your test.

Securely processed Visa or MasterCard credit card or debit card information is required when paying

testing fees online.



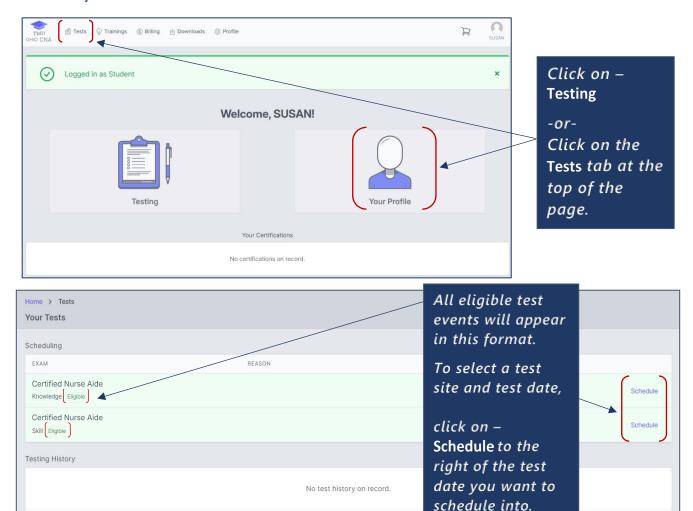


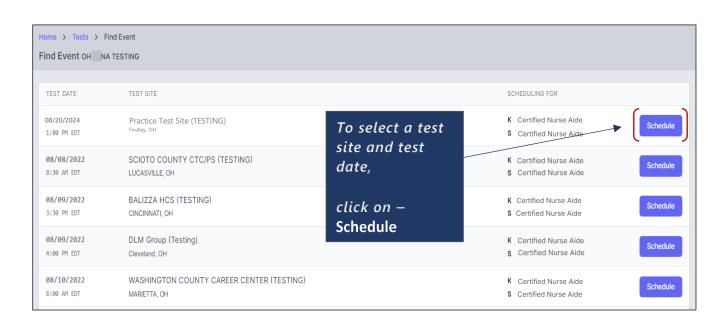


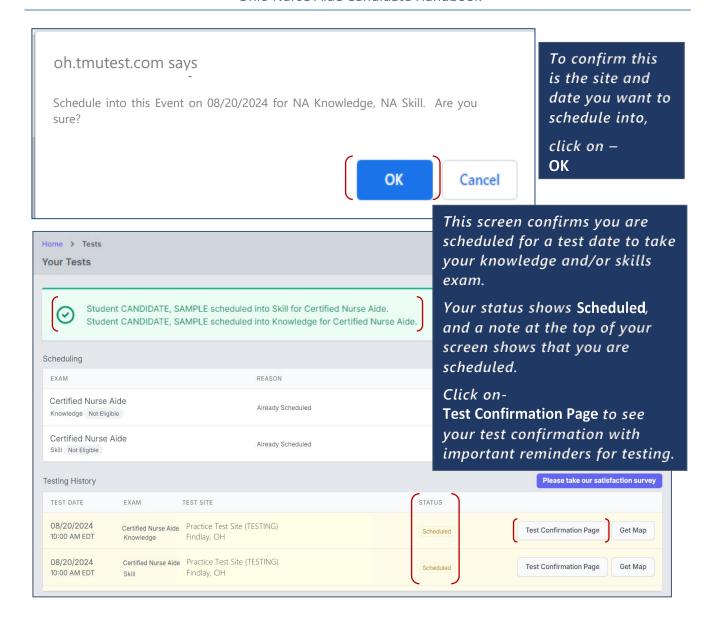
Once your testing fees are paid, you can choose a test site and date. Follow the instructions in the next section to schedule/reschedule a test event.

-continued on the next page-

Schedule/Reschedule a Test Event







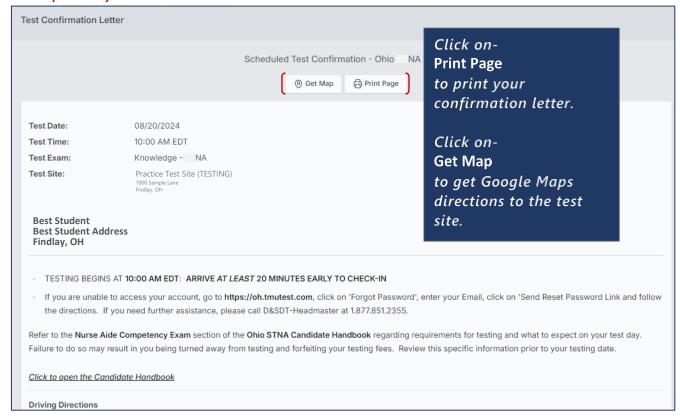
TEST CONFIRMATION LETTER

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

Please review the Ohio CNA Candidate Handbook for specific instructions on arriving at the test event on time, ID requirements, testing attire, testing policies and procedures, what to expect, etc.

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

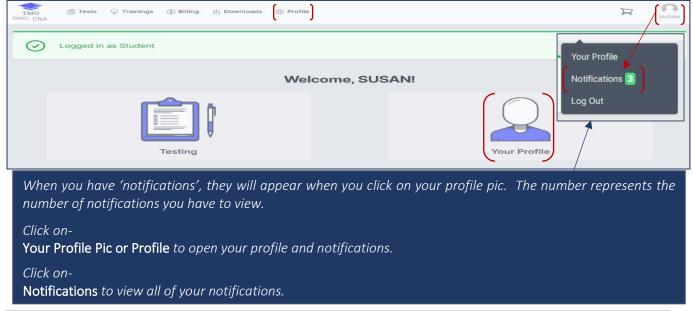
It is important you read this letter!

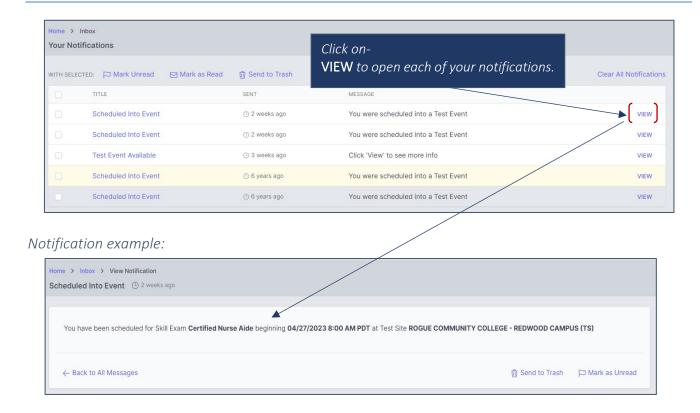


Note: Candidates who self-schedule online, or those scheduled by their training programs, will receive their test confirmation at the time they are scheduled.

Check/View your TMU© Notifications

Remember to check your 'notifications' in your TMU© account for important notices regarding your selected test events and other information. See the screenshots that follow:





Time Frame for Testing from Training Program Completion

You must schedule a test date within two years of your training program completion date. After two years, you must complete another ODH-approved training program to be eligible to schedule testing.

Many training programs host and pre-schedule in-facility test dates for their graduating students. Your program/instructor will inform you if this is the case. Before scheduling a test, verify with your instructor if the training program has already scheduled and/or prepaid for your test. Regional test seats are open to all candidates. Regional test dates are posted on the Ohio CNA TMU© site at oh.tmutest.com.

If you have any questions regarding your test scheduling, call D&SDT-Headmaster at (877)851-2355 during regular business hours, 8:00AM to 8:00PM EST, Monday through Friday, excluding holidays.

Exam Check-In

You must arrive at your confirmed test site 20 to 30 minutes before your exam is scheduled to start.

- Testing **begins** promptly at the start time noted.
- You need to ensure you are at the event <u>at least 20 minutes before</u> the start time to allow time to get checked in with the RN Test Observer.
 - For example, if your test starts at 8:00AM, you must be at the test site for check-in **no later than** 7:40AM.

Note: If you arrive late, you will not be allowed to test.

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

Testing Attire

The required testing attire applies to both the knowledge and skills exams.

- You must be in full clinical attire
 - This consists of a scrub top and scrub pants, a scrub skirt (long, loose-fitting), or a scrub dress (long, loose-fitting).
 - No open-toed shoes (flip-flops or sandals) are allowed.
 - Scrubs and shoes can be any color/design.
- No wristwatches, smartwatches, fitness monitors, or Bluetooth-connected devices are allowed.



- Long hair must be pulled back.
- Fingernails must be short (no longer than ¼ inch long), well-kept (filed, no jagged edges), and clean.

Note: You will not be admitted for testing if you are not wearing scrubs attire, the appropriate shoes, and long hair pulled back with short, well-kept, and clean fingernails. You will be considered a NO SHOW. You will forfeit your testing fees and have to pay for another exam date.

Identification

<u>Mandatory</u>: You must bring a **US GOVERNMENT ISSUED, PHOTO-BEARING, *SIGNED, NON-EXPIRED FORM OF IDENTIFICATION, and your ORIGINAL SOCIAL SECURITY CARD**.

- A letter from the Social Security office <u>will not</u> be accepted.
- Only original IDs and social security cards are accepted. Photocopies, faxes, images, and mobile or electronic/digital versions of IDs <u>are not allowed</u>.

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

- State-issued or other United States Government Issued Driver's License
 - You may use the letter issued from the Ohio Bureau of Motor Vehicles (BMV) that you receive when you apply for or renew your driver's license while waiting to receive your new license.
- State-issued Identification Card
- Signed US Passport (Foreign Passports and Passport Cards are not acceptable)
 - Exception: A signed foreign passport with a US VISA is acceptable (the VISA does not have a signature).
- Permanent Resident Card (Green Card or Alien Registration Card)/Employment Authorization Card issued by the U.S. Citizenship and Immigration Services (USCIS) (*now accepted without a signature or fingerprint IF ISSUED from January 30, 2023, to present day. If issued before January 1, 2023, may contain a fingerprint in place of a signature)
- Concealed Hand Gun Carry Permit (a signed photo ID with an expiration date that is not expired)
- US Military Identification Card (*accepted without a signature or fingerprint, but will have a bar code or may contain a fingerprint in place of a signature)

The **FIRST** and **LAST** names listed on the ID and social security card presented to the RN Test Observer during check-in at your test event **MUST EXACTLY MATCH** the FIRST and LAST names entered in the Ohio CNA TMU© database.



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

Legal documentation must be submitted to D&SDT-Headmaster at least two (2) business days before your scheduled test date for any name changes that need to be made (due to marriage, divorce, etc.). You may call D&SDT-Headmaster at (877)851-2355 to confirm that your name of record matches your US government-issued ID and original social security card or sign in to your TMU© account to check on or change your demographic information.

If you need to update or correct your demographic information, please complete, attach your legal documentation, and submit the <u>DEMOGRAPHIC CHANGE/CORRECTION REQUEST FORM</u> on the Ohio CNA TMU© page under Applications.

Note:

- You will not be admitted for testing if you do not bring proper/valid identification and your original social security card.
 - Be sure your US government-issued identification is not expired and that your ID and original social security card are signed.
 - Check to ensure that the FIRST and LAST printed names on your photo ID and original social security card match the current name on record in your TMU© account.
 - A driver's license or state-issued ID card with a hole punched in it is <u>NOT VALID</u> and will
 not be accepted as an acceptable form of ID.
- In cases where names do not match or your ID(s) are not proper/valid, you will be considered a NO SHOW, forfeit your testing fees, and have to pay for another exam date.

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

Instructions for the Knowledge, Remotely Proctored Knowledge and Skill Exams

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

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

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

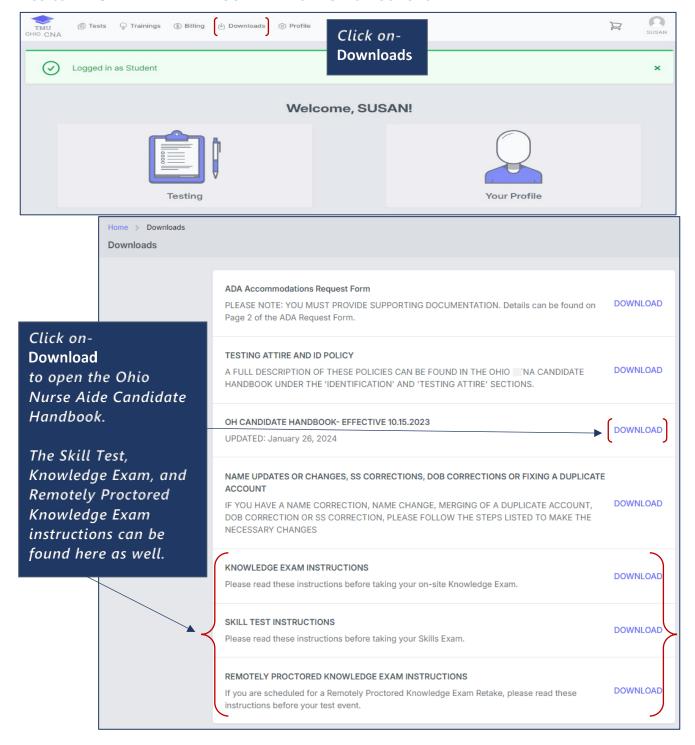
Testing Policies

The following policies are observed at each test site—

- Make sure you have signed in to your TMU© account at oh.tmutest.com before your test date to update your password and complete your demographic information. Refer to this handbook's 'Complete Your Account in TMU©' section for instructions and information.
 - If you have not signed in and completed/updated your TMU© account when you arrive for your test, you may not be admitted to the exam, and any exam fees paid will NOT be refunded.
- In the worst-case scenario, plan to be at the test site for up to six (6) hours (if taking both components on-site).
- Testing begins promptly at the start time noted on your confirmation. If you arrive late for your confirmed exam (you need to be at the test site to check in at least 20 to 30 minutes before your scheduled start time if your test start time is 8:00AM, you need to be at the test site by 7:40AM at the latest), you will not be admitted to the exam. Any exam fees paid will NOT be refunded.
 - If you are scheduled for a remotely proctored knowledge exam retake, please see procedures/policies under 'Remotely Proctored Knowledge Exam Option' in the Knowledge/Audio Exam section.
- If you do not bring valid and appropriate US government-issued, non-expired, signed photo ID and your signed original social security card, you will not be admitted to the exam, considered a No-Show status, and any exam fees paid will NOT be refunded.
 - If the FIRST and LAST printed names on your ID and original social security card do not match your current name of record in your TMU© account, you will not be admitted to the exam, considered a No-Show status, and any exam fees paid will NOT be refunded.
- If you do not wear full clinical attire and shoes with long hair pulled back and fingernails short, well-kept, and clean and conform to all testing policies for both the knowledge and skills portion of the exam, you will not be admitted to the exam, considered a No-Show and any exam fees paid will NOT be refunded.
- If you have a NO-SHOW status for your exam day, any test fees paid will NOT be refunded. You must re-pay your testing fees to schedule another exam date.
- If you refuse to show the RN Test Observer your required ID and original social security card, you will not be allowed to test. You will be asked to leave the test site, which is considered a no-show, and any exam fees paid will NOT be refunded.
- **ELECTRONIC DEVICES AND PERSONAL ITEMS:** Cell phones, smartwatches, fitness monitors, electronic recording devices, Bluetooth-connected devices, and personal items (such as water bottles, purses, briefcases, large bags, study materials, extra books, or papers) are not permitted to be on or near you in either testing room. The testing team will inform you of the designated area to place your items and electronic devices, and you will collect these items when you complete your test(s).
 - No wristwatches can be on or near you in either testing room.
 - All electronic devices must be **turned off**, including smartwatches, fitness monitors, and Bluetooth-connected devices, which also must be removed from your wrist or body.
 - You are not allowed to have coats or hooded apparel covering your head during testing in the testing rooms.

- If you are scheduled for a remotely proctored knowledge exam retake, please see procedures/policies under 'Remotely Proctored Knowledge Exam Option' in the Knowledge/Audio Exam section.
- Anyone caught using any electronic recording device during testing will be removed from the testing room(s), have their test scored as a failed attempt, forfeit all testing fees, and will be reported to their training program and the Ohio Department of Health (ODH).
- The testing team will ask candidates with long hair to pull their hair back to ensure they are not using Bluetooth devices.
- You may use personal devices during your free time in the waiting area.
- You are encouraged to bring a jacket, snack, drink, or study material during your free time in the waiting area.
- **TRANSLATION DICTIONARIES:** Published foreign word-for-word translation dictionaries **are allowed**. Dictionaries with definitions or handwriting/notes will not be allowed. You must show your published word-for-word translation dictionary to the test observer/proctor during sign-in (on-site or remotely proctored) at your test event. **Using a translator, language translators that are not pre-approved, and electronic dictionaries <u>are not allowed</u>.**
- 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 misconduct, are visibly impaired, or trying to take any notes or testing materials from the testing room, you will be dismissed from the exam, your test will be scored as a failed attempt, you will forfeit all testing fees paid, and you will be reported to your training program and the Ohio Department of Health (ODH).
- No visitors, guests, pets (including companion animals), or children are allowed.
 - Service animals with an approved ADA accommodation in place are allowed.
- You may not test if you have any physical limitation (excluding pre-arranged ADAs) that would prevent you from performing your duties as a CNA. (Examples: cast, arm/leg braces, crutches, etc.) Call D&SDT-Headmaster immediately at (877)851-2355 if you are on doctor's orders. You must image and email ohio@hdmaster.com or fax (419)422-8328 a doctor's order within three (3) business days of your scheduled exam to qualify for a free reschedule.
- Test sites, RN Test Observers, Knowledge Test Proctors, and Actors are not responsible for the candidate's personal belongings at the test site.
- Please refer to this Ohio NA Candidate Handbook before your test day for any updates to testing and policies.
- The Candidate Handbook and Testing Instructions can also be accessed within your TMU© account under the 'Downloads' tab.

ACCESS THE CANDIDATE HANDBOOK AND TESTING INSTRUCTIONS



Security

If you refuse to follow directions, use abusive language, are visibly impaired, or disrupt the examination environment, your test will be stopped and scored as a failed attempt. You will be dismissed from the testing room and will forfeit any testing fees paid. A report of your behavior will be given to your training program and the Ohio Department of Health (ODH). You will not be allowed to retest for a minimum period of six (6) months.

Anyone who removes or tries to remove test material or takes notes or information from the test site will be reported to their training program and the Ohio Department of Health (ODH) and is subject to prosecution to the full extent of the law. Your test will be scored as a failed attempt, and you will forfeit any testing fees that have been paid. You will not be allowed to retest for a minimum period of six (6) months.

If you give or receive help from anyone during testing (including using electronic recording devices such as cell phones, smartwatches, or navigating to other browsers/sites during your TMU© electronic exam), your test will be stopped and scored as a failed attempt. You will be dismissed from the testing room and will forfeit any testing fees paid. You will be reported to your training program and ODH, and you may need permission from ODH to be eligible to test again.

Reschedules

All candidates may reschedule for free online at <u>oh.tmutest.com</u> up until one (1) business day before a scheduled test day, excluding Saturdays, Sundays, and holidays.

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

■ <u>Example</u>: If you are scheduled to take your exam on a Friday, you must reschedule by the close of business (D&SDT-Headmaster is open until 8:00PM Eastern Standard, Monday through Friday, excluding holidays) the Wednesday before your scheduled exam.

The scheduled test date is on a:	e scheduled test date is on a: Reschedule the previous:	
Monday	The previous Thursday (by 8:00PM Eastern time)	
Tuesday	The previous Friday (by 8:00PM Eastern time)	
Wednesday	The previous Monday (by 8:00PM Eastern time)	
Thursday	The previous Tuesday (by 8:00PM Eastern time)	
Friday	The previous Wednesday (by 8:00PM Eastern time)	
Saturday	The previous Thursday (by 8:00PM Eastern time)	
Sunday The previous Thursday (by 8:00PM Eastern time)		

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

Refund of Testing Fees Paid

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

SCHEDULED IN A TEST EVENT

1) If you are scheduled for a test event, you must request a refund of the testing fees paid by filling out and submitting the <u>Refund Request Form</u> on D&SDT-Headmaster's main webpage at <u>www.hdmaster.com</u> at least one (1) full business day before your scheduled test event (excluding Saturdays, Sundays, and holidays). No phone calls will be accepted.

- <u>Example</u>: If you are scheduled to take your exam on a Saturday, Sunday, or Monday, you would need to request a refund by the close of business the Thursday before your exam. D&SDT-Headmaster is open until 8:00PM Eastern time, Monday through Friday, excluding holidays.
- 2) Refund requests made in the required time frame qualify for a full refund of any testing fees paid minus a \$35 refund processing fee.
- 3) Refund requests must be made within thirty (30) days of paying testing fees with D&SDT. Requests for refunds made after 30 days will not be issued.

NOT SCHEDULED IN A TEST EVENT

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

Unforeseen Circumstances Policy

If an exam date is canceled due to an unforeseen circumstance, D&SDT-Headmaster staff will try to contact you using the contact information (phone number/email) 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 (*see examples below for reasons we may not be able to contact you that you are responsible for.)

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

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

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

INCLEMENT WEATHER POLICY

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

• The county you reside in or the county of the testing site is placed on a Level 2 or Level 3 snow emergency.

- <u>LEVEL 2 SNOW EMERGENCY</u>: Roadways are hazardous with blowing and drifting snow. Roads may also be very icy. Only those who feel it is necessary to drive should be out on the roads. Motorists should use extreme caution.
- <u>LEVEL 3 SNOW EMERGENCY</u>: All roadways are closed to non-emergency personnel. No one should be driving during these conditions unless it is absolutely necessary to travel or a personal emergency exists. Those traveling on the roads may subject themselves to arrest.
- The test site closes.
- The test observer cancels the test event.
- There is an accident due to weather on your route to the test site, in which case:
 - Documentation from the Department of Transportation Services or a Police report is required within three business days of your scheduled exam to qualify for a free reschedule.

Failure to attend your scheduled test date will result in a no-show status if the above circumstances are not met, and any exam fees paid will NOT be refunded.

NOTE: Please see the information under the 'Unforeseen Circumstances Policy' and 'No-Show Exceptions' sections.

No-Show Status

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

These fees partially offset D&SDT-Headmaster cost incurred for services requested and resulting work that is performed. If a reschedule or refund request is not received before the one (1) full business day before 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. You 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.

Car breakdown or accident: D&SDT-Headmaster must be contacted within one business day via phone, fax, or email, and a tow bill, road report, police report, or other appropriate documentation showing your name and the provider of service name must be submitted within three (3) business days of the exam date. If we do not receive proof within the 3-business-day time frame, you will have to pay as though you were a no-show.

- Weather or road condition-related issue: D&SDT-Headmaster must be contacted within one business day via phone call, fax, or email. 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.
- Medical emergency or illness: D&SDT-Headmaster must be contacted within one business day via phone, fax, or email. A doctor's note showing your name and the provider of service name (or be on the provider's letterhead) must be submitted within three (3) business days of the missed exam date. If we do not receive proof within the 3-business-day time frame, you will have to pay as though you were a no-show.
- **Death in the family**: D&SDT-Headmaster must be contacted within one business day via phone call, fax, or email. An obituary showing your name and the provider of service name for immediate family only must be 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 the parent, grand and great-grandparent, sibling, children, spouse, or significant other.)
- Remotely proctored testing issues: D&SDT-Headmaster must be contacted within one business day via phone call, fax, or email. Appropriate documentation showing your name and the provider of service name must be submitted within three (3) business days of the exam date. If we do not receive proof within the 3-business-day time frame, you will have to pay as though you were a no-show.
 - **Internet outage or issue:** Documentation showing your name and the provider of service name from the Internet provider showing outage date and times.
 - **Computer or cell phone issue:** If the computer or cell phone fails to work for any reason, documentation showing your name and the provider of service name from a computer repair technician/shop or other appropriate documentation.

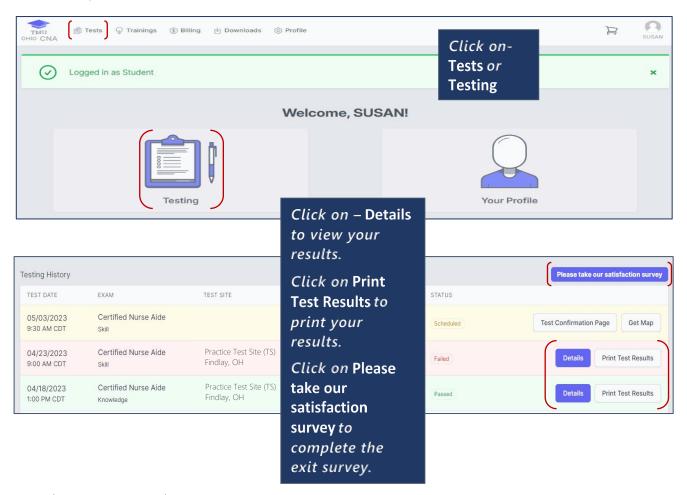
Candidate Feedback – Exit Survey

Candidates can complete an exit survey via a link when checking their test results in their TMU© account. The survey is confidential and will not affect the outcome of any test. You are encouraged to complete the survey questions with honest feedback regarding the examination process to help improve the testing process.

Test Results

After you have completed both the Knowledge Exam and Skill Test components of the competency exam, your test results will be officially scored and double-checked by D&SDT-Headmaster scoring teams. Official test results will be available by signing in to your TMU© account after 6:00PM (EST) the business day after your test event. D&SDT-Headmaster cannot release test results over the phone.

Sign in to your TMU© account at oh.tmutest.com to view your test results. (Refer to the screenshots that follow.)



Sample CNA exam results report:



Test Attempts

You have **three (3) attempts** to pass the knowledge and skill test portions of the exam **within two (2) years from your date of nurse aide training program completion**. If you do not complete testing within two years from completion of training, you must complete a new ODH-approved training program to become eligible to attempt Ohio NA examinations further.

NOTE: Federal and State regulations allow healthcare facilities to employ students for up to 120 days from the day employment and training is offered in an approved facility-based nurse aide training and competency evaluation program. However, if you fail three attempts on either portion of the state competency exam, the facility can no longer employ you to perform nurse aide duties.

Ohio Nurse Aide Registry Certification

After successfully passing the Knowledge and Skill Test components of the nurse aide exam, your test results will be sent electronically to the Ohio Department of Health by D&SDT-Headmaster. Your name will be placed on the Ohio Nurse Aide Registry.

LAMINATED CERTIFIED CNA CARD

D&SDT-Headmaster will mail your passed results letter with your laminated CNA card to the address in your TMU© account.

If you need a replacement CNA card, you can request one by filling out the <u>Replacement CNA Card Request Form</u>. A \$25.00 fee applies.

Retaking the Ohio Nurse Aide Exam

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

You can schedule a test or re-test online in your TMU© account with your Email or Username and Password at <a href="https://oncommons.org/nc-test-en-th-te

Alternatively, you may schedule a re-test for special circumstances by requesting and completing a Scheduling and Payment form:

Please email ohio@hdmaster.com to request that a Scheduling and Payment Form be emailed to you.

You can submit your Scheduling and Payment Form to D&SDT-Headmaster either by fax at (406)442-3357 (\$5.00/candidate extra fax fee per candidate applies), email at accounting@hdmaster.com (scan or image and attach) or mail to P.O. Box 6609, Helena, MT 59604.

If you need assistance scheduling your re-test, please call D&SDT-Headmaster at (877)851-2355 during regular business hours: 8:00AM to 8:00PM, Monday through Friday, EST, excluding holidays. We can assist you in scheduling a test or re-test date as long as your fees have been paid first.

Test Review Requests

You may request a review of your test results or dispute any other testing condition.

PLEASE READ BEFORE FILLING OUT THE TEST REVIEW REQUEST: Please call D&SDT-Headmaster at (877)851-2355 and discuss the test outcome you are questioning before committing to sending the \$25 test review request deposit fee. Once you have further details about the scoring of your test, you will often understand the scoring process and learn how you can better prepare yourself for subsequent exam attempts. If, after discussion with D&SDT-Headmaster staff, you still have a concern with your testing process that affected the outcome of your exam, you may submit a Test Review Request.

A \$25 test review deposit fee must be paid before a review can begin (please read the paragraph above). To request a review, submit the PDF fillable Test Review Request and Payment Form, available on D&SDT-Headmaster's main webpage at www.hdmaster.com (before you get to the Ohio CNA 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 via the PDF fillable Test Review Request and Payment Form within three (3) business days from official scoring of your test (excluding Saturdays, Sundays and holidays). Late requests will be returned and will not be considered.

Since one qualification for certification as an Ohio CNA is demonstrated by examination of minimum nurse aide knowledge and skills, the likely outcome of your review will determine who pays for your retest. If the review results are in your favor, D&SDT-Headmaster will refund your test review fee. D&SDT-Headmaster will review your detailed recollection, your knowledge test markings, and any skill task measurements you recorded at the time of your test, in addition to reviewing markings, notations, and measurements recorded by the RN Test Observer at the time of your test. D&SDT-Headmaster will recheck the scoring of your test and may contact you and/or the RN Test Observer for any additional recollection of your test(s). D&SDT-Headmaster cannot discuss test results or test reviews with the candidate's nurse aide education program/instructor. After a candidate reaches the age of 18, D&SDT-Headmaster will only discuss test results or test reviews with the candidate. D&SDT-Headmaster will not review test results or test reviews with family members or anyone else on behalf of the candidate once the candidate is 18.

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

The Knowledge/Audio Exam

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

The Knowledge Test Proctor will hand out materials and give instructions for taking the Knowledge Exam. You will have a maximum of **ninety (90) minutes** to complete the **79-question** Knowledge Exam. You will be told when fifteen (15) minutes remain. You may not ask questions about the content of the Knowledge Exam (such as "What does this question mean?")

You must have a 70% or better score to pass the knowledge portion of the exam.

All test sites in Ohio utilize electronic TMU© testing using Internet-connected computers. 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.

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

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

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

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

When you leave the testing room, you must leave all test materials in it. Anyone who takes or tries to take materials, notes, or information from the room is subject to prosecution and will be reported to the Ohio Department of Health (ODH).

The knowledge and the audio version of the knowledge exam are in English.

- Foreign language word-for-word translation dictionaries **are allowed**.
 - You must show the RN Test Observer and KTP the dictionary during check-in.
 - Translators, non-approved language translators, electronic dictionaries, or dictionaries that contain writing or definitions **are not allowed**.

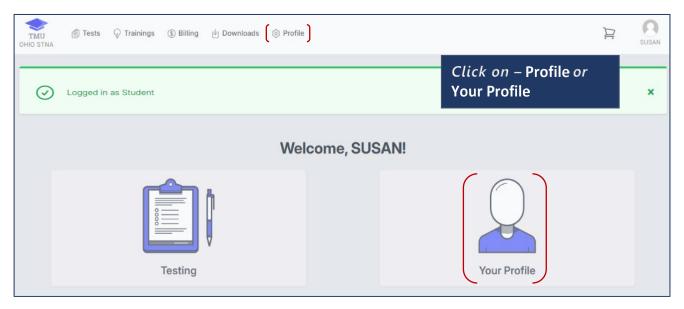
An audio (oral) version of the knowledge test is available. However, you must request an Audio version of the Knowledge Exam before you submit your testing fee payment. There is an additional fee of \$10 (the total for the Audio version of the Knowledge Exam is \$36.00) for an Audio version of the Knowledge exam. The questions are neutrally read to you and can be heard through wired headphones or earbuds provided by the KTP (or you may bring your own, but they must be shown to the RN Test Proctor and KTP at check-in) plugged into the computer. Bluetooth-connected devices are not allowed. The audio control buttons will be displayed on the computer screen, enabling you to play, rewind, or pause questions as needed.

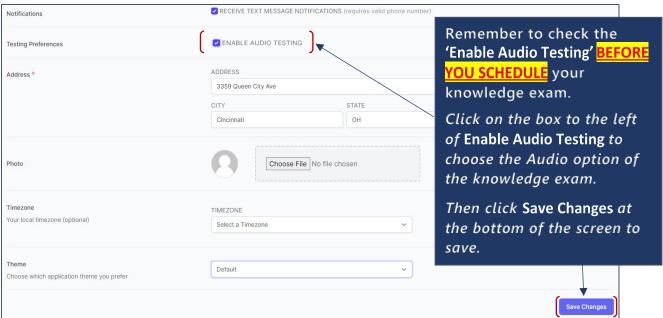
• On the audio version of the Knowledge Exam, only the first 59 questions will be read orally, and the remaining 20 questions will have to be answered without oral assistance to assess English reading comprehension.

Select an Audio Version of the Knowledge Exam

To select the audio (oral) version of the knowledge exam, follow the instructions on the next page.

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





Remotely Proctored Knowledge Exam Option (Retakes)

You can retake the knowledge exam with a remote proctor from your home, etc. If you have a previously approved ADA, please call D&SDT-Headmaster at (877) 851-2355 **before** scheduling a remotely proctored retake.

REMOTELY PROCTORED KNOWLEDGE EXAM CANDIDATE REQUIREMENTS

Candidates must have:

- An updated version of Google Chrome as your Internet browser.
 - TMU© does not support Internet Explorer.

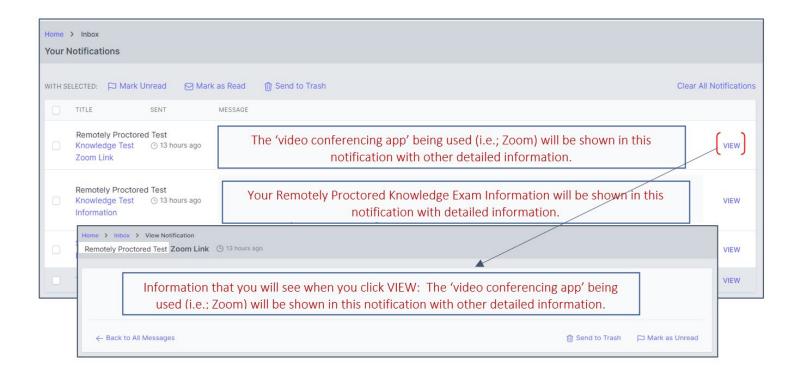
- A reliable Internet (Wi-Fi) connection.
- A personal computer/tablet/laptop to log into your TMU© account to access the knowledge exam.
- Your Email or Username and Password to take the remotely proctored TMU© Knowledge exam.
- A smartphone to access the 'video conferencing app' (for example, Zoom, etc.) that you must download in advance of your test event.
 - You will receive an email with information about the 'video conferencing app' (for example, Zoom, etc.) you will need before test day.
 - The night before your scheduled remotely proctored knowledge exam, you will be emailed a reminder with the password-protected link to join the test event.
- A distraction and interruption-free area of your home, etc., where you will be testing.
- If you have selected and paid for the Audio version of the knowledge exam, you will provide your own <u>wired</u> headphones/earbuds (Bluetooth-connected devices are not allowed) to plug into the computer.
 - The questions are neutrally read to you and will be heard through wired headphones or earbuds plugged into the computer.
 - When taking an Audio exam, the audio control buttons will be displayed on the computer screen, enabling you to play, rewind, or pause questions as needed.

SCHEDULE A REMOTELY PROCTORED KNOWLEDGE EXAM

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

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

See screenshots showing an example of what a notification regarding your remotely proctored knowledge exam will entail on the next page:



REMOTELY PROCTORED KNOWLEDGE EXAM CHECK-IN

You must be signed in to the remotely proctored exam link (for example, Zoom, etc., waiting room) for the check-in process with the remote test proctor **prior (10-20 minutes)** to the start time listed on your test confirmation. If you are not signed into the remotely proctored exam waiting room prior (**at least 10 minutes**) to the time listed on your test confirmation, you will not be allowed to test, considered a no-show status, forfeit your testing fees paid, and have to pay for another test date.

- You must show your mandatory forms of identification to the remote Proctor at check-in before starting your remotely proctored knowledge exam. Please see the 'Identification' section for specifics.
- You must show your surroundings to the remote Proctor during check-in before starting your remotely proctored knowledge exam.

REMOTELY PROCTORED KNOWLEDGE EXAM POLICIES

During the remotely proctored knowledge exam, all 'Testing Policies' and 'Security' measures are followed. Please refer to those sections for information.

- The 'video conferencing app' link (for example, Zoom, etc.) must be maintained during the entire knowledge test.
- If the 'video conferencing app' (for example, Zoom, etc.) connection is lost, you must immediately reconnect. Otherwise, the remote proctor will disconnect you from the exam, and your test will be scored as a failed attempt.
- Your device must <u>not be muted</u> during testing so that the remote Proctor can hear if there are any distractions or other interruptions during your test. **REMEMBER:** You need to test in a distraction and interruption-free area just like you would if you were sitting in the knowledge test room at a test site.

- Please see the remotely proctored knowledge testing issues information under the 'No Show Exceptions' section.
- If needed, you may do math calculations on scratch paper. Before starting your exam, you will be asked to show the remote Proctor both sides of the scratch paper.
 - At the end of your exam, you will be asked to show both sides of the scratch paper to the remote Proctor *again*. You will then be told you must tear up the scratch paper in view of the remote Proctor and told to mute your phone before tearing up the scratch paper.
- The knowledge and the audio version of the knowledge exam are in English.
- Foreign language word-for-word translation dictionaries are allowed.
 - You must show the remote Proctor the dictionary during check-in.
 - Translators, non-approved language translators, electronic dictionaries, or dictionaries that contain writing or definitions **are not allowed**.

Please call D&SDT-Headmaster at (877)851-2355 if you have any questions or concerns or need assistance scheduling a remotely proctored knowledge exam retake.

Knowledge Exam Content

The Knowledge Exam consists of 79 multiple-choice questions. Questions are selected from subject areas based on the ODH-approved Ohio test plan and include questions from all the required categories as defined in the federal regulations. The subject areas are as follows:

Knowledge Exam Subject Areas:

SUBJECT AREA	Number of Questions	Subject Area	Number of Questions
Basic Nursing Skills	9	Mental Health	7
Care Impaired	6	Older Adult Growth & Development	5
Communication	6	Personal Care	9
Data Collection	5	Resident Rights	5
Disease Process	5	Role and Responsibility	7
Infection Control	7	Safety	8

Knowledge Practice Test

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

The following are a sample of the kinds of questions that you will find on the Knowledge/Audio 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. When you are communicating with residents, you need to remember to:

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

3. A resident's psychological needs:

- (A) Should be given minor consideration
- (B) Make the resident withdrawn and secretive
- (C) Are nurtured by doing everything for the resident
- (D) Are nurtured when residents are treated like individuals

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

The Manual Skill Test

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

- Listen carefully to all instructions given by the RN Test Observer. You may request to have any of the scenarios repeated **at any time** during your Skill Test up until you run out of time or tell the RN Test Observer that you are finished with your skill task demonstrations.
- You must correctly perform all **key** steps (in bold font) and 80% of all non-key steps on each task assigned to pass the Skill Test.
- If you believe you made a mistake while performing a task, tell the RN Test Observer you would like to correct it. You will need to correctly demonstrate the step or steps on the task you believe you performed incorrectly to receive credit for the correction.
- You may repeat or correct any step or steps on any task you believe you have performed incorrectly at any time during your allotted thirty-five minutes or until you tell the RN Test Observer you are finished with the Skill Test.
- The skill task steps are not order dependent unless the words BEFORE or AFTER are used in a step.
- When you finish each task, verbally tell the RN Test Observer you are finished and move to the designated "relaxation area." When the RN Test Observer and actor have set up and are ready for your next skill task demonstration, the RN Test Observer will read the scenario for your next task.
- All steps must actually be demonstrated. Steps that are only verbalized WILL NOT COUNT.

Skill Test Recording Form

If your skill test includes a skill task that requires recording a count or measurement, the RN test observer will provide a recording form similar to the one displayed below. 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	
PULSE:	beats RESPIRATIONS:	breaths
URINE OUTPUT:	ml	
GLASS 1: _		
GLASS 2: _		
TOTAL FLUID INTAKE: _	ml FOOD INTAKE:	%
Candidate's Signature:		

Skill Test Tasks

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

- Assist a Resident with a Bedpan, Measure and Record Output with Hand Washing
- Change a Male Resident's Brief, Provide Perineal Care with Hand Washing
- Donn [PUT ON] PPE (Gown, Gloves, Goggles or Face Shield), Empty a Urinary Drainage Bag, Measure and Record Output, Doff [REMOVE] PPE with Hand Washing
- Donn [PUT ON] PPE (a Gown and Gloves) and Provide Catheter Care for a Female Resident, Doff [REMOVE] PPE with Hand Washing
- Perineal Care for a Female Resident with Hand Washing

You will also receive an additional two (2) or three (3) randomly selected tasks from the Skill Task listing below. These selected tasks will make up your personalized and unique skill test. Each skill test randomly assigned by the TMU© skill test assignment algorithm will be comparable in overall difficulty.

Skill Tasks Listing

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

The steps listed for each task are required for a nurse aide candidate to successfully demonstrate minimum proficiency in the skill task for the RN Test Observer. The steps will be performed on a live resident actor for most tasks (the PPE and providing catheter care for a female resident, changing a male resident's brief with perineal care, and the perineal care for a female resident will be demonstrated with a manikin). You will be scored only on the steps listed.

You must score 80% on each task without missing key steps (bolded) to pass the skill component of your competency evaluation.

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

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

1. Apply an Anti-Embolic Stocking on a Resident's Leg

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Raise the bed between mid-thigh and waist level.
- 4) Provide privacy for the resident; pull the privacy curtain.
- 5) Provide for the resident's privacy by only exposing one leg.
- 6) Roll, gather, or turn the stocking down inside out to the heel.

- 7) Place stocking over resident's toes, foot, and heel.
- 8) Roll or pull stocking up one leg.
- 9) Check toes for possible pressure from the stocking and adjust as needed.
- 10) Leave the resident with a stocking that is smooth and wrinkle-free.
- 11) Lower bed.
- 12) Open the privacy curtain.
- 13) Maintain respectful, courteous interpersonal interactions at all times.
- 14) Place the call light or signal device within easy reach of the resident.
- 15) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

2. ASSIST A RESIDENT TO AMBULATE USING A GAIT BELT

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Obtain a gait belt for the resident.
- 4) Lock designated bed brake(s) to ensure resident's safety.
- 5) Lock wheelchair brakes to ensure resident's safety.
- 6) Assist the resident in putting on non-skid footwear.
- 7) Lower the bed so the resident's feet are flat on the floor when sitting on the edge of the bed.
- 8) Bring the resident to a sitting position with the resident's feet flat on the floor.
- 9) Place a gait belt around the resident's waist.
- 10) Tighten the gait belt to the appropriate fitting/size.
- 11) Check the gait belt for tightness by slipping fingers between it and the resident to ensure it is secure.
- 12) Face the resident and grasp the gait belt with both hands.
- 13) Bring the resident to a standing position using proper body mechanics at all times.
- 14) Grasp the gait belt with one hand and stabilize the resident with the other hand by holding the forearm or shoulder or using another appropriate method.
- 15) Position yourself behind and slightly to the side of the resident.
- 16) Ambulate the resident at least ten steps to the wheelchair.
- 17) Assist the resident in pivoting/turning and sitting in the wheelchair in a controlled manner, ensuring safety at all times.
- 18) Remove gait belt.
- 19) Maintain respectful, courteous interpersonal interactions at all times.
- 20) Place the call light or signal device within easy reach of the resident.
- 21) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

3. Assist a Resident to Ambulate with a Walker using a Gait Belt

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Obtain a gait belt for the resident.
- 4) Lock designated bed brake(s) to ensure resident's safety.
- 5) Lock wheelchair brakes to ensure resident's safety.
- 6) Assist the resident in putting on non-skid footwear.
- 7) Bring the resident to a sitting position with the resident's feet flat on the floor when sitting on the edge of the bed.
- 8) Place the gait belt around the resident's waist.
- 9) Tighten the gait belt to the appropriate fitting/size.
- 10) Check the gait belt for tightness by slipping fingers between it and the resident to ensure it is secure.
- 11) Grasp the gait belt with one hand.
- 12) Position the walker in front of the resident.
- 13) Assist resident to standing position using proper body mechanics.
- 14) Stabilize the walker using your hand and/or foot.
- 15) Position yourself behind and slightly to the side of the resident.
- 16) Ambulate the resident at least ten steps to the wheelchair.
- 17) Assist the resident in pivoting/turning and sitting in the wheelchair in a controlled manner, ensuring safety at all times.
- 18) Remove gait belt.
- 19) Maintain respectful, courteous interpersonal interactions at all times.
- 20) Place the call light or signal device within easy reach of the resident.
- 21) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

4. Assist a Resident with a Bedpan, Measure and Record Output with Hand Washing

(One of the possible first mandatory tasks.)

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Gather supplies.
- 4) Provide privacy for the resident; pull the privacy curtain.
- 5) Put on gloves.
- 6) Position the resident on a standard bedpan/fracture pan with the pan in the correct orientation and using the correct body mechanics.
- 7) Raise the head of the bed.
- 8) Leave tissue within reach of the resident.
- 9) Leave the call light or signaling device within reach of the resident.
- 10) Step away from the resident until the RN Test Observer identifies that the resident is finished.
- 11) Upon returning, lower the head of the bed.

- 12) Gently remove the bedpan.
- 13) Hold the bedpan while the RN Test Observer pours fluid into the bedpan.
- 14) Place the graduate on a flat surface for reading output at eye level and pour fluid into the graduate.
- 15) Empty the graduate into the designated toilet.
- 16) Rinse and dry the bedpan and graduate, and return to storage.
- 17) Obtain a wet washcloth and wash/assist the resident in washing hands.
- 18) Dry/assist resident to dry hands.
- 19) Place soiled linens in a designated container.
- 20) Remove gloves, turning them inside out as they are removed, and dispose in a designated container.
- 21) Leave the resident in a position of comfort and safety.
- 22) Record output on the provided, previously signed recording form.
- 23) The candidate's recorded output is within 25 mls of the RN Test Observer's recorded output.
- 24) Open the privacy curtain.
- 25) Maintain respectful, courteous interpersonal interactions at all times.
- 26) Place the call light or signal device within easy reach of the resident.
- 27) Turn on water.
- 28) Wet all surfaces of hands before applying soap.
- 29) Wet wrists before applying soap.
- 30) Apply soap to wet hands.
- 31) Rub hands together using friction.
- 32) While hands are not under running water, rub hands together for at least 20 seconds.
- 33) Interlace fingers pointing downward.
- 34) Wash all surfaces of hands and wrists with soap.
- 35) Rinse hands and wrists thoroughly under running water with fingers pointed downward.
- 36) Dry hands and wrists with a clean paper towel(s).
- 37) Immediately discard paper towel(s) in a trash can.
- 38) Turn off the faucet with a clean, dry paper towel.
- **39) Do not re-contaminate hands at any time during the hand-washing procedure.** (Using a wet paper towel to turn off the faucet is considered recontamination.)

5. BED BATH (PARTIAL) FOR A RESIDENT- WHOLE FACE AND ONE ARM, HAND AND UNDERARM

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Fill a basin with warm water.
- 4) Provide privacy for the resident; pull the privacy curtain.
- 5) Raise the bed between mid-thigh and waist level.
- 6) Cover the resident with a bath blanket or clean sheet.
- 7) Fanfold bed linens down to the resident's waist or move linens to the opposite side.
- 8) Remove the resident's gown without exposing the resident.
- 9) Place the gown in a designated container.
- 10) Wash the resident's face WITHOUT SOAP and pat dry.
- 11) Place a towel under the resident's arm, exposing one arm.

- 12) Wash the resident's arm, hand and underarm using soap and water.
- 13) Rinse the resident's arm, hand, and underarm.
- 14) Pat dry the resident's arm, hand, and underarm.
- 15) Assist the resident in putting on a clean gown.
- 16) Empty, rinse, and dry equipment and return to storage.
- 17) Place soiled linen in a designated container.
- 18) Lower bed.
- 19) Open the privacy curtain.
- 20) Maintain respectful, courteous interpersonal interactions at all times.
- 21) Place the call light or signaling device within easy reach of the resident.
- 22) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

6. CHANGE A MALE RESIDENT'S BRIEF AND PROVIDE PERINEAL CARE WITH HAND WASHING

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

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident [manikin].
- 3) Fill a basin with warm water.
- 4) Provide privacy for the resident; pull the privacy curtain.
- 5) Raise the bed between mid-thigh and waist level.
- 6) Raise the side rail on the side of the bed opposite the working side or request the RN Test Observer or Actor to stand on the side of the bed opposite the working side.
- 7) Obtain a brief.
- 8) Put on gloves.
- 9) Place a bath blanket or clean sheet over the resident to maintain privacy.
- 10) Place the waterproof pad under the resident's buttocks by turning the resident toward the side or raising their hips.
- 11) Expose perineum only.
- 12) Unfasten the wet brief on both sides.
- 13) Remove the soiled brief under the resident [manikin] by rolling the resident [manikin] side-to-side OR raising the hips.
- 14) Discard the soiled brief in a designated container.
- 15) Gently grasp the penis.
- 16) Use water and a soapy washcloth.
- 17) Clean the tip of the penis, starting at the urethral opening and working outward with a circular motion.
- 18) Clean the shaft of the penis with downward motions away from the tip of the penis.
- 19) Use a clean portion of a washcloth with each stroke.
- 20) Clean the scrotum with a clean portion of a washcloth.
- 21) Rinse the penis with a new, clean washcloth.
- 22) Rinse the penis using a clean portion of a washcloth with each stroke.
- 23) Rinse the scrotum using a clean portion of a washcloth with each stroke.
- 24) Pat the area dry.

- 25) Recover the exposed area with the bath blanket or clean sheet.
- 26) Assist resident in turning onto their side away from the working side of the bed.
- 27) Use a new, clean, soapy washcloth to clean the rectal area.
- 28) Clean the area from the scrotum to the rectal area using a clean portion of a washcloth with each stroke.
- 29) Rinse the area from the scrotum to the rectal area using a new, clean washcloth. Use a clean portion of a washcloth with each stroke.
- 30) Pat the area dry.
- 31) Apply a new brief by rolling resident [manikin] side-to-side OR raising hips.
- 32) Pull the front of the brief through, ensuring it is even on both sides of the resident [manikin], and fasten it securely on both sides.
- 33) Remove the waterproof pad without friction by turning the resident [manikin] side-to-side or raising their hips.
- 34) Remove the bath blanket or sheet.
- 35) Place all soiled linen in a designated container.
- 36) Position the resident on his back.
- 37) Lower bed.
- 38) Lower side rail(s), if side rails were used.
- 39) Empty, rinse, dry, and return equipment to storage.
- 40) Remove gloves, turning them inside out as they are removed, and dispose in a designated container.
- 41) Open the privacy curtain.
- 42) Leave the resident in a position of comfort and safety.
- 43) Maintain respectful, courteous interpersonal interactions at all times.
- 44) Place the call light or signaling device within easy reach of the resident.
- 45) Turn on water.
- 46) Wet all surfaces of hands *before* applying soap.
- 47) Wet wrists *before* applying soap.
- 48) Apply soap to wet hands.
- 49) Rub hands together using friction.
- 50) While hands are not under running water, rub hands together for at least 20 seconds.
- 51) Interlace fingers pointing downward.
- 52) Wash all surfaces of hands and wrists with soap.
- 53) Rinse hands and wrists thoroughly under running water with fingers pointed downward.
- 54) Dry hands and wrists with a clean paper towel(s).
- 55) Immediately discard paper towel(s) in a trash can.
- 56) Turn off the faucet with a clean, dry paper towel.
- **57) Do not re-contaminate hands at any time during the hand-washing procedure.** (Using a wet paper towel to turn off the faucet is considered recontamination.)

7. DENTURE CARE – CLEAN A RESIDENT'S UPPER OR LOWER DENTURE

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

- 3) Line the bottom of the sink with a protective lining to help prevent damage to the dentures. (Use a cloth towel or washcloth; do not use paper towels.)
- 4) Put on gloves.
- 5) Remove the denture from the cup.
- 6) Handle the denture carefully to avoid damage being careful to avoid contamination.
- 7) Empty and rinse denture cup.
- 8) Apply toothpaste.
- 9) Thoroughly brush denture, including the inner, outer, and chewing surfaces of an upper or lower denture. (Only one plate is used during testing. Toothettes may be utilized instead of a toothbrush as long as all surfaces listed are cleaned.)
- 10) Rinse the denture using clean, cool water.
- 11) Place the denture in the rinsed denture cup.
- 12) Add cool, clean water to the denture cup.
- 13) Clean and dry equipment and return to storage.
- 14) Place the protective lining in a designated container.
- 15) Maintain respectful, courteous interpersonal interactions at all times.
- 16) Place the call light or signaling device within easy reach of the resident.
- 17) Remove gloves, turning them inside out as they are removed.
- 18) Dispose of gloves in a designated container.
- 19) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

8. DONN [PUT ON] PPE (GOWN, GLOVES, GOGGLES, OR FACE SHIELD), EMPTY A URINARY DRAINAGE BAG, MEASURE AND RECORD OUTPUT, DOFF [REMOVE] PPE WITH HAND WASHING

(One of the possible first mandatory tasks.)

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Unfold the gown.
- 3) Put on a gown fully covering the torso and wrapping the gown around the back.
- 4) Fasten at the neck and the waist.
- 5) Put on goggles or face shield appropriately over the eyes or face.
- 6) Put on gloves.
- 7) Extend gloves over the wrists of the gown.
- 8) Explain the procedure to be performed to the resident.
- 9) Provide privacy for the resident; pull the privacy curtain.
- 10) Raise the bed between mid-thigh and waist level.
- 11) Place a barrier on the floor under the drainage bag.
- 12) Place the graduate on the previously placed barrier.
- 13) Open the drain to allow the urine to flow into the graduate until the bag is empty.
- 14) Avoid touching the graduate with the tip of the tubing.
- 15) Close the drain.
- 16) Wipe the drain with an antiseptic wipe AFTER the drainage bag is empty.
- 17) Replace the drain in the holder.
- 18) Lower bed.

- 19) Place the graduate on a level, flat surface.
- 20) With the graduate at eye level, read the output.
- 21) Empty the graduate into the designated toilet.
- 22) Rinse, dry, and return equipment to storage.
- 23) Leave the resident in a position of comfort and safety.
- 24) Record the output on the provided, previously signed recording form.
- 25) The candidate's measured output reading is within 25 mls of the RN Test Observer's output reading.
- 26) Open the privacy curtain.
- 27) Maintain respectful, courteous interpersonal interactions at all times.
- 28) Place the call light or signaling device within easy reach of the resident.
- 29) Remove gloves BEFORE the gown, turning them inside out as they are removed.
- 30) Dispose of gloves in a designated container.
- 31) Remove goggles or face shield from the back by lifting ear pieces or headband.
- 32) Place goggles or face shield in a designated container.
- 33) Unfasten the gown at the neck.
- 34) Unfasten the gown at the waist.
- 35) Pull the gown away from the neck, touching only the inside of the gown.
- 36) Turn the gown inside out and roll it into a bundle.
- 37) Dispose of the gown in a designated container.
- 38) Turn on water.
- 39) Wet all surfaces of hands *before* applying soap.
- 40) Wet wrists before applying soap.
- 41) Apply soap to wet hands.
- 42) Rub hands together using friction.
- 43) While hands are not under running water, rub hands together for at least 20 seconds.
- 44) Interlace fingers pointing downward.
- 45) Wash all surfaces of hands and wrists with soap.
- 46) Rinse hands and wrists thoroughly under running water with fingers pointed downward.
- 47) Dry hands and wrists with a clean paper towel(s).
- 48) Immediately discard paper towel(s) in a trash can.
- 49) Turn off the faucet with a clean, dry paper towel.
- **50) Do not re-contaminate hands at any time during the hand-washing procedure.** (Using a wet paper towel to turn off the faucet is considered recontamination.)

9. DONN [PUT ON] PPE (A GOWN AND GLOVES), PROVIDE CATHETER CARE FOR A FEMALE RESIDENT, DOFF [REMOVE PPE] WITH HAND WASHING

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

- 1) Perform hand hygiene.
 - c. Cover all surfaces of the hands with hand sanitizer.
 - d. Rub hands together to dry.
- 2) Unfold the gown.
- 3) Put on a gown fully covering the torso and wrapping the gown around the back.
- 4) Fasten at the neck and the waist.
- 5) Put on gloves.

PUTTING ON PPE
STEPS ADDED
[A GOWN & GLOVES ONLY]

- 6) Extend gloves over the wrists of the gown.
- 7) Explain the procedure to be performed to the resident.
- 8) Fill a basin with warm water.
- 9) Provide privacy for the resident; pull the privacy curtain.
- 10) Raise the side rail on the side of the bed that is opposite the working side of the bed or request the RN Test Observer to stand on the side of the bed opposite the working side.
- 11) Raise the bed between mid-thigh and waist level.

Put on gloves.

- 12) Place a bath blanket or clean sheet over the resident to maintain privacy.
- 13) Turn resident [manikin] (side-to-side) or raise hips and place a waterproof pad under resident [manikin].
- 14) Verbalize checking while physically checking to see that urine can flow unrestricted into the drainage bag.
- 15) Use soap and water to carefully wash around the catheter where it exits the urethra.
- 16) With one hand, hold the catheter near the urethra to prevent tugging on the catheter.
- 17) With the other hand, clean at least 3-4 inches from the urethra down the drainage tube.
- 18) Clean with stroke(s) only away from the urethra. (A washcloth wrapped around the tubing with one stroke is okay.)
- 19) Use a clean portion of a washcloth for any stroke.
- 20) Rinse with stroke(s) only away from the urethra. (A washcloth wrapped around the tubing with one stroke is okay.)
- 21) Use a clean portion of a washcloth for any stroke.
- 22) Pat dry with a clean towel.
- 23) Do not allow the tube to be pulled at any time during the procedure.
- 24) Replace the top cover over the resident.
- 25) Remove the bath blanket or sheet.
- 26) Remove the waterproof pad without friction by turning the resident [manikin] side-to-side or raising the hips.
- 27) Place all soiled linens in a designated container.
- 28) Empty, rinse, dry, and return equipment to storage.
 - Remove gloves, turning them inside out as they are removed, and dispose in a designated container.
- 29) Lower bed.
- 30) Lower side rail(s), if side rails were used.
- 31) Leave the resident in a position of comfort and safety.
- 32) Open the privacy curtain.
- 33) Maintain respectful, courteous interpersonal interactions at all times.
- 34) Place the call light or signaling device within easy reach of the resident.
- 35) Remove gloves BEFORE the gown, turning them inside out as they are removed.
- 36) Dispose of gloves in a designated container.
- 37) Unfasten the gown at the neck.
- 38) Unfasten the gown at the waist.
- 39) Pull the gown away from the neck, touching only the inside of the gown.
- 40) Turn the gown inside out and roll it into a bundle.
- 41) Dispose of the gown in a designated container.
- 42) Turn on water.

REMOVAL OF PPE STEPS ADDED

- 43) Wet all surfaces of hands before applying soap.
- 44) Wet wrists before applying soap.
- 45) Apply soap to wet hands.
- 46) Rub hands together using friction.
- 47) While hands are not under running water, rub hands together for at least 20 seconds.
- 48) Interlace fingers pointing downward.
- 49) Wash all surfaces of hands and wrists with soap.
- 50) Rinse hands and wrists thoroughly under running water with fingers pointed downward.
- 51) Dry hands and wrists on a clean paper towel(s).
- 52) Immediately discard paper towel(s) in a trash can.
- 53) Turn off the faucet with a clean, dry paper towel.
- **54) Do not re-contaminate hands at any time during the hand-washing procedure.** (Using a wet paper towel to turn off the faucet is considered recontamination.)

10. Dress a Bedridden Resident with an Affected (Weak) Side

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Provide privacy for the resident; pull the privacy curtain.
- 4) Raise the bed between mid-thigh and waist level.
- 5) Cover the resident with a sheet, top cover, or bath blanket while removing the gown.
- 6) Remove the gown from the unaffected side first.
- 7) Place the soiled gown in a designated container.
- 8) When dressing the resident in a shirt or blouse, insert your hand through the sleeve of the shirt or blouse and grasp the resident's hand.
- 9) When dressing the resident in a shirt or blouse, always dress from the affected side first.
- 10) When dressing the resident in pants, assist the resident in raising their hips or turning the resident from side to side and pulling the pants over the buttocks and up to the resident's waist
- 11) When dressing the resident in pants, always dress the resident from the affected side first.
- 12) Apply the resident's non-skid footwear.
- 13) Leave the resident comfortably and properly dressed and in a position of safety.
- 14) Lower bed.
- 15) Open the privacy curtain.
- 16) Maintain respectful, courteous interpersonal interactions at all times.
- 17) Place the call light or signaling device within easy reach of the resident.
- 18) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

11. FEED A DEPENDENT RESIDENT IN BED

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

- 3) Verbalize identifying the resident's name against the diet card and verbalize that the resident has received the correct tray while checking the diet card and tray.
- 4) Position the resident in an upright position that is at least 45 degrees.
- 5) Protect clothing from soiling using a napkin, clothing protector, or towel.
- 6) Wash and dry the resident's hands BEFORE feeding.
- 7) Place soiled linen in a designated container.
- 8) Remain at eye level, facing the resident while feeding the resident.
- 9) Describe the foods being offered to the resident.
- 10) Offer each fluid frequently.
- 11) Offer food in small amounts at a reasonable rate, allowing the resident time to chew and swallow.
- 12) Wipe the resident's face during the meal if needed.
- 13) Leave the resident in bed with the head of the bed set up to at least 30 degrees.
- 14) Record intake in the percentage of total solid food eaten on the provided, previously signed recording form.
- 15) The candidate's recorded consumed food intake must be within 25 percentage points of the RN Test Observer's recorded food intake.
- 16) Record the sum of total fluid consumed in ml on the provided, previously signed recording form.
- 17) The candidate's recorded total consumed fluid intake is within 60 mls of the RN Test Observer's recorded fluid intake.
- 18) Remove the clothing protector and place it in an appropriate container.
- 19) Leave the resident clean.
- 20) Maintain respectful, courteous interpersonal interactions at all times.
- 21) Place the call light or signaling device within easy reach of the resident.
- 22) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

12. HAIR CARE FOR A RESIDENT

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Provide privacy for the resident; pull the privacy curtain.
- 4) Place a towel on the resident's shoulders.
- 5) Ask the resident how they would like their hair styled.
- 6) Comb/brush/style hair gently and completely.
- 7) Place linen in a designated container.
- 8) Leave hair neatly brushed/combed/styled.
- 9) Open the privacy curtain.
- 10) Maintain respectful, courteous interpersonal interactions at all times.
- 11) Place the call light or signaling device within easy reach of the resident.
- 12) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

13. MAKE AN OCCUPIED BED

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Gather linen and transport it correctly.
- 3) Place linen on a clean surface. You may place linen on the over-bed table, the back of a chair, a bedside stand, or the foot of the bed.
- 4) Explain the procedure to be performed to the resident.
- 5) Provide privacy for the resident; pull the privacy curtain.
- 6) Raise the side rail on the side of the bed opposite the working side or request the RN Test Observer to stand on the side of the bed opposite the working side.
- 7) Raise the bed to between mid-thigh and waist level.
- 8) Assist the resident in rolling onto the side toward the raised side rail or the RN Test Observer.
- 9) Roll or fan fold soiled linen, soiled side inside, to the center of the bed.
- 10) Place the clean bottom sheet along the center of the bed, roll or fan fold the linen against the resident's back, and unfold the remaining half.
- 11) Secure two fitted corners of the clean bottom sheet.
- 12) Raise the side rail on the other side of the bed or request the RN Test Observer to stand on the other side of the bed.
- 13) Assist the resident in rolling over the bottom linen, preventing trauma and avoidable pain at all times
- 14) Remove soiled linen without shaking.
- 15) Avoid touching linen to uniform.
- 16) Place soiled linen in a designated container.
- 17) Pull through and smooth out the clean bottom linen.
- 18) Secure the other two fitted corners.
- 19) Place clean top linen and blanket or bedspread over the covered resident while removing used linen.
- 20) Keep the resident unexposed at all times.
- 21) Tuck in top linen and blanket or bedspread at the foot of the bed.
- 22) Make mitered corners at the foot of the bed.
- 23) Apply a clean pillow case with zippers and tags of the pillow to the inside.
- 24) Gently lift the resident's head while replacing the pillow.
- 25) Leave the bed completely and neatly made without wrinkles.
- 26) Ensure the sheet and top linen do not constrict the resident's feet.
- 27) Lower bed.
- 28) Lower side rails, if side rails were used.
- 29) Open the privacy curtain.
- 30) Maintain respectful, courteous interpersonal interactions at all times.
- 31) Place the call light or signaling device within easy reach of the resident.
- 32) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

14. MOUTH CARE—BRUSH A RESIDENT'S TEETH

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Put on gloves.
- 4) Gather equipment/supplies.
- 5) Provide privacy for the resident; pull the privacy curtain.
- 6) Drape the chest with a chest barrier (cloth or paper towel) to prevent soiling.
- 7) Wet the toothbrush and apply a small amount of toothpaste to the toothbrush. (If available, toothettes may be utilized instead of the toothbrush as long as all the surfaces listed are cleaned.)
- 8) Brush the resident's teeth, including the inner, outer, and chewing surfaces of all upper and lower teeth.
- 9) Clean the resident's tongue.
- 10) Assist the resident in rinsing their mouth. (You may use an emesis basin or disposable cup for the resident to spit in.)
- 11) Wipe the resident's mouth.
- 12) Remove the clothing protector and place it in an appropriate container.
- 13) Empty, rinse, and dry the emesis basin, if used, or dispose of the cup in a trash container.
- 14) Rinse toothbrush.
- 15) Return equipment to storage.
- 16) Leave the resident in a position of comfort.
- 17) Open the privacy curtain.
- 18) Maintain respectful, courteous interpersonal interactions at all times
- 19) Place the call light or signaling device within easy reach of the resident.
- 20) Remove gloves, turning them inside out as they are removed.
- 21) Dispose of gloves in a designated container.
- 22) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

15. NAIL CARE FOR A RESIDENT

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Provide privacy for the resident; pull the privacy curtain.
- 4) Immerse the resident's nails in warm water.
- 5) Soak nails for at least five minutes. (The five minutes may be verbalized by the candidate and acknowledged by the RN Test Observer.)
- 6) Gently push cuticles back with a wet washcloth. (**DO NOT** use an orange stick to push back cuticles.)
- 7) Dry the resident's hand thoroughly, making sure to dry carefully between the fingers.
- 8) Gently clean under the nails with an orange stick.

- 9) Wipe the orange stick at least one time during the procedure.
- 10) File each fingernail.
- 11) Empty, rinse, dry, and return equipment to storage.
- 12) Place soiled linen in a designated container.
- 13) Discard the orange stick in a designated container.
- 14) Open the privacy curtain.
- 15) Maintain respectful, courteous interpersonal interactions at all times.
- 16) Place the call light or signaling device within easy reach of the resident.
- 17) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

16. Perineal Care for a Female Resident with Hand Washing

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

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to the resident [manikin].
- 3) Fill a basin with warm water.
- 4) Provide privacy for the resident; pull the privacy curtain.
- 5) Raise the side rail on the side of the bed opposite the working side or request the RN Test Observer or Actor to stand on the side of the bed opposite the working side.
- 6) Raise the bed to between mid-thigh and waist level.
- 7) Place a bath blanket or clean sheet over the resident.
- 8) Put on gloves.
- Place a waterproof pad under the resident's buttocks by turning the resident side-to-side or raising hips.
- 10) Expose perineum only.
- 11) Use water and a clean, soapy washcloth.
- 12) Clean both sides and middle of the labia from top to bottom with a clean portion of the washcloth for each stroke.
- 13) Using water and a new, clean washcloth, rinse the area from top to bottom. Use a clean portion of the washcloth with each stroke.
- 14) Pat the area dry with a clean portion of the towel for each pat.
- 15) Cover the exposed area with the bath blanket or clean sheet.
- 16) Assist resident in turning onto their side away from the working side of the bed.
- 17) Clean the rectal area with a new, clean washcloth with water and soap.
- 18) Clean the rectal area from the vagina to the rectal area using at least two single strokes with a clean portion of the washcloth for every single stroke.
- 19) Using a new, clean washcloth, rinse the rectal area from the vagina to the rectal area. Use at least two single strokes. Use a clean portion of the washcloth for each stroke.
- 20) Pat dry area from vagina to rectal area.
- 21) Remove the waterproof pad from under the buttocks without friction by turning the resident [manikin] side-to-side or raising the hips.
- 22) Position the resident on her back.
- 23) Remove the bath blanket or sheet.

- 24) Placed all soiled linen in a designated container.
- 25) Empty, rinse, dry, and return equipment to storage.
- 26) Remove gloves, turning them inside out as they are removed, and dispose in a designated container.
- 27) Lower bed.
- 28) Lower side rail(s), if side rails were used.
- 29) Open the privacy curtain.
- 30) Maintain respectful, courteous interpersonal interactions at all times.
- 31) Place the call light or signaling device within easy reach of the resident.
- 32) Turn on water.
- 33) Wet all surfaces of hands before applying soap.
- 34) Wet wrists *before* applying soap.
- 35) Apply soap to wet hands.
- 36) Rub hands together using friction.
- 37) While hands are not under running water, rub hands together for at least 20 seconds.
- 38) Interlace fingers pointing downward.
- 39) Wash all surfaces of hands and wrists with soap.
- 40) Rinse hands and wrists thoroughly under running water with fingers pointed downward.
- 41) Dry hands and wrists with a clean paper towel(s).
- 42) Immediately discard paper towel(s) in a trash can.
- 43) Turn off the faucet with a clean, dry paper towel.
- **44) Do not re-contaminate hands at any time during the hand-washing procedure.** (Using a wet paper towel to turn off the faucet is considered recontamination.)

17. Position a Resident in Bed on Their Side

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Provide privacy for the resident; pull the privacy curtain.
- 4) Position bed flat.
- 5) Raise the bed between mid-thigh and waist level.
- 6) Raise the side rail on the side of the bed opposite the working side or request the RN Test Observer to stand on the side of the bed opposite the working side.
- 7) From the working side of the bed, gently move the resident's upper body toward yourself.
- 8) From the working side of the bed, gently move the resident's hips toward yourself.
- 9) From the working side of the bed, gently move the resident's legs toward yourself.
- 10) Assist/turn the resident onto the correct side, as the RN Test Observer stated in the scenario.
- 11) Ensure the resident's face is never obstructed by the pillow.
- 12) Check to be sure the resident is not lying on their downside arm.
- 13) Readjust or place a support device under the resident's head.
- 14) Place a support device under the resident's head, the upside arm, behind the back, and between the knees.
- 15) Ensure the resident is in correct body alignment. Physically check that the resident is in correct body alignment.
- 16) Leave the resident in a position of comfort and safety.

- 17) Lower side rails, if side rails were used.
- 18) Lower bed.
- 19) Open the privacy curtain.
- 20) Maintain respectful, courteous interpersonal interactions at all times.
- 21) Place the call light or signaling device within easy reach of the resident.
- 22) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

18. RANGE OF MOTION FOR A RESIDENT'S HIP AND KNEE

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Raise the bed between mid-thigh and waist level.
- 4) Provide privacy for the resident; pull the privacy curtain.
- 5) Position resident supine (bed flat).
- 6) Leave the resident in good body alignment.
- 7) Place one hand under the resident's knee and the other hand under the resident's ankle.
- 8) Move the entire leg away from the resident's body. (abduction)
- 9) Move the entire leg back toward the resident's body. (adduction)
- 10) Complete abduction and adduction of the resident's hip at least three times.
- 11) Continue correctly supporting joints by placing one hand under the resident's knee and the other under the resident's ankle.
- 12) Bend the resident's knee and hip toward the resident's trunk. (flexion of the hip and knee at the same time)
- 13) Straighten the resident's knee and hip. (extension of the knee and hip at the same time)
- 14) Complete flexion and extension of the resident's knee and hip at least three times.
- 15) The candidate *must ask* the resident at least once if they are causing any pain or discomfort.
- 16) Do not force any joint beyond the point of free movement.
- 17) Leave the resident in a comfortable position.
- 18) Lower bed.
- 19) Open the privacy curtain.
- 20) Maintain respectful, courteous interpersonal interactions at all times.
- 21) Place the call light or signaling device within easy reach of the resident.
- 22) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

19. RANGE OF MOTION FOR A RESIDENT'S SHOULDER

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Raise the bed between mid-thigh and waist level.
- 4) Provide privacy for the resident; pull the privacy curtain.

- 5) Position resident supine (bed flat).
- 6) Leave the resident in good body alignment.
- 7) Place one hand under the resident's elbow and the other hand under the resident's wrist.
- 8) Raise the resident's arm up and over the resident's head. (flexion)
- 9) Bring the resident's arm back down to the resident's side. (extension)
- 10) Complete flexion and extension of the resident's shoulder at least three times.
- 11) Continue correctly supporting joints by placing one hand under the resident's elbow and the other under the resident's wrist.
- 12) Move the resident's arm away from the resident's body. (abduction)
- 13) Return the resident's arm to the resident's side. (adduction)
- 14) Complete abduction and adduction of the shoulder at least three times.
- 15) The candidate <u>must ask</u> at least once if they are causing any pain or discomfort.
- 16) Do not force any joint beyond the point of free movement.
- 17) Leave the resident in a comfortable position.
- 18) Lower bed.
- 19) Open the privacy curtain.
- 20) Maintain respectful, courteous interpersonal interactions at all times.
- 21) Place the call light or signaling device within easy reach of the resident.
- 22) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

20. STAND AND PIVOT-TRANSFER A RESIDENT FROM THEIR BED TO A WHEELCHAIR USING A GAIT BELT

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Obtain a gait belt for the resident.
- 4) Position the wheelchair close to the bed.
- 5) Lock wheelchair brakes to ensure resident's safety.
- 6) Lock designated bed brake(s) to ensure resident's safety.
- 7) Assist the resident in putting on non-skid footwear.
- 8) Assist the resident in a sitting position and lower the bed so the resident's feet are flat on the floor when sitting on the edge of the bed.
- 9) Place a gait belt around the resident's waist.
- 10) Tighten the gait belt to the appropriate fitting/size.
- 11) Check the gait belt for tightness by slipping fingers between it and the resident to ensure it is secure.
- 12) Face the resident and grasp the gait belt with both hands.
- 13) Bring the resident to a standing position using proper body mechanics.
- 14) Assist the resident in pivoting and sitting in the wheelchair in a controlled manner that ensures safety.
- 15) Remove the gait belt.

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

21. VITAL SIGNS - TAKE AND RECORD A RESIDENT'S PULSE AND RESPIRATIONS

- 1) Perform hand hygiene.
 - a. Covers all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Provide privacy for the resident; pull the privacy curtain.
- 4) Locate the radial pulse by placing the tips of fingers on the thumb side of the resident's wrist.
- 5) Count pulse for a full 60 seconds, or count for 30 seconds times two.
 - a. Must verbally tell the RN Test Observer if you are counting for 60 seconds or 30 seconds times two.
 - b. Verbally tell the RN Test Observer when you start and stop counting.
- 6) Record the resident's pulse rate on the provided, previously signed recording form.
- 7) The candidate's recorded pulse rate is within four (4) beats of the RN Test Observer's recorded pulse rate.
- 8) Count respirations for a full 60 seconds, or count for 30 seconds times two.
 - a. Must verbally tell the RN Test Observer if you are counting for 60 seconds or 30 seconds times two.
 - b. Verbally tell the RN Test Observer when you start and stop counting.
- 9) Record the resident's respirations on the provided, previously signed recording form.
- 10) The candidate's recorded respiratory rate is within two (2) breaths of the RN Test Observer's recorded respiratory rate.
- 11) Open the privacy curtain.
- 12) Maintain respectful, courteous interpersonal interactions at all times.
- 13) Place the call light or signaling device within easy reach of the resident.
- 14) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

Knowledge Exam Vocabulary List

abdominal thrust
abduction
abduction pillow
abuse
accidents
activities
adaptive equipment

adduction
ADL
admitting resident
advance directives
affected side
aggressive resident
aging process

agitation
airborne precautions
airway obstruction
alarm
Alzheimer's disease
ambulation
anger

angina	
anti-embolism/elastic	
stocking/TED hose	
anxiety	
apathy	
aphasia	
apnea	
appropriate response	
aromatherapy	
arthritis	
aseptic	
aspiration	
assault]
assistive device	
auditory hallucinations	
bacteria	
balance	
bargaining	
basic needs	
bathing	
battery	
bed cradle	
bed measurement]
bedpan	
behavior	
benign prostatic hypertrophy (BPH)	
biohazard	
bladder training]
blindness	
bloodborne pathogen	
blood pressure	
body fluid	
body language	
body mechanics	$\neg \bot$

body systems
body temperature
bowel elimination
bowel movement
bowel program
ВРН
bradycardia
breathing
breathing rates
C-difficile
call light/signal
cancer
cane use
cardiac arrest
cardiovascular system
care conference
care impaired
care plan
cares
cast
cataract
catheter
catheter care
ccs in an ounce
centered care
central nervous system
cerebral vascular accident
cerebrovascular accident (CVA)
chain of command
chain of infection
charge nurse
chemical restraint
chemical safety
chest pain

CHF	
choking	
circulation	
cleaning spills	
clear liquid diet	
cognitive impairment	
cold compress	
colostomy care	
comfort care	
communicable	
communication	
communication terms	
competency evaluation	
program	
conduct	
confidentiality	
conflict resolution	
confused resident	
confusion	
congestive heart failure	
constipation	
constrict	
contact isolation	
contamination	
continuity	
contracture	
converting measures	
COPD	
cueing	
cultural	_
data collection	_
death and dying	_
dehydration	_
delegation	_
delusions	_

dementia dentures depression diabetes
depression
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diabetes
dialysis
diastolic
diet
digestion
dilate
discharging resident
disease
disease process
disinfection
disoriented
disrespect
dizziness
DNR
documentation
dressing
droplet precautions
dry skin
dysphagia
dyspnea
dysuria
dysuria and hematuria
edema
elevate head
elimination
emergency situation
emesis
emesis basin
emotional needs
emotional support
empathy
emphysema

end of life
enteral feeding
ethics
evacuation
extremity
eyeglasses
facial care
falls
fecal impaction
feeding
feeding tubes
financial abuse
financial exploitation
fire safety
flatus
fluid
fluid intake
Foley catheter
foot care
foot drop
Fowler's
fraud
frayed cord
free from disease
frequent urination
gait belt
gastric feedings
gastrostomy tube
geriatric chair
geriatrics
gerontology
gestures
gifts
gown removal
gown removal with IV bag

grieving process
HAI
hair care
halitosis
hallucination
hand hygiene
hand tremors
harm
hearing aid
hearing impaired
heart rates
hemiplegia
hepatitis B
hierarchy of needs
HIPAA
HIV
hoarding
hormones
hospice
human emotion
hydration
hypertension
impairment
impotence
in-service programs
incontinence
independence
indwelling catheter
infection
infection control
inflammation
influenza
initial observations
input and output (I&O)
insulin

Ohio Nurse Aide Candidate Handbook

isolation jaundice lateral position legal ethics lift/draw sheet lifting linen handling liquid diet listening localized infection logrolling loose teeth loss of function low sodium diet Maslow masturbation MDS measuring measuring height measuring temperature mechanical lift medical asepsis medical record medications memory loss memory loss mental health microbe microorganism military time morning care mouth care moving resident multiple sclerosis	integumentary system	
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mouth care moving resident multiple sclerosis	military time	
moving resident multiple sclerosis	morning care	
multiple sclerosis	mouth care	
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nail care	
neglect	
negligence	
nervous system	
non-contagious disease	9
non-verbal	
communication	
NPO	
nursing assistant's role	
nutrients	
nutrition	
objective	
observations	
ombudsman	
oral care	
oral temperature	
orientation	
OSHA	
osteoporosis	
output	
overbed table	
oxygen	
pain	
palliative care	
paralysis	
Parkinson's disease	
partial bath	
passive range of motion (PROM)	n
pathogen	
patience	
perineal care	
peripheral vascular	
disease	
perseverate	

ре	rsonal grooming
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	one etiquette
	ysical needs
	ysical therapist
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	licy book
	sitioning
	st-mortem care
	eferences
	essure area
	essure injury/ulcer
	eventing injury
	vacy
pro	ofessionalism
pro	ogressive
pro	omoting independence
pro	onation
pro	ostate gland
pro	osthesis
psy	ychological needs
psy	ychosocial wellbeing
pu	lse
qu	ality of life
rac	dial
rar	nps
rar	nge of motion (ROM)
rea	ality orientation
red	ceptive aphasia
rec	ctal
rec	ctal temperature
	gulation

personal care

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reminiscence therapy	sexual needs	toileting schedule
reminiscing	sharp's container	transfers
reporting	shaving	treating residents with
reposition	side rails	respect
resident abuse	simple fracture	tube feeding
resident belongings	skin care	tubing
resident identification	skin integrity	tympanic
resident independence	slander	types of isolation
resident-centered care	smoking	unaffected
resident's chart	social needs	unconscious
resident's environment	special diets	undressing
resident's rights	specimen	urethral
residents	spiritual needs	urinary appearance
respectful treatment	stages of grief	urinary catheter
respiration	standard precautions	urinary elimination
respiratory system	standards of conduct	urinary problems
responding to resident	sterilization	urinary system
behavior	stethoscope	urine
responsibility	stress	UTI
restorative care	stroke	validation therapy
restraints	subjective	Vancomycin-resistant
rights	substance abuse	enterococcus (VRE)
risk factor	suicide	vision change
role	sundowning	visual impairment
safety	supine	vital signs
safety precautions	survey	vomitus
safety techniques	syncope	walker
scale	systolic	wandering resident
SDS	tachycardia	weak side
seclusion	telephone etiquette	weighing
seizure	temperature	wheelchair safety
self-esteem	terminal illness	white blood cells
semi-Fowlers	terminology	withdrawn resident
sensory system	threatening resident	work environment
sexual harassment	toenails	workplace violence

Notes: