



**D&S Diversified Technologies LLP**

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**Headmaster LLP**

## **Ohio Nursing Assistant Candidate Handbook**

*EFFECTIVE: September 1, 2019*

**Version 16.1**





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# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

## Preparing for Test Day Check List

- \_\_\_ 1. US Government Issued, Signed, Non-Expired Photo ID (Drivers license, State ID, Military ID, Passport, or Conceal Carry Permit). Also, Per DMV you can use your letter issued from the DMV that you received until your new Drivers License is mailed to you. The letter can only be used until your new drivers license is received. Also, upon receipt of this letter your laminated drivers license will be hole punched by the DMV and will be considered "void". Use the letter only until it expires or your new drivers license is received.
- \_\_\_ 2. Original Social Security Card (copies will NOT be accepted)
- \_\_\_ 3. Full Clinical Attire for ALL test dates, written and skill (Scrub top, scrub pants/skirt and closed toed shoes) (Clinical Tee Shirts ARE NOT ACCEPTABLE and will be turned away as a no show and forfeit your testing fee.
- \_\_\_ 4. Several sharpened #2 pencils
- \_\_\_ 5. Remember to plan ahead if you do not know where you are going to test. We recommend that you make a practice run to the location before testing day
- \_\_\_ 6. You must arrive at the testing site 20-30 minutes prior to your scheduled testing time
- \_\_\_ 7. No cell phones, electronic devices, or personal items (watches, fitness trackers, or any other electronic wrist device, purse) will be permitted at the testing site
- \_\_\_ 8. Long hair pulled back.
- \_\_\_ 9. Spouses, instructors, children or pets will not be permitted at the testing area.
- \_\_\_ 10. You must have the 2 required forms of id's or you will be considered a no show and will have to repay and reapply for your test.
- \_\_\_ 11. Check the web site at [hdmaster.com](http://hdmaster.com), click on Ohio STNA, to check for any updates.



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### After my Testing Day

- Test results will be available for electronic/computer tests after 3 pm EST by phone on the next business day excluding Sundays and holidays.





**D&S Diversified Technologies LLP**

**Headmaster LLP**

# Ohio Nursing Assistant Candidate Handbook

*EFFECTIVE: September 1, 2019*

**Version 16.1**

## Contact Information

Questions regarding testing process, test scheduling and eligibility to test: (877) 851-2355

Questions about Nursing Registry: (800) 582-5908

<p>Diversified Technologies P.O. Box 418 Findlay, OH 45839 Email: <a href="mailto:hdmastereast@hdmaster.com">hdmastereast@hdmaster.com</a></p>	<p>Monday through Friday 8:00 AM - 6:00 PM Saturday 8:00 AM - 2:00 PM</p>	<p>Phone # (877) 851 -2355  Fax # (419) 422- 8328</p>
<p><b>Ohio Department of Health Ohio Nurse Aide Registry (NAR)</b> 246 North High Street Columbus, OH 43215 Email: <a href="mailto:NAR@odh.ohio.gov">NAR@odh.ohio.gov</a></p>	<p>Monday through Friday 8:00 AM - 5:00 PM</p>	<p>Phone # (800) 582 -5908  Fax # (614) 564- 2461</p>
<p><b>Ohio Department of Health Nurse Aide Training and Competency Evaluation Program (NATCEP)</b> 246 North High Street Columbus, OH 43215 Email: <a href="mailto:NATCEP@odh.ohio.gov">NATCEP@odh.ohio.gov</a></p>	<p>Monday through Friday 8:00 AM - 5:00 PM</p>	<p>Phone # (614) 752 -8285  Fax # (614) 564- 2596</p>



# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

## Table Of Contents

INTRODUCTION	8
NURSE AIDE REGISTRY REQUIREMENTS	9
The Registry	11
Active Duty and Veteran GI Bill Benefits	11
Military: Healthcare and Medical Occupations:	12
What to expect on testing Day	13
Your Skill Test	15
Your Knowledge Test Subject Areas	16
ADA Accomodations	17
Testing Policy	18
Testing Security	19
Four Month Rule for Nurse Aides per Federal regs	20
Reschedule/Cancellation Policy Reschedules	21
Cancellations	21
No Shows	22
Laminated Replacement STNA cards:	22
Test Disputes	22
Ohio Manual Skill Tasks Listing	23
OHIO KNOWLEDGE TEST VOCABULARY LISTING AND RELATED TERMINOLOGY 2019	48



D&S Diversified Technologies LLP

Headmaster LLP

# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

## INTRODUCTION

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

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

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

Ohio has approved D&S Diversified Technologies to provide tests and scoring services for nurse aide testing. To learn how to apply to take nurse aide tests, please use this handbook or contact D&S at [www.hdmaster.com](http://www.hdmaster.com), or call local (419) 420-1605 or toll free 877-851-2355.

**Check the [hdmaster.com](http://hdmaster.com) website for updates, and for the most recent version of the candidate handbook, and any updates to testing prior to your testing day.**





# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

## NURSE AIDE REGISTRY REQUIREMENTS

Ohio Administrative Code (OAC) rule 3701-17-07.3 describes the maintenance for all individuals who have met the competency requirements of division (A) of section 3721.32 of the Ohio Revised Code and are on the Nurse Aide Registry.

The Ohio Department of Health (ODH) will not continue to list an individual on the registry as eligible to work in a long-term care facility unless the department has received verification in accordance with paragraph (C) of this rule, that the individual provided at least seven and one-half consecutive hours, or eight hours in a forty-eight hour period of nursing and nursing-related services for compensation during the twenty-four month period immediately following either the date that the individual was placed on the registry, or the most recent date of verified work.

If an individual desires to remain on the registry as eligible to work as a nurse aide, but is not eligible because more than twenty-four consecutive months have passed since the last date of verified work the individual must do one of the following:

1. Submit documentation showing that he or she has provided at least seven and one-half consecutive hours, or eight hours in a forty-eight-hour period of nursing and nursing-related services for compensation during that twenty-four month period; or
2. Successfully complete additional training and competency evaluation by complying with paragraphs (D)(1) and (D)(2) of rule 3701-17-07.1 of the Administrative Code.



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### **The documentation required in paragraph (C)(1) of this rule shall include either of the following:**

1. In the case of a facility, agency, or any other health care provider that is authorized under applicable law to provide services that include implementation of portions of a nursing regimen, as defined by section 4723.01 of the Revised Code, a statement verifying the dates that the individual performed nursing and nursing-related services for compensation; or
2. A statement by a physician or nurse verifying that he or she has personal knowledge that the individual provided nursing and nursing-related services to a patient under the physician's or nurse's care.

### **The statement shall further verify:**

-The name of the individual that provided nursing and nursing-related services for such patient

-The nature of the nursing and nursing-related services, and the date or dates the individual last provided seven and one-half consecutive hours, or eight hours in a forty-eight hour period of nursing and nursing related services;

-That the individual received compensation for the services specified in paragraph (D)(2)(b) of this rule. If the physician or nurse is unable to verify that the individual was compensated for those services, the individual must provide further proof that he or she received compensation for the specified services.

Additional questions regarding these rules may be addressed to either the Nurse Aide Registry at (800) 582-5908. If you have questions regarding the location of nurse aide training classes you may call (614) 752-8285.

## Ohio Nursing Assistant Candidate Handbook

*EFFECTIVE: September 1, 2019*

**Version 16.1**

### The Registry

The Ohio nurse aide registry maintains information regarding the status of state tested nurse aides in Ohio. The Registry operates according to federal and state requirements and guidelines. Anyone may contact the Registry to inquire about his or her status as a nurse aide. Contact the Ohio Nurse Aide Registry with questions about lapsed certification and transfer of certification to or from another state. Ohio Registry number is 800-582-5908.

Your active status on the Ohio Registry after passing both the skill and knowledge portion of the state test will keep you in good standing for 24 months. Review page 9 in this book for a complete listing of how to maintain your active status as a nurse aide after your first 24 months.

### Active Duty and Veteran GI Bill Benefits

D&S Diversified Technologies has been approved by the Department of Veterans Affairs (VA) as a testing vendor for the Ohio STNA exam. If you are an active duty service member, retired service member, veteran reimbursement of exam fees may be available through your GI Bill if funds are available. You must first pay the STNA testing fees and you will be provided with a receipt that you can submit to the VA with a completed form, VA Form 22-0803, for reimbursement.

<http://www.vba.va.gov/pubs/forms/VBA-22-0803-ARE.pdf>). VA Form 22-0803 can also be found on our website at [www.hdmaster.com](http://www.hdmaster.com) on our Ohio STNA and Certification page. You can find additional information about the GI Bill at [www.gibill.va.gov](http://www.gibill.va.gov).

If you are an active duty service member, retired service member, veteran, or spouse of a veteran, you may be eligible to receive priority of service on testing day if you have completed service in the United States Armed Forces, including the



## Ohio Nursing Assistant Candidate Handbook

*EFFECTIVE: September 1, 2019*

### **Version 16.1**

National Guard of any state or a reserve component of the United States Armed Forces, or have been discharged under honorable conditions and the required documentation is presented. The following forms of proof of service must be presented on testing day to the Test Observer in order to qualify for priority of service:

1. Department of Defense Identification Card (Active, Retired, TDRL).
2. DD214 Military Discharge Certificate indicating disposition of discharge.
3. Report of Separation from the National Archives National Personnel Records Center in St. Louis, Missouri.
4. Veterans Identification Card from the Department of Veterans Affairs. This documentation must be presented in addition to the required original Social Security card and the government issued non-expired, photo ID.

## **Military: Healthcare and Medical Occupations:**

Per the Ohio Administrative code 3701-18-23, an individual who has the equivalent of twelve months or more of full-time employment in the preceding five years in a position that includes the provision of direct patient care involving the performance of daily living activities such as toileting, bathing, feeding, dressing, etc., may submit documentation for approval and written verification to waive the Nurse Aide Training requirement to sit for the Ohio Nurse Aide exam. Those individuals 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)



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

### Version 16.1

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, time totaling a minimum of 1600 hours and is signed by a supervisor..

## What to expect on testing Day

Make sure you check the web site at [hdmaster.com](http://hdmaster.com) then click on Ohio STNA for the most recent updates on policies and procedures and testing skills. **It is your responsibility to check for updates before your testing day.**

- Plan on 6 hours for your Nurse Aide Test
- Arrive 20 minutes **PRIOR** to your SCHEDULED testing time
- You must be dressed in full clinical attire for both written and/or skill test (scrub shirts, scrub pants/skirts and clinical footwear. **NO CLINICAL TEES WILL BE ACCEPTED!**
- Your **original** Social Security Card, **NO COPIES WILL BE ACCEPTED.** Name on the Social Security Card and Drivers license **MUST** match, if they do not a **COPY** of the supporting documentation must be presented on testing day to the Test Observer. A copy **MUST** be brought as the Test Observer will **NOT** have access to make copies. This is your responsibility!
- US Government issued non-expired, **signed**, photo id (example: drivers lic, signed Military Id, Conceal Carry Lic, Passport that is non-expired, **signed**).
- **If you arrive without the required id's or without full clinical attire you will be deemed a no show and forfeit your testing fee's.**
- Also, Per DMV you can use your letter issued from the DMV that you received until your new Drivers License is mailed to you. Also, upon receipt of this letter your laminated drivers license will be hole punched by the DMV and will be considered "void". Use the letter until your new drivers



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

### Version 16.1

license is received.

- **The Social Security Card must be the original No copies will be accepted.**
- **If you do not have the 2 required id's you will forfeit your testing fee and will be required to repay and reapply.**
- If your original Social Security and US government issued Id's do not match you, MUST provide the testing team a COPY of your supporting documentation such as a divorce decree or a marriage certificate. Remember, you MUST bring a copy for return to D&S Diversified. The test observer will not have access to a copy machine on testing day.
- 2 number 2 pencils.
- **Cell phones, electronic wrist devices of any kind (ie fitness trackers etc) are prohibited.**
- **Watches of any kind** are prohibited (the tester will have the required equipment for the TPR skill.
- Also, when you sign in for testing, double check your name on the testers address verification form. If any information is incorrect make the correction immediately before signing. If you do not make the name spelling correction on testing day you will be charged a fee of \$25.00 for a replacement card for the name correction. So, make sure to verify for accuracy on your testing day. If a new card is required log onto hdmaster.com, click on Ohio STNA and print off form 1999, complete and mail to D&S with payment as listed at the top of the form.
- **No outside assistance of any type is permitted. Anyone caught using these items will have their test terminated and scored as a no show and not permitted to test for six months.**

Full Clinical Attire is mandatory for **both knowledge and/or skill test** and you will be turned away as a no show if you do



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

### Version 16.1

not have full clinical attire, clinical shoes and long hair tied back. It is your responsibility to bring several sharpened Number 2 pencils with erasers if you are taking a paper written test. **DO NOT BRING or USE INK PENS.** Ink will not allow your scan form to be processed by the scanner.

Prior to your testing day, we strongly recommend that you check the web site for any updates prior to your testing day.

## Your Skill Test

Your Skill Test will consist of five scenarios associated with your five (5) assigned skill tasks which will be read to you before you begin each task. Listen carefully to all instructions given by the test observer. **You will have 35 minutes to complete all five skill tasks. A calculator will be available for you if needed, just ask the test observer.**

Be sure you understand all instructions before you begin your skill test. You may not ask questions once the skill test begins. **REMEMBER** you must actually perform each step to get credit for that step. For example, you must actually pull the privacy curtain or actually give the resident the call light. Verbalizing the step will not get you credit for that task.

The purpose of the skill test is to evaluate your nurse aide skills. All students will be tested on Hand Washing, and four (4) additional skill tasks will be randomly selected from the list for you to perform on your skill test.

The steps that are listed for each skill task are the steps required for a nurse aide to competently perform the task. You will be scored on each of these steps.

You must have a score of 80% on each task without missing any of the **BOLDED** key steps to pass the skill portion of the test. If you fail a skill task, you will have to take another skill test with five (5) tasks, at least one of which will be one that you failed, if you fail one skill. If you fail 2 or more skills you will be given a randomly generated new skill set for your next skill test.



# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

## Your Knowledge Test Subject Areas

Your Knowledge Test will consist of 79 multiple choice questions which you will have 90 minutes to complete.

Questions are selected from subject areas based on the Ohio Department of Health curriculum and include questions from all the required categories as defined in the OBRA regulations. The subject areas and number of items are as follows:

1) Safety (8 items)	8) Data Collection (4 items)
2) Infection Control (5 items)	9) Basic Nursing Skills (11 items)
3) Personal Care (11 items)	10) Role and Responsibility (8 items)
4) Mental Health (7 items)	11) Disease Process (4 items)
5) Care Impaired (6 items)	12) Older Adult Growth (4 items)
6) Resident Rights (5 items)	
7) Communication (6 items)	

A knowledge test proctor will hand out materials and give instructions for taking the knowledge test. You will have a maximum of ninety (90) minutes to complete the seventy-nine (79) question knowledge test. You will be told when fifteen (15) minutes remain. You may not ask questions about the content of the knowledge test (such as “What does this question mean?”). Fill in only one (1) oval on the answer sheet for each question. DO NOT mark in the testing booklet. Marks in the test booklet will not be accepted as answers. Your answers must appear on the separate scan form answer sheet if you are taking a paper test. You can take your test in paper format at an electronic site by identifying paper on your application.

For WebETest®, electronic testing, you will use either the mouse or keyboard to choose your correct answers. You must have a score of **75% (7/1/2019)** or better on the knowledge portion of the test to pass the knowledge portion. Your knowledge test proctor will have scrap paper and a calculator available for math related questions. The scrap paper and the



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

### Version 16.1

calculator must be returned to the test proctor when your test is ended.

Failure to return these items may result in disciplinary action. The knowledge test may be taken orally if you have difficulty reading English. The oral test **MUST** be requested at the time of registration and there is an additional fee. The knowledge test will be provided along with an audio recording of the questions. Your answers will be recorded on the scan form just as with the knowledge test. You will hear the WebETest© questions on the computer.

You may request an oral version of the Knowledge test but, the last **20** questions **MUST** be read and answered by the student without aid of the recording. These last twenty **(20)** questions serve as the reading comprehension requirement required by the Ohio Department of Health. Oral test request **MUST** be made at the time of scheduling your Knowledge test.

## ADA Accomodations

The Ohio Department of Health (ODH), Office of Health Assurance and Licensing, Nurse Aide Training Competency Evaluation Program (NATCEP) Unit and D&S Diversified Technologies, LLP, nurse aide testing program, provides reasonable accommodations for candidates with disabilities or limitations that may affect their ability to perform the nurse aide competency examination (state test). Accommodations are granted in accordance with the Americans with Disabilities Act. If you are a candidate with a disability or limitation for which you wish to request accommodation, you will need to complete form 1404 OH located on D&S Diversified Technologies' Website at [www.headmaster.com](http://www.headmaster.com) and return the completed form to D&S Diversified Technologies along with supporting documentation, i.e., copy of IEP, 504 and/or letter from a learning specialist with your initial application, or call **1-877-851-2355** for more information. Please allow an additional time if requesting an ADA accommodation in the event additional information is required or if you request is incomplete.



# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

## Testing Policy

Late arrivals will not be admitted to the test. Late arrivals and No Shows forfeit testing fees and will need to reschedule the test. The name printed on both IDs must match the name entered into the training program database EXACTLY or the candidate will be considered a No Show for testing. This includes the first, middle and last name. If the candidate has more than one middle name, we only review the first middle name.

- NO ELECTRONIC DEVICE OF ANY KIND WILL BE PERMITTED IN THE TESTING AREAS! Cellular phones, beepers, blue tooth phones or any other electronic devices are not permitted on your testing day. **If you are found to have an electronic device on your person, you will be asked to exit the test and you will forfeit all testing fees. You will be required to reschedule your test.**
- With the exception of religious/cultural head coverings, candidates may not have their head covered during the test for security reasons.
- You are not permitted to bring personal belongings, such as briefcases, large bags, study materials, extra books, or papers into the testing area. Any such materials brought into the testing area will be collected and returned to you when you have completed the test. The testing team, D&S Diversified or the testing sites are not responsible for personal items of students.
- During testing. NO outside assistance of any type is permitted, anyone caught using any type of outside assistance will forfeit their test and be considered a NO Show.
- Foreign language translation dictionaries must be shown to the Test Observer at check in and the Test Proctor before

## Ohio Nursing Assistant Candidate Handbook

*EFFECTIVE: September 1, 2019*

### **Version 16.1**

you start the knowledge test. No electronic dictionaries are allowed. No definitions or writing can appear in the book. If any documentation or writing is in the translation book you will not be permitted to use it.

- You may not take any notes or other materials from the testing room.
- You are not permitted to eat, drink, or smoke during the test.
- If you are discovered causing a disturbance of any kind or engaging in any kind of misconduct, you will be dismissed from the test and reported to your training program and the Ohio Department of Health and your test will be terminated.
  - No children, visitors, guests, or pets are allowed at the testing site for security reasons. If you use a service animal you must complete the ADA form 1404 and follow the procedure documented on page 17 of this book.
  - You may not test if you have any type of physical limitation (excluding pre-arranged ADA's) that would prevent you from performing your duties as an STNA. For example, casts, braces, crutches or weight restrictions.

Call D&S immediately (877-851-2355) if you are determined to be unable to test due to illness or injury. You must fax a signed doctor's excuse within five (5) days of your testing date to allow you to reschedule without repayment of fees and to ensure you are not determined to be a NO SHOW.

## Testing Security

Anyone who removes or tries to remove test material or information from the test site will be prosecuted to the full extent of the law and will be recorded as a test failure and will



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

### Version 16.1

not be allowed to retest for a minimum period of six months. Study materials or any form of electronic devices may not be brought to the test or used during testing. If you give or receive help from anyone during testing, the test will be stopped; your test will not be scored. You will be dismissed from the testing room and your name will be reported to the appropriate agencies. Any future testing will require approval from ODH to retest.

## Four Month Rule for Nurse Aides per Federal regs

What is the “four month grace period,” and how does the Registry calculate the four month grace period? Paragraph (B) of Ohio Administrative Code (“O.A.C.”) rule 3701-17-07.1 allows a long-term care facility to use an individual who is not listed on the Nurse Aide Registry as a nurse aide for up to four months. However, a facility cannot use an individual as a nurse aide for more than four months unless: a) the individual is competent to provide nurse aide services; b) the individual has successfully completed an approved training program and passed a required state test, or has otherwise been deemed competent by the Director of Health; and c) the facility has received verification from the Registry that the individual has met the competency requirements. The Registry starts calculating the four month period on the date the facility first uses the individual as a nurse aide, and continues to count each day consecutively (regardless of whether the facility actually utilized the individual as a nurse aide on that particular day) during the period of the individual’s employment as a nurse aide. According to paragraph (G) of O.A.C. rule 3701-17-07.1, the four month “grace period” is cumulative. Specifically, paragraph (G) states that the four month period includes “any time that an individual is used as a nurse aide on a full time, temporary, per diem or other basis by a facility or any other facility.” Thus, no individual may be used as a nurse aide at any facility or facilities for more than a total of four months without successfully completing training and passing the required state test.



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### Training Certificates

Your training certificate you received from your training program is good for a period of 24 months (2 years) from the date listed on your certificate. During that two year period you have three testing attempts. If you are not successful you will be required to retrain in order to retest.

### Reschedule/Cancellation Policy

#### Reschedules

An individual may reschedule one time during the three attempt testing cycle to a new mutually agreed upon test date and site for no charge up to 24 hours from the actual testing time (excluding Sundays and holidays). Example, if your test

starts at 8:30 am on Friday you must call no later than 8:30 am on Thursday to qualify. Reschedules must occur within 60 days of the actual testing date. If reschedules are not made within the 60 days you will be charged a \$35 reschedule fee. Any further reschedules will be charged at the rate of \$35 which must be paid before the reschedule can occur. No refunds or free reschedules will be granted after 60 calendar days from the last reschedule date.

#### Cancellations

Cancellations MUST be faxed or emailed PRIOR TO 24 HOURS OF THE ACTUAL TESTING DATE and time excluding Sundays and holidays. No phone calls will be accepted to qualify for a full refund minus a \$26 cancellation fee. No verbal cancellations will be accepted. If you reschedule and later decide that you want to cancel you must notify us in writing (mail, fax or email) within 60 days from your last scheduled test date to qualify for a refund minus the cancellation fee. Cancellations submitted more than 60 days from your last scheduled test date will not qualify for a refund. If you fax or email, call to verify receipt of the statement.

## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### No Shows

If you are scheduled for your test and don't show up without notifying D&S at least 24 hours from the actual testing date and time (excluding Sundays and holidays) you will be considered a NO SHOW and YOU must submit a new application with all required fees to be scheduled for a new test date.

- No refunds will be granted after 60 calendar days.

### Laminated Replacement STNA cards:

If you do not receive your laminated card within 30 days from your actual testing date it's your responsibility to contact D&S toll free at (877) 851-2355. Cards never received after 60 days from the actual testing day will require a \$25.00 replacement charge.

### Test Disputes

If you dispute your test results, a step-by step explanation of skill steps demonstrated must be faxed, emailed, or sent to D&S within 10 days of your test event along with the \$25.00 test dispute fee. Disputes received without dispute fee will not be processed. If the dispute is found in your favor you will be refunded the fee. If it is determined your results will remain the same, or if you are given a free reschedule the fee will not be refunded. If we receive your dispute without the fee, it will not be processed. Please allow 2- 4 weeks processing time for test disputes. You will be notified by email or mail of the outcome of your dispute.



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### Ohio Manual Skill Tasks Listing

**SKILLS # 2, 4, 6, 10, 11, 24 AND 25 HAVE BEEN UPDATED  
EFFECTIVE 9/1/2019**

#### Skill 1- Hand Washing

1. Knock on the door and introduce self to the resident.
2. Explain the procedure.
3. Turn on water.
4. Wet all surfaces of hands and wrists.
5. Apply liquid soap to hands.
6. Rub hands together away from water for 20 seconds using friction.
7. Interlace fingers pointing downward.
8. Wash all surfaces of hands and wrists with liquid soap.
9. Rinse hands thoroughly under running water with fingers pointed downward.
10. Dry hands on clean paper towel(s) and immediately discard in trash can.
11. Turn off faucet with a SECOND (last) clean dry paper towel. (Previously used towel for drying will not be accepted).
12. Discard paper towel to trash container as used.
13. **Do not re-contaminate hands at any point during the procedure.**

**Notes:**



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### Skill 2- Abdominal Thrust on Conscious Resident

1. Ask resident, "Are you choking?"
2. Identify two symptoms/signs of choking. ( \_\_\_\_\_, \_\_\_\_\_).
3. Bring actor to a standing position.
4. Call for help.
5. Stand behind resident.
6. Wrap arms around resident above the waist.
7. Make a fist with one hand.
8. Place the thumb side of the fist against resident's abdomen.
9. Position fist slightly above navel and below bottom of sternum.
10. Grasp fist with other hand.
11. Verbalize only "press fist and hand into the resident's abdomen with an inward, upward thrust."
12. Verbalize thrust at least three times.
13. **Stop, ask resident, "Are you still choking?" Actor will say, "No." (Tester will ask, what would you have done if the resident would have indicated that they were still choking).**
14. State, "I would repeat this procedure until it is successful or the resident lost consciousness."
15. At which point I would place the resident in the recovery position on lateral side **in bed (for testing purpose only)**.. (Must be physically performed).

#### Notes:





## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### Skill 3- Ambulation using a Gait Belt

1. Introduce self to resident.
2. Identify that your hands should be washed.
3. Explain the procedure to be performed and obtain a gait belt.
4. Provides for residents privacy, pulls privacy curtain.
5. **Locks all bed brakes to ensure resident's safety.**
6. **Lock wheelchair brakes to ensure resident's safety.**
7. Puts on non skid slippers while in bed.
8. Lower bed to a position so resident's feet will rest comfortably flat on the floor when sitting on the bed.
9. Place gait belt around waist to stabilize trunk.
10. Tighten gait belt. Check gait belt for tightness by slipping fingers between gait belt and resident and adjust as needed.
11. Bring resident to standing position, using proper body mechanics.
12. With one hand grasping gait belt and the other stabilizing resident by holding forearm, shoulder, or using other appropriate method to stabilize, ambulate resident at least 10 steps to their wheelchair.
13. Assist resident to pivot and sit in a controlled manner that ensures safety.
14. Remove gait belt.
15. Maintain respectful, courteous interpersonal interactions at all times.
16. Open privacy curtain and leave call light within easy reach of the resident.
17. Identify that hands should be washed.

#### **Notes:**



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### Skill 4- Ambulation with Walker to the Wheelchair using a gait belt

1. Introduce self to the resident.
2. Identify that hands should be washed.
3. Explain procedure to resident.
4. Provide for resident's privacy by pulling privacy curtain.
5. **Locks all bed brakes on bed to ensure resident's safety.**
6. **Lock wheelchair brakes to ensure resident's safety.**
7. Puts on non skid slippers **while in bed.**
8. Lower bed to a position so resident's feet will rest comfortably flat on the floor when sitting on the bed.
9. Place gait belt around waist to stabilize trunk.
10. Tighten gait belt. Check gait belt for tightness by slipping fingers between gait belt and resident and adjust as needed.
11. Bring resident to standing position, using proper body mechanics.
12. Position and stabilize walker correctly using hand and/or foot to stabilize.
13. Position self behind and slightly to side of resident.
14. Safely ambulate resident at least 10 steps.
15. Assist resident to pivot and sit, using correct body mechanics.
16. Remove gait belt.
17. Maintain respectful, courteous interpersonal interactions at all times.
18. Open privacy curtain.
19. Leave call light or signaling device within easy reach of the resident.
20. Identify that hands should be washed.

#### Notes:



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### Skill 5- Applying Anti-embolic Stocking (Ted Hose)

1. Introduce self to the resident.
2. Identify that hands should be washed.
3. Explain procedure to resident.
4. Raise bed between mid thigh and waist level.
5. Provide for resident's privacy by pulling privacy curtain.
6. Provide for resident's privacy by only exposing one leg.
7. Roll, gather, or turn stocking down inside out to the heel.
8. Place stocking over the toes, foot, and heel and roll or pull up the leg.
9. Check toes for possible pressure from stocking and adjust as needed.
- 10. Leave resident with stockings that are smooth and wrinkle free.**
11. Lower bed.
12. Maintain respectful, courteous interpersonal interactions at all times.
13. Open privacy curtain.
14. Leave call light or signaling device within easy reach of the resident.
15. Identify that hands should be washed.

#### **Notes:**



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### Skill 6- Bedpan/Fracture Pan and Output

(Step 18 added)

1. Introduce self to the resident.
2. Identify that hands should be washed.
3. Explain the procedure to resident.
4. Gather supplies before beginning the demonstration.
5. Provide for resident's privacy by pulling privacy curtain.
6. Put on gloves.
7. Position resident on bedpan/fracture pan correctly using correct body mechanics.
8. Position resident on bedpan/fracture pan with pan in correct orientation.
9. Raise head of bed to comfortable level.
10. Leave tissue within reach of resident and step away from the resident until RN Observer identifies resident is finished.
11. **Using a wet wash cloth and dry towel, wash and dry your resident's hands.**
12. Lower head of bed and gently remove bedpan/fracture pan and hold while RN Observer adds a known quantity of fluid.
13. Place graduate on flat surface at eye level and pour urine into the graduate to measure output.
14. Empty graduate, rinse and dry bedpan/fracture pan and graduate and return to storage. Flush toilet if used.
15. Discard linen in the appropriate container.
16. Turn gloves inside out as they are removed and dispose of gloves in an appropriate container.
17. Record the output in cc/ml on signed recording sheet.
18. **Record reading in the correct location on the signed recording sheet.**
19. **Recorded measurement reading is within 25 cc or ml of RN Observer's reading.**
20. Open privacy curtain.
21. Leave resident in a position of safety and comfort. (Lowers bed & side rails)
22. Maintain respectful, courteous interpersonal interactions at all times.
23. Leave call light or signaling device within reach.
24. Identify that hands should be washed.

**Notes:**



# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

## Skill 7- Catheter Care for a Female

(on manikin)

1. Introduce self to the resident.
2. Identify that hands should be washed.
3. Explain procedure to the resident (Manikin).
4. Provide for resident's privacy by pulling privacy curtain.
5. Raise side rail opposite working side of bed.
6. Fill basin with comfortably warm water.
7. Raise the bed between mid-thigh and waist level.
8. Place bath blanket on resident/manikin, put on gloves, and turn resident side to side and place incontinence pad under resident/manikin. Expose only the perineum area.
9. Check to see that the tubing is not kinked and the urine can freely flow into the drainage bag. (MUST verbalize while physically checking).
10. Use soap and water to carefully wash, in a circular motion, around where the drainage tube exits the urethra.
11. **With one hand hold catheter near the urethra to prevent tugging on catheter.**
12. With the other hand clean at least 3-4 inches from the urethra down the drainage tube.
13. Use a clean portion of the washcloth for each stroke.
14. Rinse all areas using a clean portion of the washcloth for each stroke.
15. Pat dry all areas with a clean towel.
16. **Always clean, rinse and pat dry in a direction away from the urethra.**
17. Do not allow the tube to be pulled at any time during the procedure.
18. Replace top cover over resident and remove bath blanket and incontinence pad by turning side to side without friction.
19. Dispose of linens in the linen hamper.
20. Empty, rinse and dry basin and return to storage.
21. Remove gloves turning inside out and dispose of gloves in the appropriate container.
22. Open privacy curtain.
23. Leave resident in a position of safety and comfort. (Lower bed and side rails).
24. Place call light or signaling device within reach of resident.
25. Maintain respectful, courteous interpersonal interactions.
26. Identify that hands should be washed.

### Notes:



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### Skill 8- Denture Care

1. Introduce self to the resident.
2. Identify that hands should be washed.
3. Explain procedure to resident.
4. Line bottom of sink with a protective lining that would help prevent damage to the dentures (towel or washcloth, NO PAPER TOWELS).
5. Put on gloves and remove dentures from cup.
6. Handle dentures carefully to avoid damage or contamination.
7. Wets tooth brush.
8. Apply a small amount of toothpaste and thoroughly brush dentures including the inner, outer, and chewing surfaces of upper and/or lower dentures. Toothettes may be utilized instead of a tooth brush as long as all of the required surfaces listed above are cleaned.
9. Rinse dentures using clean COOL water.
10. Place dentures in rinsed denture cup.
11. Add cool clean water to the rinsed denture cup.
12. Clean and dry equipment and return to storage. (denture brush/toothbrush handle).
13. Discard protective lining in an appropriate container.
14. Turn gloves inside out as they are removed and dispose of gloves in an appropriate container.
15. Maintain respectful, courteous interpersonal interactions at all times.
16. Leave call light or signaling device within easy reach of the resident.
17. Identify that hands should be washed.

#### **Notes:**



# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

## Skill 9- Dressing Resident

1. Introduce self to the resident.
2. Identify that hands should be washed.
3. Explain the procedure to the resident.
4. Provide for resident's privacy by pulling privacy curtain.
5. Raise the bed between mid-thigh and waist level.
6. Keep resident covered while removing gown.
7. Remove gown from unaffected side first.
8. Place used gown in laundry hamper.
9. **When dressing the resident in a shirt or blouse, insert hand through the sleeve of the shirt or blouse and grasp the hand of the resident, dressing from the affected side first.**
10. **When dressing the resident in pants, assist the resident to raise buttocks or turn resident side to side and draw the pants over the buttocks and up to the resident's waist, always dressing from the weak side first.**
11. **Apply non-skid slippers while in bed. (shoes removed)**
12. Leave the resident comfortably and properly dressed in a position of safety. (lowers bed and pants pulled up appropriately over buttocks).
13. Maintain respectful, courteous interpersonal interactions at all times.
14. Open privacy curtain.
15. Leave call light or signaling device within easy reach of the resident.
16. Identify that hands should be washed.

### Notes:



# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

## Skill 10- Emptying a Urinary Drainage Bag (step 22 added)

1. Introduce self to the resident.
2. Identify that hands should be washed.
3. Explain procedure to resident.
4. Provide for resident's privacy by pulling curtain.
5. Raise side rails on both sides of the bed.
6. Raise bed between mid thigh and waist level.
7. Put on gloves.
8. Place barrier on the floor under the drainage bag.
9. Place the graduate on the previously placed barrier.
10. Open the drain to allow the urine to flow into the graduate until the bag is empty.
11. Avoid touching the graduate with the tip of the tubing.
12. Close the drain.
13. **Wipe the drain with antiseptic wipe after emptying drainage bag.**
14. Replace drain in holder.
15. Lower bed and lower side rails.
16. Place graduate on flat surface at eye level to measure output.
17. Empty graduate into toilet. Rinse and dry equipment.
18. Return equipment to storage.
19. Turn gloves inside out as they are removed. Dispose of gloves in the appropriate container.
20. Leave resident in a position of safety and comfort. (Bed and side rails lowered)
21. Record the output in cc or ml on signed recording sheet.
22. **Record reading in the correct location on the signed recording sheet.**
23. **Recorded measurement from the recording pad is within 25 cc or mls of RN Observers' measurement.**
24. Open privacy curtain.
25. Place call light or signal device within reach of resident.
26. Maintain respectful, courteous interpersonal interactions.
27. Identify that hands should be washed.

### Notes:





# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

## Skill 11- Feeding the Dependent Resident

(Step 18 added)

1. Introduce self to the resident.
2. Identify that hands should be washed.
3. Explain procedure to the resident.
4. Verbally identify resident's name against the diet card and verbalize that the resident has received the correct tray.
5. Position the resident in an upright position, at least 45 degrees.
6. Ask resident if he/she prefers to use a clothing protector.
7. Protect clothing from soiling by using napkin, clothing protector or towel per resident request.
8. Wash and dry resident's hands before feeding.
9. Position self at eye level sitting down and face the resident while feeding.
10. Describe the food being offered to the resident.
11. Alternately offer each fluid frequently. (Two fluids will be offered).
12. Offer food in small amounts at a reasonable rate, allow resident to chew and swallow.
13. Wipe resident's hands and face during meal at least one time.
14. Leave resident clean and in a position of comfort with head of bed left at least 30 degrees after completion of the meal. (Must physically be performed)
15. Discard soiled linen in the linen hamper.
16. Record intake in percentage of total solid food eaten on signed recording sheet.
17. Record the sum of the intake of fluid in cc or ml on signed recording sheet.
18. Record all readings in the correct location on the signed recording sheet.
19. **Recorded reading is within 25% of the solids and within 60 cc or mL of the fluids consumed.**
20. Maintain respectful, courteous interpersonal interactions at all times.
21. Leave call light or signaling device within easy reach of the resident.
22. Identify that hands should be washed.

### Notes:



# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

## Skill 12- Hair Care

1. Introduces self to the resident.
2. Identify that hands should be washed.
3. Explain procedure to the resident.
4. Place towel on shoulders.
5. Ask resident how he/she would like their hair styled.
6. Comb or brush hair gently and completely.
7. Discard linen in appropriate container.
8. Return equipment to storage.
9. Leave hair neatly brushed combed or styled.
10. Maintain respectful, courteous interpersonal interactions at all times.
11. Leave call light or signaling device within easy reach of the resident.
12. Identify that hands should be washed.

### **Notes:**

# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

## Version 16.1

### Skill 13-Making an Occupied Bed

1. Introduce self to resident.
2. Identify that hands should be washed.
3. Gather linen and transport correctly.
4. Place clean linen on top of bedside stand, on over-bed table, over back of chair or drape over foot of bed.
5. Explain procedure to resident.
6. Provide for resident's privacy by pulling privacy curtain.
7. **Raise side rail opposite working side of the bed.**
8. Raise the bed between mid-thigh and waist level.
9. Resident is to remain covered at all times.
10. Assist resident to roll onto side toward raised side rail. Side rail remains up on side opposite candidate at all times during the task.
11. Roll or fan fold soiled linen, soiled side inside, to the center of the bed.
12. Place clean bottom sheet along the center of the bed and roll or fan fold linen against resident's back and unfold remaining half.
13. Secure two fitted corners, of the clean bottom sheet.
14. **Raise second side rail opposite working side of the bed and assist the resident to roll over the bottom linen, preventing trauma and avoid pain to resident.**
15. Remove soiled linen without shaking, and place in hamper.
16. Avoid touching linen to uniform.
17. Pull through and smooth out the clean bottom linen.
18. Secure other two fitted corners.
19. Place clean top linen and blanket or bedspread over covered resident. Remove used linen making sure the resident is unexposed at all times.
20. Tuck in top linen and blanket or bedspread at foot of the bed.
21. Make mitered corners at the foot of the bed.
22. Apply clean pillowcase, with zippers and/or tags to inside.
23. Gently lift resident's head when replacing the pillow.
24. Lower bed.
25. Return side rails to lowered position.
26. Maintain respectful, courteous interpersonal interactions at all times.
27. Open privacy curtain.
28. Leave call light or signaling device within easy reach of the resident.
29. Identify that hands should be washed.

#### Notes:



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### Skill 14- Applying an Adult Brief

1. Introduce self to resident.
2. Identify that hands should be washed.
3. Explain the procedure to the resident. (manikin)
4. Provide for resident's privacy by pulling privacy curtain.
5. Gather supplies.
6. Raise bed between mid thigh and waist level.
7. Raise side rail opposite working side of the bed.
8. Put on gloves.
9. Place water proof incontinent pad under resident by rolling resident side to side.
10. Unfasten the wet brief on both sides and assist resident to raise buttock or roll side to side to remove soiled brief.
11. Discard soiled brief in the appropriate container.
12. **Verbalize you would wash, rinse and dry soiled area.**
13. **Verbalizes that brief "should be checked every two hours."**
14. Apply new brief by rolling resident side to side or raising buttocks.
15. Pull brief through and be sure that it is even on both sides, and fasten the brief securely on both sides.
16. Remove waterproof pad from under buttocks by turning resident side to side or raising buttocks to remove pad without friction.
17. Dispose of soiled linen in an appropriate container.
18. Lower bed and side rail.
19. Dispose of gloves in the appropriate container.
20. Leave resident in a position of comfort and safety. (Bed and side rails down)
21. Open privacy curtain.
22. Leave call light within easy reach of resident.
23. Identify that hands should be washed.

#### Notes:



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### Skill 15- Mouth Care

1. Introduce self to resident.
2. Identify that hands should be washed.
3. Explain procedure to the resident.
4. Provide for resident's privacy by pulling privacy curtain.
5. Gather equipment and supplies, puts on gloves (AFTER ALL EQUIPMENT AND SUPPLIES HAVE BEEN GATHERED).
6. Drape the chest with towel (Paper or cloth) to prevent soiling.
7. Wet tooth brush.
8. Apply a small amount of toothpaste to toothbrush.
9. **Brush resident's teeth, including the inner, outer, and chewing surfaces of all upper and lower teeth. If available, toothettes may be utilized instead of the toothbrush as long as all of the surfaces listed above are cleaned.**
10. Clean tongue.
11. Assist resident in rinsing mouth.
12. Wipe resident's mouth, remove soiled towel and place in appropriate container.
13. Empty, rinse and dry emesis basin. Rinse toothbrush. Return emesis basin and toothbrush to storage.
14. Turn gloves inside out as they are removed. Dispose of gloves in the appropriate container.
15. Leave resident in position of comfort.
16. Open privacy curtain.
17. Leave call light or signaling device within easy reach of the resident.
18. Maintain respectful, courteous interpersonal interactions at all times
19. Identify that hands should be washed.

#### **Notes:**

# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

## Skill 16- Nail Care One Hand

1. Introduce self to resident.
2. Identify that hands should be washed.
3. Explain procedure to the resident.
4. Immerse nails in comfortably warm water and soak for at least five (5) minutes. (The five minutes may be verbalized.)
5. Gently push cuticle back with wet wash cloth.
6. Dry hands thoroughly, being careful to dry hand and between fingers.
7. Gently clean under nails with orange stick. (No Longer Key)
8. File each fingernail.
9. Empty, rinse and dry equipment.
10. Discard linen in linen hamper.
- 11. Discard orange stick in the designated sharp container.**
12. Return equipment to storage.
13. Maintain respectful, courteous interpersonal interaction at all times.
14. Leave call light or signaling device within easy reach of the resident.
15. Identify hands should be washed.

### Notes:



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### Skill 17- Partial Bed Bath-Face, Arm, Hand and Underarm

1. Introduce self to resident.
2. Identify that hands should be washed.
3. Explain procedure to the resident.
4. Provide for resident's privacy by pulling privacy curtain.
5. Fill basin with comfortably warm water.
6. Raise the bed between mid thigh and waist level.
7. Cover resident with a bath blanket.
8. Fanfold bed linens at least down to waist or move linens to opposite side.
9. Remove resident's gown without exposing resident and dispose in linen hamper.
10. Wash face without soap and then pat dry.
11. Place towel under arm, exposing one arm.
12. Wash arm, hand (and between fingers), and underarm using soap and water.
13. Rinse arm, hand (and between fingers), and underarm, and dry entire area.
14. Assist resident to put on a clean gown.
15. Empty, rinse and dry basin/s and return equipment to storage.
16. Dispose of soiled linen in appropriate container.
17. Lower bed.
18. Maintain respectful, courteous interpersonal interactions at all times.
19. Open privacy curtain.
20. Leave call light or signaling device within reach of the resident.
21. Identify that hands should be washed.

#### **Notes:**



# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

## Skill 18- Perineal Care for a Female

1. Introduce self to the resident.
2. Identify that hands should be washed.
3. Explain procedure to the resident. (Manikin)
4. Provide for resident's privacy by pulling privacy curtain.
5. Raise side rail opposite working side of bed.
6. Fill basin with comfortably warm water.
7. Raise the bed between mid-thigh and waist level.
8. Place bath blanket on resident/manikin.
9. Put on gloves.
10. Turn resident to side and place waterproof pad under resident's buttocks then return resident to their back or raise hips and place waterproof pad under buttocks.
11. Expose perineum only.
12. Verbalize separating labia.
13. **Using water and soapy washcloth, clean both sides and middle of labia from top to bottom using a clean portion of the washcloth with each stroke.**
14. Rinse and pat dry both sides and middle from top to bottom with a clean portion of the washcloth with each stroke.
15. Cover the exposed area with the bath blanket. Assist resident (manikin) to turn onto side away from the Candidate.
16. Assist resident (manikin) to turn onto side away from the Candidate.
17. With a new washcloth, clean the rectal area.
18. **Using water, washcloth and soap, clean area from vagina to rectal area using a clean portion of the washcloth with each single stroke.**
19. Rinse and pat dry area from vagina to rectal area.
20. Remove waterproof pad from under buttocks by turning resident side to side to remove pad without friction.
21. Position resident (manikin) on her back.
22. Dispose of soiled linen and bath blanket in an appropriate container.
23. Empty, rinse and dry equipment and return to storage.
24. Turn gloves inside out as they are removed. Dispose of gloves in the appropriate container.
25. Lower bed.
26. Lower side rails.
27. Open privacy curtain.
28. Leave call light or signaling device within reach of resident.
29. Identify that hands should be washed.

### Notes:



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### Skill 19- Position Resident on Side

1. Introduce self to the resident.
2. Identify that hands should be washed.
3. Explain the procedure to the resident.
4. Provide for resident's privacy by pulling privacy curtain.
5. Position bed flat.
6. Raise bed between mid-thigh and waist level.
7. **Raise side rail on opposite side of the bed to provide safety.**
8. Move resident's head, upper body, hips and legs toward self to provide room on the bed that will be used to safely turn the resident on their side.
9. Assist/turn resident on side and insure that the resident's face never becomes obstructed by the pillow. (Physically check and verbalize checking).
10. Check to be sure resident is not lying on his/her down side arm.
11. Protect bony prominences, under head (must physically check), upside arm, behind back, and between knees by placing support devices such as pillows, wedge, blanket, etc.
12. Lower bed.
13. Lowers side rails.
14. **Maintain correct body alignment. (Must verbalize and physically check body alignment)**
15. Leave resident in a position of safety and comfort.
16. Maintain respectful, courteous interpersonal interactions at all times.
17. Open privacy curtain.
18. Leave call light or signaling device within reach of the resident.
19. Identify that hands should be washed.

**Notes:**



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### Skill 20- Range of Motion Hip & Knee

1. Introduce self to the resident.
2. Identify that hands should be washed.
3. Explain procedure to the resident.
4. Raise bed between mid thigh and waist level.
5. Provide for resident's privacy by pulling privacy curtain.
6. Position resident supine (bed flat) and verbalize that the resident is in good body alignment.
7. **Do not cause discomfort or pain and do not force any joint beyond the point of free movement. (Candidate must ask if they are causing any pain or discomfort).**
8. Correctly support joints at all times by placing one hand under the knee and the other hand under the ankle.
9. Move the entire leg away from the body (abduction).
10. Move the entire leg back toward the body (adduction).
11. Complete abduction and adduction of the hip three times.
12. Straighten the knee and hip. (extension of knee and hip at the same time).
13. Complete flexion and extension of knee and hip three times. (bend and straighten)
14. Lower bed and leave resident in comfortable position.
15. Maintain respectful, courteous interpersonal interactions at all times.
16. Open privacy curtain.
17. Leave call light or signaling device within easy reach of the resident.
18. Identify that hands should be washed.

#### **Notes:**



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### Skill 21- Range of Motion One Shoulder

1. Introduce self to the resident.
2. Identify that hands should be washed.
3. Explain procedure to the resident.
4. Provide for resident's privacy by pulling privacy curtain.
5. Raise bed between mid thigh and waist level.
6. Position resident supine (bed flat).
7. Verbalize that the resident is in good body alignment.
8. Correctly support the resident's joint by placing one hand under elbow and the other hand under the resident's wrist.
9. Raise resident's arm up and over the resident's head (flexion).
10. Bring the resident's arm back down to the resident's side (extension).
11. Complete full range of motion for shoulder through flexion and extension three times.
12. Continue supporting joints correctly and move the resident's entire arm out away from the body (abduction).
13. Return the resident's arm to the side of the resident's body (adduction).
14. Complete full range of motion for shoulder through abduction and adduction three times.
15. **Do not cause discomfort or pain and do not force any joint beyond the point of free movement. (Candidate must ask if they are causing any pain or discomfort).**
16. Maintain respectful, courteous interpersonal interactions at all times.
17. Lower bed.
18. Open privacy curtain.
19. Leave call light or signaling device within reach of the resident.
20. Identify that hands should be washed.

#### Notes:



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### Skill 22- Stand Pivot Transfer from Bed to Wheelchair using a Gait Belt

1. Introduce self to the resident.
2. Identify that hands should be washed.
3. Explain the procedure to be performed to the resident and obtain a gait belt.
4. Provide for resident's privacy by pulling privacy curtain.
5. Position wheelchair at the foot or head of bed with the wheelchair touching side of the bed.
6. **Lock wheelchair brakes to ensure resident's safety.**
7. **Locks bed brakes to ensure resident's safety.**
8. Assist resident to put on non-skid slippers while in bed.
9. Lower bed to lowest position so resident's feet will be flat on floor and assist resident to a sitting position.
10. Place gait belt around waist to stabilize trunk.
11. Tighten gait belt. Check gait belt for tightness by slipping fingers between gait belt and resident.
12. While facing resident grasp gait belt with both hands and bring resident to standing position, using proper body mechanics.
13. With both hands grasping gait belt, transfer resident from bed to wheelchair.
14. Assist resident to pivot and assist them to sit in the wheelchair, in a controlled manner that ensures resident's safety.
15. Remove gait belt.
16. Maintain respectful, courteous interpersonal interactions at all times.
17. Open privacy curtain.
18. Leave call light or signaling device within reach of the resident.
19. Identify that hands should be washed.

#### **Notes:**



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### Skill 23- Stand Pivot Transfer from Wheelchair to Bed using a Gait Belt

1. Introduce self to the resident.
2. Identify that hands should be washed.
3. Explain the procedure to be performed to the resident and obtain a gait belt.
4. Provide for resident's privacy by pulling privacy curtain.
5. Position wheelchair at the foot or head of bed with the wheelchair touching side of the bed.
6. **Lock wheelchair brakes to ensure resident's safety.**
7. **Locks bed brakes to ensure resident's safety.**
8. Lower bed to a position so the resident's feet will be flat on the floor when the resident is transferred to the bed.
9. Place gait belt around waist to stabilize trunk. Tighten gait belt. Check gait belt for tightness by slipping fingers between gait belt and resident.
10. While facing resident grasp gait belt with both hands and bring resident to standing position, using proper body mechanics.
11. Assist resident to pivot in a controlled manner that ensures safety and sit the resident on the bed.
12. Assist resident in removing non-skid slippers and gait belt.
13. Assist resident to move to center of bed and lie down, supporting extremities as necessary.
14. Make sure resident is comfortable (offer blanket etc) and verbally identify while physically checking that resident is in good body alignment.
15. Open privacy curtain.
16. Maintain respectful, courteous interpersonal interaction at all times.
17. Leave call light or signaling device within easy reach of the resident.
18. Identify hands should be washed.

#### Notes:



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### Skill 24- Vital Signs-Temperature, Pulse and Respiration for 60 seconds

(Step 13 added)

1. Introduce self to the resident
2. Identify that hands should be washed.
3. Explain procedure to resident.
4. Provide for resident's privacy by pulling privacy curtain.
5. Correctly turn on digital oral thermometer.
6. Gently insert bulb end of thermometer in mouth under tongue.
7. Hold thermometer in place for appropriate length of time.
8. Remove thermometer. Read and record the temperature on signed recording sheet. (Complete one task at a time and record in-between temperature, pulse and respirations)
9. **Candidate's recorded temperature varies no more than .1 degree from RN Test Observer's.**
10. Wipe thermometer clean with alcohol pad or discard sheath.
11. Locate the radial pulse by placing tips of fingers on thumb side of the resident's wrist.
12. Count pulse for 60 seconds and record on signed recording sheet.
13. **Record all readings in the correct location on the signed recording sheet.**
14. **Candidate's recorded pulse rate is within 4 beats of RN Test Observer's recorded rate.**
15. Count respiration for 60 seconds and record results on signed recording sheet.
16. **Candidate's recorded respiratory rate is within 2 breaths of the RN Test Observer's recorded rate.**
17. Maintain respectful, courteous interpersonal interactions at all times.
18. Open privacy curtain.
19. Leave call light within easy reach of the resident.
20. Identify that hands should be washed.

#### Notes:



## Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

### Skill 25- Weighing an Ambulatory Resident

(Step 13 added)

1. Introduce self to the resident.
2. Identify that hands should be washed.
3. Explain procedure to resident.
4. Check balance of scale and balance or zero scale before resident steps on scale. (A digital scale is not allowed.)
5. **Insure resident's safety. Lock wheelchair brakes.**
6. Assist resident to stand and walk them to the scale.
7. Assist resident to step on scale.
8. Check that resident is balanced and centered on scale with arms at side and verbalize that the resident is not holding on to anything that would alter reading of the weight
9. Appropriately adjust weights until scale is in balance or observe analog scale.
10. Read weight.
11. Return resident to wheelchair and assist to sitting position.
12. Record weight on signed recording sheet provided.
13. Record reading in the correct location on the signed recording sheet.
14. **Candidate's recorded weight varies no more than 2 lbs. from RN Test Observer's reading.**
15. Maintain respectful, courteous interpersonal interactions at all times.
16. Leave call light or signaling device within easy reach of the resident.
17. Identify that hands should be washed.

**Notes:**







# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

<b>abdominal thrust</b>	<b>aseptic</b>
<b>abduction</b>	<b>aspiration</b>
<b>abuse</b>	<b>assault</b>
<b>accidents</b>	<b>assistive device</b>
<b>activities</b>	<b>bacteria</b>
<b>adaptive device</b>	<b>bargaining</b>
<b>adaptive equipment</b>	<b>basic needs</b>
<b>adduction</b>	<b>bathing</b>
<b>ADL</b>	<b>battery</b>
<b>admission</b>	<b>bed cradle</b>
<b>admitting resident</b>	<b>bed measurement</b>
<b>admitting resident</b>	<b>bedpan</b>
<b>advance directives</b>	<b>behavior</b>
<b>affected side</b>	<b>behavioral care plan</b>
<b>aggressive resident</b>	<b>bladder training</b>
<b>aggressive residents</b>	<b>blindness</b>
<b>aging process</b>	<b>blood pressure</b>
<b>agitation</b>	<b>body fluid</b>
<b>alarm</b>	<b>body mechanics</b>
<b>Alzheimer's</b>	<b>body temperature</b>
<b>Alzheimer's disease</b>	<b>bowel program</b>
<b>ambulation</b>	<b>BP</b>
<b>anatomy</b>	<b>BPH</b>
<b>anger</b>	<b>bradycardia</b>
<b>angina</b>	<b>breathing</b>
<b>anti-embolitic stocking</b>	<b>breathing rates</b>
<b>aphasia</b>	<b>burns</b>
<b>apnea</b>	<b>call light</b>
<b>appropriate response</b>	<b>call signal</b>
<b>arthritis</b>	<b>cancer</b>



# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

cardiac arrest	communication
cardiovascular system	competency evaluation program
care impaired	conduct
care plan	confidentiality
care planning	confused resident
cares	congestive heart failure
cataract	constipation
catheter	constrict
catheter care	contamination
cc's in an ounce	continuity
cell phones	contracture
central nervous system	converting measures
cerebral vascular accident	COPD
chain of command	cueing
chain of infection	cultural
charge nurse	CVA
chemical restraint	data collection
chemical safety	data collection
CHF	death & dying
choking	dehydration
circulation	delegation
clarification	dementia
cleaning spills	denture care
clear liquid diet	dentures
cognitively impaired	dependability
cold compress	depression
colostomy care	developmental process
comfort care	diabetes
communicable	diabetic



# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

dialysis	emesis basin
diastolic	emotional needs
diet	emotional support
dietitian	empathy
diets	emphysema
digestion	ethics
dilate	evacuation
discharging resident	extremity
disease	eye glasses
disease process	falls
disinfection	fecal impaction
disoriented	feeding
disrespect	feeding tubes
dizziness	financial abuse
DNR	fire
documentation	fire safety
dorsiflexion	flatus
dressing	fluid
drowsy	Foley catheter
dry skin	foot care
dying	foot drop
dysphagia	force fluid
dyspnea	Fowler's
dysuria	fraud
edema	frayed cord
elastic stockings	free from disease
elevate head	frequent urination
elimination	gait belt
emergency situation	gastric feedings
emesis	gastrostomy tube



# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

geriatric chair	incontinence
geriatrics	indwelling catheter
germ transmission	infection
gerontology	infection control
gestures	initial observations
gifts	in-service programs
gloves	insulin
grieving process	intake
HAI	intake and output
hair care	integumentary system
hallucination	interpersonal skills
hand tremors	isolation
hand washing	lateral position
harm	legal ethics
health-care team	legal responsibilities
hearing	lift/draw sheet
hearing aid	lifting
hearing impaired	linen
heart rates	liquid diet
hemiplegia	listening
hepatitis B	loose teeth
HIPAA	low sodium diet
HIV	Maslow
hoarding	masturbation
hormones	MDS
hospice	measuring
hydration	measuring height
hypertension	measuring temperature
I&O	mechanical lift
impairment	medical asepsis



# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

medical record	oral hygiene
medications	oral temperature
memory	orientation
memory loss	osteoporosis
mental health	output
microorganism	overbed table
military time	oxygen
minerals	oxygen concentrator
misappropriation	pain
mistreatment	palliative care
morning care	paralysis
mouth care	Parkinson's
moving	PASS
multiple sclerosis	passive
musculoskeletal	passive range of motion
musculoskeletal system	pathogen
nail care	patience
neglect	perineal care
negligence	personal items
non-contagious disease	phone etiquette
non-verbal communication	physical needs
NPO	physician's authority
nursing assistant's role	policy book
nurtients	positioning
nutrition	PPE
objective	pressure ulcer
observation	preventing injury
ombudsman	privacy
open-ended questions	progressive
oral care	promoting independence



# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

pronation	respiratory symptoms
prostate gland	respiratory system
prosthesis	responding to resident behavior
prosthetic device	response
psychological needs	responsibility
pulse	restorative
quality of life	restorative care
radial	restraint
ramps	restraint alternative
range of motion	rights
reality orientation	risk factor
rectal	role
regulation	safety
religious service	safety precautions
reminiscence therapy	safety techniques
reminiscing	scale
reporting	scope of practice
reposition	seclusion
resident abuse	seizure
resident belongings	self-esteem
resident harm	semi fowlers
resident identification	sensory system
resident independence	sexual harassment
resident right	sexual needs
resident rights	sharps container
residents	shaving
residents	shearing
resident's environment	side rails
respectful treatment	simple fracture
respiration	skin integrity
respiratory	slander



# Ohio Nursing Assistant Candidate Handbook

EFFECTIVE: September 1, 2019

Version 16.1

smoking	tub bath
social needs	tube feeding
specimen	tubing
spills	tympanic
spiritual needs	types of isolation
sputum	unaffected
standard precautions	unconscious
sterile	undressing
sterilization	urethral
stethoscope	urinary catheter bag
stress	urinary elimination
stroke	urinary problems
subjective	urinary system
subjective data	urinary tract
substance abuse	urine
suicide	validation
sundowning	vision change
supine	visual impairment
survey	vital signs
swelling	vitamins
systolic	vomitus
tachycardia	walker
TED hose	wandering resident
telephone etiquette	weak side
temperature	weighing
terminal illness	weight
tips	wheelchair safety
toenails	white blood cells
toileting schedule	withdrawn resident
transfers	workplace violence
treating residents with respect	



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