



D&S Diversified Technologies LLP

Headmaster LLP

Oregon Nurse Aide Candidate Handbook

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Oregon Nurse Aide Candidate Handbook

Contact Information

Questions regarding: testing process • test scheduling • eligibility to test (800) 393-8664	
Questions regarding: obtaining information on official regulations and guidelines for nurse aides • nurse aide certification • renewals • Registry (971) 673-0685	
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<i>Oregon State Board of Nursing</i> 17938 SW Upper Boones Ferry Road Portland, OR 97224-7012 Email: osbn.cnacertificates@state.or.us Web Site: www.oregon.gov/OSBN	<p style="text-align: center;"><i>Monday through Friday</i> 8:00AM – 5:00PM <i>Eastern Standard Time (EST)</i></p> <p style="text-align: right;">Phone #: (800) 393-8664 Fax #: (406) 442-3357</p> <p style="text-align: right;">Phone #: (971) 673-0685 Fax #: (971) 673-0684</p>

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Introduction

In 1987, the Nursing Home Reform Act was adopted by Congress as part of the Omnibus Budget Reconciliation Act (OBRA '87). It was designed to improve the quality of care in long-term health care facilities and to define training and evaluation standards for nurse 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. The purpose of a nurse aide competency evaluation program is to ensure that candidates who are seeking to be nurse aides understand these standards and can competently and safely perform the job of an entry-level nurse aide.

This handbook describes the process of taking the nurse aide competency examination and is designed to help prepare candidates for testing. There are two parts to the nurse aide competency examination—a multiple-choice knowledge test and a skill test. Exam candidates must be registered, complete approved nurse aide education, pass both parts of the exam and meet all other requirements of the Oregon State Board of Nursing (OSBN) for certification in Oregon and to have their name placed on the Oregon Nurse Aide Registry.

Oregon approved D&S Diversified Technologies (D&SDT)-Headmaster LLP to provide tests and scoring services for nurse aide testing. For question not answered in this handbook, please contact Headmaster at (800)393-8664 or go to Headmaster’s Oregon webpage at www.hdmaster.com. The information in this handbook will help you prepare for your examination and should be kept for future reference.

Application to Obtain Oregon CNA1 Certification

Complete the OSBN Nurse Aide application available at the OSBN Nurse Portal, link here: [OSBN Nurse Portal \(boardsofnursing.org\)](http://boardsofnursing.org). **The name entered on your application must be your current legal name. The two forms of identification you will present at the exam site for admission must match the name entered on your application.** Remember to use the same name on the application and all forms, enter your information, answer all questions, provide written explanations of all YES responses to the background questions, and electronically sign and date the application. Double-check your application for accurate and complete information before submission.

Exam Fees

Initial Examination (Knowledge and Skill Tests).....	\$106
Reactivation by Examination (Knowledge and Skill Tests).....	\$106
If Requesting an Oral Knowledge Exam (audio recording)	ADDITIONAL \$35
Retake or Reschedule of both Knowledge and Skill Test.....	\$70
Retake or Reschedule of Knowledge Test Only	\$25
Retake or Reschedule of Skill Test Only	\$45

All fees paid to the Oregon State Board of Nursing are non-refundable. OSBN does not accept checks.

Americans with Disabilities Act (ADA)

ADA Compliance

If you have a qualified disability, you may request special accommodations when you apply for the certification examination. Accommodations must be approved by the Oregon State Board of Nursing in advance of examination. The request for ADA Accommodation is available on the OSBN website or by calling OSBN. This form must be submitted with your application packet.

The Oregon Nurse Aide Competency Exam

Released to Test by OSBN

You will receive an email once you are released to test by OSBN. First time exam candidates will be scheduled to take the knowledge test and skill test on the same day at either an approved Oregon State Board of Nursing regional exam site or at an approved OSBN in-facility exam site.

You must apply for the state competency exam **within one year of your date of nurse aide education program completion**. Your exam date can be scheduled online at <https://or.tmuniverse.com>. (See instructions under ‘Schedule/Reschedule into a Test Event’.) If you need help scheduling an exam, please call Headmaster at (800)393-8664 during regular business hours 8:00AM to 6:00PM (Mountain Time), Monday through Friday, excluding Holidays.

Please note: In-facility exam dates are normally arranged by nurse aide education program instructors. Check with your education program instructor to see if your nurse aide education site has been approved for in-facility testing. If your nurse aide education site is an approved in-facility examination site, your nurse aide education program instructor will tell you the exam date that has been scheduled for you when you complete nurse aide education.

Complete your Initial Login

Your initial registration information will be entered in Headmaster’s TestMaster Universe (TMU©) software.

IMPORTANT: Before you can test, you must sign in to TMU© (<https://or.tmuniverse.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 record has been created, that you sign in to your record, update your password and verify your demographic information. If your demographic information is not correct, please notify your nurse aide education program.
- **You must notify OSBN any time you have a name or address change.**

If you do not know your Email or Username and Password, enter your email address and click on “Forgot Your Password?” You will be asked to re-enter your email and a ‘reset password link’ will be sent to your email (see instructions under ‘Forgot your Password and Recover your Account’). If you are unable to sign in for any reason, contact D&SDT-Headmaster at (800)393-8664.

Oregon TMU© Home Page

This is the Oregon TMU© main page <https://or.tmuniverse.com>:

TMU
OREGON

Click on –
Sign In

Sign In

How can we help you today?

Available Test Dates

Read FAQ

Sign In

USERNAME OR EMAIL

PASSWORD

REMEMBER ME

Sign In

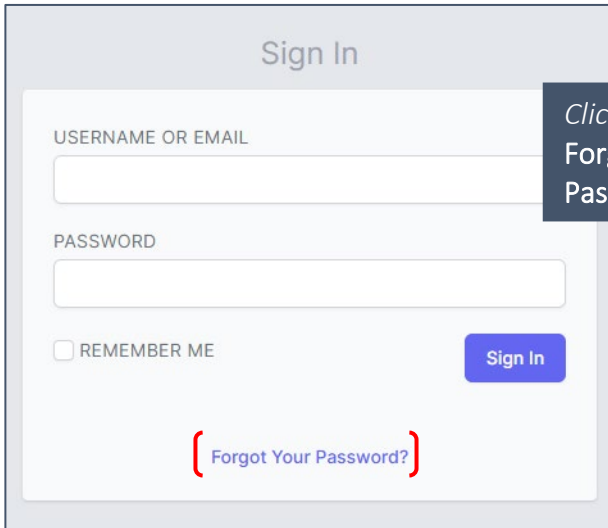
[Forgot Your Password?](#)

Enter your –
Username or
Email and
Password

Click on –
Sign In

If you do not remember your password, follow the instructions under **'Forgot Password and Recover Account'**.

Forgot Password and Recover Account



Sign In

USERNAME OR EMAIL

PASSWORD

REMEMBER ME

Sign In

Forgot Your Password?

Click on –
Forgot Your Password?

Type in your Email Address

Click on –
Recover Account

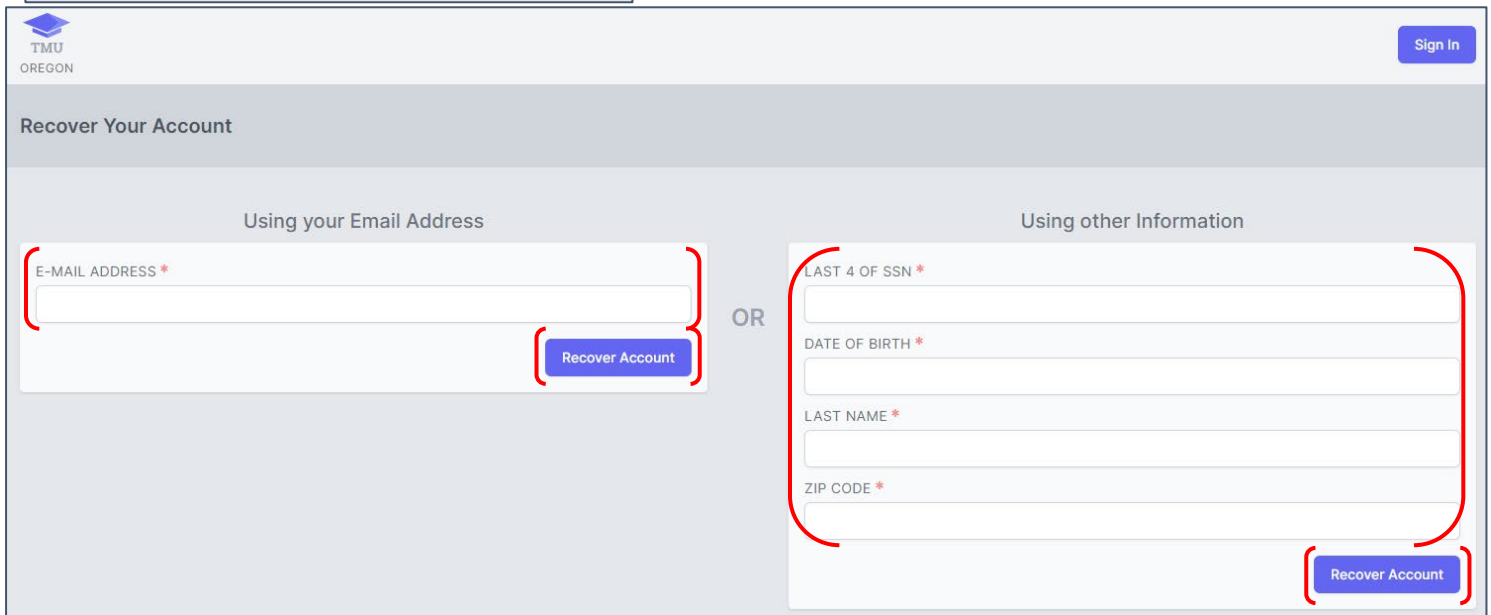
An email with the reset link will be emailed to you.

Click on the reset link in your email to reset your password. (See next page.)

-OR-

You can type in the requested data under Using other Information

Click on -
Recover Account



TMU OREGON Sign In

Recover Your Account

Using your Email Address

E-MAIL ADDRESS *

Recover Account

OR

Using other Information

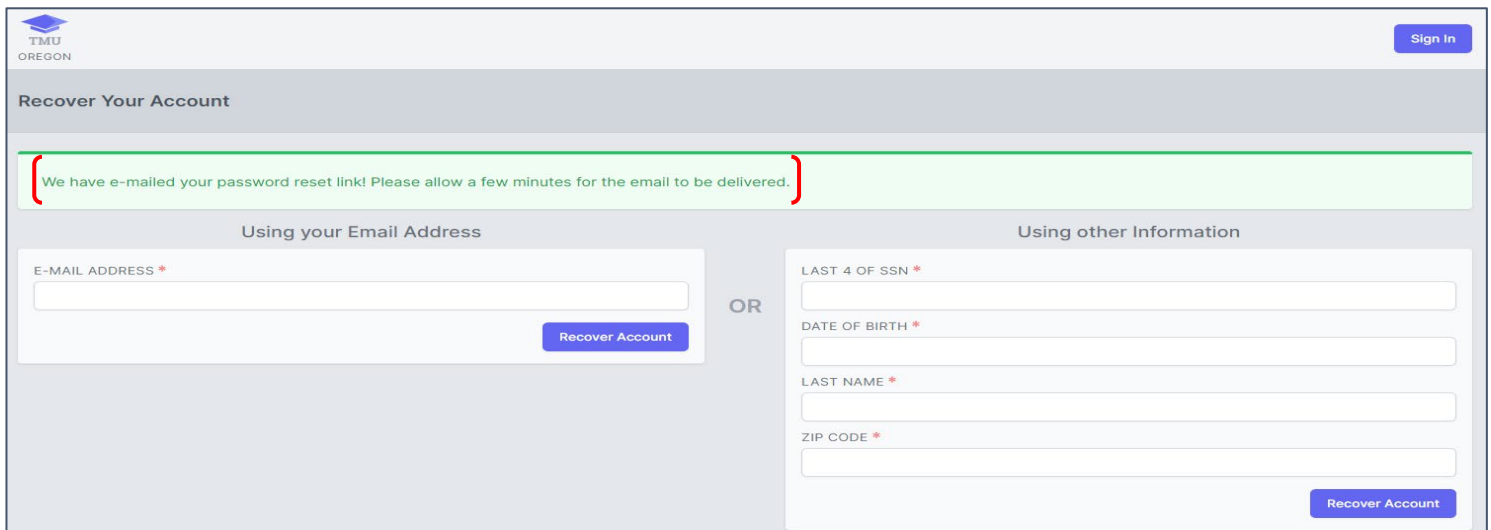
LAST 4 OF SSN *

DATE OF BIRTH *

LAST NAME *

ZIP CODE *

Recover Account



TMU OREGON Sign In

Recover Your Account

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

Using your Email Address

E-MAIL ADDRESS *

Recover Account

OR

Using other Information

LAST 4 OF SSN *

DATE OF BIRTH *

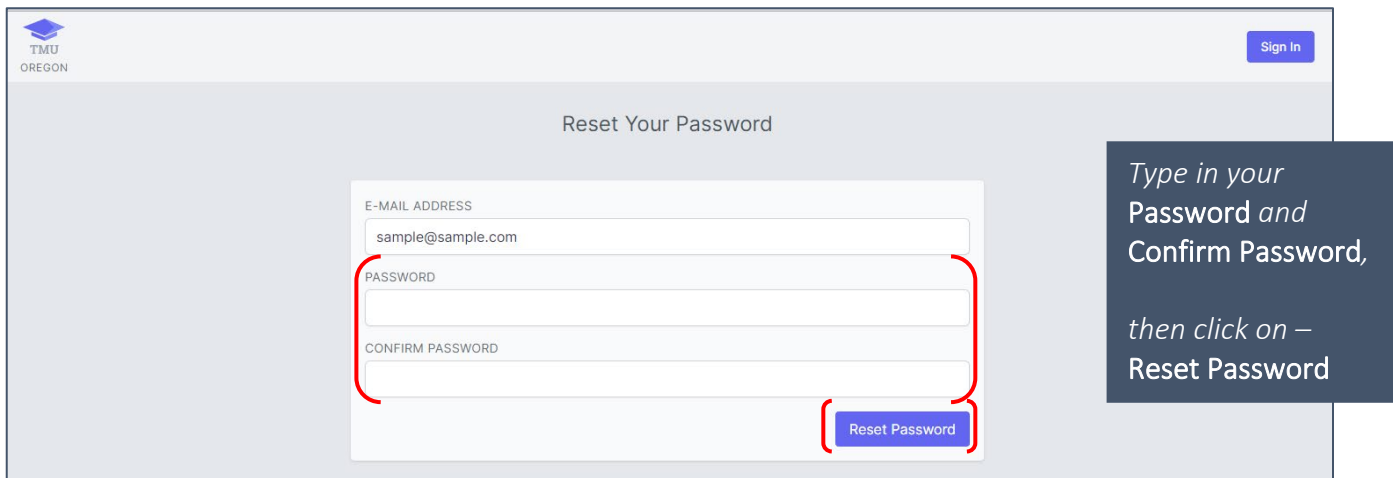
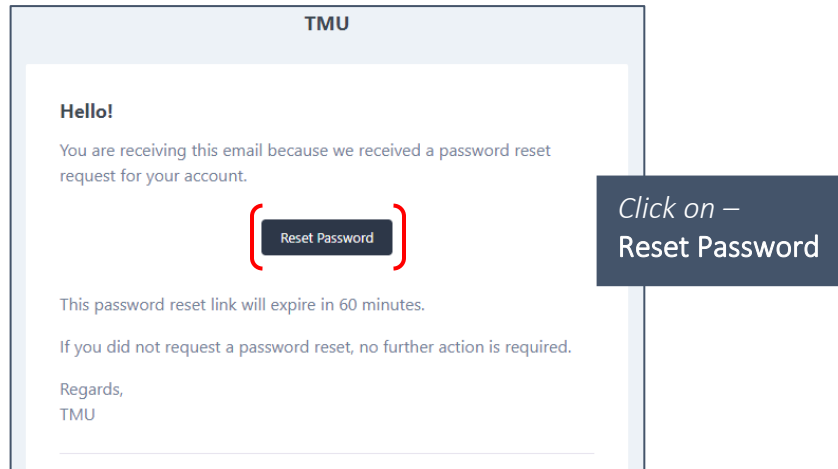
LAST NAME *

ZIP CODE *

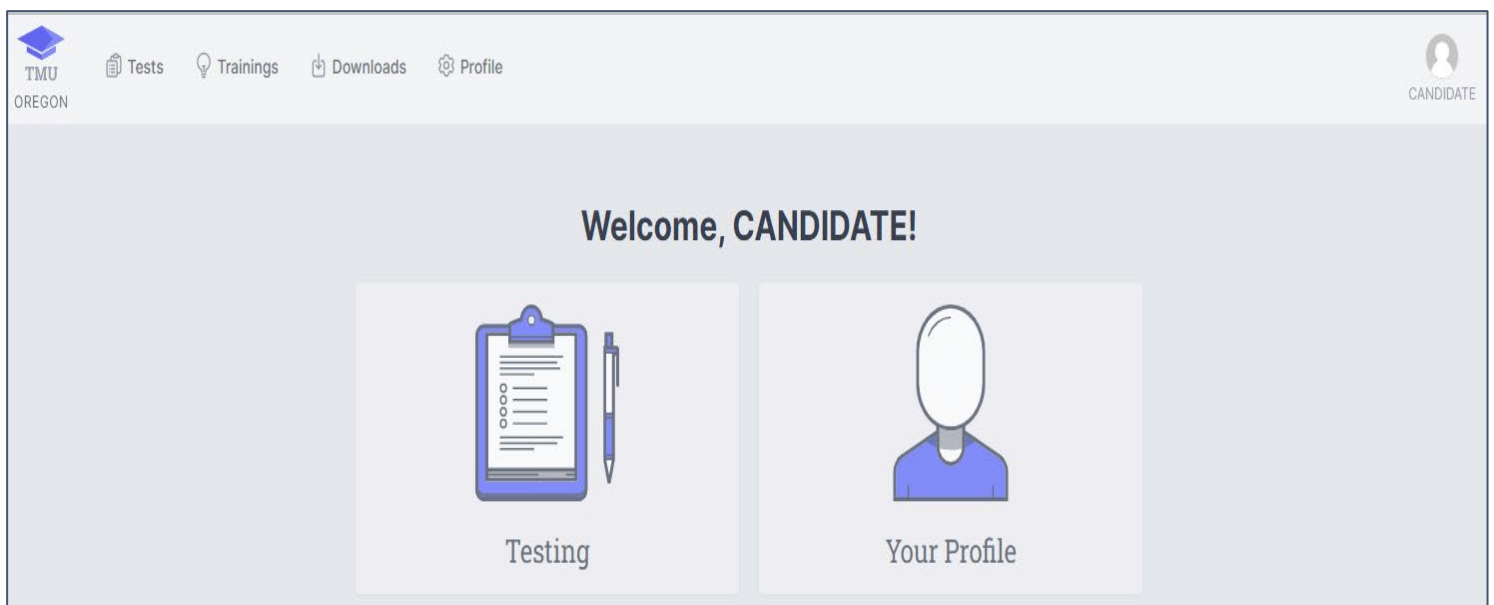
Recover Account

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Email you will receive to reset your password:



Once done resetting your password, your record will open up.

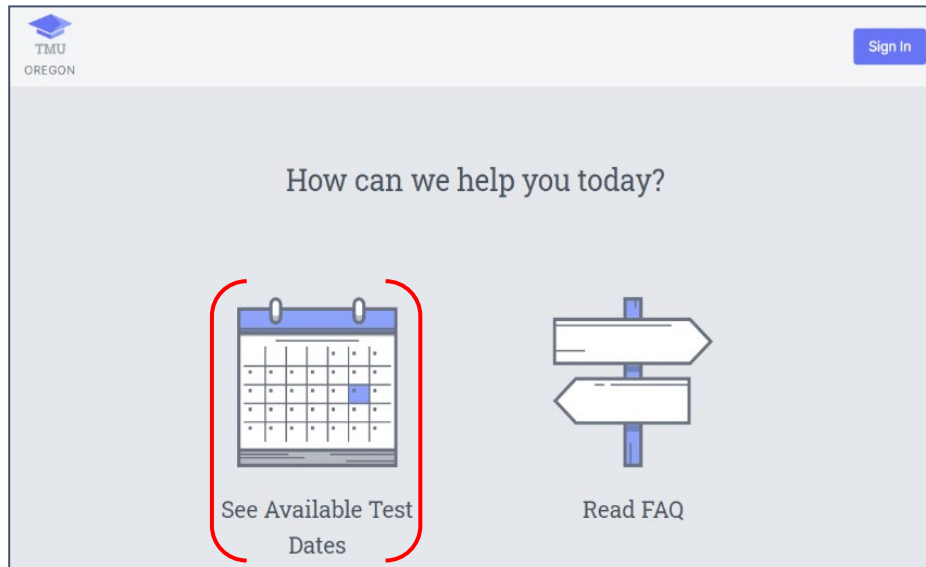


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Viewing Available Exam Dates

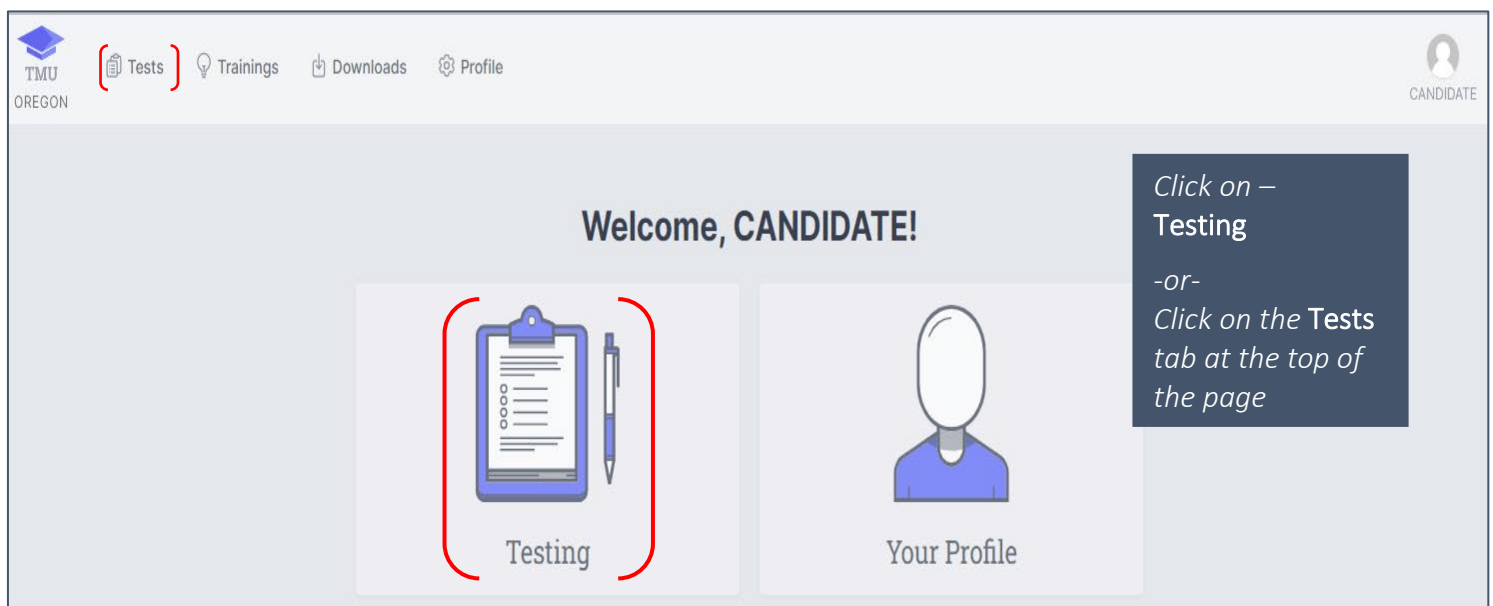
Approved exam dates can be obtained:

- from your instructor
- or by visiting the Oregon TMU© page at <https://or.tmuniverse.com> to view the available examination dates in real time



Schedule/Reschedule into a Test Event

This is the home screen you will see once you have signed in:



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EXAM	REASON	Action
Certified Nurse Aide Knowledge (Eligible)		Schedule
Certified Medication Aide Knowledge (Not Eligible)	Medication Aide Training	
Certified Nurse Aide Skill (Eligible)		Schedule

All eligible test events will appear in this format.

To select a test, click on **Schedule** next to the corresponding desired test component, knowledge or skills.

(You will be scheduled for both components at the same event and only need to click on the “schedule” next to either the knowledge or the skill test, not both individually.)

TEST DATE	TEST SITE	SCHEDULING FOR	Action
01/08/2021 8:00 AM PST	DALLAS RETIREMENT VILLAGE & HEALTH CTR. DALLAS, OR	S Certified Nurse Aide K Certified Nurse Aide	Schedule
01/11/2021 8:00 AM PST	CAREGIVER TRAINING INSTITUTE #1 PORTLAND, OR	S Certified Nurse Aide K Certified Nurse Aide	Schedule
01/12/2021 8:00 AM PST	CAREGIVER TRAINING INSTITUTE #1 PORTLAND, OR	S Certified Nurse Aide K Certified Nurse Aide	Schedule
01/18/2021 8:00 AM PST	CAREGIVER TRAINING INSTITUTE #1 PORTLAND, OR	S Certified Nurse Aide K Certified Nurse Aide	Schedule
01/19/2021 8:00 AM PST	CAREGIVER TRAINING INSTITUTE #1 PORTLAND, OR	S Certified Nurse Aide K Certified Nurse Aide	Schedule
01/23/2021 8:00 AM PST	UMPQUA COMMUNITY COLLEGE - ROSEBURG ROSEBURG, OR	S Certified Nurse Aide K Certified Nurse Aide	Schedule
01/23/2021 8:00 AM PST	DARE 2 CARE LEARNING CENTER EUGENE, OR	S Certified Nurse Aide K Certified Nurse Aide	Schedule

To select a test site and date –

Click on **Schedule** next to the corresponding desired test site and date.

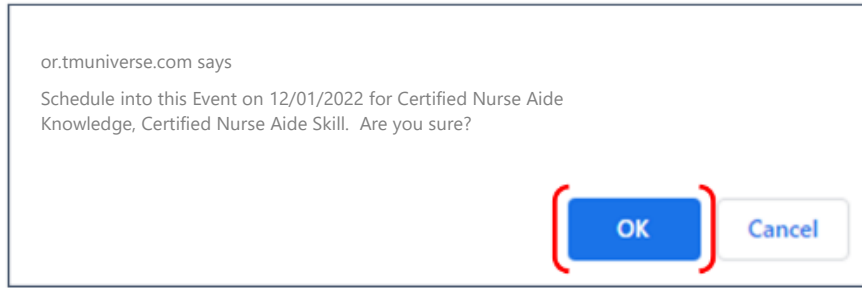
This screen confirms you are scheduled into a test date to take your knowledge and skills exam.

*Your status shows **Scheduled** and a note at the top of your screen also shows you are scheduled.*

*Click on- **Test Confirmation Page** to see your test confirmation with important reminders for testing.*

TEST DATE	EXAM	TEST SITE	STATUS	Action
12/01/2022 8:00 AM PST	Certified Nurse Aide Knowledge	ROGUE COMMUNITY COLLEGE - TABLE ROCK CAMPUS (TS) WHITE CITY, OR	Scheduled	Test Confirmation Page Get Map
12/01/2022 8:00 AM PST	Certified Nurse Aide Skill	ROGUE COMMUNITY COLLEGE - TABLE ROCK CAMPUS (TS) WHITE CITY, OR	Scheduled	Test Confirmation Page Get Map

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Click OK on the screen that pops up confirming this is the date and site you wish to schedule into.

Test Confirmation Notice

Candidates can view, verify and print their test confirmation notice any time after scheduling by logging into their TMU@ account at <https://or.tmuniverse.com> and clicking on the “Test Confirmation Page”. Your test confirmation notice is not required for exam admission.

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

Note: Failure to adhere to information in the candidate handbook could result in No Show for your test event.

It is important you read this letter!

Please note: Candidates who self-schedule online, or those scheduled by their nurse aide education programs, will receive their test confirmation at the time they are scheduled. HEADMASTER does not send postal mail test confirmation letters to candidates.

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

Exam Check-In

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

Testing Attire

Wear comfortable, appropriate, clothing and non-skid shoes to your examination. You may wear nursing assistant attire, such as scrubs, if you wish. You will not be allowed to test if you wear inappropriate or revealing clothing.

You may bring a standard watch with a second hand. No smart watches or fitness monitors are allowed.

Identification

You must bring **two forms of original (no photo copies), signature-bearing, current (not expired) proper identification to test. At least one of the signature ID's must contain your photograph.** Examples of the forms of accepted identification that are current (not expired) and include a signature are:

- Driver's License (*non-expired from any state is acceptable*)
- State-issued Identification Card (*non-expired from any state is acceptable*)
- Passport (*Passport Cards are not acceptable*)
- Military Identification Card (*that meets all identification requirements*)
- Alien Registration Card (*that meets all identification requirements – may contain a fingerprint in place of a signature*)
- Tribal Identification Card (*that meets all identification requirements*)
- Work Authorization Card (*that meets all identification requirements*)
- Social Security Card (there is not an expiration date, but must be signed to be acceptable)
- Credit or Debit Card (*that meets all identification requirements*)
- 1st Aid or CPR Card (*that meets all identification requirements*)
- School or high school ID for current year with signature

Please note: A driver's license or state-issued ID card that has a hole punched in it is NOT VALID and will not be accepted as an acceptable form of ID. You will not be admitted for testing and you will be considered a NO SHOW.

The name on your two forms of identification must match the name on your nursing assistant application packet submitted to OSBN. If you have had a legal name change since submitting your application packet, you must bring an official document proving your legal name has changed such as a marriage certificate or divorce decree. **You must notify OSBN any time you have a name or address change.**

Please note:

- **You will not be admitted for testing if you do not bring proper/valid identification.**
 - Be sure your identification is not expired.
 - Check to be positive that both your FIRST and LAST printed names on your identification documents match your current name of record in TMU®.
- A driver's license or state-issued ID card that has a hole punched in it is NOT VALID and will not be accepted as an acceptable form of ID.


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In the cases where names do not match or your IDs are not proper/valid or has a hole punched in it, this is considered a NO SHOW and you will have to reschedule and pay for another test and date.


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

REQUIRED INFORMATION FOR THE TWO FORMS OF IDENTIFICATION

FIRST PHOTO BEARING ID



REVERSE SIDE OF ALL CARDS



SECOND FORM OF ID



1. Full Legal Name (FIRST & LAST)
2. Photo-Bearing Identification (one ID must contain photo)
3. MUST BE SIGNED
4. Non-Expired

FIRST and LAST names match on both forms of ID

Both ID's MUST BE SIGNED and the signatures on both ID's MUST MATCH

Instructions for the Knowledge and Skill Tests

Test instructions for the knowledge and skill tests will be provided in written format in the waiting area when you sign-in for your test. Oral and PDF versions are also available anytime from your smart phone via the knowledge and skill test instructions link under the Candidate Forms column on Headmaster's [Oregon webpage](#). These instructions detail the process and what you can expect during your exams. Please read through each instruction, or listen to them, **before** entering the knowledge test room or skill demonstration lab. The instructions will be left in the waiting area during testing for you to refer to throughout your time at the test site. The RN Test Observer and Knowledge Test Proctor will ask you questions about the instructions you read when you enter the knowledge test room and/or skill test lab.

Testing Policies

The following policies are observed at each test site—

- Make sure you have signed in to your TMU© record at <https://or.tmuniverse.com> before your test date to update your password and verify your demographic information. Refer to the **'Complete Your Initial Login'** section of this handbook for instructions and information.
 - If you have not signed in and updated your password and verified your demographics in your TMU© record when you arrive for your test, you may not be admitted to the exam and any exam fees paid *will NOT be refunded*.
- Plan to be at the test site up to eight (8) hours. Please plan your day accordingly.

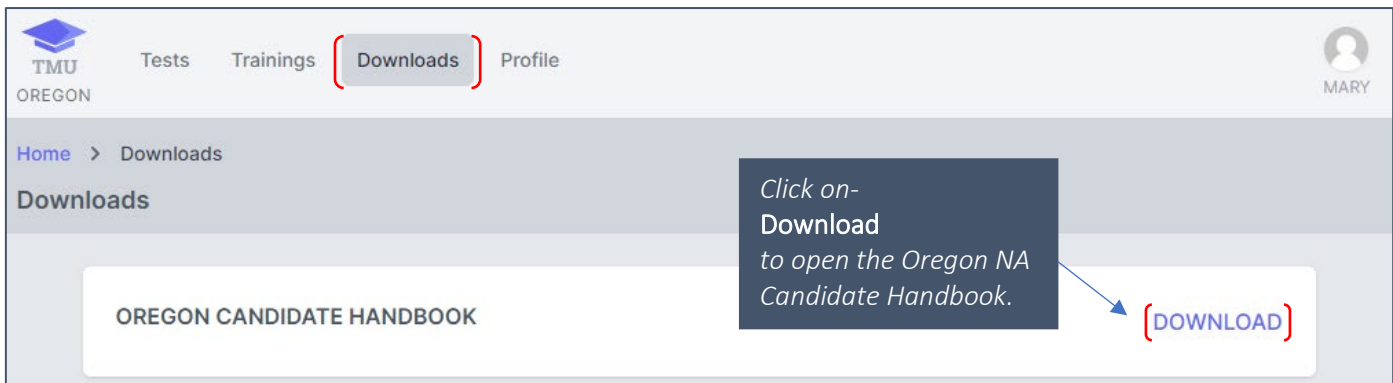
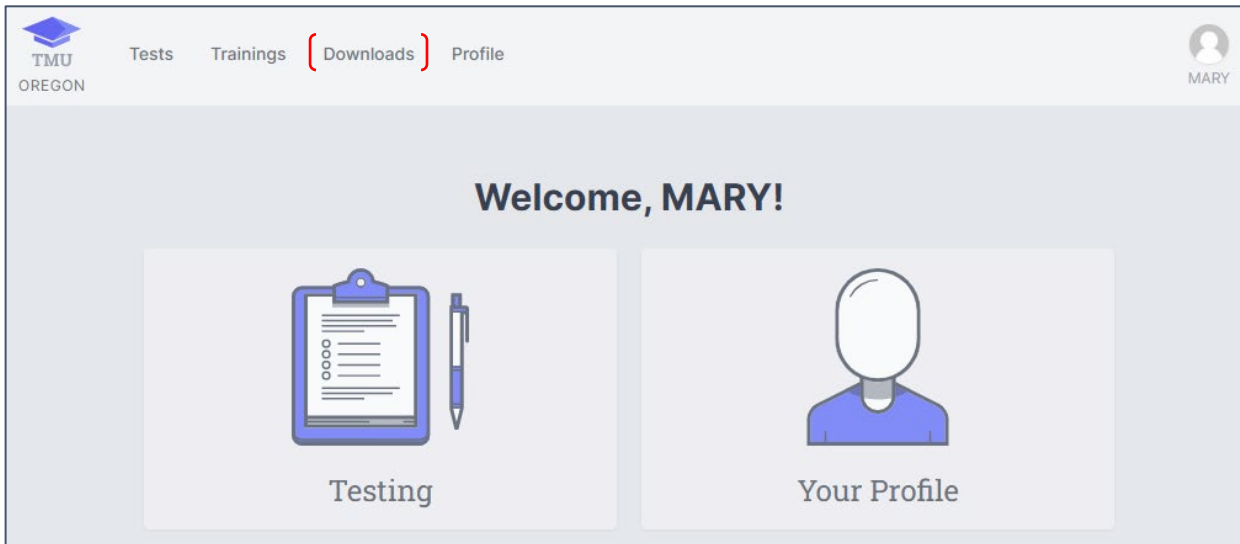
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- If you arrive late for your confirmed exam (you need to be at the test site to check in at least 20-30 minutes before your scheduled start time – if you test start time is 8:00AM, you need to be at the test site by 7:40AM **at the latest**), you may not be admitted to the exam and any exam fees paid *will NOT be refunded*.
- If you do not bring two valid and appropriate current, signature-bearing with at least one containing a photo, forms of ID, you will not be admitted to the exam and any exam fees paid *will NOT be refunded*.
 - If the FIRST and LAST printed names on both forms of your IDs do not match your current name of record, you will not be admitted to the exam, considered a No Show and any exam fees paid *will NOT be refunded*.
- If you NO SHOW for your exam day, any test fees paid *will NOT be refunded*. You must re-pay your testing fees to the Oregon State Board of Nursing and be released to test in order to schedule another exam date.
- **ELECTRONIC DEVICES AND PERSONAL ITEMS:** Cell phones, smart watches, fitness monitors, electronic recording devices, Bluetooth-connected devices and personal items (such as water bottles, briefcases, large bags, study materials, extra books, or papers) are not permitted to be on or near you in either testing room. You will be informed by the testing team of the designated area to place your personal items and electronic devices and you are to collect these items when you complete your test(s).
 - All electronic devices must be **turned off**. Smart watches, fitness monitors and Bluetooth-connected devices must be removed from your wrist/body.
- Anyone caught using any type of electronic recording device during testing will be removed from the testing room(s), have their test scored as a failure, forfeit all testing fees, will be reported to their nurse aide education program and the Oregon State Board of Nursing (OSBN) and you will not be permitted to test for 6 months. You may, however, use personal devices during your free time in the waiting area.
- Test sites, RN Test Observers, Knowledge Test Proctors and Actors are not responsible for candidate personal belongings at the test site.
- You are encouraged to bring a jacket, snack, drink or study material to have while waiting to test.
- No translation dictionaries in any format are allowed.
- You may not take any notes or other materials from the testing room.
- You are not permitted to eat, drink or smoke (e-cigarettes or vape) during the exam.
- You are not allowed to leave the testing room (knowledge test room or skills lab) once the exam has begun **for any reason**. If you do leave during your test event, you will not be allowed back into the testing room to finish your exam.
- If you are discovered causing a disturbance of any kind, engaging in any kind of misconduct or try to take any notes or testing materials from the testing room, you will be dismissed from the exam, your test will be scored as a failure and you will be reported to your nurse aide education program and the Oregon State Board of Nursing.
- 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 perform the skill test if you have any type of physical limitation (excluding pre-arranged ADA's) that would prevent you from performing your duties as a nursing assistant. (Examples: cast, arm/leg braces, crutches, etc.) Call Headmaster as soon as possible to reschedule a new test date. You must fax a doctor's order **within three (3) business days** of your scheduled exam day to qualify for a free reschedule.
- After check-in and ID verification, the knowledge test will be administered to candidates. After candidates finish the knowledge test, they will be assigned a time to take their skill test by the RN Test Observer. For skill retakes only, the RN Test Observer will inform you of your skill test time at check-in before starting the knowledge exam. You will take notify you of your skill test time when you check-in for your test event at check-in.

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- Please review this [Oregon Candidate Handbook](#) before your test day for any updates to testing and/or policies.

The Candidate Handbook can also be accessed within your TMU@ record under your 'Downloads' tab:



Security

If you refuse to follow directions, use abusive language or disrupt the examination environment, your test will be stopped and scored as a failure. You will be dismissed from the testing room, your test will be scored as a failed attempt, you will forfeit any testing fees paid and a report of your behavior will be provided to OSBN. You will not be allowed to retest without OSBN approval.

Anyone who removes or tries to remove test material or takes notes or information from the test site will be reported to OSBN 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 paid. You will not be allowed to retest without OSBN approval.

If you give or receive help from anyone during testing (which also includes the use of any electronic recording devices such as cell phones, smart watches, etc.), 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 provided to OSBN and you will not be allowed to retest without OSBN approval.

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Reschedule and No Show Policies

Reschedule

If you must reschedule your exam date, please do so as soon as possible. You may reschedule an exam date online in your TMU© record at or.tmuniverse.com up until three (3) business days, **excluding** Saturdays, Sundays and Holidays, before your scheduled exam date. If you need assistance, please call Headmaster at (800)393-8664.

- Example: If you are scheduled to take your exam on a Saturday, Sunday or Monday, you would need to reschedule by the Tuesday before your scheduled exam.

Scheduled test date is on a:	Reschedule on the previous:
Monday	Tuesday
Tuesday	Wednesday
Wednesday	Thursday
Thursday	Friday
Friday	Monday
Saturday	Tuesday
Sunday	Tuesday

Please note: Reschedules will not be granted less than three (3) full business days prior to a scheduled test date.

No Shows

If you are scheduled for your exam and do not show up without notifying Headmaster at least three (3) full business days prior to your scheduled testing event, **excluding** Saturdays, Sunday, and Holidays, OR if you are turned away for lack of proper identification or any other reason to deem you ineligible to test, you will be considered a **NO SHOW**. You will forfeit all fees paid and must submit a new testing fee to OSBN and be released to test to schedule yourself into a new test event.

These fees partially offset Headmaster costs incurred for services requested and resulting work that is performed. If you do not reschedule online before three (3) business days preceding a scheduled test event, a No Show status will exist.

No Show Exceptions

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

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

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

Unforeseen Circumstances Policy

If an exam date is cancelled due to an unforeseen circumstance, Headmaster staff will make every effort 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*) in the event of an unforeseen circumstance for a test event you are scheduled in to, you will be taken out of the test event and Headmaster will not reschedule you until we hear back from you.

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

- If Headmaster leaves you a message or emails you at the phone number or email in your record and:
 - you do not call us back in a timely manner,
 - your phone number is disconnected/mail box 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 schedule exam date unless:

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

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

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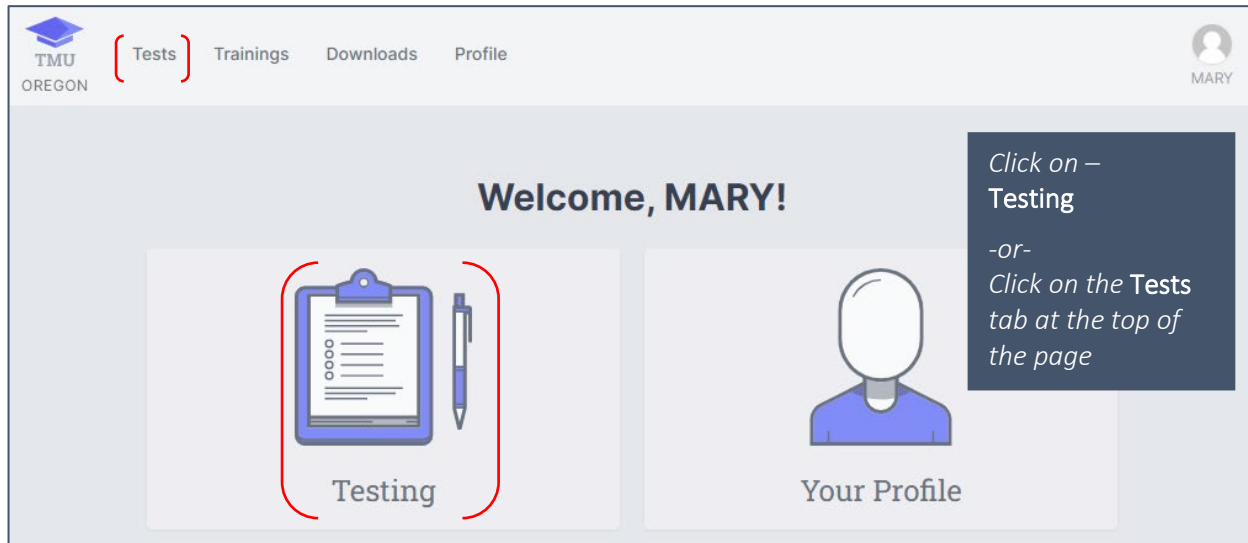
Candidate Feedback – Exit Survey

You will be able to access your test results in your TMU© record the day your test is officially scored after 7:00PM MST. You will be provided a link to complete the exit survey when you access your test results. The survey is confidential and will not have any bearing on 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.

Exam Results

After you have completed both the Knowledge Test and Skill Test components of the competency exam, your test results will be officially scored and double checked by scoring teams in Headmaster’s Helena, Montana office. You may securely access your results in your own record in TMU© at <https://or.tmuniverse.com>. Official test results are available to you after 7:00PM Mountain Standard time the day tests are scored.

To view your test results, sign in to your record in TMU© at <https://or.tmuniverse.com>. (Refer to the screen shots below.)

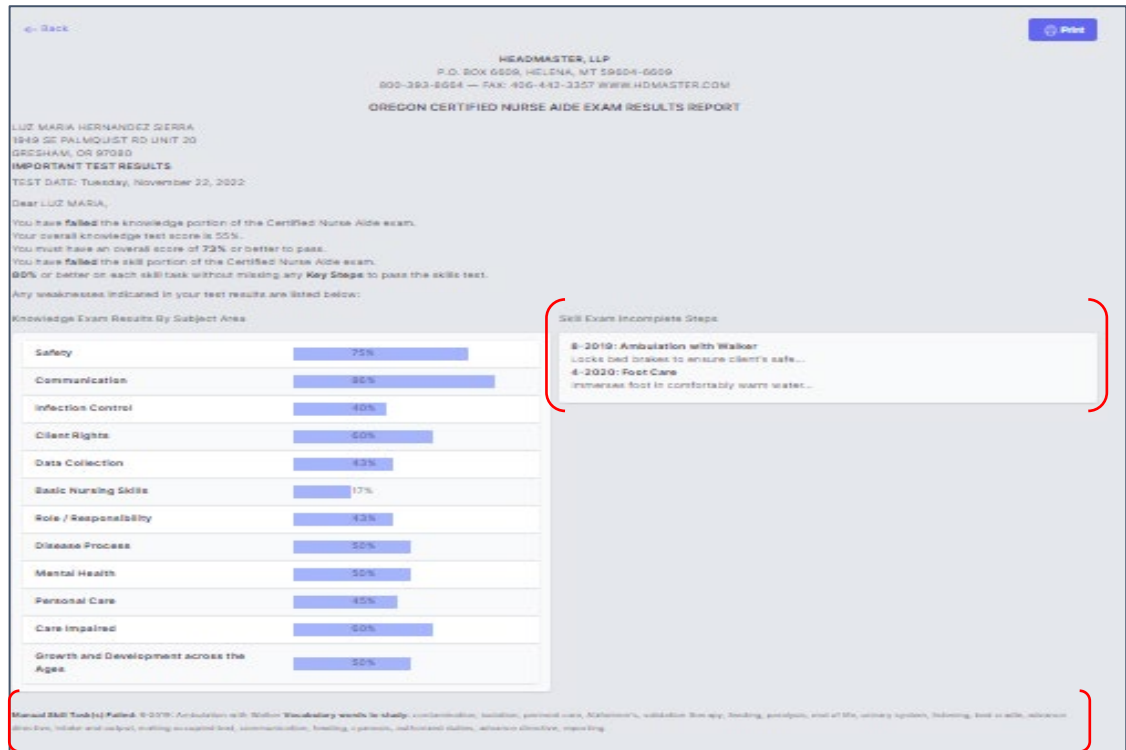


Testing History				Please take our satisfaction survey
TEST DATE	EXAM	TEST SITE	STATUS	
11/22/2022 8:00 AM PST	Certified Nurse Aide Knowledge	CAREGIVER TRAINING INSTITUTE (TS) PORTLAND, OR	Failed	Details Print Test Results
11/22/2022 8:00 AM PST	Certified Nurse Aide Skill	CAREGIVER TRAINING INSTITUTE (TS) PORTLAND, OR	Failed	Details Print Test Results

Click on – Details to view your results.
 Click on Print Test Results to print your results.
 Click on Please take our satisfaction survey to complete the exit survey.

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Sample NA exam results report:



OSBN will receive your results for state record the day your test is scored. Headmaster and OSBN cannot release results over the phone. Exam results are normally available online after 7:00PM Mountain Standard time (excluding Saturdays, Sundays and Holidays) one business day after the exam date.

When you pass your exam, you may be certified and listed on the Oregon Nursing Assistant Registry **ONLY AFTER** you have met all OSBN requirements. **One** of those requirements includes passing **both** the knowledge and skill test components of the Oregon nursing assistant examination.

Please note: HEADMASTER does not send postal mail letters or email test results to candidates.

Test Attempts

You must apply for the state competency exam **within one year of your date of nurse aide education program completion.**

An attempt means checking in for the competency evaluation and signing in to the TMU© knowledge test or entering the skills test lab and hearing the skills that are to be performed. If a candidate decides to not complete the test after signing in to the knowledge test or entering the skills test lab and hearing the tasks to be performed, the attempt will be scored as a failure.

Retaking the Nurse Aide Test

In the event that your test results inform you that you failed the knowledge and/or skill portion of the examination and when you want to apply for a retest, you will need to repay the appropriate non-refundable fees to OSBN through the OSBN nurse portal at: [OSBN Nurse Portal \(boardsofnursing.org\)](https://boardsofnursing.org). Once your payment is processed by

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OSBN and they authorize (release) you to test, you will receive an email and then you can schedule a new exam date. **Follow the instructions for 'Schedule/Reschedule a Test Event'.**

Test Review Requests

You may request a review of your test results or dispute any other condition of your testing. To request a review, you must submit a detailed explanation of why you feel your dispute is valid **within three (3) business days** from official scoring of your test (excluding Saturdays, Sundays and Holidays). Requests may be sent via email oregon@hdmaster.com, fax (406)442-3357 or mail (post marked within 3 business days from official scoring of your test) P.O. Box 6609, Helena, MT 59604. Late requests will not be considered.

PLEASE READ BEFORE EMAILING YOUR TEST REVIEW REQUEST: Please call Headmaster at (800)393-8664 during regular business hours, 8:00AM to 6:00PM MST, Monday through Friday, excluding holidays, and discuss the test outcome you are questioning. Many times, once you have further details about the scoring of your test, you will understand the scoring process and learn how you can better prepare yourself for subsequent exam attempts. If, after discussion with Headmaster staff, you still have a concern, you may submit a Test Review Request.

One qualification for certification as a nursing assistant in Oregon is demonstration by examination of minimum nursing assistant knowledge and skills. The outcome of your review will determine who pays for your re-test. If the results of the review are in your favor, Headmaster will pay your re-test fee. Headmaster will review your detailed recollection, your knowledge test markings and any skill task measurements you recorded at the time of your test, in addition to reviewing markings, notations and measurements recorded by the RN Test Observer at the time of your test. Headmaster will re-check the scoring of your test and may contact you and/or the RN Test Observer for any additional recollection of your test(s). After a candidate reaches the age of 18, Headmaster will only discuss test results or test disputes with the candidate or the candidate's nurse aide education program/instructor. Headmaster will not review test results or disputes with family members or anyone else on behalf of the candidate once the candidate is 18 years of age.

Headmaster will complete your review request within 10 business days of the receipt of your timely review request and will email the review results to your email address and to the Oregon State Board of Nursing.

The Knowledge/Oral Test

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

The Knowledge Test Proctor will hand out materials and give instructions for taking the Knowledge Test. You will have a maximum of **ninety (90) minutes** to complete the **80 question** Knowledge Test. You will be told when fifteen minutes remain. You may not ask questions about the content of the Knowledge Test (such as "What does this question mean?") The Knowledge Test Proctor (KTP) will have scratch paper available for use during your knowledge exam.

You must have a score of 73% or better to pass the knowledge portion of the exam.

Electronic TMU© testing using Internet connected computers is utilized at all sites in Oregon. The Knowledge test portion of your exam will be displayed on a computer screen for you to read and key in your answers.

NOTE: You will need your TMU© Username or Email and Password to sign in to your knowledge test. Please see the information under **'Complete Your Initial Login'** to sign in to your record in TMU©.

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

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An audio (Oral) version of the knowledge test is available. However, you must request an Oral test when you submit your application to OSBN and pay the oral test fee. There is an additional charge for an Oral Test. The questions are read to you, in a neutral manner through the computer headphones and have control buttons on the computer screen (play, rewind, pause etc.).

The knowledge and/or oral knowledge test is in English. No other language is approved by OSBN for examination. Translation dictionaries or devices are not allowed during testing.

All test materials (including scratch paper) must be left in the testing room. Anyone who takes, or tries to take materials, notes or information from the testing room is subject to prosecution and will be reported to the Oregon State Board of Nursing.

Knowledge Test Content

The Knowledge Test consists of 80 multiple-choice questions. Questions are selected from subject areas based on the Oregon State Board of Nursing (OSBN) approved Oregon test plan and include questions from all the required categories as defined in OBRA regulations. The subject areas and number of questions from each subject area are as follows:

SUBJECT AREA	NUMBER OF QUESTIONS
Basic Nursing Skills	6
Care Impaired	5
Client Rights	5
Communication	14
Data Collection	7
Disease Process	4
Growth & Development Across the Ages	2
Infection Control	5
Mental Health	6
Personal Care	11
Role and Responsibility	7
Safety	8

Knowledge Practice Test

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

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

1. Clean linens that touch the floor should be:
 - (A) Picked up quickly and placed back on the clean linen cart
 - (B) Used immediately on the next resident bed
 - (C) Considered dirty and placed in the soiled linen hamper
 - (D) Used only in the room with the floor the linen fell on
 2. 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 purpose of the Skill Test is to evaluate your performance when demonstrating Oregon approved nursing assistant skill tasks. You will find a complete list of skill tasks in this handbook.
- You will be asked to re-present your photo-bearing ID that you showed the RN Test Observer at sign-in.
- Be sure you understand all instructions you read while in the waiting area before you begin your skill task demonstrations. You may not ask questions once the Skill Test begins and the timer starts. Once the Skill Test begins, the RN Test Observer may not answer questions.
- The RN Test Observer will show you where supplies are located and demonstrate the use of the equipment you will need for your three (3) or four (4) assigned skill tasks before starting your skill test.
- 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.
- **EFFECTIVE 1-1-2023:** You will be allowed a maximum of **thirty-five (35) minutes** [decreased from forty-five (45) minutes] to complete your three (3) or four (4) tasks. After 20 minutes have elapsed, 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 of the key steps and 80% of all non-key steps on each task assigned in order to pass the Skill Test. Key steps have been recommended by OSBN's Test Advisory Panel and approved by the Oregon State Board of Nursing.

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- If you believe you made a mistake while performing a task, tell the RN Test Observer you would like to make a correction. You will need to correctly demonstrate the step or steps on the task you believe you performed incorrectly in order 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 (35) minutes** or until you tell the RN Test Observer you are finished with the Skill Test.
- The skill task steps are generally not order dependent, unless the words *BEFORE* or *AFTER* are used in a step.
- When you finish each task, verbally tell the RN Test Observer you are finished and move to the designated “relaxation area.” When the RN Test Observer and actor have set up and are ready for your next skill task demonstration, the RN Test Observer will read the scenario for your next task.
- **All steps must actually be demonstrated. Steps and correction to steps that are only verbalized WILL NOT COUNT.**

Skill Test Recording Form

The RN test observer will provide a recording form similar to the one displayed below.

RECORDING FORM

Candidate's Name: _____	
PLEASE PRINT	
TEMPERATURE: _____	PULSE: _____ RESPIRATIONS: _____
PULSE OX %: _____	BLOOD PRESSURE: _____ / _____
URINARY OUTPUT: _____ ml	
Glass 1: _____ Glass 2: _____ Glass 3: _____ TOTAL INTAKE: _____ ml	TOTAL FLUID INTAKE: _____ ml FOOD INTAKE: _____ %
Candidate's Signature: _____	

Skill Test Tasks

Your nurse aide education program has prepared you for all of the skill tasks that you may be asked to perform. You will be assigned one of the following mandatory tasks with embedded hand washing using soap and water as your first task:

- Bedpan and Output with Hand Washing
- Catheter Care of a Male with Hand Washing
- Donning an Isolation Gown and Gloves then Emptying a Urinary Drainage Bag with Hand Washing
- Perineal Care of a Female with Hand Washing
- Perineal Care of a Male and Changing a Soiled Brief with Hand Washing

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

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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. That is why some skill tests will have a differing number of tasks.

Skill Tasks Listing

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

The steps that are listed for each task are the steps required for a nursing assistant candidate to successfully demonstrate minimum proficiency of the skill task for the RN Test Observer. The steps will be performed on a live resident actor for most of the tasks (the catheter care and perineal care tasks will be done on a manikin). You will be scored only on the steps listed.

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

Note: The skill task steps included in this handbook are offered as guidelines to help prepare candidates for the Oregon nursing assistant skill test and the steps included 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) AMBULATION OF A CLIENT USING A GAIT BELT

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rub hands together until hands are completely dry.
- Explain procedure to be performed to the client.
- Obtain gait belt.
- Lock bed brakes to ensure client's safety.
- Lock wheelchair brakes to ensure client's safety.
- Lower bed so client's feet will be flat on the floor when sitting on the edge of the bed.
- Bring client to sitting position.
- Assist client to put on shoes.
- Place gait belt around the client's waist to stabilize trunk. Tighten gait belt.
- Check gait belt by slipping fingers between gait belt and client.
- Stand in front of and face the client.
- Grasp the gait belt on each side of the client with an underhand grip.
- Stabilize the client's legs.
- Bring client to standing position, using proper body mechanics.
- Grasp gait belt with one hand, using under hand grip.
- ~~Stabilize client with other hand by holding forearm, shoulder, or using other appropriate method to stabilize client.~~ **WILL BE REMOVED**

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- ~~Ambulate the client to wheelchair.~~ **REPLACED WITH -> Ambulate client at least 10 steps to the wheelchair while maintaining contact with the gait belt.**
- Assist client to sit in the wheelchair in a controlled manner that ensures safety.
- Remove gait belt.
- Leave client in position of comfort and safety.
- Maintain respectful, courteous interpersonal interactions at all times.
- Place client within easy reach of call light or signaling device.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rub hands together until hands are completely dry.

2) AMBULATION OF A CLIENT WITH A WALKER USING A GAIT BELT

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain procedure to client.
- Lock bed brakes to ensure client's safety.
- Lock wheelchair brakes to ensure client's safety.
- Lower bed so client's feet will be flat on the floor when sitting on the edge of the bed.
- Bring client to sitting position.
- Assist client in putting on shoes.
- **Place gait belt around the client's waist to stabilize trunk. Tighten gait belt. ADDED STEP**
- **Check gait belt by slipping fingers between gait belt and client. ADDED STEP**
- Assist client to stand.
- Position walker in front of client.
- Ensure client has stabilized walker.
- Position self behind and slightly to side of client.
- Walk to the side a little behind the client.
- Safely ambulate client at least 10 steps to the wheelchair.
- Assist client to sit in the wheelchair in a controlled manner that ensures safety.
- Remove gait belt.
- Use correct body mechanics at all times.
- Leave client in position of comfort and safety.
- Maintain respectful, courteous interpersonal interactions at all times.
- Place client within easy reach of call light or signaling device.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

3) APPLYING AN ANTI-EMBOLISM ELASTIC STOCKING (ONE LEG)

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

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- Explain procedure to client.
- Provide for client's privacy by only exposing the (right/left) leg.
- Roll, gather or turn stocking down inside out at least to the heel.
- Place stocking over the toes, foot, and heel.
- Roll or pull stocking up leg.
- Check toes for possible pressure from stocking and adjust as needed.
- Leave client with a stocking that is smooth and wrinkle free.
- Leave client with a stocking that is properly placed.
- Cover exposed leg.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

4) ASSISTING A CLIENT TO USE A BEDPAN WITH HAND WASHING

(One of the possible mandatory first tasks)

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain the procedure to the client.
- Provide privacy - pull curtain.
- Raise bed to a comfortable working height.
- Position client on bedpan correctly.
- After placing bedpan, raise head of bed to comfortable level.
- Leave tissue within reach of client.
- Leave call light within reach of client.
- Leave room until called.
- Put on gloves.
- Provide hand hygiene for the client. *(Candidate may provide a wet washcloth, -or- hand sanitizer, -or- a disposable wipe to provide hand hygiene for the client.)*
- Gently remove bedpan.
- Measure output using a graduate.
- Empty graduate into toilet, rinse receptacles and empty rinse water into toilet.
- Lower bed, if it was raised.
- Record output on recording form.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Wash hands - turn on water.
- Begin by thoroughly wetting hands.
- Apply soap to hands.
- Rub hands together for 20 seconds using friction *with soap*.
- Wash all surfaces of hands and wrists with soap.
- Clean under fingernails *with soap*.
- Using friction, rub interlaced fingers together while pointing downward *with soap*.

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- Rinse hands thoroughly under running water with fingers pointed downward.
- Dry hands *and wrists* on clean paper towel(s).
- Turn off faucet with a SECOND (last) clean dry paper towel.
- Discard paper towels to trash container as used.
- Do not re-contaminate hands at any time during/after the hand washing procedure.

5) ASSISTING A DEPENDENT CLIENT WITH A MEAL IN BED

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain procedure to the client.
- Read aloud the diet card to check that the client has received the correct tray.
- Position the client in an upright position, *at least 45 degrees*.
- Provide hand hygiene for the client BEFORE assisting with meal. (Candidate may use a wet washcloth, or they may rub hand sanitizer over all surfaces of the client's hands, or they may use a disposable wipe to provide hand hygiene for the client.)
- Place soiled linen in hamper.
- Sit next to the client while assisting with meal.
- Describe the foods being offered to the client.
- Offer fluid frequently.
- Offer small amounts of food at a reasonable rate.
- Allow client time to chew and swallow.
- Wipe client's hands and face during meal as needed.
- Leave client clean and in a position of comfort.
- Record intake of total solid food eaten as a percentage on recording form.
- Record fluid intake in ml on recording form.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

6) ASSISTING A DEPENDENT CLIENT WITH A MEAL IN A CHAIR

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain procedure to the client.
- Read aloud the diet card to check that the client has received the correct tray.
- Provide hand hygiene for the client BEFORE assisting with meal. (Candidate may use a wet washcloth, or they may rub hand sanitizer over all surfaces of the client's hands, or they may use a disposable wipe to provide hand hygiene for the client.)
- Place soiled linen in hamper.
- Sit next to the client while assisting with meal.

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- Describe the foods being offered to the client.
- Offer fluid frequently.
- Offer small amounts of food at a reasonable rate.
- Allow client time to chew and swallow.
- Wipe client's hands and face during meal as needed.
- Leave client clean and in a position of comfort.
- Record intake of total solid food eaten as a percentage on recording form.
- Record fluid intake in ml on recording form.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

7) BED BATH FOR A CLIENT (WHOLE FACE, ARM, HAND AND ARMPIT)

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain procedure to the client.
- Provide privacy - pull curtain.
- Raise bed to a comfortable working height.
- ~~Cover client with a bath blanket.~~ **REPLACED WITH -> Keep client covered (towel, bath blanket, gown or sheet).**
- ~~Remove remaining top bed cover.~~ **WILL BE REMOVED**
- ~~Fold bed cover to bottom of bed or place aside.~~ **WILL BE REMOVED**
- Remove client's gown without exposing client.
- Fill basin with comfortably warm water.
- Wash face without soap.
- Dry face.
- Place towel under arm, exposing one arm.
- Using soap: wash arm, hand, and armpit.
- Rinse arm, hand, and armpit.
- Dry arm, hand, and armpit.
- Assist client to put on a clean gown.
- Rinse basin.
- Store basin.
- Dispose of soiled linen in appropriate container.
- Lower bed, if it was raised.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

8) CATHETER CARE FOR A MALE CLIENT WITH HAND WASHING

(One of the possible mandatory first tasks)

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain the procedure to the client.
- Provide privacy - pull curtain.
- Put on gloves.
- Lift client's gown to expose catheter area.
- Physically checks that urine can flow unrestricted into the drainage bag.
- ~~Use soap and water to carefully wash around the catheter where it exits the urethra.~~
REPLACED WITH -> Use soap and water to carefully wash around the penis where the catheter exits the body.
- Hold catheter where it exits the urethra.
- With fingers near the urethra, clean at least 3-4 inches down the catheter tube.
- Clean with stroke(s) only away from the urethra.
- Use clean portion of cloth for stroke(s).
- Rinse using stroke(s) only away from the urethra.
- Rinse using clean portion of cloth for stroke(s).
- Pat dry.
- Do not allow the tube to be pulled at any time during the procedure.
- Replace top cover over client.
- Leave client in a position of safety and comfort.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Wash hands - turn on water.
- Begin by thoroughly wetting hands.
- Apply soap to hands.
- Rub hands together for 20 seconds using friction *with soap*.
- Wash all surfaces of hands and wrists with soap.
- Clean under fingernails *with soap*.
- Using friction, rub interlaced fingers together while pointing downward *with soap*.
- Rinse hands thoroughly under running water with fingers pointed downward.
- Dry hands *and wrists* on clean paper towel(s).
- Turn off faucet with a SECOND (last) clean dry paper towel.
- Discard paper towels to trash container as used.
- Do not re-contaminate hands at any time during/after the hand washing procedure.

9) DENTURE CARE FOR A DEPENDENT CLIENT

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain the procedure to the client.

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- Line sink (cloth towel or washcloth – *no paper towel allowed*) with a protective lining or fill with water to prevent damage to the dentures in case they are dropped.
- Put on gloves.
- Carefully remove dentures from cup.
- Apply denture cleanser to toothbrush.
- Thoroughly brush dentures, including the inner, outer, and chewing surfaces of upper and/or lower dentures.
- Rinse dentures using clean cool running water.
- Rinse denture cup.
- Place dentures in denture cup.
- Add cool clean water to denture cup.
- Rinse equipment and return to storage.
- Discard sink's protective lining in an appropriate container, or drain sink.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

10) ~~UNDRESSING AND~~ DRESSING A CLIENT

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain the procedure to the client.
- Provide privacy - pull curtain.
- Keep client covered while removing gown.
- ~~Remove gown from unaffected side first.~~ **REPLACED WITH -> Remove client's gown.**
- Place used gown in laundry hamper.
- ~~During the next two steps, always dress client beginning with the weak side first.~~ **WILL BE REMOVED**
- ~~When dressing the client in a shirt/blouse, insert your hand through the sleeve of the shirt/blouse and grasp the hand of the client.~~ **REPLACED WITH -> When dressing the client in a shirt/blouse, begin with the weak side first and insert your hand through the sleeve of the shift/blouse and grasp the hand of the client.**
- When dressing the client in sweat pants assist the client to raise his/her buttocks or rock client side to side and draw the pants over the buttocks and up to the client's waist.
- When putting on the client's socks, draw the socks up the client's foot until they are smooth.
- Leave the client comfortably and properly dressed.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

11) FINGERNAIL CARE FOR CLIENT (ONE HAND)

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain the procedure to the client.
- Immerse nails in comfortably warm water.
- Verbalize to soak nails for *at least* five (5) minutes.
- Dry hand thoroughly.
- Specifically dry between fingers.
- Gently clean under nails with orange stick.
- File each fingernail.
- Rinse equipment.
- Return equipment to storage.
- Discard soiled linen in linen hamper or equivalent.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

12) FOOT CARE FOR CLIENT (ONE FOOT)

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain the procedure to the client.
- Fill basin with comfortably warm water.
- Remove sock.
- Immerse foot in comfortably warm water for 5 to 20 minutes (time is to be verbalized).
- Use water and soapy washcloth.
- Wash entire foot.
- Wash between toes.
- Rinse entire foot.
- Rinse between toes.
- Dry foot thoroughly, dry between toes thoroughly.
- Warm lotion by rubbing it between hands.
- Applies lotion over entire foot, avoiding between the toes.
- If any excess lotion, wipe with a towel.
- Replace sock on foot.
- Rinse basin.
- Return basin to storage.
- Place dirty linen in hamper or equivalent.
- Maintain respectful, courteous interpersonal interactions at all times.

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- Leave client in position of safety in proper alignment in the chair.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

13) MAKING A CLIENT'S OCCUPIED BED

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain the procedure to the client.
- Gather linen. Transport linen away from body.
- Place clean linen on a clean surface. (bedside stand, chair, or overbed table)
- Provide privacy - pull curtain.
- Raise bed to a comfortable working height.
- Client is to remain covered with a sheet or bath blanket at all times.
- Assist client to roll onto side.
- Roll or fan fold soiled linen, soiled side inside, to the center of the bed.
- Place clean bottom sheet on mattress.
- Secure two fitted corners.
- Roll or fan fold clean linen against client's back.
- Assist the client to roll over the bottom linen, preventing trauma and avoidable pain to client.
- Remove soiled linen without shaking.
- Avoid touching linen to uniform.
- Dispose of soiled linen in hamper or equivalent.
- Pull through and smooth out the clean bottom linen.
- Secure the other two fitted corners.
- Place clean top linen over covered client.
- Place clean blanket or bed spread over covered client.
- Remove used top linen keeping client unexposed at all times.
- Tuck in clean top linen at the foot of bed, while providing room for feet to move.
- Tuck in clean blanket or bedspread at the foot of bed, while providing room or feet to move.
- Apply clean pillowcase without contaminating linen and clothing.
- Gently lift client's head while replacing the pillow.
- Lower bed, if it was raised.
- Return side rails to lowered position, if side rails were used.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

Making an Unoccupied Bed

- **WILL BE REMOVED FROM TESTING**

14) MEASURE AND RECORD ORAL FLUID INTAKE AT MEAL TIME

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain the procedure to the client.
- Observe dinner tray.
- Use paper, pencil, and/or mental computation to calculate grand total ml consumed from three different glasses.
- Record the total ml of fluid consumed.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

15) MOUTH CARE (BRUSHING CLIENT'S TEETH)

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain the procedure to the client.
- Provide privacy - pull curtain.
- Drape the chest with towel to prevent soiling.
- Put on gloves.
- Apply toothpaste to toothbrush/toothette.
- Brush all inner, outer, and chewing surfaces of all upper and lower teeth.
- Clean tongue.
- Clean gums.
- Assist client in rinsing mouth.
- Wipe/dry client's mouth.
- Remove soiled linen.
- Place soiled linen in hamper or equivalent.
- Empty emesis basin.
- Rinse emesis basin.
- Rinse toothbrush or dispose of toothette.
- Return emesis basin and toothbrush to storage.
- Leave client in position of comfort and safety.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

16) MOUTH CARE FOR A COMATOSE CLIENT

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Provide privacy - pull curtain.
- Turn client to a side lying position.
- Drape as needed to protect from soiling.
- Put on gloves.
- Use toothette(s) dipped in water.
- Squeeze excess water from toothette(s).
- Gently and thoroughly clean the inner, outer, and chewing surfaces of all upper and lower teeth.
- Gently and thoroughly clean the gums and tongue.
- Clean and dry face around mouth.
- Discard disposable items in waste can.
- Discard towel and wash cloth in linen hamper.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

17) PERINEAL CARE FOR A FEMALE CLIENT WITH HAND WASHING

(One of the possible mandatory first tasks)

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain the procedure to the client/manikin.
- Provide privacy - pull curtain.
- Raise bed to a comfortable working height.
- Fill basin with comfortably warm water.
- Put on gloves.
- Remove covers from client.
- Make sure client is comfortably positioned on back.
- Lift client's gown to expose perineum only.
- Separate labia.
- Use water and a clean, soapy washcloth.
- Clean one side of labia from top to bottom.
- Use a clean portion of a washcloth with each stroke for each step.
- Clean other side of labia from top to bottom.
- Clean the vaginal area from top to bottom, rinse the area from top to bottom, pat dry.
- ~~Re-cover the exposed area with the client's gown.~~ **WILL BE REMOVED**
- Assist client to turn onto side.
- Use water and a clean, soapy washcloth.
- Clean from vagina to rectal area.
- Use a clean portion of a washcloth for any cleaning stroke(s).

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- Rinse area from vagina to rectal area.
- Pat dry.
- Position client (manikin) on her back.
- Dispose of soiled linen in an appropriate container.
- Lower bed, if it was raised.
- Rinse basin, return basin to storage.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Wash hands - turn on water.
- Begin by thoroughly wetting hands.
- Apply soap to hands.
- Rub hands together for 20 seconds using friction *with soap*.
- Wash all surfaces of hands and wrists with soap.
- Clean under fingernails *with soap*.
- Using friction, rub interlaced fingers together while pointing downward *with soap*.
- Rinse hands thoroughly under running water with fingers pointed downward.
- Dry hands *and wrists* on clean paper towel(s).
- Turn off faucet with a SECOND (last) clean dry paper towel
- Discard paper towels to trash container as used.
- Do not re-contaminate hands at any time during/after the hand washing procedure.

18) PERINEAL CARE FOR A MALE CLIENT, CHANGING A SOILED BRIEF WITH HAND WASHING

(One of the possible mandatory first tasks)

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain procedure to the client/manikin.
- Provide privacy – pull curtain.
- Raise bed to a comfortable working height.
- Obtain new brief.
- Fill basin with comfortably warm water.
- Put on gloves.
- Remove covers from client.
- Make sure client is comfortably positioned on back.
- Lift client's gown to expose perineum only.
- Remove soiled brief from front to back.
- Dispose of soiled brief by placing brief in trash can.
- Gently grasp penis.
- Use water and a clean, soapy washcloth.
- Use a clean portion of a washcloth, clean tip of penis starting at the urethral opening working away with a circular motion towards the body.
- Use a clean portion of a washcloth for each stroke, clean the shaft of the penis with firm motion towards the body.

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- Use a clean portion of a washcloth, clean scrotum.
- Use a clean wash cloth, rinse.
- Use a clean portion of washcloth for each stroke, rinse penis.
- Use a clean portion of washcloth with each stroke, rinse scrotum.
- Pat dry.
- ~~Re-cover the exposed area with client's gown.~~ **WILL BE REMOVED**
- Assist client to turn onto side.
- Use water and a clean, soapy washcloth.
- Clean from scrotum to rectal area.
- Use a clean portion of washcloth for any cleaning stroke(s).
- Use a clean portion of the washcloth for each stroke, rinse from scrotum to rectal area.
- Pat dry.
- Position client (manikin) on his back.
- Apply brief.
- Dispose of soiled linen in an appropriate container.
- Tie trash bag.
- Lower bed, if it was raised.
- Rinse basin.
- Return basin to storage.
- Maintain respectful courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of client.
- Wash hands - turn on water.
- Begin by thoroughly wetting hands.
- Apply soap to hands.
- Rub hands together for 20 seconds using friction *with soap*.
- Wash all surfaces of hands and wrists with soap.
- Clean under fingernails *with soap*.
- Using friction, rub interlaced fingers together while pointing downward *with soap*.
- Rinse hands thoroughly under running water with fingers pointed downward.
- Dry hands *and wrists* on clean paper towel(s).
- Turn off faucet with a SECOND (last) clean dry paper towel
- Discard paper towels to trash container as used.
- Do not re-contaminate hands at any time during/after the hand washing procedure.

19) PUTTING ON GOWN AND GLOVES, MEASURE AND RECORD CLIENT'S OUTPUT FROM A URINARY DRAINAGE BAG, REMOVE GOWN AND GLOVES WITH HAND WASHING

(One of the possible mandatory first tasks)

- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Face the back opening of the gown.
- Do not shake gown during unfolding.
- Place arms through each sleeve.
- Secures the neck opening.
- Tie the waist in the back or on the side.

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- Clothing, both front and back, is covered as completely as possible.
- Put on gloves. Gloves overlap gown sleeves at the wrist.
- Knock on door.
- Explain procedure to client.
- Provide privacy – pull curtain.
- Place a barrier on the floor under the drainage bag.
- Place the graduate on the previously placed barrier.
- Open the drain to allow the urine to flow into the graduate.
- Completely empty urinary drainage bag.
- Do not touch the graduate with any portion of the tubing.
- Close the drain.
- Secure drain.
- ~~With graduate at eye level, measure output.~~ **WILL BE REMOVED**
- Record the output in ml's on the recording form.
- Empty graduate into toilet.
- Rinse graduate.
- Empty rinse water in toilet.
- Return equipment to storage.
- Leave client in a position of safety and comfort.
- Remove gloves before removing gown **or** with gloves on pulls/pops gown off by pulling on the front of the gown.
- Remove gloves turning inside out and folding one glove inside the other **or** pulls/pops gown from neck always keeping gloved hands on outside (contaminated) portion of the gown.
- Do not touch outside of gloves with bare hand at any time **or** works gown down the arms from the neck and rolls gown inside out as it is removed.
- Dispose of the gloves, without contaminating self, in appropriate container **or** peels gloves off keeping them inside out and rolled up inside the gown.
- Remove gown at the neck with bare hands if not using alternate method of removal.
- Unfasten gown at the waist with bare hands if not using alternate method of removal.
- Remove gown by folding/rolling soiled area to soiled area with either method of removal.
- Candidate's bare hands never touch soiled surface of gown.
- Dispose of gown in an appropriate container.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Wash hands - turn on water.
- Begin by thoroughly wetting hands.
- Apply soap to hands.
- Rub hands together for 20 seconds using friction *with soap*.
- Wash all surfaces of hands and wrists with soap.
- Clean under fingernails *with soap*.
- Using friction, rub interlaced fingers together while pointing downward *with soap*.
- Rinse hands thoroughly under running water with fingers pointed downward.
- Dry hands *and wrists* on clean paper towel(s).
- Turn off faucet with a SECOND (last) clean dry paper towel.
- Discard paper towels to trash container as used.
- Do not re-contaminate hands at any time during/after the hand washing procedure.

20) RE-POSITION CLIENT ON THEIR SIDE IN BED

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain the procedure to the client.
- Provide privacy - pull curtain.
- Position bed flat.
- Raise bed to a comfortable working height.
- Ensure that the client's face never becomes obstructed by the pillow.
- From the working side of bed - move upper body toward self.
- From the working side of bed - move hips toward self.
- From the working side of bed - move legs toward self.
- Assist/turn client onto the correct side as read to him/her in the scenario.
- Check to be sure client is not lying on his/her arm.
- Maintain client's correct body alignment.
- Place support devices under the client's head and upper arm, behind back, and between knees.
- Lower bed, if it was raised.
- Lower side rail, if it was used.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

21) RANGE OF MOTION (ROM) FOR CLIENT'S LOWER EXTREMITIES (HIP AND KNEE)

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain the procedure to the client.
- Provide privacy - pull curtain.
- Position client supine.
- ~~Position client in good body alignment for this task.~~ **WILL BE REMOVED**
- Correctly support joints by placing one hand under the knee and the other hand under the ankle of the leg.
- Perform the following motions (*abduction, adduction, flexion and extension*) on the correct side stated to the candidate by the RN Test Observer.
- Move the entire leg away from the body. (*abduction*)
- Move the entire leg toward the body. (*adduction*)
- Complete abduction and adduction of the hip at least three times.
- Continue to correctly support joints by placing one hand under the client's knee and the other hand under the client's ankle.
- Bend the client's knee and hip toward the client's trunk. (*flexion of hip and knee at the same time - may also do separately*)

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- Straighten the knee and hip. (*extension of knee and hip in the same motion - may also do separately*)
- Complete flexion and extension of the knee and hip at least three times.
- Ask if causing any discomfort or pain sometime during ROM procedure.
- Do not force any joint beyond the point of free movement.
- Leave client in a comfortable position.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

22) RANGE OF MOTION (ROM) FOR CLIENT'S UPPER EXTREMITIES (ONE SHOULDER)

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain the procedure to the client.
- Provide privacy - pull curtain.
- Position client on back.
- ~~Position client in good body alignment for this task.~~ **WILL BE REMOVED**
- Correctly support client's joint by placing one hand under the elbow and the other hand under the client's wrist.
- Perform the following motions (*flexion, extension, abduction and adduction*) on the correct side stated to the candidate by the RN Test Observer.
- Raise the client's arm up and over the client's head. (*flexion*)
- Bring the client's arm back down to the client's side. (*extension*)
- Complete flexion and extension of shoulder at least three times.
- Continue same support for shoulder joint.
- Move the client's entire arm out away from the body. (*abduction*)
- Return arm to side of the client's body. (*adduction*)
- Complete abduction and adduction of the shoulder three times.
- Ask if causing any discomfort or pain sometime during ROM procedure.
- Do not force any joint beyond the point of free movement.
- Leave client in a comfortable position.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

23) TAKING AND RECORDING CLIENT'S BLOOD PRESSURE (ONE-STEP PROCEDURE)

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

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- Explain the procedure to the client.
- Provide privacy - pull curtain.
- Position client with forearm relaxed and supported in a palm-up position, approximately at the level of the heart.
- Roll client's sleeve up about 5 inches above the elbow.
- Apply the appropriate size cuff around the upper arm just above the elbow.
- Correctly align cuff over brachial artery.
- Clean earpieces of stethoscope appropriately and place in ears.
- Clean diaphragm.
- ~~Locate brachial artery with fingertips.~~ **WILL BE REMOVED**
- Place stethoscope over brachial artery.
- Hold stethoscope snugly in place. Inflate cuff to 160-180 mmHg.
- Slowly release air from cuff to disappearance of pulsations.
- Remove cuff.
- Record blood pressure reading on recording form.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

24) TAKING AND RECORDING ORAL TEMPERATURE, PULSE OXYGEN AND ELECTRONIC BLOOD PRESSURE

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain procedure to client.
- Put sheath on thermometer probe.
- Correctly turn on digital oral thermometer.
- Gently insert bulb end of thermometer in mouth under tongue.
- Tell client to hold thermometer in place with lips closed.
- Leave thermometer in place until it beeps.
- Remove thermometer.
- Read and record the temperature on the recording form.
- Discard sheath appropriately.
- Obtain pulse oximeter.
- Clip the pulse oximeter on the top and bottom of the client's finger.
- Turn on pulse oximeter.
- Leave pulse oximeter in place while oxygen level reading is being taken.
- Record oxygen level on the recording form.
- Remove pulse oximeter from client's finger.
- Obtain electronic blood pressure monitor and cuff.
- Place blood pressure cuff correctly on client's arm.
- Align cuff correctly over brachial artery.

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- Turn on electronic blood pressure monitor.
- Leave electronic blood pressure cuff in place while blood pressure reading is being taken.
- Record blood pressure on the signed recording form.
- Remove electronic blood pressure cuff from client's arm.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signal calling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

25) TAKING AND RECORDING ORAL TEMPERATURE, RADIAL PULSE AND RESPIRATIONS

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain the procedure to the client.
- Put sheath on thermometer probe.
- Correctly turn on digital oral thermometer.
- Gently insert bulb end of thermometer in mouth under tongue.
- Tell client to hold thermometer in place with lips closed.
- Leave thermometer in place until it beeps.
- Remove thermometer.
- Read and record the temperature on the recording form.
- Discard sheath appropriately.
- Locate the radial pulse by placing tips of fingers on thumb side of the client's wrist.
- Count pulse for 60 seconds.
- Record pulse count on the recording form
- Count respirations for 60 seconds.
- Record respirations count on recording form.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

26) TAKING AND RECORDING A RADIAL PULSE AND RESPIRATIONS

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain the procedure to the client.
- Provide privacy – pull curtain.
- Locate the radial pulse by placing tips of fingers on the thumb side of the client's wrist.
- Count pulse for 60 seconds.
- Record pulse count on the recording form.

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- Count respirations for 60 seconds.
- Record respirations count on the recording form.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

27) TAKING AND RECORDING TEMPORAL TEMPERATURE (USING A TEMPORAL CONTACT – SLIDE THERMOMETER), RADIAL PULSE AND RESPIRATIONS

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain the procedure to the client.
- Correctly turn on the temporal thermometer.
- Place the sensor head at the center of the forehead.
- Slowly slide the thermometer.
- Slide thermometer across the forehead towards the top of the ear.
- Keep sensor head in contact with skin at all times.
- Stop when hairline reached.
- Read and record the temperature on the previously signed recording form.
- Locate the radial pulse by placing tips of fingers on thumb side of the client's wrist.
- Count the pulse for 60 seconds.
- Record the pulse count on the previously signed recording form.
- Count the respirations for 60 seconds.
- Record the respirations count on the previously signed recording form.
- Maintain respectful, courteous, interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

28) TRANSFER FROM BED TO WHEELCHAIR

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain the procedure to the client.
- Ensure client safety by locking bed brakes.
- Position wheelchair at foot or head of bed with arm of wheelchair almost touching the bed.
- Ensure client safety by locking wheelchair brakes.
- Bring client to a sitting position using proper body mechanics.
- Place gait belt around the client's waist to stabilize trunk.
- Check gait belt for fit by sliding fingers under belt to determine if it is snug but not too tight.

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- Assist client in putting on shoes.
- Bring client to standing position using proper body mechanics.
- Transfer client from bed to wheelchair by assisting client to pivot and sit in a controlled manner that ensures safety.
- Remove gait belt.
- Leave client in a position of safety and comfort.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

29) TRANSFER FROM WHEELCHAIR TO BED

- Knock on door.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.
- Explain the procedure to the client.
- Position wheelchair at foot or head of bed with arm of the wheelchair almost touching the bed.
- Ensure client's safety by locking wheelchair brakes.
- Ensure client's safety by locking bed brakes.
- Place gait belt around the client's waist to stabilize trunk.
- Check gait belt for fit by sliding fingers under belt to determine if it is snug but not too tight.
- Ensure client's feet are flat on the floor.
- Ask client to place hands on wheelchair arm rests.
- Use legs to stabilize client.
- Assist client to standing position, using an underhand grip on gait belt.
- Assist client to standing position using proper body mechanics.
- Assist client to pivot and sit on bed in a controlled manner that ensures safety.
- Remove gait belt.
- Remove client's shoes.
- Assist client to lie down in center of bed.
- Make sure client is comfortable and in good body alignment.
- Maintain respectful, courteous interpersonal interactions at all times.
- Leave call light or signaling device within easy reach of the client.
- Perform hand hygiene:
 - Cover all surfaces of hands with hand sanitizer.
 - Rubs hands together until hands are completely dry.

Knowledge Test Vocabulary List

abbreviations
abdominal thrust

abduction
abuse

accidents
activities



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acute	biohazard	client rights
adaptive equipment	bladder training	client's chart
adduction	bleeding	client's environment
ADLs	blindness	colostomy
admitting resident	blood pressure	combative client
advance directive	body alignment	comfort care
advocate	body fluids	communicable
afebrile	body language	communication
affected side	body mechanics	community based care setting
aging process	body systems	conduct unbecoming
AIDS	body temperature	confidentiality
alternating pressure mattress	bowel program	confused
Alzheimer's	breathing	congestive heart failure
ambulation	burnout	constipation
angina	burns	contamination
anorexia	calculation	contracture
anterior	call light	converting measures
antibiotic	cancer	COPD
anti-embolism stocking	cardiac arrest	coughing excessively
anxiety	cardiopulmonary resuscitation	cross contamination
aphasia	cardiovascular	cueing
apical	care plan	cultural sensitivity
appropriate response	cast	CVA
arthritis	cataracts	cyanosis
aspiration	catheter	dangling
assistive device	catheter care	de-escalation
atrophy	central nervous system	dehydration
authorized duties	charge nurse	dementia
bacteria	chemical safety	dentures
basic needs	chemotherapy	dependability
bathing	choking	depression
bed cradle	chronic	diabetes
bed making	circulatory system	diastolic
bed measurement	clear liquid diet	diet
bedpan	client belongings	digestion
behavior	client identification	dignity
beliefs	client independence	discharging resident



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disease process	gastrostomy tube	interpersonal skills
disinfection	genetic disease	isolation
disoriented	gerontology	job description
disrespect	gloves	lateral position
dizziness	grieving process	lift/draw sheet
DNR	growth	linen
documentation	hair care	liquid diet
dressing	hand washing	listening
droplets	hazardous substance	low sodium diet
dry skin	healthcare	making occupied bed
dysphagia	hearing	manipulative behavior
dyspnea	heart	Maslow
dysuria	heat application	masturbation
edema	healthcare acquired infection	mechanical lift
elimination	height	medical asepsis
emesis	hip precautions	medications
emotional needs	hip replacement	memory
empathy	HIPAA	memory loss
emphysema	HIV	mental health
end of life	holistic care	metastasis
endocrine system	hospice	microorganism
enema	hydration	middle childhood
ethics	hyperglycemia	military time
evacuation	hypertension	minerals
extension	hyperventilation	misappropriation of property
falls	hypoglycemia	misconduct
fatigue	immobility	moving
feeding	impaction	Multiple Sclerosis
financial abuse	incontinence	musculoskeletal system
fire safety	incident form	mutual consent
flexion	incontinence	myocardial infarction
foot drop	infection	nail care
Fowler's positioning (high, semi, Fowler's)	Infection control	neglect
fraud	in-service programs	negligence
gait belt	insomnia	nonverbal communication
gangrene	intake and output	NPO
	integumentary system	nutrition



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objective	progressive	shearing of skin
OBRA	prone	side rails
observation	prostate gland	signs and symptoms
ombudsman	prosthesis	skin
open-ended questions	provider's authority	slander
oral care	psychological needs	sleep
orientation	psychosocial	smoking
osteoporosis	pulmonary disease	social needs
ostomy bag	pureed diet	social worker
overbed table	quadrant	soiled linen
oxygen	quadriplegia	specimen
pain	quality of life	spills
paralysis	radial	spiritual needs
paraphrasing	range of motion	standard precautions
Parkinson's	rectal	stereotypes
pathogens	rehabilitation	sternal precautions
patience	reporting	stethoscope
perineal care	repositioning	stomach
peristalsis	respiratory symptoms	stress
person centered care	respiratory system	stroke
personal care	responding to resident behavior	subjective
personal items	restorative care	suicide
personal protective equipment	restraints	sundowning
phantom pain	role and responsibility	supine
phone etiquette	safety	supplemental feedings
physical change	safety data sheets	survey
physical needs	sanitizer	swallowing
plate rim	secretions	systolic
pneumonia	seizure	tachycardia
positioning	self care	telephone etiquette
post mortem care	self-esteem	temperature
post-operative	sexual harassment	threatening resident
precautions	sexual needs	tips
pressure injury	sexually transmitted diseases	toddlerhood
prioritizing	sharps container	toenails
privacy	shaving	transfers
professional boundaries		transporting

