

EFFECTIVE: October 7, 2022

Changes effective for testing on October 7, 2022 are highlighted gray.



Contact Information

Questions regarding: testing process • test scheduling • eligibility to test: (888) 401-0462 Questions regarding: Nurse Aide certification • renewals • Nurse Aide Registry:(888) 401-0465 **D&S Diversified Technologies, LLP** Phone #: (888) 401-0462 PO Box 418 Findlay, OH 45839 Fax #: (406) 442-3357 Headmaster, LLP Monday through Friday PO Box 6609 7:00AM - 7:00PM (CST) Helena, MT 59604 Email: wisconsin@hdmaster.com Web Site: hdmaster.com TestMaster Universe TMU©: wi.tmuniverse.com

TABLE OF CONTENTS

INTRODUCTION	
REGISTRY	
REGISTRY MAINTENANCE	5
REGISTRY RECIPROCITY / OUT-OF-STATE TRANSFERS	7
Out-of-State Process Out-of-State Eligibility – Active Certification Out-of-State Eligibility – Inactive Certification	8
STUDENT NURSE / GRADUATE NURSE TRAINING	9
Requirements	<u> </u>
CAREGIVER PROGRAM	10
Caregiver Background Check Rehabilitation Review Caregiver Misconduct Registry Work Limitations	10
AMERICANS WITH DISABILITIES ACT (ADA)	11
ADA COMPLIANCE	11
THE WISCONSIN NURSE AIDE COMPETENCY EXAM	11
COMPLETING YOUR INITIAL SIGN IN Forgot your Password and Recover your Account SCHEDULE AN EXAM Payment Information Self-Pay of Testing Fees	

Schedule / Reschedule into a Test Event	20
Test Confirmation Letter	22
TEST DAY	23
Testing Attire	23
Identification	23
Instructions for the Knowledge and Skill Tests	
Testing Policies	
SECURITY	
RESCHEDULE / REFUND OF TESTING FEES PAID / NO SHOW POLICIES	
Reschedule	
Refund of Testing Fees Paid	
No Shows	
No Show Exceptions	
Inclement Weather and Unforeseen Circumstances Policy	
CANDIDATE FEEDBACK – EXIT SURVEY	
TEST RESULTS	
RETAKING THE NURSE AIDE TEST	
TEST RESULT REVIEW REQUESTS	29
THE KNOWLEDGE/ORAL TEST	30
SELECTING AN ORAL EXAM	31
Knowledge Test	32
Virtual Knowledge Exam Option	33
Virtual Knowledge Test Candidate Requirements	33
Scheduling a Virtual Knowledge Test	
Virtual Knowledge Test Sign-In	
Virtual Knowledge Test Policies	
Knowledge Practice Test	
SKILLS DEMONSTRATION TEST	34
SKILL TEST TASKS	
SKILL TASKS LISTING	
Applying an Anti-embolic Stocking to One of the Resident's Legs	
Assisting a Resident to Ambulate using a Gait Belt	
Assisting a Resident to Ambulate using a Galt Belt	
Assisting a Resident with a Bedpan, Measure and Record the Output with Hand Washing Required	
Catheter Care for a Female Resident with Hand Washing Required	
Denture Care – Cleaning Upper or Lower Denture	
Donning an Isolation Gown and Gloves, Emptying a Urinary Bag, Measure and Record Output and Remove Gown	
with Hand Washing Required	40
Dressing Bedridden Resident with an Affected (weak) Side	41
Foot Care for One Foot	42
Mouth Care – Brushing Resident's Teeth	
Partial Bed Bath for Resident: Whole Face and One Arm, Hand and Underarm	
Perineal Care for a Female Resident with Hand Washing Required	
Positioning Resident in Bed on their Side	
Range of Motion for Resident's Hip & Knee	
Range of Motion for One of Resident's Shoulders	
Stand and Pivot Transfer a Weight Bearing Resident from Bed to Wheelchair Using a Gait Belt	
Vital Signs: Count and Record Resident's Pulse and Respirations	
KNOWLEDGE TEST VOCABULARY LIST	49
NOTES	EΛ



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 (NA) 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.

There are two parts to the nurse aide competency examination; a multiple-choice knowledge test, and a skill test. Candidates must successfully complete an approved Wisconsin Nurse Aide training program, pass both parts of the exam and meet all requirements of the Wisconsin Department of Health Services (DHS) to be listed on the Wisconsin Nurse Aide Registry (WNAR).

Wisconsin has approved D&S Diversified Technologies LLP (D&SDT)-HEADMASTER LLP to provide testing and scoring services for the nurse aide competency exam and to maintain the Wisconsin Nurse Aide Registry.

Contact D&SDT-HEADMASTER toll free at (888)401-0462 for questions related to testing and scoring services or (888)401-0465 for questions related to the WNAR. Additional information is available at hdmaster.com.

This handbook is designed to provide information related to testing and registry services in Wisconsin and help you prepare for the Wisconsin nurse aide competency examination or renew your current NA certification.

Registry

The Wisconsin Nurse Aide Registry (WNAR) lists the names of nurse aides who, through training, testing and experience, meet federal and/or state requirements to work as a nurse aide in Wisconsin. The Registry lists the type of regulated facilities that a nurse aide is eligible to work in and indicates any special certifications held by a nurse aide. Additionally, the Registry includes substantiated findings of caregiver abuse, neglect, misappropriation of client property, or exploitation involving a caregiver at a DHS regulated facility.

A nurse aide candidate, upon successful completion of training, passing both the knowledge and skills portions of the competency exam, and meeting federal and/or state requirements will be listed on the WNAR. Review the Nurse Aide Competency Exam section below to help prepare for the exam.

Registry Maintenance

Once placed on the WNAR, it is your responsibility to maintain your demographic information so that renewal notifications/alerts can be delivered to you in a timely manner. This is done by logging into your TMU© account at wi.tmuniverse.com. Your email address is your default username. If you're new to



the system or have forgotten your password, see instructions under 'Forgot your Password and Recover your Account'. A valid email address will be sent a link to follow and reset/create a password. Renewal reminders are emailed to your email address of record and/or texted to your SMS capable phone so it is important to keep your contact information up to date.

You can check your registry status at any time, update your address and phone number, and check your eligibility expiration date from any Internet capable device.

Registry name changes (marriage/divorce, etc.) must be verified with appropriate documentation. Copies of documentation must be emailed wisconsin@hdmaster.com, faxed (406)442-3357, or mailed to D&SDT-HEADMASTER, PO Box 6609, Helena, MT 59604.

Registry Renewal

To maintain eligibility to work in a federally certified facility (Medicare and/or Medicaid certified), you must renew your federal eligibility every 24 months. To be eligible to renew, you must work for pay as a nurse aide in a health care setting such as a nursing home, hospital, home health agency, assisted living or personal care agency for at least eight (8) hours during the previous 24 months. Paid work hours must be completed under supervision of a registered nurse or licensed practical nurse. Please note, self-employment and private-duty experience are not recognized as work experience eligible to maintain federal eligibility.

You will be eligible to renew your federal certification 90 days prior to the certification expiration date. You will begin receiving notifications via email and SMS informing you of your eligibility and directing you where to submit your employment verification. To renew your eligibility, you will login to TMU© at wi.tmuniverse.com and list your work hours and where you were employed. An email verification link will be sent to the employer contact on record. When the employer verifies your listed work experience, your federal eligibility will be extended an additional 24 months. Please note, out of state employers are not listed in TMU© but may still be eligible to renew certification. Your employer should contact DHS to confirm work as a nurse aide for pay. DHS will review to determine if it meets Wisconsin's requirements and extend federal eligibility accordingly.

Working in a hospital or a State licensed facility only (not federally certified Medicare and/or Medicaid provider) does not require you to report your employment history. This means that your federal eligibility to work in a federally certified facility will lapse, but you still may work in a State licensed facility and be listed on the WNAR as State certified only. Hospitals or State licensed facilities may request that nurse aides report their employment history to maintain federal eligibility by logging into TMU© at wi.tmuniverse.com for verification of work hours through TMU© employer verification link.

Under federal regulations, a nurse aide becomes ineligible for employment in a federally certified (Medicare and/or Medicaid certified) nursing home, home health agency or hospice if they do not perform at least 8 hours of nursing related services for pay in a health care setting during a period of 24 consecutive months. To re-establish federal employment eligibility on the WNAR, you must successfully pass both components of the approved Wisconsin nurse aide competency examination. Contact D&SDT-HEADMASTER for authorization to schedule the competency test to regain federal employment eligibility status.



Nurse Aide / Medication Aide Registry Status

The Wisconsin Department of Health Services includes both nurse aides (NA) and medication aides (MA) on the WNAR.

Nurse Aide: Upon completing a DHS approved nurse aide training program and successfully passing the required knowledge and skill exams or completing an alternate DHS approved route, individuals will be listed on the WNAR at <u>wi.tmuniverse.com</u>. A newly trained nurse aide candidate must successfully pass both the knowledge and skill exams within one (1) year of successfully completing a training program.

Medication Aide: A nurse aide in good standing on the WNAR who provides direct nursing related duties and has completed a Wisconsin-approved medication aide course may administer certain medications in long-term care facilities. To be eligible to complete a medication aide course and be listed on the WNAR as a MA, a nurse aide must:

- Be at least eighteen (18) years of age;
- Have a high school diploma, High School Equivalency Diploma (HSED), or a General Education Diploma (GED);
- Be listed on the Nurse Aide Registry, with current eligibility to work in federally certified facilities;
- Have at least 2000 hours experience in direct patient care in the past three (3) years;
- Have worked a minimum of forty (40) hours, within the last ninety (90) days or by the time the course clinical experience begins, caring for the same residents the student will be working with during the medication aide clinical experience;
- Be recommended in writing by the director of nursing and the administrator of the agency in which the student will be working during clinical experience; and
- Be recommended in writing by two (2) licensed charge nurses, one of whom must be a registered nurse.

If you successfully complete an approved medication aide course, your training program will assist you in submitting a Medication Aide Registry Application. Your medication aide status will be added to your record on the WNAR.

Training Exemptions: You may be exempt from taking a medication aide course if you are one of the following:

- Current nursing student who has successfully completed a pharmacology course;
- Graduate nurse who does not hold a license; or
- Nurse aide who has been a medication aide in a nursing home in another state and has taken a medication aide training course that is determined to be equivalent to the Wisconsin-approved medication aide training course.

If you are one of the above, and you wish to become a medication aide for a nursing home, you must complete a Challenge Examination Application for Nurse Aides/Medication Aide available at: dhs.wisconsin.gov/regulations/nh/medaides-requirements.htm and mail it to:

Wisconsin Department of Health Services Division of Quality Assurance Attn: Pharmacy Consultant PO Box 2969 Madison WI 53701-2969



After your application is received and reviewed, you will be informed of your eligibility to challenge test out of the Wisconsin medication aide course. The minimum passing score for the Medication Aide Challenge Examination is 85%. For questions regarding medication aides or to obtain a list of organizations that offer an approved skilled nursing medication aide course, see dhs.wisconsin.gov/regulations/nh/medaides-requirements.htm

Registry Reciprocity / Out-of-State Transfers

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

Out-of-State Process

There are multiple methods by which you may be eligible for placement on the WNAR via the Out-of-State registry process. In any case, you must be current and in good standing on a nurse aide registry in a state other than Wisconsin to be considered.

To apply for placement on the WNAR, you must complete an Out-of-State application. You may obtain an Out-of-State application on D&SDT-HEADMASTER'S website at hdmaster.com or calling D&SDT-HEADMASTER at (888)401-0465. It is recommended that all out-of-state candidates apply as far in advance as possible, as multiple state agencies must verify and process your application.

Individuals transferring from Arizona, California, Colorado, District of Columbia, Florida, Georgia, Illinois, Louisiana, Michigan Mississippi, Missouri, North Carolina, North Dakota, Pennsylvania, Tennessee, or Virginia should mail your:

- 1. completed Out-of-State application and
- 2. certificate/diploma from a basic nurse aide course that includes the date of completion, or a transcript or letter (must be on letterhead) from the training program verifying the number of hours of nurse aide training received to:

Wisconsin Department of Health Services Division of Quality Assurance Attn: Nurse Aide Training Consultant PO Box 2969 Madison, WI 53701-2969

Individuals transferring from all other states (not listed above) must mail completed applications to the state they received their initial basic nurse aide training from. A complete list of State Nurse Aide Registries is available at: ncsbn.org/Directory of Nurse Aide Registries.pdf.

Once your completed application has been received, DHS staff will start your TMU© informational record. You must have a valid email address in order to receive a user name and temporary password so you can login to TMU© to complete the reciprocity process. Once you receive an email regarding your application, you must login to TMU© at wi.tmuniverse.com and change your password to one of your choosing. Remember it. You will then be required to finish entering your demographic information. Any personal information entered into TMU© will only be used to determine whether you can work as a nurse aide in Wisconsin. Failure to provide complete and accurate information during the reciprocity determination process may delay or even prevent you from being listed on the WNAR.



Out-of-State Eligibility – Active Certification

- 1. If you are a nurse aide candidate from another state who has completed a training program of 75 hours, which included 16 hours of clinical, and you have successfully passed a nurse aide competency exam that is the same or substantially similar to the Wisconsin competency examination within one (1) year training completion, your name will be placed on the WNAR. You must have a valid email address in order to receive a username and temporary password. Once you have received your username and password you must log into TMU© at wi.tmuniverse.com to complete the transfer process.
- 2. If you are a nurse aide candidate from another state who has completed a training program of 75 hours, which included 16 hours of clinical, and you successfully completed a nurse aide competency exam but the exam is not the same or substantially similar to the Wisconsin competency examination, you will be required to successfully complete the Wisconsin examination within one (1) year of receiving approval to test. You must have a valid email address in order to receive a username and temporary password. Once you have received your username and password you must log into TMU© at wi.tmuniverse.com to pick a test event and location of your choice. Upon passing the applicable exam, your name will be placed on the WNAR.
- 3. If you are a nurse aide candidate from another state who has completed a training program of 75 hours, which included 16 hours of clinical, but you have **not tested and are within a year of completing your training program**; you will be required to successfully complete the Wisconsin competency examination. You must have a valid email address in order to receive a username and temporary password. Once you have received your username and password you must log into TMU© at wi.tmuniverse.com to pick a test event and location of your choice. Upon passing the knowledge and skills exams, your name will be placed on the WNAR.
- 4. If you are a nurse aide candidate from another state who has completed a training program of 75 hours, which included 16 hours of clinical, you have not tested, and are past one year of completing your training program, you will be denied and required to successfully complete an approved DHS training program and successfully complete the Wisconsin competency examination.

Out-of-State Eligibility – Inactive Certification

If you are a nurse aide currently listed on another state's Registry, but have an Inactive status, and have completed an approved nurse aide training program of at least 75 hours with at least 16 hours of clinical training in another state, you must successfully pass the Wisconsin competency exam in order to be eligible for placement on the WNAR. To apply for placement on the WNAR, you must complete an Out-of-State application. You may obtain an Out-of-State application at the Wisconsin webpage at <a href="https://doi.org/10.1001/jhan.2007/nd.2

If you have questions regarding your Out-of-State registry status, please contact DHS Nurse Aide Training and Registry staff at (608)261-9315.

If you have questions about the WNAR, please call D&SDT-HEADMASTER staff at (888)401-0465.



Student Nurse / Graduate Nurse Training

Requirements

A Student Nurse (SN) currently enrolled in a state-approved nursing education program preparing for registered nurse or practical nurse licensure, or a Graduate Nurse (GN) who has completed a state-approved nursing education program who has not taken the National Council Licensure Examination for Registered Nurses (NCLEX-RN*) or Practical Nurses (NCLEX-PN*) must submit an original transcript and a Student/Graduate Nurse Verification form verifying they have met all training requirements for a nurse aide program.

The verification form must first be sent to DHS for approval at:

Wisconsin Department of Health Services Division of Quality Assurance Attn: Nurse Aide Training Consultant PO Box 2969 Madison, WI 53701-2969

You will be required to successfully complete the Wisconsin competency examination. You must have a valid email address in order to receive a username and temporary password. Once you have received your user name and password from DHS, you must log into TMU© wi.tmuniverse.com to pick a test event and location of your choosing. Upon passing both the knowledge and skills exams your name will be placed on the WNAR.

A GN who has taken the National Council Licensure Examination for Registered Nurses (NCLEX-RN*) or Practical Nurses (NCLEX-PN*) and failed, must submit a copy of the letter from the State Board of Nursing verifying you failed the NCLEX and a Student/Graduate Nurse Verification form verifying he/she has met all training requirements for a nurse aide program.

The verification form must first be sent to DHS for approval at:

Wisconsin Department of Health Services Division of Quality Assurance Attn: Nurse Aide Training Consultant PO Box 2969 Madison, WI 53701-2969

You will be required to successfully complete the Wisconsin competency examination. You must have a valid email address in order to receive a user name and temporary password. Once you have received your username and password, you must log into TMU© at wi.tmuniverse.com to pick a test event and location of your choosing. Upon passing both the knowledge and skills exams your name will be placed on the WNAR.



Caregiver Program

Wisconsin's Caregiver Program responds to concerns about potential physical, emotional and financial abuse and neglect of vulnerable citizens by caregivers in health care settings. The program applies to all caregivers, including nurse aides, who have access to residents/clients and work in facilities regulated by the Department of Health Services. The program provisions include:

Caregiver Background Check

Facilities must complete a caregiver background check for employees who have access to and are responsible for the safety and security of vulnerable residents/clients and their property. Caregivers with convictions of serious crimes or a history of improper behavior may be barred from working in facilities regulated by the Department of Health Services.

Rehabilitation Review

Caregivers who have been convicted of serious crimes or have a finding of misconduct entered on the Caregiver Misconduct Registry may request a Rehabilitation Review to give clear evidence that a repeat of the conduct that led to their conviction is not likely. A Rehabilitation Review Application may be filed with DHS at any time. You may obtain this application and other caregiver misconduct information at the Department's website at dhs.wisconsin.gov/caregiver/misconduct.htm or by contacting the Department's Office of Legal Counsel at (608)266-8428. The Rehabilitation Review panel reviews the caregiver's application and other personal and professional information. Caregivers are encouraged to meet with the Rehabilitation Review panel to answer any questions. The panel will issue a decision based on the evidence of the caregiver's ability to safely work in state regulated facilities.

Caregiver Misconduct Registry

The Department keeps a record of nurse aides and other caregivers who have a substantiated finding of misconduct on the Caregiver Misconduct Registry. Misconduct includes abuse, neglect or exploitation of a resident/client or misappropriation of a residents/client's property, as defined under Ch. DHS 13 of the Wisconsin Administrative Code. Examples include, but are not limited to:

- physical abuse: hitting, slapping, pinching, and kicking to intentionally cause harm;
- sexual abuse: harassment, inappropriate touching, or assault;
- verbal abuse: threats of harm, saying things to intentionally frighten a resident/client;
- mental abuse: humiliation, harassment, intimidation with threats of punishment or depriving a resident/client of care or possessions;
- neglect: intentional conduct of withholding care, failure to carry out a plan of care that could reasonably be expected to cause pain, injury or death of a resident/client;
- misappropriation of property: theft of money, credit cards or jewelry, misuse of property, such as using a residents/client's phone or other personal items without consent; and
- exploitation: taking advantage of a resident for personal gain through the use of manipulation, intimidation, threats, or coercion.

For more information: visit dhs.wisconsin.gov/caregiver/misconduct.htm

Work Limitations

Under federal regulations, nurse aides with a finding of misconduct are permanently barred from working in federally certified nursing homes and, in certain situations, may be barred from working in



federally certified intermediate care facilities for individuals with intellectual disabilities (ICFs/IIDs). State regulations bar all caregivers with a finding of misconduct from working in facilities regulated by DHS, unless approved under the Rehabilitation Review process.

Americans with Disabilities Act (ADA)

ADA Compliance

D&SDT-HEADMASTER certifies that it complies with the provisions of the Americans with Disability Act (42 U.S.C. 12101 et seq.). A nurse aide candidate who has a disability may request special arrangements for testing. This request should be made as soon as it is known that a special accommodation will be needed, and **before** a candidate applies for testing. Accommodations must be approved by D&SDT-HEADMASTER and DHS and cannot change the examination in any way. The request for accommodations can be found on the <u>D&SDT-HEADMASTER webpage</u> or by clicking on this link: <u>ADA Accommodation Form 1404</u>. This form must be submitted to D&SDT-HEADMASTER with required documentation listed on the second page of the ADA application in order to be reviewed by D&SDT-HEADMASTER and DHS for any accommodations.

When you are scheduling to take your exam, please make sure you or your training program has submitted the ADA Accommodation Form(s) far enough in advance to not delay testing with your classmates.

NOTE: You do not need ADA approval to take the Oral examination.

If you have any questions regarding the ADA review process or specific required documentation, please call D&SDT-HEADMASTER at (888)401-0462. ADA request forms submitted without supporting documentation of a diagnosed disability will not be accepted or reviewed.

Please allow additional time for your request to be approved.

The Wisconsin Nurse Aide Competency Exam

Completing your Initial Sign In

In order to schedule the Wisconsin competency examination, candidates must have successfully completed a DHS approved nurse aide training program or have DHS issued approval to test letter. All nurse aide candidates must be registered with D&SDT-HEADMASTER by their training program or alternate registration route in the TestMaster Universe (TMU©) software at wi.tmuniverse.com. Your demographic registration information will be placed on the WNAR accessible at wi.tmuniverse.com upon passing both portions of the NA exam or via an alternate eligibility route.

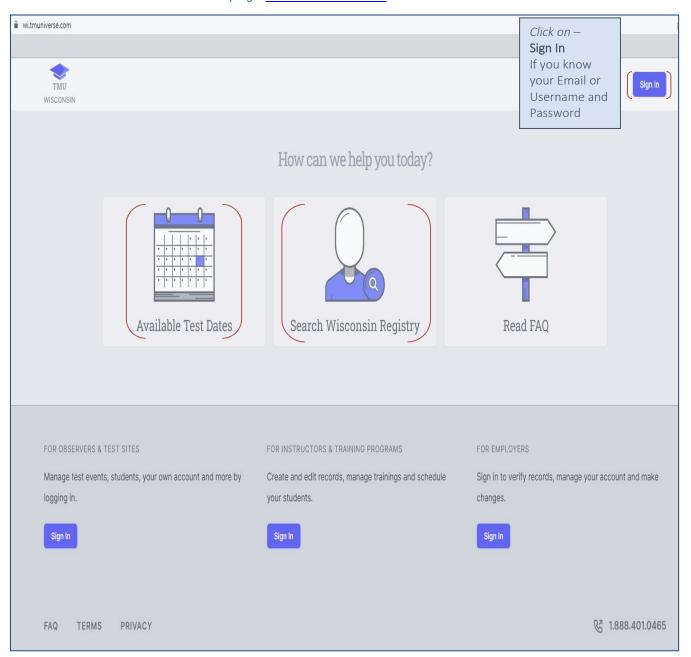
<u>IMPORTANT</u>: Before you can test, you must sign in to TMU© (<u>wi.tmuniverse.com</u>) using your secure Email or Username and Password and verify that your demographic information is correct.

 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 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 (888)401-0462.

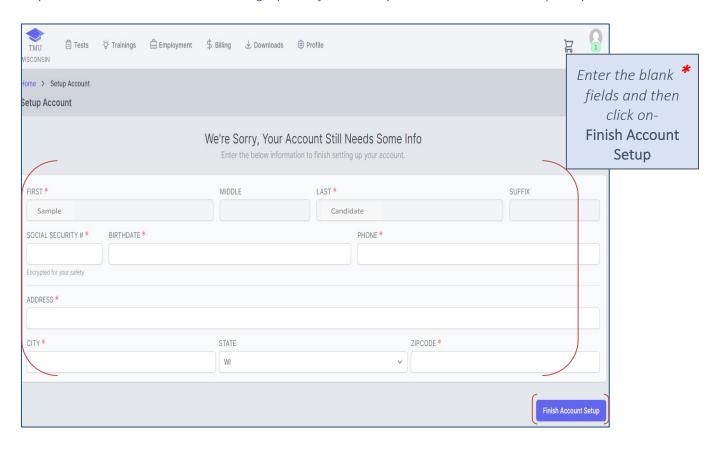
This is the Wisconsin TMU© main page wi.tmuniverse.com:

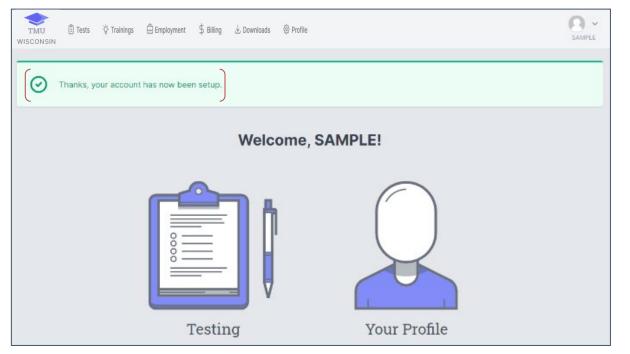


- Click on 'Available Test Dates' see the calendar of available test events and their location.
- Click on 'Search Wisconsin Registry' to do a public search for a nurse aide on the Wisconsin Nurse Aide Registry.



If you know your email or username and password, this is the screen you will see the first time you sign in to your TMU© record with the demographic information you need to enter to complete your record:



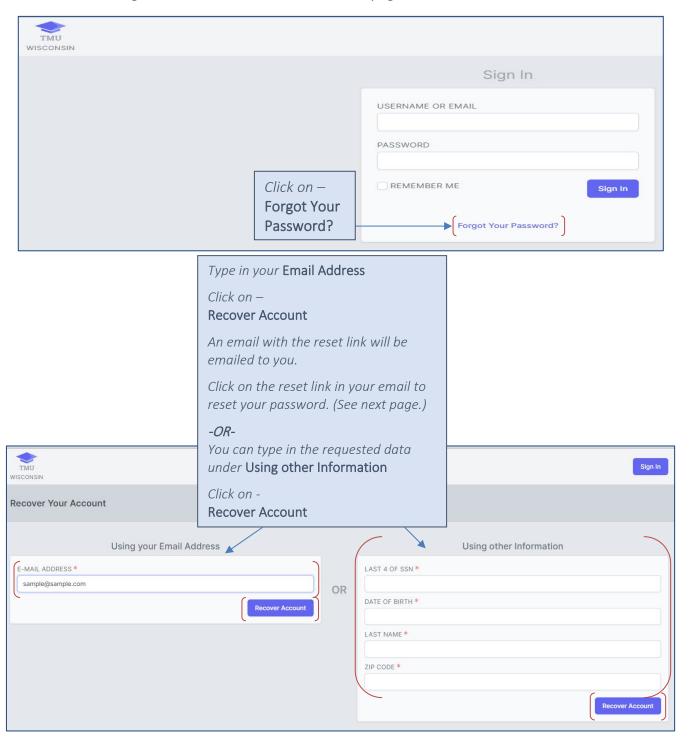




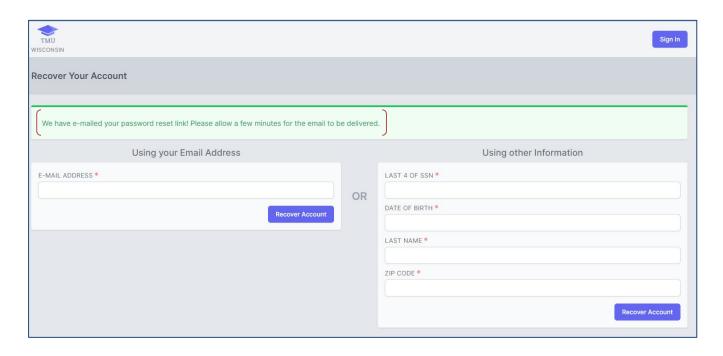
Forgot your Password and Recover your Account

If you do not remember your password, follow the instructions with screen shots in this section.

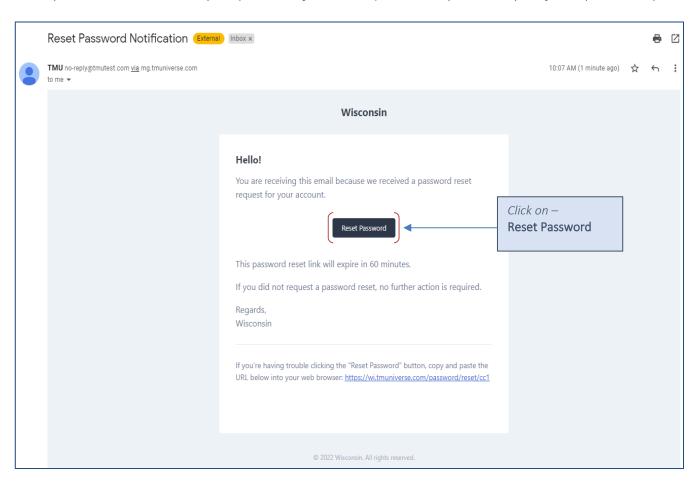
Click on 'Sign In' on the main Wisconsin TMU© page.



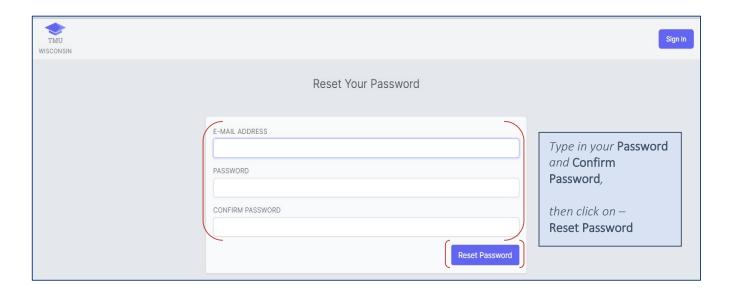




Email you will receive to reset your password from TMU (make sure you check your junk/spam email):







Schedule an Exam

Your training program will enter your initial TMU© registration information online. You must login to wi.tmuniverse.com and complete your demographic information. Your training program instructor will verify the name entered into TMU© against the identification you will present when you sign in at a test event. Your ID must be a non-foreign government issued, signed, unexpired photo bearing ID. You will receive a verification form during your training to sign, attesting to the fact that there is an exact match. If you discover your ID name doesn't match your name as listed in TMU©, please call D&SDT-HEADMASTER at (888)401-0462.

Once your instructor or training program enters the date you successfully complete training into TMU©, and you have verified that all information is correct, you may schedule your exam date online at the Wisconsin TMU© webpage at wi.tmuniverse.com using your Email or Username and Password (see instructions with screen shots under the section 'Schedule / Reschedule an Exam'). If you are unable to sign in with your email, please call D&SDT-HEADMASTER for assistance at (888)401-0462. If you do not know your username and password, enter your email as username and click <Forgot Your Password?> (see instructions under 'Forgot your Password and Recover your Account'). This will give you an opportunity to reset your password and then login. If you are unable to login for any reason, contact D&SDT-HEADMASTER staff by calling (888)401-0462.

If you have a DHS issued approval to test letter, you will also receive a username and password via email or text. Once you have received this notification, you must log into TMU© at wi.tmuinverse.com, complete your demographic information and select a test event and location and pay for your test.

Many training programs host and pre-schedule in-facility test dates for their graduating students. Your instructor will have informed you if this is the case. Prior to scheduling a test, verify with your instructor if the training program where you trained has already scheduled your test. Regional test seats are open to all candidates. Regional test dates and seats are posted in the dynamic test scheduler in TMU©.



Login to the system at <u>wi.tmuniverse.com</u>, using your username and password. You <u>follow the</u> link from the Wisconsin NA page of our public website at <u>hdmaster.com</u> or from the DHS web site at <u>dhs.wisconsin.gov/caregiver/nurse-aide/natd-registry.htm</u>. Read important notes that may be on the screen.

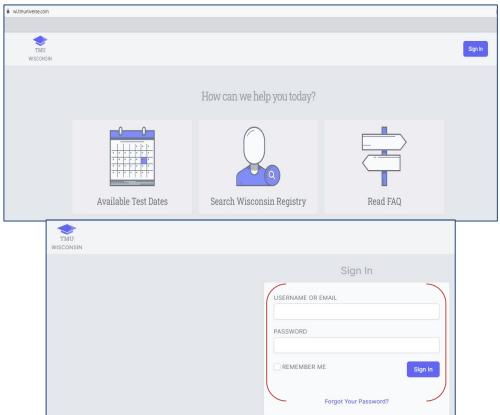
Securely processed Visa or MasterCard credit card or debit card information is required when scheduling online. After paying, you will be able to schedule and/or reschedule up to 3 business days prior to a scheduled test date of your choice and receive your test confirmation notification online, via text or email, or on the screen while you are logged in. You may login with any Internet connected device. To change or reschedule your test date, login to TMU© at wii.tmuniverse.com to update no less than 3 business days before your scheduled test date.

Candidates who self-schedule online, or those scheduled by their training programs, will receive their test confirmation notice on the screen at the time they are scheduled online. Candidates can also view their confirmation notice any time by logging into their TMU© account at <u>wi.tmuniverse.com</u>. **D&SDT-HEADMASTER does not send postal mail test confirmation letters to candidates.**

You must schedule and pass a test within one year of your date of training program completion. After one year, you must complete another DHS approved training program in order to be eligible to schedule testing.

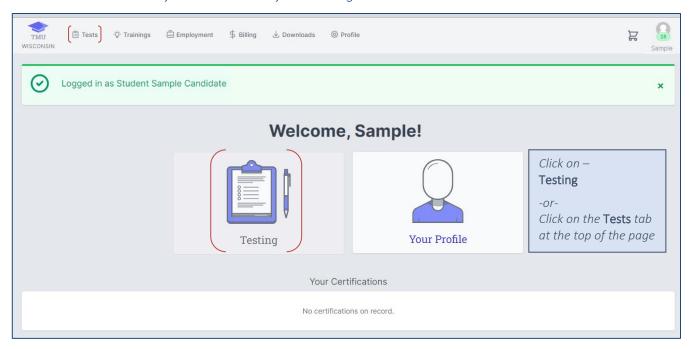
If you have any questions regarding your test scheduling, call D&SDT-HEADMASTER at (888)401-0462.







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



Payment Information

- Candidates and facilities can pay testing fees online through TMU©
 - For candidates: Please follow the instructions under the section 'Self-Pay of Testing Fees in TMU©'.
- Securely processed MasterCard or Visa payments are accepted from both candidates and facilities
- Money Orders, Cashier's Checks and Facility Checks are accepted on behalf of candidates (made payable to D&SDT)

Exam Description	Price
Knowledge and Demonstration/Skills	\$ 125
Oral and Demonstration/Skills	\$ 130
Knowledge Only	\$32
Oral Only	\$37
Demonstration/Skills Only	\$93

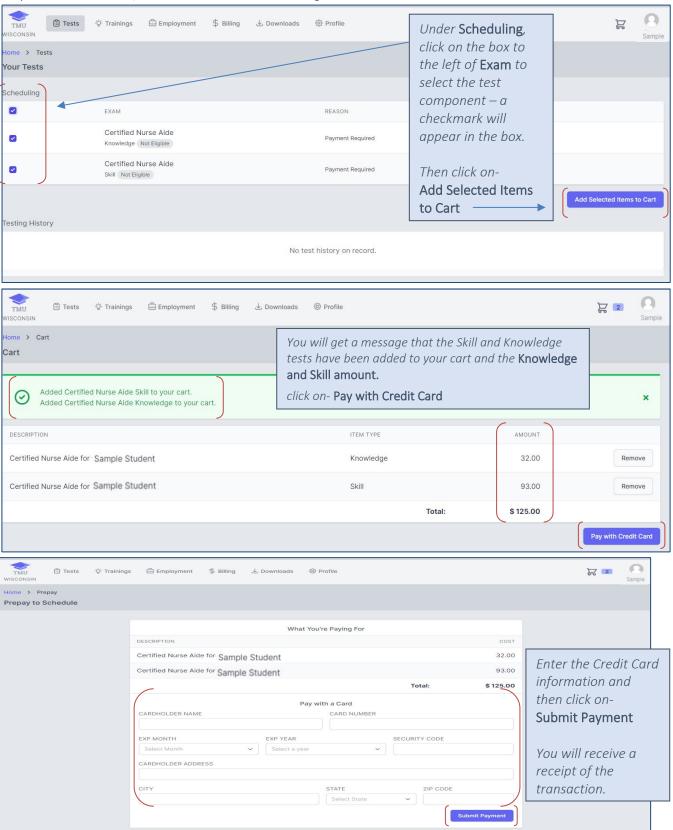
Please note: personal checks or cash ARE NOT accepted from candidates.

Self-Pay of Testing Fees

Testing fees will need to be paid before you can schedule a test date. Some training programs pre-pay testing fees for their graduating students. Your program/instructor will have informed you if this is the case. Prior to scheduling a test, verify with your instructor if the training program has already prepaid for your test. Instructions with screenshots follow for paying testing fees online.



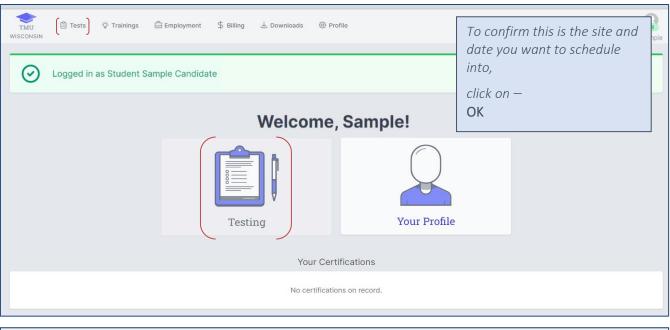
On your home screen, click on 'Test' tab or 'Testing':



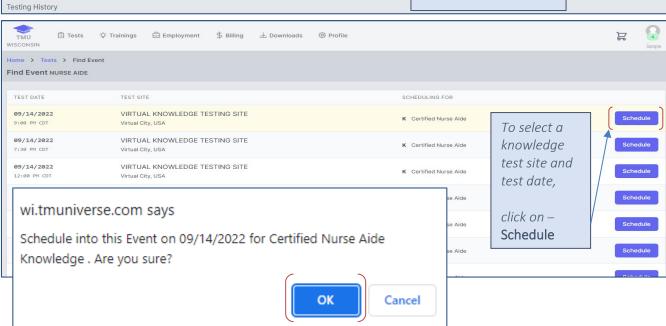
Once your testing fees are paid for, you will be eligible to choose a test site and date. Follow the instructions in the next section to schedule/reschedule into a test event.

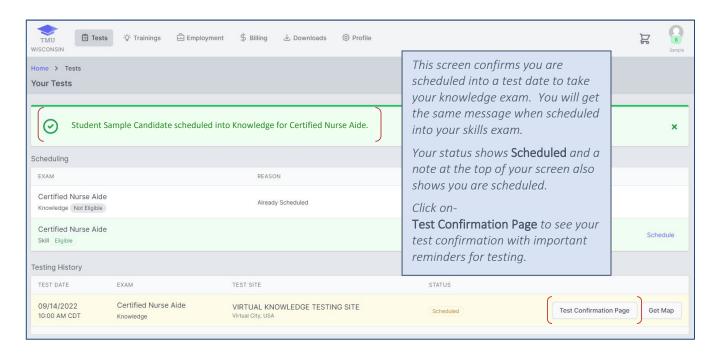


Schedule / Reschedule into a Test Event

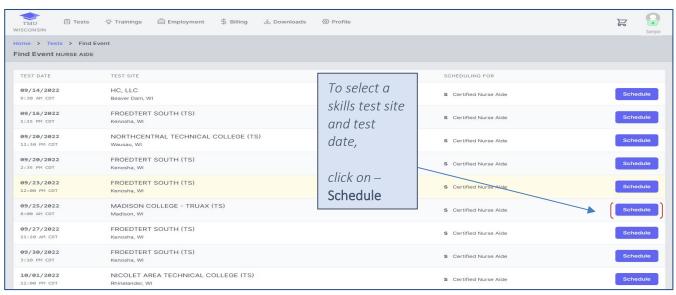


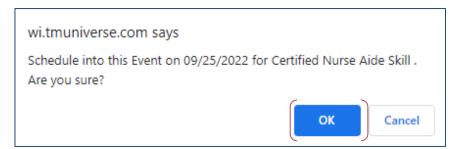




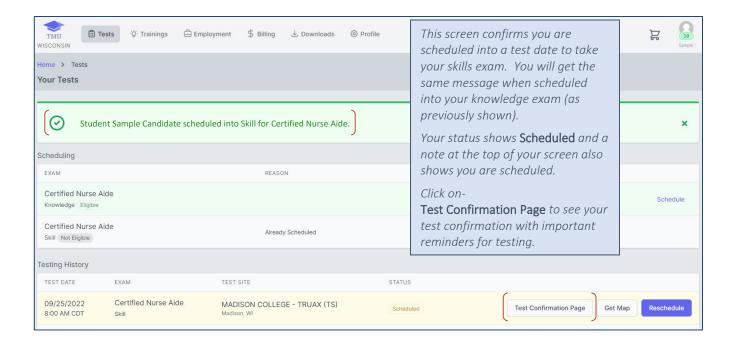


Follow the same steps to select a Skills Test Event by clicking on 'Schedule' next to eligible test events.





To confirm this is the site and date you want to schedule into,
click on —
OK



Test Confirmation Letter

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

Please review the Wisconsin Nurse Aide Candidate Handbook for specific instructions on time to arrive at test event, ID requirements, testing attire, testing policies and procedures, what to expect, etc.

Note: Failure to read the candidate handbook could result in No Show for your test event for not adhering to the policies of testing, etc.

Knowledge Test confirmation page (for a virtual knowledge exam):

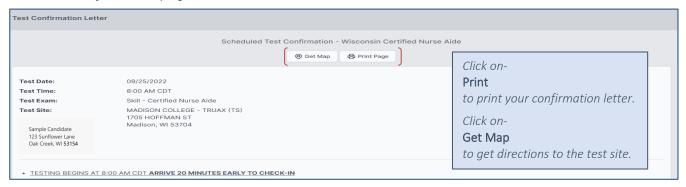


Please refer to the <u>Wisconsin Candidate Handbook</u> (in your downloads or at <u>www.hdmaster</u>, click on Wisconsin CNA) for important information regarding ID requirements, testing attire, what to expect on testing day, etc.

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



Skills Test confirmation page:



Test Day

You should arrive at your confirmed test site fifteen to twenty (15-20) minutes before your test is scheduled to start. (For example: if your test start time is 8:00AM, you will need to be at the test site for check-in no later than 7:45AM.)

• If you are scheduled into a virtual knowledge exam, please see procedures/policies under 'Virtual Knowledge Exam Option' in the Knowledge/Oral Test section.

Testing Attire

You must be in full clinical attire (scrubs). No opened toed shoes are allowed. Scrubs and shoes can be any color/design. You may bring a standard watch with a second hand. No smart watches or fitness monitors are allowed. Long hair must be pulled back. Fingernails need to be short (no longer than ¼ inch in length), well-kept (filed, no jagged edges) and clean. Visible tattoos and or body art must be covered to the greatest extent possible. REMOVED Body piercings that are not covered by scrubs are not acceptable and must be removed or covered. Ear Gauges are not acceptable and must be replaced by flesh or clear plugs.

Before entering the skill test room, large jewelry or accessories, smart watches, fitness monitors, and any wireless communication such as blue tooth earrings, eyeglasses and the like will be required to be removed.

Note: You will not be admitted for testing if you are not wearing scrubs attire and appropriate shoes. This is considered a NO SHOW and you will have to pay for another test and date.

Identification

You must bring a **NON-FOREIGN GOVERNMENT ISSUED, SIGNED, UNEXPIRED, PHOTO BEARING ID**. Examples of the forms of US government issued, photo ID's that are acceptable are:

- State or Other United States Government Issued Driver's License
- State Identification Card that meets all identification criteria
- US Passport (Foreign Passports and Passport Cards are not acceptable)
 - A foreign passport with a US Visa is acceptable.
- Alien Registration Card
- Tribal Identification Card that meets all identification criteria
- Work Authorization Card
- Military ID that meets all identification criteria



The **FIRST** and **LAST** names listed on the ID presented to the RN Test Observer during sign-in at your test event *MUST EXACTLY MATCH* the FIRST and LAST names that were entered in the WI nurse aide database by your training program. You may call D&SDT-HEADMASTER at (888)401-0462 to confirm that your name of record matches your non-foreign government issued ID, or log in at <u>wi.tmuniverse.com</u> using your personal username and password to check on or change your demographic information.

It is recommended that you print out, read and bring your test confirmation notice with you on your test day, although it is not required for test admission.

Note:

- You will not be admitted for testing if you do not bring proper/valid identification.
 - Be sure your US government issued identification is not expired and is signed.
 - Check to be positive that both your FIRST and LAST printed names on your identification card 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 <u>NOT VALID</u> and will not be accepted as an acceptable form of ID.
- In cases where names do not match or your ID(s) are not proper/valid, you will be considered a NO SHOW and you will forfeit your testing fees and have to pay for and reschedule another exam date.

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

Instructions for the Knowledge and Skill Tests

Test instructions for the knowledge and skill tests will be provided in written and oral format in the waiting area when you sign-in for your test. Oral and pdf version is also available anytime from your smart phone via the link on D&SDT-HEADMASTER's Wisconsin website at <a href="https://documents.org/lead-noise/lead-noise/bead

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

• If you are scheduled into a virtual knowledge exam, please see procedures/policies under 'Virtual Knowledge Exam Option' in the Knowledge/Oral Test section for information and where the Virtual Knowledge Test Instructions can be found on the Wisconsin CNA webpage at hdmaster.com.



Testing Policies

The following policies are observed at each test site:

- Make sure you have signed in to your TMU© record at <u>wi.tmuniverse.com</u> before your test date to update your password and verify your demographic information. Refer to the 'Complete Your Initial Sign In' 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 for up to four (4) hours.
- If you do not bring appropriate non-foreign government issued ID that is unexpired with your picture and your signature, you will not be admitted to the test and any test fees paid will not be refunded.
- If your FIRST and LAST printed names on your username do not match your current TMU© name of record, you will not be admitted to the test and any test fees paid will not be refunded.
- If you arrive late for your confirmed test, you will not be admitted to the test and any test fees paid will not be refunded.
 - If you are scheduled into a virtual knowledge exam, please see procedures/policies under 'Virtual Knowledge Exam Option' in the Knowledge/Oral Test section.
- If you do not wear scrubs with appropriate shoes (waived if testing at one of the four DHS facilities) and conform to all testing polices, you will not be admitted to the test and any test fees paid will not be refunded.
- If you NO SHOW for your testing day, any test fees paid will not be refunded. You must login to TMU© using your username and password to schedule another test date.
- Cell phones, smart watches, fitness monitors, electronic recording devices and personal items (such as 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 to be collected when you complete your test(s). All electronic devices must be **turned off**. Anyone caught using any type of electronic recording device during testing will be removed, forfeit all testing fees and will not be permitted to test for 6 months. You may, however, use personal devices during your free time in the waiting area.
- You are encouraged to bring a jacket, snack, drink or study material to have while waiting to test.
- Foreign word-for-word translation dictionaries are allowed. No electronic dictionaries are allowed. Please see more detailed information under the Knowledge Test section.
- You may not take any notes or other materials from the testing room.
- You are not permitted to eat, drink or smoke during the test.
- You are not allowed to leave a testing room (knowledge test room or skills lab) once your test has started *for any reason*. If you do leave during your test event, you will not be allowed back into the testing room to finish your test. Any test fees paid will not be refunded.
- If you are discovered causing a disturbance of any kind, engaging in any kind of misconduct, or attempting to take any notes or testing materials from the testing room, you will be dismissed from the test and reported to DHS.



- No visitors, guests, pets (including companion animals) or children are allowed.
 - Service animals with an approved ADA accommodation in place are allowed.
- You may not test if you have any type of physical limitation (excluding pre-arranged ADA's) that would prevent you from performing your duties as a nurse aide. (Examples: cast, arm/leg braces, crutches, etc.) Call D&SDT-HEADMASTER (888)401-0462 immediately if you are on doctor's orders. You must fax a doctor's order within 3 business days of your scheduled testing day to qualify for a reschedule with no rescheduling fee. Note: The calculation of 3 business days includes the day of your test day.

Security

Anyone who removes or tries to remove test material or takes notes or information from the test site will be reported to DHS and is subject to prosecution to the full extent of the law. Your test will be scored as a test failure, and you will not be allowed to retest for a minimum period of six (6) months. You will need to obtain permission from DHS in order to be eligible to test again.

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 failure. You will be dismissed from the testing room and will forfeit any testing fees paid. You will be considered a No Show status and your name will be reported to DHS and you may need to obtain permission from DHS in order to be eligible to test again.

Reschedule / Refund of Testing Fees Paid / No Show Policies

Reschedule

You may reschedule your test event online, at no additional cost, up to three (3) business days before your scheduled test event. Reschedule your test event online in your record in TMU© at wi.tmuniverse.com.

For example, to reschedule at no additional cost:

- If scheduled test is Monday, you need to reschedule by 7:00 PM (CST) the previous Wednesday.
- If scheduled test is Tuesday, you need to reschedule by 7:00 PM (CST) the previous Thursday.
- If scheduled test is Wednesday, you need to reschedule by 7:00 PM (CST) the previous Friday.
- If scheduled test is Thursday, you need to reschedule by 7:00 PM (CST) the previous Monday.
- If scheduled test is Friday, you need to reschedule by 7:00 PM (CST) the previous Tuesday.
- If scheduled test is Saturday/Sunday, you need to reschedule by 7:00 PM (CST) the previous Wednesday.

Refund of Testing Fees Paid

If you change your mind and do not wish to test or if you are unable to schedule a test date prior to your training expiration date, you may request a refund of testing fees paid. A refund request of testing fees paid must be made in writing by filling out and submitting the <u>Refund Request Fillable Form 1405</u> on D&SDT-HEADMASTER's main webpage at <u>www.hdmaster.com</u> at least **seven (7) full business days** prior to your scheduled test event and up to two (2) business days preceding a scheduled test date (excluding Saturdays, Sundays and Holidays). Written requests for refunds of testing fees paid can be emailed to accounting@hdmaster.com, or faxed to (406)442-3357. No phone calls will be accepted.



- If you request a refund of testing fees paid more than seven (7) days in advance of your scheduled test event, all fees will be refunded to the remitter of record.
- Requests made after seven (7) days before and up to two (2) business days preceding a scheduled test day will qualify for a full refund of any testing fees paid minus a \$30 refund fee. Saturdays, Sundays and Holidays are not considered business days.

For example, to request a refund of testing fees paid and receive a refund when approaching the two (2) business day window:

- If scheduled test is Monday, you need to reschedule by 7:00 PM (CST) the previous Thursday.
- If scheduled test is Tuesday, you need to reschedule by 7:00 PM (CST) the previous Friday.
- If scheduled test is Wednesday, you need to reschedule by 7:00 PM (CST) the previous Monday.
- If scheduled test is Thursday, you need to reschedule by 7:00 PM (CST) the previous Tuesday.
- If scheduled test is Friday, you need to reschedule by 7:00 PM (CST) the previous Wednesday.
- If scheduled test is Saturday/Sunday, you need to reschedule by 7:00 PM (CST) the previous Thursday.

No Shows

If you are scheduled for your exam and do not show up without notifying D&SDT-HEADMASTER at least two (2) full business day prior to your scheduled testing event, **excluding** Saturdays, Sundays, and Holidays, or if you are turned away for lack of proper identification, proper attire, or any other reason to deem you ineligible to test, you will be considered a **NO SHOW**. You will forfeit all fees paid and must submit a new testing fee to schedule yourself into a new test event.

These fees partially offset D&SDT-HEADMASTER cost incurred for services requested and resulting work that is performed. If a reschedule or refund request is not received before the two (2) full business day preceding a scheduled test event, excluding Saturdays, Sundays, and Holidays (see examples under Reschedules and Refund of Testing Fees Paid), a NO SHOW status will exist. You then must log into TMU© at https://wi.tmuniverse.com, re-pay and re-schedule into a new test event of your choice.

No Show Exceptions

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

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



- Weather or road condition related issue: D&SDT-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: D&SDT-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.
- <u>Death in the family</u>: D&SDT-HEADMASTER must be contacted within ten (10) business days via phone call, fax or email and an obituary for <u>immediate</u> family only submitted within ten (10) business days from a missed exam date. If we do not receive proof within the 7-business day time frame you will have to pay as though you were a No Show. (Immediate family includes parents, grand and great-grand parents, siblings, children, spouse or significant other.)
- <u>Virtual testing issues</u>: D&SDT-HEADMASTER must be contacted within one business day via phone call, fax or email and 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.
 - Internet outage or issue: Documentation from Internet provider showing outage date and times.
 - Computer or cell phone issue: If computer or cell phone fail to work for any reason, documentation from a computer repair technician/shop or other appropriate documentation.

Inclement Weather and Unforeseen Circumstances Policy

If an exam date is cancelled due to inclement weather or other unforeseen circumstances, D&SDT-HEADMASTER staff will make every effort to contact you using the contact information you have listed in TMU©. Please make sure you keep your contact information up to date. D&SDT-HEADMASTER will reschedule you, for no charge, to a mutually agreed upon new test event.

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 weather emergency,
- The test site closes,
- The test observer cancels the test event,
- There is an accident due to weather, or other circumstance, 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.



Candidate Feedback – Exit Survey

You will receive a notification of your test results on the day your test is officially scored. A link to the exit survey will be available when you log in to your record in TMU© to get your 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.

Test Results

After you have completed both the Knowledge Test and Skill Test components of the competency exam, your test results will be officially scored and double checked. Official test results are available to you the next business day after your test event. You may check your test results on-line by going to wi.tmuniverse.com, and logging in with your username and password. Upon successful completion of both components of the competency exam, your name will be placed on the WNAR. You may print a hard copy of your results and check the payer of record as listed in your payment accounting record in TMU©. If you fail either test component, you must reapply to retake the component that you failed. Procedures for reapplying and detailed test results are included in the link emailed to your email address of record. You are eligible to test as many times as needed within one year of your date of training program completion. After one year, you must complete another DHS approved training program in order to be eligible to schedule further testing.

Note: Federal and State regulations allow health care facilities to employ students enrolled in an approved nurse aide training and competency evaluation program for up to 120 days from the beginning of employment. However, if you fail either portion of the state competency exam, the facility must ensure the following are completed to continue to employee you to perform nurse aide duties.

- The facility provides and documents additional training, coaching or mentoring given to the student, especially in the areas they failed.
- The student cannot work alone.
- The facility documents how they ensured competency of the student aide (knowledge practice tests if the student failed the knowledge portion, skills demonstration if they failed the skills portion, or other means ensuring competency).

Also, if your name is not listed on the Registry by the 120th day from the date of employment, you are no longer able to work as a nurse aide.

Retaking the Nurse Aide Test

You can schedule a test or a re-test online at <u>wi.tmuniverse.com</u> by logging in with your secure username and password. Once payment is made by Visa or MasterCard, you will then be able to schedule. If you forget your password, use the password reset function on your TMU© login screen, (see instructions under 'Forgot your Password and Recover your Account'). Call D&SDT-HEADMASTER at (888)401-0462 during business hours, whenever assistance is needed.

Test Result Review Requests

You may request a review of your test results or dispute any other condition of your testing. **There is a** \$25 test review deposit fee. To request a review, you must submit the PDF fillable <u>Test Review Request</u>



and Payment Form 1403 available on D&SDT-HEADMASTER's main webpage at www.hdmaster.com (before you get to the Wisconsin NA webpage). Submit the Test Review Fee of \$25 (MasterCard, Visa or debit card) and a detailed explanation of why you feel your dispute is valid (upload with Form 1403) via the PDF fillable Test Review Request and Payment Form 1403 within three (3) business days from official scoring of your test (excluding Saturdays, Sundays and Holidays). Late requests will be returned and will not be considered.

PLEASE READ BEFORE FILLING OUT THE TEST REVIEW REQUEST: Please call D&SDT-HEADMASTER at (888)401-0462 during regular business hours, Monday through Friday, 7:00AM to 7:00PM CST, excluding Saturdays, Sundays and Holidays, and discuss the test outcome you are questioning before committing to sending the \$25 test review request deposit fee. 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 D&SDT-HEADMASTER staff, you still have a concern with your testing process that affected the outcome of your exam, you may submit a Test Review Request.

Since one qualification for certification as a nurse aide in Wisconsin is demonstration by examination of minimum nurse aide knowledge and skills, the likely outcome of your review will determine who pays for any re-tests granted. If the results of the review are in your favor, D&SDT-HEADMASTER will pay your re-test fee. D&SDT-HEADMASTER will review your detailed recollection, your knowledge test markings and any skill task measurements you recorded at the time of your test, in addition to reviewing markings, notations and measurements recorded by the RN Test Observer at the time of your test. We will interview the RN Test Observer, Actor or Knowledge Test Proctor about the facts detailed in your dispute documentation. D&SDT- HEADMASTER will re-check the scoring of your test and may contact you and/or the RN Test Observer, Actor and/or Knowledge Test Proctor and other candidates who were on site at your test event for any additional information about the test event.

After a candidate reaches the age of 18, D&SDT-HEADMASTER will only discuss test results or test disputes with the candidate or the candidate's training program/instructor. D&SDT-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. D&SDT-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 DHS.

The Knowledge/Oral Test

The Knowledge Test Proctor will hand out materials and give instructions for taking the Knowledge Test. You will have a maximum of sixty (60) minutes to complete the 75 question Knowledge Test. For Oral Tests, only the first 67 questions will be read orally, the remaining 8 questions will have to be answered without oral assistance to assess your English reading comprehension. After forty-five (45) minutes have elapsed, you will be told when fifteen (15) minutes remains. You may not ask questions about the content of the Knowledge Test (such as "What does this question mean?"). You must have a score of 71% or better to pass the knowledge portion of the exam.

Electronic testing in TMU©, using Internet connected devices, is utilized at the test sites in Wisconsin. For electronic tests, the Knowledge Test portion of your exam will be displayed on a screen for you to



read and key/click/tap in your answers. Testing electronically (online) with TMU© allows no later than next business day official scoring of tests, release of official test results and placement on the registry for candidates who successfully complete the nurse aide competency evaluation. Online testing eliminates examination material shipping time or faxing delays so placement on the registry happens several days sooner than with traditional paper and pencil testing.

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 Training' to sign in to your record in TMU©.

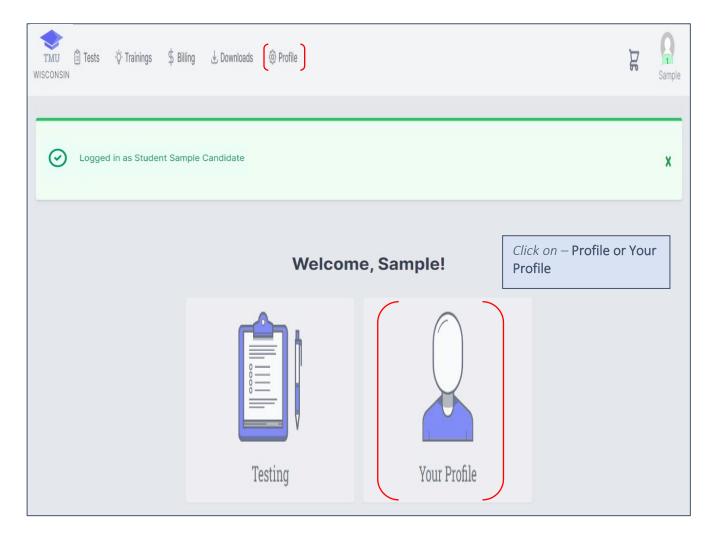
The Knowledge Test Proctor will provide you a code at the test event to start your test.

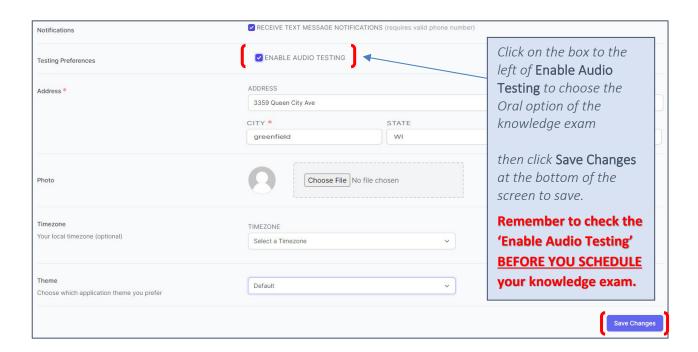
An audio (Oral) version of the knowledge test is available for anyone requesting it. You must request an Oral Test when you initially schedule your test. There is a five dollar (\$5) additional charge for an Oral Test. For TMU© electronic testing, you will hear the questions over the computer/tablet headphones and have control buttons on the screen to play, rewind, pause etc.

Selecting an Oral Exam

To select the Oral version of the knowledge test, follow the instructions with screen shots that follow:

Checking the Enable Audio Testing to receive an Oral version of the Knowledge Exam:





Foreign language paper word-for-word translation dictionaries are allowed and must be shown to the RN Test Observer at check-in (for both a virtual knowledge test and an on-site test event) and to the Knowledge Test Proctor when you enter the knowledge test room (on-site test event). If there is any writing or definitions, the translation dictionary will not be permitted to be used during testing. Any form of an electronic foreign language dictionaries is not allowed.

All test materials must be left in the testing room when you leave. Anyone who takes or tries to take materials, notes or information from the testing room is subject to prosecution and will be reported to DHS.

Knowledge Test

The Knowledge Test consists of 75 multiple-choice questions. Questions are selected from subject areas based on the approved DHS test plan and include questions from all the required categories as defined in Federal regulations. The number of questions in each subject area is as follows:

Aging Process & Restorative Care [5]	Infection Control [7]
Basic Nurse Skills [10]	Mental Health [4]
Care Impaired [8]	Personal Care [8]
Communication [5]	Resident Rights [7]
Data Collection [4]	Role and Responsibility [5]
Disease Process [4]	Safety [8]



Virtual Knowledge Exam Option

You will have the option to take the knowledge exam virtually.

Virtual Knowledge Test Candidate Requirements

Candidates must have:

- An updated version of Google Chrome as your Internet browser.
 - Internet Explorer is not supported by TMU©.
- A reliable Internet (Wi-Fi) connection.
- A personal computer/tablet/laptop to log into TMU© to access the knowledge test.
- Your Email or Username and Password to take the virtual TMU© Knowledge test.
- A smartphone to access the 'facetime app' that you will need to have downloaded.
 - D&SDT-Headmaster will provide you information of the 'facetime app' you will need before test day.
 - The night before your scheduled virtual knowledge exam, D&SDT-Headmaster will email you a reminder with the password protected link to join the test event.
- A distraction and interruption free area of your home, etc., where you will be testing.

Scheduling a Virtual Knowledge Test

You will need to sign in to your TMU© record using your Username or Email and Password and follow the instructions to 'Schedule/Reschedule into a Test Event'. Please make sure you have met the 'Virtual Knowledge Test Candidate Requirements' listed above before scheduling a virtual knowledge exam.

- The test site location for a virtual knowledge exam will be "Virtual Knowledge Test Site".
- Once scheduled, a test confirmation will be sent via email and/or text message (see the 'Schedule/Reschedule into a Test Event' and the 'Test Confirmation Letter' section for information to access your test confirmation.)
- Instructions and the link to download the 'facetime app', including the meeting ID and Password for the virtual knowledge event you are scheduled for will be emailed to you.

Virtual Knowledge Test Sign-In

You are required to be signed in to the virtual link for the sign in process with the test proctor **prior** to the start time listed on your test confirmation. If you are not signed into your virtual exam prior to the time listed on your test confirmation, you will not be allowed to test, considered a No Show and forfeit your testing fees paid and have to pay for another test date.

- You will need to show your mandatory form of identification to the test proctor at sign in before starting your virtual knowledge exam. Please see the 'Identification' section for specifics.
- You will be required to show your surroundings to the test proctor during sign-in before starting your virtual knowledge exam.

Virtual Knowledge Test Policies

All 'Testing Policies' and 'Security' measures are adhered to during the virtual knowledge exam. Please refer to those sections for information.

• The 'facetime app' link must be maintained during the entire knowledge test.



- If the 'facetime app' connection is lost, you must immediately reconnect or be subject to voided test results.
- Please see virtual knowledge test issues information under the 'No Show Exceptions' section.

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

Knowledge Practice Test

The following are 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

Skills Demonstration Test

The purpose of the Skill Test is to evaluate your performance when demonstrating Wisconsin approved nurse aide skill tasks. You will find a complete list of possible skill tasks in this handbook.

- Be sure you understand all instructions you read while in the waiting area before you begin your skill task demonstrations. You may not ask questions once the Skill Test begins and the timer starts. Once the Skill Test begins, the RN Test Observer may not answer questions.
- Each of your randomly selected three (3) or four (4) tasks will have scenarios associated with them. The scenarios will be read to you by the RN Test Observer immediately before you are asked to do each task.
- You will be given no more than thirty (30) minutes to complete your three (3) or four (4) tasks. After 15 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 (in bold font) and 80% of all non-key stepson each task assigned in order to pass the Skill Test. If you believe you made a mistake while performing a task, say so. You will need to demonstrate the step or steps on the task you believe you performed incorrectly for the correction to be noted for the step. You may repeat or correct any step or steps you believe you have performed incorrectly at any time during your allotted thirty (30) minutes or until you tell the RN Test Observer you are finished with the Skill Test.
- Skill task steps are generally not order dependent, unless the words BEFORE or AFTER are used in a step.
- At any time during any skill, you may direct the RN Test Observer to move anywhere needed to assist you in providing safety for the resident.
- All steps must actually be demonstrated. Steps that are only verbalized WILL NOT COUNT.

Skill Test Tasks

You will be assigned **one** of the following mandatory tasks as your first task:

- Bedpan and Output with Required Hand Washing
- Catheter Care with Required Hand Washing
- Isolation Gown & Gloves Empty Urinary Drainage Bag with Required Hand Washing
- Perineal Care of a Female with Required Hand Washing

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

You will also receive additional two (2) or three (3) randomly selected tasks from the **Skills 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 nurse aide 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. You will be scored only on the steps listed. You must have a score of 80% on each task *without missing any key steps* (the **Bolded** steps) to pass the skill component of your competency evaluation. If you fail the Skill Test, one of the tasks on your retest will be a task you previously failed. There will always be only one of the four 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.

Note: The skill task steps included in this handbook are the discrete skill tasks steps used for objective testing purposes only. The steps included herein are not intended to be used to provide complete care that would be inclusive of best care practiced in an actual work setting.



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

- 1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2. Explain the procedure to the resident.
- 3. Raise bed height
- 4. Provide for privacy.
- 5. Provide for resident's privacy by only exposing one leg.
- 6. Roll, gather or turn stocking down inside out to the heel.
- 7. Place stocking over the resident's toes, foot, and heel.
- 8. Roll OR pull stocking up the leg.
- 9. Check toes for possible pressure from stocking.
- 10. Adjust stocking as needed.
- 11. Leave resident with stocking that is smooth/wrinkle free.
- 12. Lower bed.
- 13. Maintain respectful, courteous interpersonal interactions at all times.
- 14. Place call light or signal calling device within easy reach of the resident.
- 15. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Assisting a Resident to Ambulate using a Gait Belt

- 1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2. Explain the procedure to the resident.
- 3. Obtain gait belt for the resident.
- 4. Lock bed brakes to ensure resident's safety.
- 5. Lock wheelchair brakes to ensure resident's safety.
- 6. Position bed so the resident's feet will rest comfortably flat on the floor when sitting on the bed.
- 7. Bring resident to sitting position with resident's feet flat on the floor.
- 8. Properly place gait belt around resident's waist.
- 9. Tighten gait belt.
- 10. Check gait belt for tightness by slipping fingers between gait belt and resident.
- 11. Assist resident to put on non-skid footwear BEFORE standing.
- 12. Bring resident to standing position.
- 13. Use proper body mechanics at all times.
- 14. Grasp gait belt.
- 15. Stabilize resident.
- 16. Ambulate resident at least 10 steps. (No longer a KEY step.)
- 17. Assist resident to pivot/turn.
- 18. Sit resident in the wheelchair.
- 19. Sit resident in a controlled manner.
- 20. Ensure safety at all times.
- 21. Remove gait belt.



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

Assisting a Resident who is Dependent with a Meal

- 1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2. Explain the procedure to the resident.
- 3. Ask resident to state name and verify name matches the name on the diet card.
- 4. Position the resident in an upright position, at least 45 degrees.
- 5. Protect clothing from soiling by using napkin, clothing protector, or towel.
- 6. Assist resident to clean hands BEFORE feeding. (May use a wet washcloth and dry washcloth/towel to wash/dry resident's hands —OR may use hand sanitizer making sure to completely cover all surfaces of the resident's hands and rub until hands are completely dry.) -> Perform hand hygiene for resident before assisting them with their meal.
- 7. Ensure resident's hands are dry BEFORE feeding. -> Ensure resident's hands are dry BEFORE assisting them with their meal.
- 8. Position yourself at eye level facing the resident while feeding resident. -> Position yourself at eye level facing the resident while assisting the resident with their meal.
- 9. Describe the foods being offered to the resident.
- 10. Offer each fluid frequently.
- 11. Offer small amounts of food at a reasonable rate.
- 12. Allow resident time to chew and swallow.
- 13. Wipe resident's face during meal at least one time.
 - a. Actor will say, "I'm full" before all the solid food and fluids are gone.
- 14. Leave resident clean.
- 15. Leave resident in bed with head of bed set up to at least 30 degrees.
- 16. Record intake as a percentage of total solid food eaten on the previously signed recording form.
- 17. Candidate's calculation must be within 25 percentage points of the RN Test Observer's.
- 18. Record sum of estimated fluid intakes in ml on the previously signed recording form.
- 19. Candidate's calculation must be within 60ml of the RN Test Observer's.
- 20. Maintain respectful, courteous interpersonal interactions at all times.
- 21. Place call light or signaling device within easy reach of the resident.
- 22. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.



Assisting a Resident with a Bedpan, Measure and Record the Output with Hand Washing Required

- 1. Knock.
- 2. Introduce yourself to resident.
- Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 4. Explain the procedure to the resident.
- 5. Provide for privacy.
- 6. Candidate puts on gloves.
- 7. Position resident on bedpan/fracture pan correctly. (Pan not upside down, is centered, etc.)
- 8. Position resident on bedpan/fracture pan using correct body mechanics.
- 9. Raise head of bed to comfortable level.
- 10. Leave tissue within reach of resident.
- 11. Leave call light within reach of resident.
- 12. Move to an area of the room away from the Actor.
- 13. When the RN Test Observer indicates, candidate returns.
- 14. Obtain a wet washcloth. -> Obtain a wet washcloth with soap.
- 15. Wash/assist resident to wash hands. -> Provide a washcloth for the resident to wash their hands.
- 16. Provide a wet washcloth for resident to rinse their hands. (New step added.)
- 17. Dry/assist resident to dry hands. -> Provide a towel or dry washcloth for resident to dry hands.
- 18. Discard soiled linen in designated laundry hamper.
- 19. Gently remove bedpan/fracture pan.
- 20. Hold the bedpan/fracture pan for the RN Test Observer while an unknown quantity of liquid is poured into bedpan/fracture pan.
- 21. Place graduate on level, flat surface.
- 22. With graduate at eye level, read output.
- 23. Empty equipment used into designated toilet.
- 24. Rinse equipment used and empty rinse water into designated toilet.
- 25. Remove gloves turning inside out.
- 26. Properly dispose of gloves.
- 27. Record output on recording form.
- 28. Candidate's measured reading is within 25ml of RN Test Observer's reading.
- 29. Maintain respectful, courteous interpersonal interactions at all times.
- 30. Place call light or signaling device within reach of the resident.
- 31. Wash hands: Begin by wetting hands.
- 32. Apply soap to hands.
- 33. Rub hands together using friction.
- 34. Rub hands together for at least twenty (20) seconds.
- 35. Interlace fingers pointing downward.
- 36. Wash all surfaces of hands with soap.
- 37. Wash wrists with soap.
- 38. Rinse hands thoroughly under running water with fingers pointed downward.
- 39. Dry hands on clean paper towel(s).



- 40. Turn off faucet with a clean, dry paper towel.
- 41. Discard paper towels to trash container as used.
- 42. Do not re-contaminate hands by touching faucet or sink at any time during/after the hand washing procedure.

Catheter Care for a Female Resident with Hand Washing Required

- 1. Knock.
- 2. Introduce yourself to resident/manikin.
- 3. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 4. Explain the procedure to the resident/manikin.
- 5. Provide for privacy.
- 6. Put on gloves.
- 7. Avoid over exposure throughout the procedure.
- 8. Check to see that urine can flow, unrestricted, into the drainage bag.
- 9. Use soap and water to carefully wash around the catheter where it exits the urethra.
- 10. Hold catheter where it exits the urethra with one hand.
- 11. While holding catheter, clean 3-4 inches down the catheter tube.
- 12. Clean with strokes only away from the urethra (AT LEAST TWO STROKES).
- 13. Use clean portion of washcloth for each stroke.
- 14. Rinse using a clean washcloth with strokes only away from the urethra.
- 15. Rinse using clean portion of washcloth for each stroke.
- 16. Pat dry.
- 17. Do not allow the tube to be pulled at any time during the procedure.
- 18. Replace gown over resident's peri area.
- 19. Leave resident in a position of safety and comfort.
- 20. Place call light or signaling device within reach of resident.
- 21. Maintain respectful, courteous interpersonal interactions at all times.
- 22. Wash hands: Begin by wetting hands.
- 23. Apply soap to hands.
- 24. Rub hands together using friction.
- 25. Rub hands together for at least twenty (20) seconds.
- 26. Interlace fingers pointing downward.
- 27. Wash all surfaces of hands with soap.
- 28. Wash wrists with soap.
- 29. Rinse hands thoroughly under running water with fingers pointed downward.
- 30. Dry hands on clean paper towel(s).
- 31. Turn off faucet with a clean, dry paper towel.
- 32. Discard paper towels to trash container as used.
- 33. Do not re-contaminate hands by touching faucet or sink at any time during/after the hand washing procedure.



Denture Care – Cleaning Upper or Lower Denture

- 1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2. Explain the procedure to the resident.
- 3. Line bottom of the sink with a protective lining that would help prevent damage to the dentures. (Towel, washcloth or paper towels are allowed for lining.)
- 4. Put on gloves.
- 5. Apply denture cleanser.
- 6. Remove denture from cup.
- 7. Handle denture carefully to avoid damage.
- 8. Handle denture carefully to avoid contamination.
- 9. Thoroughly brush denture inner surfaces of upper or lower dentures. (With a denture brush or toothbrush.)
- 10. Thoroughly brush denture outer surfaces of upper or lower dentures.
- 11. Thoroughly brush denture chewing surfaces of upper or lower dentures.
- 12. Rinse denture using clean cool water.
- 13. Place denture in rinsed cup.
- 14. Add cool clean water to denture cup.
- 15. Rinse equipment.
 - a. Denture brush or toothbrush
- 16. Return equipment to storage.
- 17. Discard protective lining in an appropriate container.
- 18. Remove gloves, turning inside out as they are removed.
- 19. Dispose of gloves in an appropriate container.
- 20. Maintain respectful, courteous interpersonal interactions at all times.
- 21. Place call light or signaling device within easy reach of the resident.
- 22. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Donning an Isolation Gown and Gloves, Emptying a Urinary Bag, Measure and Record Output and Remove Gown and Gloves with Hand Washing Required

- 1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2. Face the back opening of the gown.
- 3. Unfold the gown.
- 4. Place arms through each sleeve.
- 5. Secure the neck opening.
- 6. Secure the waist, making sure that the back flaps cover clothing as completely as possible.
- 7. Put on gloves.
- 8. Glove overlap gown sleeves at the wrist.
- 9. Knock.



- 10. Introduce yourself to resident.
- 11. Explain the procedure to the resident.
- 12. Place a barrier on the floor under the drainage bag.
- 13. Place the graduate on the previously placed barrier.
- 14. Open the drain to allow the urine to flow into the graduate.
- 15. Avoid touching the graduate with the tip of the tubing.
- 16. Close the drain.
- 17. Wipe the drain with alcohol wipe AFTER emptying drainage bag.
- 18. Replace drain in holder.
- 19. Place graduate on level, flat surface
- 20. With graduate at eye level, read output.
- 21. Empty graduate into designated toilet.
- 22. Rinse equipment emptying into designated toilet.
- 23. Return equipment to storage.
- 24. Leave resident in a position of comfort and safety.
- 25. Place call light or signaling device within reach of the resident.
- 26. Maintain respectful, courteous interpersonal interactions at all times.
- 27. Remove gloves, turning inside out.
- 28. Remove gloves BEFORE removing gown.
- 29. Dispose of the gloves in appropriate container.
- 30. Unfasten gown at the neck.
- 31. Unfasten gown at the waist.
- 32. Remove gown by folding soiled area to soiled area.
- 33. Dispose of gown in an appropriate container.
- 34. Record the output in ml on previously signed recording form.
- 35. Candidate's recorded measurement is within 25ml of the RN Test Observer's measurement.
- 36. Wash hands: Begin by wetting hands.
- 37. Apply soap to hands.
- 38. Rub hands together using friction.
- 39. Rub hands together for at least twenty (20) seconds.
- 40. Interlace fingers pointing downward.
- 41. Wash all surfaces of hands with soap.
- 42. Wash wrists with soap.
- 43. Rinse hands thoroughly under running water with fingers pointed downward.
- 44. Dry hands on clean paper towel(s).
- 45. Turn off faucet with a clean, dry paper towel.
- 46. Discard paper towels to trash container as used.
- 47. Do not re-contaminate hands by touching faucet or sink at any time during/after the hand washing procedure.

Dressing Bedridden Resident with an Affected (weak) Side

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



- 3. Provide for privacy.
- 4. Raise bed height
- 5. Keep resident covered while removing gown.
- 6. Remove gown from unaffected side first.
- 7. Place used gown in designated laundry hamper.
- 8. Dress the resident in a button-up shirt. Insert hand through the sleeve of the shirt and grasp the hand of the resident.
- 9. When dressing the resident in a button-up shirt, always dress from the weak side first.
- 10. Assist the resident to raise their buttocks or turn the resident from side to side and draw the pants over the buttocks and up to the resident's waist.
- 11. When dressing the resident in pants, always dress the weak side leg first.
- 12. Put on the resident's socks. Draw the socks up the resident's foot until they are smooth.
- 13. Put on the resident's non-skid footwear, slip each non-skid footwear on the resident's feet.
- 14. Leave the resident comfortably/properly dressed.
- 15. Leave the resident in a position of safety.
- 16. Lower bed.
- 17. Maintain respectful, courteous interpersonal interactions at all times.
- 18. Place call light or signaling device within easy reach of the resident
- 19. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Foot Care for One Foot

- 1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2. Explain the procedure to the resident.
- 3. Fill foot basin with warm water.
- 4. Put on gloves. (New step added)
- 5. Remove a sock from the (right/left) foot. (The scenario read to you will specify right or left.)
- 6. Immerse foot in warm water.
 - a. You may verbalize the 5 to 20 minutes soaking time after you begin soaking the foot.
- 7. Use water and soapy washcloth.
- 8. Wash entire foot.
- 9. Wash between toes.
- 10. Rinse entire foot.
 - a. Soapy washcloth dipped in basin and wrung out is okay for rinsing.
- 11. Rinse between toes.
- 12. Dry foot thoroughly.
- 13. Dry thoroughly between toes.
- 14. Warm lotion by rubbing it between hands.
- 15. Massage lotion over entire foot.
- 16. Avoid getting lotion between the toes.
- 17. If any excess lotion, wipe with a towel.
- 18. Replace sock on foot.



- 19. Empty basin.
- 20. Rinse basin.
- 21. Dry basin.
- 22. Return basin to storage area.
- 23. Place dirty linen in designated laundry hamper.
- 24. Remove gloves. (New step added.)
- 25. Leave resident in position of safety in proper alignment in the chair.
- 26. Maintain respectful, courteous interpersonal interactions at all times.
- 27. Place call light or signaling device within reach of resident.
- 28. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Mouth Care – Brushing Resident's Teeth

- 1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2. Explain the procedure to the resident.
- 3. Provide for privacy.
- 4. Put on gloves only AFTER supplies have been gathered.
- 5. Drape resident's chest with a towel (cloth or paper) to prevent soiling.
- 6. Wet toothbrush.
- 7. Apply toothpaste to toothbrush.
- 8. Brush resident's teeth, including the inner surfaces of all upper and lower teeth, while verbalizing the surfaces you are cleaning.
- 9. Brush resident's teeth, including the outer surfaces of all upper and lower teeth, while verbalizing the surfaces you are cleaning.
- 10. Brush resident's teeth, including chewing surfaces of all upper and lower teeth, while verbalizing the surfaces you are cleaning.
- 11. Clean resident's tongue.
- 12. Assist the resident in rinsing mouth.
- 13. Wipe resident's mouth.
- 14. Remove soiled chest barrier.
- 15. Place soiled chest barrier (cloth or paper) in the appropriate container.
- 16. Empty emesis basin.
- 17. Rinse emesis basin.
- 18. Dry emesis basin.
- 19. Rinse toothbrush.
- 20. Return equipment to storage.
- 21. Remove gloves turning inside out.
- 22. Dispose of gloves in appropriate container.
- 23. Leave resident in position of comfort.



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

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

- 1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2. Explain the procedure to the resident.
- 3. Provide for privacy.
- 4. Fill basin with warm water.
- 5. Raise bed height.
- 6. Cover resident with a bath blanket.
- 7. Fanfold bed linens at least down to waist or move linens to opposite side.
- 8. Remove resident's gown without exposing resident.
- 9. Dispose of gown in designated laundry hamper.
- 10. Wash face WITHOUT SOAP.
- 11. Pat dry face.
- 12. Place towel under arm, exposing one arm.
- 13. Wash arm with soap.
- 14. Wash hand with soap.
- 15. Wash underarm soap.
- 16. Rinse arm.
- 17. Rinse hand.
- 18. Rinse underarm.
- 19. Pat dry arm.
- 20. Pat dry hand.
- 21. Pat dry underarm.
- 22. Assist resident to put on a clean gown.
- 23. Empty equipment.
- 24. Rinse equipment.
- 25. Dry basin.
- 26. Return equipment to storage.
- 27. Dispose of soiled linen in designated laundry hamper.
- 28. Lower bed.
- 29. Maintain respectful, courteous interpersonal interactions at all times.
- 30. Place call light or signal calling device within reach of the resident.
- 31. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.



Perineal Care for a Female Resident with Hand Washing Required

- 1. Knock.
- 2. Introduce yourself to the resident/manikin.
- 3. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 4. Explain the procedure to the resident/manikin.
- 5. Provide for privacy.
- 6. Raise the bed height
- 7. Fill basin with warm water.
- 8. Put on gloves.
- 9. Direct RN Test Observer to stand on opposite side of the bed or raise side rail on opposite side of bed.
 - a. RN Test Observer DOES NOT move into position unless directed to do so by the candidate.
- 10. Turn resident or raise hips and place barrier (candidate will choose barrier such as a towel, waterproof pad, chux, etc.) under buttocks.
- 11. Expose perineum only.
- 12. Separate labia.
- 13. Use water and soapy washcloth.
- 14. Clean one side of labia from top to bottom.
- 15. Use a clean portion of a washcloth, clean other side of labia from top to bottom.
- 16. Use a clean portion of a washcloth, clean the vaginal area from top to bottom.
- 17. Use a clean washcloth, rinse one side of labia from top to bottom.
- 18. Use a clean portion of a washcloth, rinse other side of labia from top to bottom.
- 19. Use a clean portion of a washcloth, rinse the vaginal area from top to bottom.
- 20. Pat dry.
- 21. Avoid over exposure throughout the procedure.
- 22. Assist resident/manikin to turn onto side away from the candidate.
 - a. RN Test Observer may help hold the manikin on their side ONLY after the candidate has turned the manikin.
- 23. Use a clean washcloth.
- 24. Use water, washcloth and soap.
- 25. Clean from vagina to rectal area.
- 26. Use a clean portion of a washcloth with any stroke.
- 27. Use a clean washcloth, rinse from vagina to rectal area.
- 28. Use a clean portion of a washcloth with any stroke.
- 29. Pat dry.
- 30. Safely remove barrier from under buttocks.
- 31. Position resident (manikin) on their back.
- 32. Dispose of soiled linen in designated laundry hamper.
- 33. Empty equipment.
- 34. Rinse equipment.
- 35. Dry equipment.
- 36. Return equipment to storage.



- 37. Remove gloves, turning inside out.
- 38. Dispose of gloves in appropriate container.
- 39. Lower bed.
- 40. Maintain respectful, courteous interpersonal interactions at all times.
- 41. Place call light or signaling device within reach of resident.
- 42. Wash hands: Begin by wetting hands.
- 43. Apply soap to hands.
- 44. Rub hands together using friction.
- 45. Rub hands together for at least twenty (20) seconds.
- 46. Interlace fingers pointing downward.
- 47. Wash all surfaces of hands with soap.
- 48. Wash wrists with soap.
- 49. Rinse hands thoroughly under running water with fingers pointed downward.
- 50. Dry hands on clean paper towel(s).
- 51. Turn off faucet with a clean, dry paper towel.
- 52. Discard paper towels to trash container as used.
- 53. Do not re-contaminate hands by touching faucet or sink at any time during/after the hand washing procedure.

Positioning Resident in Bed on their Side

- 1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2. Explain the procedure to resident.
- 3. Provide for privacy.
- 4. Position bed flat.
- 5. Raise bed height.
- 6. Raise side rail on side of the bed opposite working side of bed to provide safety.
- 7. From the working side of bed move resident's upper body toward self.
- 8. From the working side of the bed move resident's hips toward self.
- 9. From the working side of the bed move resident's legs toward self.
- 10. Assist/turn resident on their left/right side. (Side will be read to candidate by RN Test Observer.)
- 11. Ensure that the resident's face never becomes obstructed by the pillow.
- 12. Check to be sure resident is not lying on down side arm.
- 13. Ensure resident is in correct body alignment.
- 14. Place support devices under the resident's head.
- 15. Place support devices under the resident's up side arm.
- 16. Place support devices behind back.
- 17. Place support devices between knees.
- 18. Leave resident in a position of comfort and safety.
- 19. Lower bed.



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

Range of Motion for Resident's Hip & Knee

- 1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2. Explain the procedure to the resident.
- 3. Do not cause discomfort/pain anytime during ROM.
- 4. Raise bed height.
- 5. Provide for privacy.
- 6. Position resident supine (bed flat).
- 7. Position resident in good body alignment.
- 8. Place one hand under the knee.
- 9. Place the other hand under the ankle.
- 10. ROM for Hip: Move the entire leg away from the body.
 - a. abduction
- 11. Move the entire leg toward the body.
 - a. adduction
- 12. Complete abduction and adduction of the hip at least three times.
- 13. Continue to correctly support joints by placing one hand under the resident's knee and the other hand under the resident's ankle.
- 14. Bend the resident's knee and hip toward the resident's trunk.
 - a. flexion of hip and knee at the same time
- 15. Straighten the knee and hip.
 - a. extension of knee and hip at the same time
- 16. Complete flexion and extension of the knee and hip at least three times.
- 17. Do not force any joint beyond the point of free movement.
- 18. You must ask at least once during the ROM exercise if there is/was any discomfort/pain.
- 19. Leave resident in a comfortable position.
- 20. Lower bed.
- 21. Maintain respectful, courteous interpersonal interactions at all times.
- 22. Place call light or signaling device within easy reach of the resident
- 23. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Range of Motion for One of Resident's Shoulders

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



- 3. Do not cause discomfort/pain at any time during ROM.
- 4. Provide for privacy.
- 5. Raise bed height.
- 6. Position resident supine (bed flat).
- 7. Position resident in good body alignment.
- 8. Place one hand under the elbow.
- 9. Place other hand under the resident's wrist.
- 10. Raise the resident's arm up and over the resident's head.
 - a. flexion
- 11. Bring the resident's arm back down to the resident's side.
 - a. extension
- 12. Complete flexion and extension of shoulder at least three times.
- 13. Continue same support for shoulder joint.
- 14. Move the resident's entire arm out away from the body.
 - a. abduction
- 15. Return arm to the resident's side.
 - a. adduction
- 16. Complete abduction and adduction of the shoulder at least three times.
- 17. Do not force any joint beyond the point of free movement.
- 18. You must ask at least once during the ROM exercise if there is/was any discomfort/pain.
- 19. Leave resident in a comfortable position.
- 20. Lower bed.
- 21. Maintain respectful, courteous interpersonal interactions at all times.
- 22. Place call light or signaling device within easy reach of the resident.
- 23. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Stand and Pivot Transfer a Weight Bearing Resident from Bed to Wheelchair Using a Gait Belt

- 1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2. Explain the procedure to the resident.
- 3. Obtain a gait belt.
- 4. Lock bed brakes to ensure resident's safety.
- 5. Assist resident in putting on non-skid footwear.
- 6. Position bed so resident's feet will be flat on floor when resident is sitting on the bed.
- 7. Assist resident to a sitting position.
- 8. Position wheelchair arm/wheel touching the side of the bed.
- 9. Lock wheelchair brakes to ensure resident's safety.
- 10. Place gait belt around waist to stabilize trunk.
- 11. Tighten gait belt.
- 12. Check gait belt for tightness by slipping fingers between gait belt and resident.
- 13. Face resident.



- 14. Grasp gait belt with both hands.
- 15. Bring resident to standing position.
- 16. Use proper body mechanics.
- 17. Assist resident to pivot in a controlled manner that ensures safety.
- 18. Sit resident in the wheelchair in a controlled manner that ensures safety.
- 19. Remove gait belt.
- 20. Maintain respectful, courteous interpersonal interactions at all times.
- 21. Place call light or signaling device within easy reach of the resident.
- 22. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Vital Signs: Count and Record Resident's Pulse and Respirations

- 1. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2. Explain the procedure to resident.
- 3. Locate the radial pulse by placing tips of fingers on thumb side of the resident's wrist.
- 4. Count pulse for 60 seconds.
 - a. Tell the RN Test Observer when you start counting and tell them when you stop counting.
- 5. Record your reading on the previously signed recording form.
- 6. Recorded pulse rate is within 4 beats of RN Test Observer's recorded rate.
- 7. Count respirations for 60 seconds.
 - a. Tell the RN Test Observer when you start counting and tell them when you stop counting.
- 8. Record your reading on the previously signed recording form.
- 9. Recorded respiratory rate is within 2 breaths of the RN Test Observer's recorded rate.
- 10. Maintain respectful, courteous interpersonal interactions at all times.
- 11. Place call light or signal calling device within easy reach of the resident.
- 12. Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Weighing an Ambulatory Resident

Will no longer be tested.

Knowledge Test Vocabulary List

abandonment	acquired immunodeficiency	admission
abdominal thrust	syndrome (AIDS)	admitting resident
abductor wedge	activities	advance directives
abnormal vital signs	activities of daily living (ADL)	afebrile
absorption	acute	affected side
abuse	adaptive	aging process
accidents	adaptive equipment	agitation
accountable	adduction	Alzheimer's

ambulation	
amputee	
anatomy	
anemia	
angina	
anterior	
antibiotics	
anti-embolic stocking	
anxiety	
aphasia	
apical	
apnea	
arteries	
arteriosclerosis	
arthritis	
aspiration	
assault	
assistive device	
atrophy	
audiologist	
authorized duty	
axillary temperature	
bacteria	
basic needs	
bath water temperature	
bathing	
bed cradle	
bed height	
bed making	
bed position	
bedrest	
behavior	
behavioral care plan	
beliefs	
biohazard	
bipolar disorder	
bladder training	
bleeding	
blindness	
body alignment	
body fluid	
body language	
body mechanics	
body system	
Dody System	

body temperature bone loss bowel program brain stem breathing brittle bones burnout burns call light cancer cardiac arrest cardiopulmonary resuscitation (CPR) cardiovascular system care impaired care plan care planning cast
bowel program brain stem breathing brittle bones burnout burns call light cancer cardiac arrest cardiopulmonary resuscitation (CPR) cardiovascular system care impaired care plan care planning cast cataract
brain stem breathing brittle bones burnout burns call light cancer cardiac arrest cardiopulmonary resuscitation (CPR) cardiovascular system care impaired care plan care planning cast cataract
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burns call light cancer cardiac arrest cardiopulmonary resuscitation (CPR) cardiovascular system care impaired care plan care planning cast cataract
call light cancer cardiac arrest cardiopulmonary resuscitation (CPR) cardiovascular system care impaired care plan care planning cast cataract
cancer cardiac arrest cardiopulmonary resuscitation (CPR) cardiovascular system care impaired care plan care planning cast cataract
cardiac arrest cardiopulmonary resuscitation (CPR) cardiovascular system care impaired care plan care planning cast cataract
cardiopulmonary resuscitation (CPR) cardiovascular system care impaired care plan care planning cast cataract
resuscitation (CPR) cardiovascular system care impaired care plan care planning cast cataract
cardiovascular system care impaired care plan care planning cast cataract
care impaired care plan care planning cast cataract
care plan care planning cast cataract
care plan care planning cast cataract
cast cataract
cast cataract
anthoras
catheter
catheter care
cc's consumed
cc's in an ounce
central nervous system
cerebrovascular accident
(CVA)
chain of command
charge nurse
chemical disinfection
chemical restraint
chemotherapy
choking
chronic
chronic obstructive
pulmonary disease (COPD)
circulation
circulatory system
cleaning
cleaning spills
clear liquid diet
clergy
cognitively impaired
cold application
cold compress

cold pack	
colostomy	
,	
colostomy care	
coma	
combative resident	
communicable	
communication	
competency evaluation	
conduct	
confidentiality	
conflict	
conflict resolution	
confused resident	
congestive heart failure	
(CHF)	
constipation	
constrict	
contamination	
contracture	
converting measures	
coronary artery disease	
coughing excessively	
cultural	
culture	
cyanotic	
dangling	
death & dying	
decubitus ulcer	
deeper tissue	
de-escalation	
defense mechanism	
dehydration	
delegation	
delusions	
demanding resident	
dementia	
denture care	
dentures	
dependability	
depression	
development	
developmental disability	
diabetes	
dialysis	

diaphragm
diet
dietitian
digestion
dilate
dirty linen
discharging resident
disease
disease process
disinfection
disoriented
disposing of contaminated
materials
disrespect
dizziness
do not resuscitate (DNR)
documentation
domestic abuse
dorsiflexion
dressing
droplets
drowsy
dry skin
dying
dysphagia
dyspnea
dysuria
edema
edentulous
elastic stockings
elderly
elimination
emesis
emesis basin
emotional abuse
emotional labiality
emotional lability
emotional needs
emotional stress
emotional support
empathy
emphysema
enema
epilepsy

essential behaviors	
ethics	
etiquette	
evacuation	
eye glasses	
falls	
false imprisonment	
fasting	
fecal impaction	
feces	
feeding	
financial abuse	
fire	
fire safety first aid	
flatus	
Foley catheter	
foot board	
foot care	
foot drop	
Fowler's	
fracture pan	
fractures	
fraud	
frayed cord	
free from disease	
gait belt	
gastric feedings	
gastrostomy tube	
geriatrics	
gerontology	
gestures	
gifts	
glass thermometer	
gloves	
grand mal seizure	
grieving process	
group settings	
hair care	
hand care	
hand tremors	
hand washing	
health information	
portability and	

accountability act (HIPAA)
health-care team
hearing aid
hearing impaired
hearing loss
heart attack
heart muscle
heat application
height
Heimlich maneuver
helping residents
hemiplegia
hepatitis A
hereditary
hip prosthesis
holistic care
hormones
hospice
human immunodeficiency
virus (HIV)
Huntington's
hyperglycemia
hypertension
hyperventilation
hypoglycemia
ileostomy
immobility
impaired
impairment
incident report
incontinence
indwelling catheter
infection
infection control
infection prevention
in-house transfer
initial observations
in-service programs
insomnia
intake
intake and output (I&O)
integumentary system
inter-generational care
inter-generational care
interpersonal skills

Intravenous care (IV) invasion of privacy ischemia
· · ·
ischemia
isolation
isolation precautions
jaundice
job application
job description
lactose intolerance
laxatives
life support
lift/draw sheet
linen
living will
log roll
log rolling
loose teeth
male perineal care
Maslow
masturbation
material safety data sheets
(MSDS)
measuring height
measuring temperature
mechanical lift
medical asepsis
medical record
medication administration
medications
memory loss
mental health
mentally impaired
metastasis
microorganism
military time
minerals
misappropriation
mistakes
mobility
mouth care
moving
mucous membrane
Multiple Sclerosis
muscle spasms

musculoskeletal	
nail care	
nasal cannula	
neglect	
non-contagious disease	
non-verbal communication	n
nosocomial	
nothing by mouth (NPO)	
nurse aide's role	
nurse's station	
nutrition	
objective	
objective data	
obsessive compulsive	
occupied bed	
Ombudsman	
omnibus budget	
reconciliation act (OBRA)	
oral care	
oral hygiene	
oral temperature	
orientation	
oriented	
orthopneic	
orthosis	
osteoarthritis	
osteoporosis	
ostomy bag	
output	
overbed table	
oxygen	
oxygen use	
palliative care	
paralysis	
paranoia	
Parkinson's	
passive	
pathogen	
patience	
perineal care	
peripheral artery disease	
(PAD)	
peripheral vascular diseas	e
(PVD)	

peristalsis
personal belongings
personal care
personal items
personal protective
equipment (PPE)
personal values
pet therapy
petit mal seizure
phone etiquette
physical needs
physical therapist
physician's authority
plaque
plate rim
pleura
podiatrist
policy book
positioning
postmortem care
post-traumatic stress
disorder (PTSD)
postural hypotension
postural supports
precautions
pressure ulcer
preventing falls
privacy
progressive
pronation
prostate gland
prosthesis
psychiatrist
psychological needs
psychosocial
pulse
pureed diet
quadriplegia
quality of life
radial
ramps
range of motion
reality orientation
rectal

rectal temperature
refusal
regulation
rehabilitation
religious service
reminiscence therapy
reminiscing
renewal
reporting
reposition
rescue alarm confine
extinguish (RACE)
resident abuse
resident belongings
resident independence
resident pain
resident pictures
resident right
resident treatment
resident trust
resident unit
residents
Resident's Bill of Rights
resident's chart
resident's environment
resident's families
respectful treatment
respiration
respiratory symptoms
respiratory system
responding to resident
behavior
responsibility
restorative care
restraint
resuscitation
rights
rigor mortis
risk factor
role
rotation
safety
safety procedures
sanitizer

scale
scope of practice
seclusion
secretions
seizure
self-esteem
semi fowlers
sensory system
sexual abuse
sexual harassment
sexual needs
shampoo tray
sharing information
sharps container
shaving
shearing
side rails
Sitz bath
skilled care facility
skin integrity
skin observation
slander
smoking
social needs
social worker
soiled linen
specimen
spills
spiritual needs
sputum
sputum specimen
stages of grief
standard precautions
state tested
stealing
stereotypes
sterilization
stethoscope
stress
stroke
subjective
subjective data
sundowning
supine

supplemental feedings
suprapubic
survey
swelling
tachycardia
TED hose
telephone etiquette
temperature
tendons
terminal illness
terminology
thick fluid
thickened liquids
threatening resident
thrombus
tips
toenails
trachea
transfer belt
transfers
transient ischemic attack
(TIA)
transporting
transporting food
transporting linens
trochanter roll
tub bath
tubing
twice daily (BID)
tympanic
tympanic temperature
unaffected
unconscious
unethical behavior
unsteady
urethral
urinary catheter bag
urinary elimination
urinary system
urinary tract
urinary tract infection (UTI)
urination
urine
validation



validation therapy	walker	weight
varicose veins	wandering resident	well balanced meal
violent behavior	warm application	well-being
vision change	water faucets	wheelchair safety
visual impairment	water pitcher	white blood cells
vital signs	water temperature	withdrawn resident
vitamins	weak side	workplace violence
vocabulary	weakness	
vomitus	weighing	

Notes