

D&S Diversified Technologies LLP

Headmaster LLP

Arkansas Nurse Aide Candidate Handbook

EFFECTIVE: December 20, 2021 | Updated: 10-1-2022

Version 4

Updates Effective October 1, 2022: Student Nurse / Graduate Nurse Training Requirements updated (page 6).

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Introduction

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

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

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

Arkansas Department of Human Services (DHS) has approved D&S Diversified Technologies (D&SDT)-HEADMASTER, LLP to provide tests and scoring services for nurse aide testing. For questions not answered in this handbook, please contact D&SDT-HEADMASTER at (888)401-0462 or go to the <u>Arkansas webpage</u>. The information in this handbook will help you prepare for your examination.

Military Member Licensure

A 'uniformed service member' means:

- An active or reserve component member of the United States Air Force, United States Army, United States Coast Guard, United States Marine Corps, United States Navy, United States Space Force or National Guard
- An active component member of the National Oceanic and Atmospheric Commissioned Office Corps
- An active or reserve component member of the United States Commissioned Corps of the Public Health Service

A 'uniformed service veteran' means:

• A former member of the United States uniformed services discharged under conditions other than dishonorable.

Military Members: Initial Nurse Aide Licensure Routes

Uniformed Service Member/Veteran Criteria to Waive Nurse Aide Certification Education

To qualify to waive nursing assistant certification education and be eligible to apply to take the Arkansas nursing assistant competency exam for certification as a nursing assistant in Arkansas, you must be:

- A uniformed service member; or
- A uniformed service veteran who makes an application within one (1) year of your discharge from uniformed service.

You will need to provide proof of service documentation. Proof of service documentation includes:

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

You will need to show proof of military occupational training or a service-issued credential toward nurse aide licensure qualifications or requirements and experience in health care in a nursing-related capacity (i.e.: Medical Specialist, Healthcare Specialist, Hospital Corpsman).

You are required to provide relevant and applicable documentation that you have completed at least 90 hours of military health care education, training or service-issued credential toward nurse aide qualifications or requirements, as evidenced by military records. The documentation can include official training documents.

Documentation of military health care training includes:

Official military health care education, training or service-issued credential toward nurse aide qualifications or requirements documents.

You will need to fill out the AR Military Waiver Form found on the D&SDT-Headmaster Arkansas webpage at www.hdmaster.com, and submit the required proof of service and military health care education, training or service-issued credential toward nurse aide qualifications or requirements documents. Once received by D&SDT-Headmaster, your request will be expedited and you will receive priority of service on test day (see below). You will be required to take both the knowledge and the skills exams.

MILITARY SPOUSE APPLYING TO TAKE THE ARKANSAS NURSE AIDE COMPETENCY EXAM

If you are a spouse of a uniformed service member (see qualifications below) applying to take the Arkansas nursing assistant competency exam, you will need to have:

- Completed an Arkansas approved training program, or
- Completed a training program of at least 90 hours in another state but have not successfully completed a nurse aide competency exam that is the same or substantially similar to the Arkansas examination (please see information under 'Out-of-State Reciprocity Process'), or
- Qualified for training as a currently enrolled student nurse (SN) or graduate nurse (GN), please see information under 'Student Nurse/Graduate Nurse Training'.

You will be required to successfully complete the Arkansas competency examination within one (1) year of your successfully completion of an Arkansas approved training program or of your documented completion of comparable training. You will be required to take both the knowledge and skills exams. Your request will be expedited and you will receive priority of service on test day.

Qualifications as a spouse of a uniformed service member:

- The spouse of a uniformed service member or veteran who resides in or establishes residency in the State of Arkansas;
- The spouse of a uniformed service member who is assigned a tour of duty that excludes the uniformed service member's spouse from accompanying the uniformed service member and the spouse relocates to the State of Arkansas;
- Or the spouse of a uniformed service member who is killed or succumbs to his or her injuries or illness in the line of duty, if the spouse establishes residency in the State of Arkansas.

You will also need to fill out the <u>AR Military Spouse Expedited Application to Test Form</u> found on the D&SDT-Headmaster Arkansas webpage at <u>www.hdmaster.com</u>, and submit the required military member proof of service.

Priority of Service on Test Day for Military Members

If you qualify to test under one of the applicable means listed above, you are eligible to receive priority of service on testing day.

You must meet all the required qualifications listed above and you must provide the following additional proof of service documentation to the RN Test Observer at check-in on test day:

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

Eligibility Requirements for Expedited Nurse Aide Licensure for Military Members

NOTE: You will need to follow the steps needed to complete your request for placement on the ARNAR and submit the required completed forms and documentation found under the 'Nurse Aide Registry Requirements' section:

- Registry Maintenance
- Registry Renewal
- Registry Reciprocity
- Student Nurse/Graduate Nurse Training

Applicability for expedited nurse aide licensure applies to the following members who complete one of the eligibility routes listed under the Nurse Aide Registry Requirements section, submit the applicable completed forms and provide images/copies of the applicable required documentation:

- A uniformed service member stationed in the State of Arkansas;
- A uniformed service veteran who resides in or establishes residency in the State of Arkansas;
- The spouse of a uniformed service member or veteran who resides in or establishes residency in the State of Arkansas;
- The spouse of a uniformed service member who is assigned a tour of duty that excludes the uniformed service member's spouse from accompanying the uniformed service member and the spouse relocates to the State of Arkansas;
- Or the spouse of a uniformed service member who is killed or succumbs to his or her injuries or illness in the line of duty, if the spouse establishes residency in the State of Arkansas.

If you qualify under one of the applicable means listed above, once D&SDT-Headmaster receives your applicable correctly completed forms and documentation, the processing of your request for licensure in the State of Arkansas will be expedited.

You must fill out the <u>AR Military Expedited Licensure Form</u> available on the D&SDT-Headmaster Arkansas webpage at <u>www.hdmaster.com</u> and provide an image/copy of your proof of service documentation.

Nurse Aide Registry Requirements

The Arkansas Nurse Aide Registry (ARNAR) lists the name of nurse aides who, through training, testing and experience meet federal and/or state requirements to work as a nurse aide in Arkansas. The Registry includes substantiated findings of nurse aide abuse, neglect, misappropriation of resident property, or exploitation involving a nurse aide 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 ARNAR. A newly trained nurse aide candidate must successfully pass both the knowledge and skills exams within one (1) year of successfully completing a training program. Review the Nurse Aide Competency Exam section below to help prepare for the exam.

Registry Maintenance

Once placed on the Arkansas Registry, it is your responsibility to maintain your demographic information so that renewal notifications/alerts can be delivered to you in a timely manner. You must renew electronically by signing in to your TMU© account at https://ar.tmuniverse.com. Use your Email or Username and Password to sign in. If you are new to the system or have forgotten your password, refer to the 'Forget my Password?' section in this handbook to reset your password. If you need assistance signing in to your record, call D&SDT-HEADMASTER at (888)401-0462. 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.

Note: Renewal notifications/alerts are sent 60 days before your certification expiration date via email and text message. No renewal certifications are sent via USPS mail. It is important to keep your TMU© demographic information updated to receive your renewal notification.

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 (https://documentation.ncm, faxed (406)442-3357, or mailed to D&SDT-HEADMASTER, P.O. Box 6609, Helena, MT 59604.

Registry Renewal

To maintain eligibility to work you must renew your eligibility every 24 months. To be eligible to renew, you must work for pay as a nurse aide performing nursing or nursing-related services at least eight (8) consecutive

hours during the previous 24 months. Nurse aides with misconduct restrictions on the Registry are not eligible for renewal.

To renew, sign in to your TMU© record at https://ar.tmuniverse.com and list your work hours and where you were employed. An email verification link will be sent to the employer contact you choose from the list of employers. When the employer verifies your work experience, your eligibility will be extended an additional 24 months.

Under federal regulations, a nurse aide becomes ineligible for employment 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 reestablish employment eligibility on the ARNAR, you must successfully pass both components of the approved Arkansas nurse aide competency examination. Contact D&SDT-HEADMASTER for authorization to schedule the competency test to regain employment eligibility status.

Registry Reciprocity

This information if for applicants who want to be entered on the ARNAR through the Arkansas Reciprocity/Outof-State registry placement process.

Out-of-State Reciprocity Process

There are multiple methods by which you may be eligible for placement on the ARNAR 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 Arkansas to be considered.

To apply for reciprocity placement on the ARNAR, you must complete an Out-of-State reciprocity form 9110AR. You may fill out an Out-of-State reciprocity form 9110AR by browsing to the D&SDT-HEADMASTER's Arkansas webpage.

Once your completed application, processing fee and all required documentation has been received, D&SDT-HEADMASTER staff will determine if you are eligible to be added to the Arkansas Nurse Aide Registry. You must have a valid email address in order to receive your TMU© login user name and temporary password. You may check your listing on the Arkansas Nurse Aide Registry at https://ar.tmuniverse.com. Any personal information entered into TMU© will only be used to determine whether you can work as a nurse aide in Arkansas. Failure to provide complete and accurate information during the reciprocity determination process may delay or even prevent you from being listed on the ARNAR.

 If you have successfully passed a nurse aide competency exam that is the same or substantially similar to the Arkansas competency examination within one (1) year of completing your training program, your name may be placed on the ARNAR. 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 https://ar.tmuniverse.com to verify all your Arkansas registry information and this is where you will renew your registry listing every 24 months with good and sufficient Nursing Assistant work in Arkansas.

• If you are a nurse aide candidate from another state who has completed a training program of at least 90 hours but have not successfully completed a nurse aide competency exam that is the same or substantially similar to the Arkansas examination, you will be required to successfully complete the Arkansas competency examination within one (1) year of your documented completion of comparable training. 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 https://ar.tmuniverse.com and pick a test event and location of your choosing. Upon passing both the knowledge and skill exams within three attempts your name will be placed on the ARNAR.

Student Nurse / Graduate Nurse Training

Requirements

RN or LPN students who have finished the basic nursing course (Introduction to Nursing, Fundamentals of Nursing, etc.) must provide a copy of their school transcript/document showing successful completion of the basic nursing course in order to qualify to take the state competency test. Include an image of your transcript with your reciprocity form 9110AR.

Americans with Disabilities Act (ADA)

ADA Compliance

The Arkansas Department of Human Services and D&SDT-HEADMASTER provide reasonable accommodations for candidates with disabilities or limitations that may affect their ability to perform the nurse aide competency examination. Accommodations are granted in accordance with the Americans with Disabilities Act (ADA).

If you have a qualified disability or limitation, you may request special accommodations for examination. Accommodations must be approved by D&SDT-HEADMASTER in advance of examination. The request for accommodations can be found on the <u>D&SDT-HEADMASTER webpage</u> and clicking on the PDF Fillable <u>ADA Accommodation Form 1404</u>. This form must be electronically submitted to D&SDT-HEADMASTER with required documentation listed on the second page of the ADA application in order to be reviewed for an accommodation. Please allow additional time for your request to be approved. If you have any questions regarding the ADA review process or specific required documentation, please call D&SDT-HEADMASTER at (888)401-0462.

The Arkansas Nurse Aide Competency Exam

Payment Information

Exam Description	Price
Knowledge Test or Retake	\$30
Oral Knowledge Test or Retake	\$40
Skill Test or Retake	\$95

ARKANSAS DEPARTMENT OF HUMAN SERVICES (DHS) FUNDING OF TESTING FEE

DHS is responsible to pay the test fee for individuals who are employed by a Medicaid certified nursing facility or those individuals that have a commitment (letter of intent) to be employed in a Medicaid certified nursing facility. Letters of intent to hire from Medicaid certified nursing facilities must be dated within 12 months immediately preceding the date of the application to take the test.

Independent test candidates who are taking the competency test without an employment connection to a long-term care facility will be responsible to pay their own test fee.

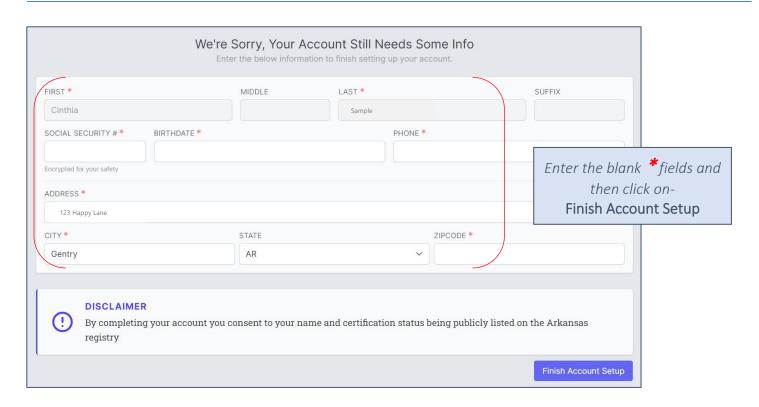
A DHS funded applicant deemed as a "No Show" is not reimbursable by DHS. You will forfeit all fees paid and must submit a new testing fee (refer to table above) to schedule yourself into a new test event. Please see more information under the 'Reschedule' and 'No Show' sections.

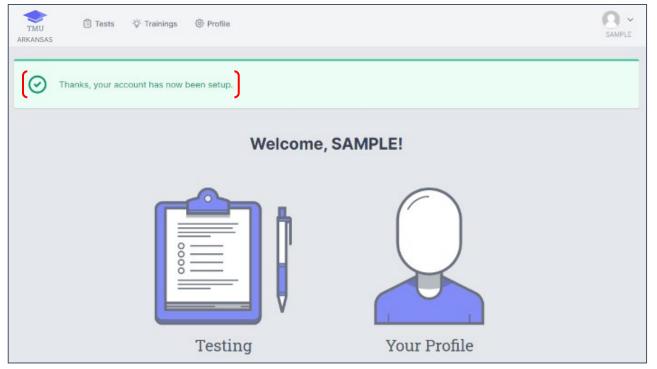
Completing your Initial Login

Your initial information will be entered in D&SDT-HEADMASTER's TestMaster Universe© (TMU©) software. You must sign in to TMU© at https://ar.tmuniverse.com using your secure email or username and password and complete your demographic information. If you do not know your username and/or password, enter your email address and click on "Forgot Your Password?" You will be asked to re-enter your email and then click "Recover Your Account" 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 during regular business hours 7:00AM to 7:00PM CST Monday through Friday, excluding holidays.

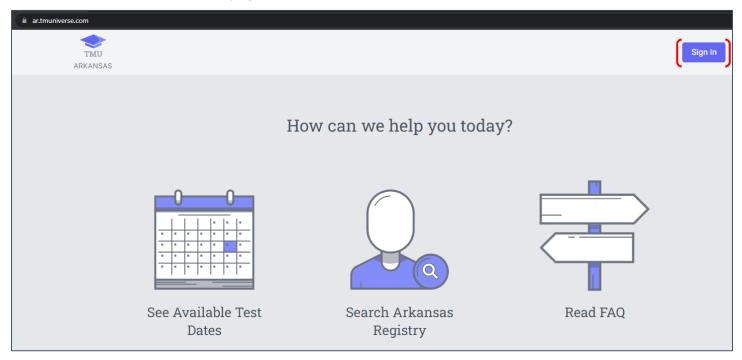
Screen you will see the first time you sign in to your TMU© record with the demographic information you need to enter to complete your record (next page):

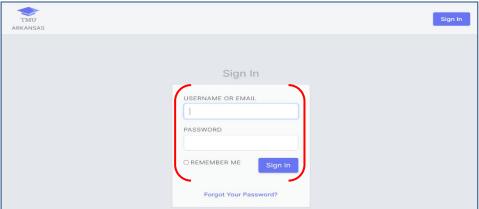




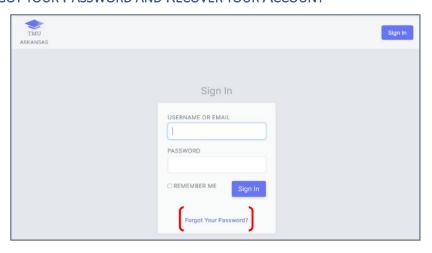


This is the Arkansas TMU© home page:

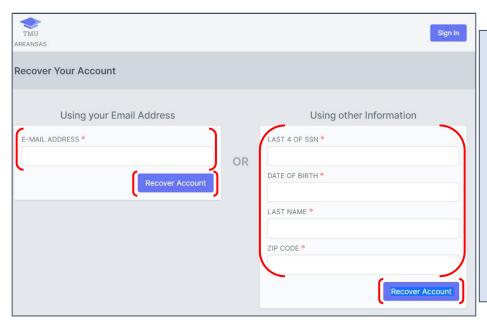




FORGOT YOUR PASSWORD AND RECOVER YOUR ACCOUNT



Click on-Forgot Your Password?



Type in your Email Address

Click on –

Recover Account

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

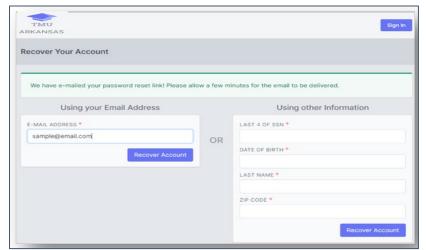
Click on the reset link in your email to reset your password.

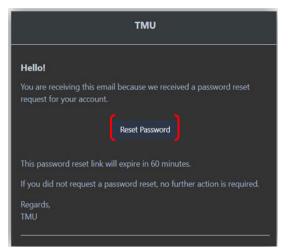
-OR-

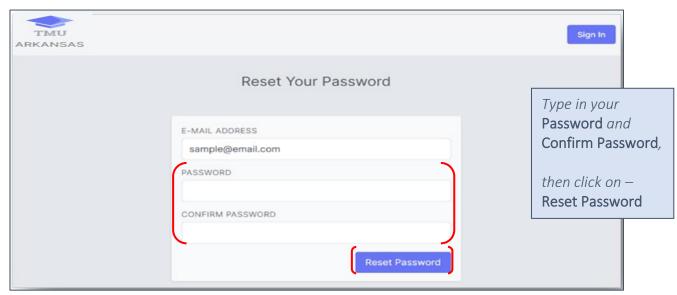
You can type in the requested data under Using other Information

Click on -

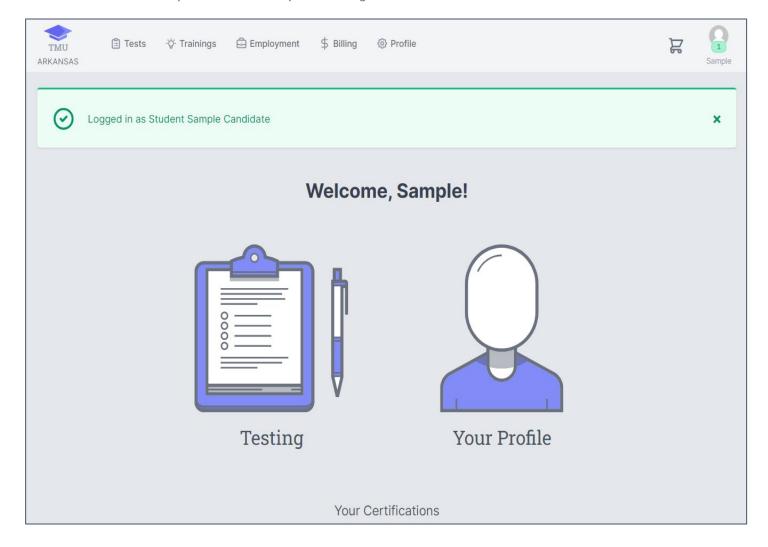
Recover Account







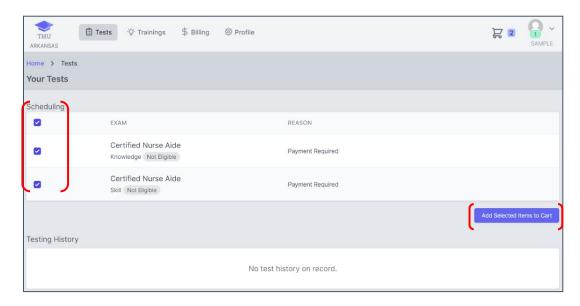
This is the home screen you will see once you have signed in:



SELF-PAY OF TESTING FEES IN TMU©

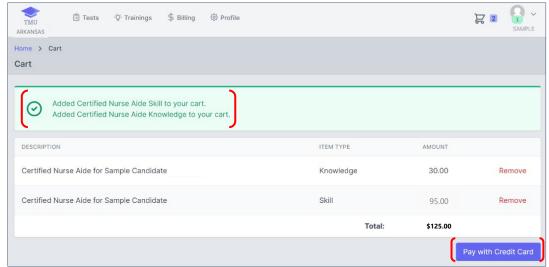
Testing fees will need to be paid before you can schedule a test date. Once your training program has completed your training record with completion hours and date, you will receive an email and text message that you are eligible to schedule a test date. Some training programs pre-pay testing fees for 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.

Securely processed Visa or MasterCard credit card or debit card information is required when scheduling online, if you are not a DHS paid for candidate. 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.



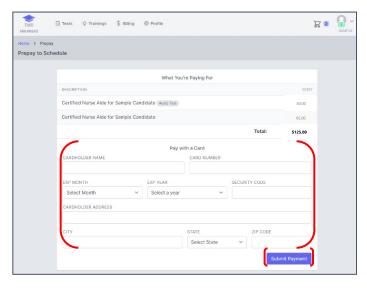
Under Scheduling, click on the box to the left of Exam to select the test component – a checkmark will appear in the box.

Then click on-Add Selected Items to Cart



You will get a message that the Skill and Knowledge tests have been added to your cart and the **Knowledge** and Skill amount,

click on-Pay with Credit Card



Enter the Credit Card information and then click on-

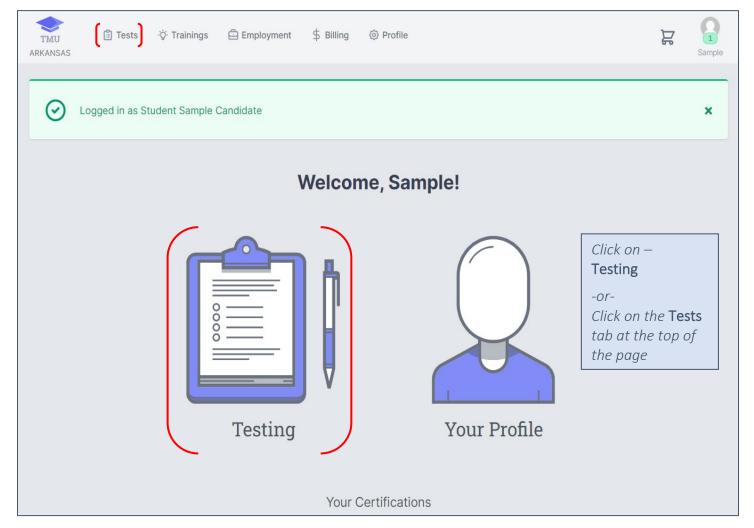
Submit Payment

You will receive a receipt of the transaction.

Schedule/Reschedule into a Test Event

Once your completed record is in the D&SDT-HEADMASTER TestMaster Universe© (TMU©) database and your fees are paid, you may schedule your exam date online at the Arkansas TMU© webpage at https://ar.tmuniverse.com using your email and password (see instructions under 'Forgot Your Password and Recover Your Account'). If you are unable to sign in with your email, please call D&SDT-HEADMASTER for assistance at (888)401-0462 during regular business hours 7:00AM to 7:00PM Monday through Friday, Central Standard Time (CST), excluding holidays.

After testing fees are paid (see instructions under 'Self-Pay of Testing Fees', if you are not DHS funded), you will be able to schedule and/or reschedule your test event up to the business day prior to a scheduled test date of your choice and receive your test confirmation notification online or on the screen while you are logged in. You may login with any Internet connected device. You will be scheduled to take your initial knowledge and skill tests on the same day. To schedule or reschedule your test date, sign in to the Arkansas TMU© webpage at https://ar.tmuniverse.com with your email and password. If you are unable to schedule/reschedule on-line, please call D&SDT-HEADMASTER at (888)401-0462 during regular business hours 7:00AM to 7:00PM CST Monday through Friday, excluding holidays, for assistance.





All **eligible** test events will appear in this format.

To select a test, click on -Schedule

next to the corresponding test component, knowledge or skills.



To select a test site and test date,

click on – Schedule

ar.tmuniverse.com says

Schedule into this Event on 07/15/2021 for Certified Nurse Aide
Knowledge, Certified Nurse Aide Skill. Are you sure?

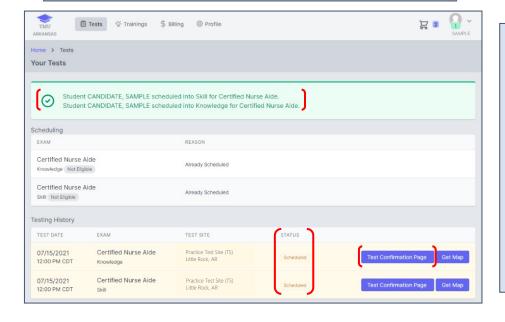
OK

Cancel

To confirm this is the site and date you want to schedule into,

click on -

OK



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

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

Click on-

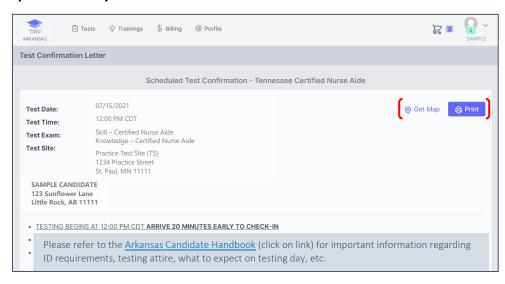
Test Confirmation Page to see your test confirmation with important reminders for testing.

TEST CONFIRMATION LETTER

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

The body of the test confirmation letter will give you state specific instructions on what time to arrive by, ID requirements, dress code, etc.

It is important that you read this letter!



Click on-Print to print your confirmation letter. Click on-Get Map to get Google Maps directions to the test site.

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

TIME FRAME FOR TESTING FROM TRAINING PROGRAM COMPLETION

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

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

If you have any questions regarding your test scheduling, call D&SDT-HEADMASTER at (888)401-0462, during regular business hours 7:00AM to 7:00PM CST Monday through Friday, excluding holidays.

Exam Check-In

You need to arrive at your confirmed test site between 20 to 30 minutes before your exam is scheduled to start. (For example: if your test start time is 8:00AM – you need to be at the test site for check-in no later than 7:40AM.) If you arrive late, you will not be allowed to test.

Testing Attire

The following testing attire requirements will be followed at testing sites:

- You must be in full clinical attire (scrubs).
 - Scrubs and shoes can be any color/design.
- No opened toed shoes are allowed.
- Long hair must be pulled back.

Please note: You will not be admitted for testing if you are not wearing scrubs attire and appropriate shoes with long hair pulled back. You will be considered a NO SHOW. You will forfeit your testing fees and have to pay for another exam date.

Identification

You must bring a United States (US) government issued, signed, non-expired photo bearing form of identification. Some examples here:

- State or Other United States Government Issued Driver's License
 - You may use your letter issued from the Department of Motor Vehicles (DMV) that you receive when you apply for or renew your driver's license while waiting to receive your new license.
- State issued Identification Card (that meets all identification criteria)
- Signed US Passport (Foreign Passports and Passport Cards are not acceptable)
 - Exception: A Foreign Passport with a US VISA is acceptable.
- Alien Registration Card (that meets all identification criteria may contain a fingerprint in place of a signature)
- Tribal Identification Card (that meets all identification criteria)
- Military Identification Card (that meets all identification criteria)
- Work Authorization Card (that meets all identification criteria)
- Concealed Hand Gun Carry Permit (that meets all identification criteria)

Identification Criteria = United States (US) government issued, signed (Alien Registration Card may contain a fingerprint in place of a signature), unexpired photo bearing form of identification

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

The FIRST and LAST names listed on the mandatory United States (US) government issued, signed, non-expired photo bearing form of identification 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 TMU© database. You may call D&SDT-HEADMASTER at (888)401-0462, during regular business hours 7:00AM to 7:00PM CST Monday through Friday, excluding holidays, to confirm that your name of record matches your United States (US) government issued, signed, non-expired photo bearing form of identification, or sign in to your record in TMU© to check or change your demographic information.

Please note:

- You will not be admitted for testing if you do not bring proper/valid identification.
 - Be sure your identification is not expired.
 - Check to be positive that both your FIRST and LAST printed names on your identification 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.
- A school ID is not an acceptable form of ID.
- In the cases where names do not match or your ID is not proper/valid or has a hole punched in it, this is considered a NO SHOW and you will have to reschedule and pay for another test and date.

You will be required to show your ID again 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 event.

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 versions are also available anytime from your smart phone via the knowledge test and skill test instruction links on the D&SDT-HEADMASTER Arkansas webpage, www.hdmaster.com under the Candidate column.

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 event. The RN Test Observer and Knowledge Test Proctor will ask you questions about the instructions you read when you enter the knowledge test room and/or skill test lab.

Testing Policies

The following policies are observed at each test site:

- Plan to be at the test site up to 5 hours, in the worst-case scenario. (Due to COVID, scheduling time frames have been altered and the time at the test site may be significantly shorter.)
- If you arrive late for your confirmed exam (you need to be at the test site to check in at least 20 to 30 minutes before your scheduled start time if your test start time is 8:00AM, you need to be at the test site by 7:40AM at the latest), you will not be admitted to the exam and any exam fees paid will NOT be refunded.
- If you do not bring a valid and appropriate United States (US) government issued, signed, non-expired
 photo bearing form of identification, you will not be admitted to the exam and any exam fees paid will
 NOT be refunded.
- If the FIRST and LAST names on your United States (US) government issued, signed, non-expired photo bearing form of identification do not match the FIRST and LAST names in your TMU© record, you will not be admitted to the exam and any exam fees paid will NOT be refunded.
- If you do not wear scrubs with appropriate shoes and have long hair pulled back, and conform to all testing policies, you will not be admitted to the exam and any exam fees paid will NOT be refunded.
- If you NO SHOW for your exam day, any test fees paid will NOT be refunded.
- **PERSONAL ITEMS:** Such as water bottles, briefcases, large bags, study materials, extra books, or papers) are not permitted to be on or near you in either testing room. You will be informed by the

testing team of the designated area to place your personal items and you are to collect these items when you complete your test(s).

- **ELECTRONIC DEVICES**: Cell phones, smart watches, fitness monitors, electronic recording devices, Bluetooth-connected devices 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 electronic devices and you are to collect these items when you complete your test(s).
 - All electronic devices must be turned off. Smart watches, fitness monitors and Bluetoothconnected devices must be removed from your wrist/body.
- Anyone caught using any type of electronic recording device during testing will be removed from the
 testing room(s) have their test scored as a failed test, forfeit all testing fees and will be reported to their
 training program and the Arkansas DHS. 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 language translation dictionaries in any form are not allowed during testing.
- You may not remove any notes or other materials from the testing room.
- You are not permitted to eat, drink, smoke (e-cigarettes or vape) during the exam.
- You are not allowed to leave the testing room (knowledge test room or skills lab) once the exam has begun *for any reason*. If you do leave during your test event, you will not be allowed back into the testing room to finish your exam.
- If you are discovered causing a disturbance of any kind, engaging in any kind of misconduct or try to take any notes or testing materials from the testing room, you will be dismissed from the exam, your test will be scored as a failed test and you will be reported to your training program and the Arkansas Department of Human Services.
- Test sites, RN Test Observers, Knowledge Test Proctors and Actors are not responsible for candidate personal belongings at the test site.
- 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 an NA (examples: cast, arm/leg braces, crutches, etc.) Call D&SDT-HEADMASTER immediately if you are on doctor's orders. You must fax a signed doctor's order within 3 business days of your scheduled exam day to qualify for a free reschedule.
- Please review this Arkansas Candidate Handbook before your test day for any updates to testing and/or policies.

Inclement Weather Policy and Unforeseen Circumstances

If an exam date is cancelled due to weather or other unforeseen circumstances, D&SDT-HEADMASTER staff will make every effort to contact you using the contact information (email, text message, phone call) we have on file in your TMU© record to reschedule you, for no charge, to a mutually agreed upon new test date. Therefore, you must keep your contact information up to date in case we need to contact you. See more information under 'No Show Exceptions'.

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

- The county you reside in or the county of the testing site is placed on a weather emergency.
- The test site closes.
- The test observer cancels the test event.

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

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

Candidate Feedback – Exit Survey

Candidates are provided the opportunity to complete an exit survey via a link when checking their test results in their TMU© record. 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.

Security

If you refuse to follow directions, use abusive language or disrupt the examination environment, your test will be stopped and scored as a failure. You will be dismissed from the testing room and will forfeit any testing fees paid and a report of your behavior will be given to your training program and the Arkansas DHS. You will not be allowed to retest for a minimum period of six (6) months.

Anyone who removes or tries to remove test material or takes notes or information from the test site will be reported to their training program and the Arkansas 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 forfeit any testing fees paid. You will not be allowed to retest for a minimum period of six (6) months. You may have to obtain permission from the Arkansas 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, or navigating to other browsers/sites during an electronic exam, etc.), your test will be stopped, you will be dismissed from the testing room and your test will be scored as a failure. You will forfeit any testing fees paid. You will be reported to your training program and the Arkansas Department of Human Services and you may have to obtain permission from DHS in order to be eligible to test again.

Reschedules

All candidates may reschedule for free online at https://ar.tmuniverse.com any time up until one (1) business day before a scheduled test day, excluding Saturdays, Sundays and holidays. Reschedules are subject to a \$35 fee that must be paid in full prior to a D&SDT-HEADMASTER staff assisted reschedule.

If you must reschedule your exam date, please do so as soon as possible. You may reschedule an exam date online by signing in to your record at https://ar.tmuniverse.com. (See instructions under 'Schedule/Reschedule into a Test Event'.)

• Example: If you are scheduled to take your exam on a Saturday, Sunday or Monday, you would need to reschedule by close of business the Thursday before your scheduled exam. D&SDT-HEADMASTER is open 7:00AM to 7:00PM, CST, Monday through Friday, excluding holidays.

Scheduled test date is on a:	Reschedule before 7:00PM CST the previous:
Monday	The previous Thursday
Tuesday	The previous Friday
Wednesday	The previous Monday
Thursday	The previous Tuesday
Friday	The previous Wednesday
Saturday	The previous Thursday
Sunday	The previous Thursday

Please note: Reschedules will not be granted less than one full business day prior to a scheduled test date.

Refund of Testing Fees Paid

Requesting a refund of testing fees paid is different than rescheduling a test date. Requesting a refund means that you are not interested in taking the Arkansas nurse aide certification test at all.

SCHEDULED IN A TEST EVENT

- 1) If you are scheduled in a test event, a refund request of testing fees paid must be made by filling out and submitting the <u>Refund Request Fillable Form 1405</u> on D&SDT-HEADMASTER'S main webpage at <u>www.hdmaster.com</u> at least **one (1) full business day** prior to your scheduled test event (excluding Saturdays, Sundays and Holidays). No phone calls will be accepted.
 - Example: If you are scheduled to take your exam on a Saturday, Sunday or Monday, you would need to request a refund by filling out and submitting the Refund Request Fillable Form on the D&SDT-HEADMASTER main webpage at www.hdmaster.com by close of business the Thursday before your scheduled exam. D&SDT-HEADMASTER is open until 7:00PM Central Standard time.
- 2) Refund requests made in the required time frame qualify for a full refund of any testing fees paid minus a \$35 refund processing fee.
- 3) Refund requests must be made within thirty (30) days of payment of original testing fees with D&SDT-HEADMASTER. Any requests for refunds made beyond the 30 days of original payment of testing fees with D&SDT-HEADMASTER will not be issued.

NOT SCHEDULED IN A TEST EVENT

- 1) Refund requests must be made within thirty (30) days of original payment of testing fees with D&SDT-HEADMASTER. Any requests for refunds made beyond the 30 days of original payment of testing fees with D&SDT-HEADMASTER will not be issued.
- 2) A refund request of testing fees paid must be made 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>. No phone calls will be accepted.
- 3) Refund requests made in the required time frame qualify for a full refund of any testing fees paid minus a \$35 refund processing fee.

No Shows

If you are scheduled for your exam and do not show up without notifying D&SDT-HEADMASTER at least one (1) full business day prior to your scheduled testing event, **excluding** Saturdays, Sundays and holidays, OR if you are turned away for 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.

A DHS funded applicant deemed as a "NO SHOW" is not reimbursable by DHS. You will forfeit all fees paid and must submit a new testing fee to schedule yourself into a new test event. You will not be able to schedule into a new test event until you have paid your testing fee.

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 at least one full business day before a scheduled test event, excluding Saturdays, Sundays and holidays (see examples under Reschedules and Refunds of Testing Fees Paid), a NO SHOW status will exist and you will forfeit your testing fees and must repay the full testing fee to secure a new test event.

No Show Exceptions

Exceptions to the NO SHOW status exist; if you are a NO SHOW for any test component for any of the following reasons, a free reschedule will be authorized to the remitter of record 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 one business day via phone call, fax or email and an obituary for <u>immediate</u> family only submitted within seven (7) business days from a missed exam date. If we do not receive proof within the 7-business day time frame you will have to pay as though you were a NO SHOW. (Immediate family includes parents, grand and great-grand parents, siblings, children, spouse or significant other.)

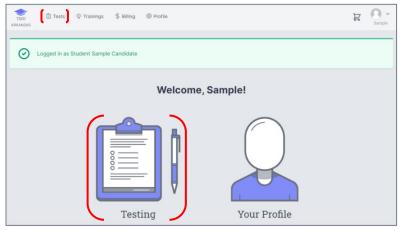
- <u>Virtual testing issues</u>: D&SDT-HEADMASTER must be contacted within one business day via phone call, fax or email and appropriate documentation must be submitted within **three (3) business days** of the exam date. If we do not receive proof within the 3-business day time frame you will have to 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.

Test Results

After you have completed both the Knowledge Test and Skill Test components of the competency exam, your test results will be officially scored and double checked. Official test results will be available by signing in to your TMU© record after 7:00PM CST the business day after your test event.

D&SDT-HEADMASTER does not send postal mail test results letters.

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







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

Test Attempts

You have **3 attempts** to pass the knowledge and skill test portions of the exam within one year from your date of nurse aide training program completion. If you do not complete testing within one year from completion of training, you must retrain in order to become eligible to further attempt Arkansas nursing assistant examinations.

Retaking the Nursing Assistant Test

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

You can schedule a test or re-test online by signing in to your TMU© record at https://ar.tmuniverse.com. (See screen shots under "Schedule/Reschedule into a Test Event" for rescheduling instructions.) You will need to pay with a Visa, Master Card or debit card before you are able to schedule.

If you need assistance scheduling your re-test, please call D&SDT-HEADMASTER at (888)401-0462 during regular business hours 7:00AM to 7:00PM CST Monday through Friday, excluding holidays. We are able to assist you in scheduling a test or re-test date as long as your fees have been paid first.

Test Review Requests

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

Note: Please call D&SDT-HEADMASTER at (888)401-0462 during regular business hours 7:00AM to 7:00PM CST Monday through Friday, excluding holidays, and discuss the test outcome you are questioning before committing to sending the \$25 test review request deposit. Many times, once you have further details about the scoring of your test, you will understand the scoring process and learn how you can better prepare yourself for subsequent exam attempts. If, after discussion with 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. If, after investigation, the finding of the review is in your favor, you will receive your \$25 test review deposit back in full.

Since one qualification for certification as an Arkansas nurse aide is demonstration by examination of minimum nurse aide knowledge and skills, the likely outcome of your review will determine who pays for your re-test. If the results of the review are in your favor, 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. D&SDT-HEADMASTER will re-check the scoring of your test and may contact you and/or the RN Test Observer and professional Actor for any additional recollection of your test(s). 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 Arkansas DHS.

The Knowledge/Oral Test

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

The Knowledge Test Proctor will hand out materials and give instructions for taking the Knowledge Test. You will have a maximum of 60 minutes (one hour) to complete the 75 question Knowledge Test. You will be told when fifteen (15) minutes remain. You may not ask questions about the content of the Knowledge Test (such as "What does this question mean?"). You must have a score of 76% or better to pass the knowledge portion of the exam.

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

NOTE: You will need your TMU© Username or Email and Password to sign in to your knowledge test. 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. However, you must request an Oral test before you submit your testing fee payment. There is an additional \$10 charge for an Oral Test. The questions are read to you, in a neutral manner, and can be heard through headphones/ear buds plugged into the computer. When taking an electronic Oral exam, the oral control buttons will be displayed on the computer screen enabling you to play, rewind or pause questions as needed.

Please note: On the Oral Knowledge Test, only the first 67 questions will be read orally, the remaining 8 questions will have to be answered without oral assistance to assess English reading comprehension.

No foreign translation dictionaries in any format are allowed during testing.

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

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 for 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 Test Content

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

SUBJECT AREA	Number of Questions	SUBJECT AREA	Number of Questions
Aging Process and Restorative Care	5	Infection Control	9
Basic Nursing Skills	11	Mental Health	4
Care Impaired	3	Personal Care	8
Communication	5	Resident Rights	6
Data Collection	4	Role and Responsibility	7
Disease Process	5	Safety	8

Knowledge Practice Test

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

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

1. Clean linens that touch the floor should be:

- (A) Picked up quickly and placed back on the clean linen cart
- (B) Used immediately on the next resident bed
- (C) Considered dirty and placed in the soiled linen hamper
- (D) Used only in the room with the floor the linen fell on

2. When you are communicating with residents, you need to remember to:

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

3. A resident's psychological needs:

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

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

The Manual Skill Test

- The purpose of the Skill Test is to evaluate your performance when demonstrating Arkansas DHS approved nurse aide skill tasks. You will find a complete list of skill tasks in this handbook.
- You will be asked to re-present your ID that you showed the RN Test Observer at sign-in.
- Be sure you understand all instructions you read while in the waiting area before you begin your skill task demonstrations. You may not ask questions once the Skill Test begins and the timer starts. Once the Skill Test begins, the RN Test Observer may not answer questions.
- Each of your randomly selected 3 or 4 tasks will have scenarios associated with them. The scenarios will be read to you by the RN Test Observer immediately before you are asked to do each task.
- You will be allowed a maximum of **30 minutes** to complete your three or four 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 steps on each task assigned in order to pass the Skill Test.
- If you believe you made a mistake while performing a task, tell the RN Test Observer you would like to make a correction. You will need to correctly demonstrate the step or steps on the task you believe you performed incorrectly in order to receive credit for the correction.
- You may repeat or correct any step or steps on any task you believe you have performed incorrectly at any time during your allotted 30 minutes or until you tell the RN Test Observer you are finished with the Skill Test.
- The skill task steps are not order dependent, unless the words BEFORE or AFTER are used in a step.
- When you finish each task, verbally tell the RN Test Observer you are finished and move to the
 designated "relaxation area." When the RN Test Observer and actor have set up and are ready for your
 next skill task demonstration, the RN Test Observer will read the scenario for your next task.
- All steps must actually be demonstrated. Steps that are only verbalized WILL NOT COUNT.

Skill Test Recording Form

The RN test observer will provide a recording form similar to the one displayed below if your skill test includes a skill task which requires recording a count or measurement.

See example next page.



	PLEASE PRINT
PULSE:	RESPIRATIONS:
URINARY OUTPUT: _	ml
GLASS 240ml:	_
GLASS 120ml:	_
TOTAL FLUIDINTAKE:	mi FOOD INTAKE:

Skill Test Tasks

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

- Bedpan and Output with Hand Washing
- Catheter Care for a Female with Hand Washing
- Donning an Isolation Gown and Gloves then Emptying a Urinary Drainage Bag with Hand Washing
- Perineal Care for a Female with Hand Washing

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

You will also receive an additional two or three randomly selected tasks from the Skill Task listing below. These selected tasks will make up your personalized and unique skill test. Each skill test randomly assigned by the 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. The catheter care and perineal care for a female task will be done on a manikin. You will be scored only on the steps listed. You must have a score of 80% on each task without missing any key 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 the 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. The RN Test Observer will observe your demonstrations of your skill tasks and record what she/he sees you do. D&SDT-HEADMASTER scoring teams will officially score and double check your test.

Please note: The skill task steps included in this handbook are offered as guidelines to help prepare candidates for the Arkansas nurse aide skill test and the steps included herein are not intended to be used to provide complete care that would be all inclusive of best care practiced in an actual work setting.

Ambulation 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 resident.
- 3) Obtain gait belt for the resident.
- 4) Lock bed brakes to ensure resident's safety.
- 5) Adjust bed height to ensure resident's feet will be flat on the floor.
- 6) Bring resident to a sitting position with resident's feet flat on the floor.
- 7) Properly place gait belt around resident's waist to stabilize trunk.
- 8) Tighten gait belt. Check gait belt for tightness by slipping fingers between gait belt and resident.
- 9) Assist resident to put on non-skid footwear BEFORE standing.
- 10) Bring resident to a standing position using proper body mechanics at all times.
- 11) Grasp gait belt.
- 12) Stabilize resident.
- 13) Ambulate resident at least 10 steps to the wheelchair.
- 14) Lock wheelchair brakes to ensure resident's safety.
- 15) Assist resident to pivot/turn and sit in wheelchair.
- 16) Sit resident in the wheelchair in a controlled manner that ensures safety at all times.
- 17) Remove gait belt.
- 18) Place resident within easy reach of the call light or signaling device and water.
- 19) Maintain respectful, courteous interpersonal interactions at all times.
- 20) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Ambulation from Wheelchair to Bed using a Gait Belt

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain the procedure to resident.
- 3) Obtain gait belt for the resident.
- 4) Lock bed brakes to ensure resident's safety.
- 5) Adjust bed height to ensure resident's feet will be flat on the floor.
- 6) Lock wheelchair brakes to ensure resident's safety.
- 7) Properly place gait belt around resident's waist to stabilize trunk.
- 8) Tighten gait belt. Check gait belt for tightness by slipping fingers between gait belt and resident.
- 9) Ask resident to place hands on wheelchair arm rests.
- 10) Grasp gait belt with both hands.
- 11) Bring resident to a standing position using proper body mechanics at all times.
- 12) Continue grasping gait belt.
- 13) Stabilize resident.
- 14) Ambulate resident at least 10 steps to the bed.
- 15) Assist resident to pivot/turn and sit on the bed.

- 16) Sit resident on the bed in a controlled manner that ensures safety at all times.
- 17) Remove gait belt.
- 18) Remove resident's non-skid footwear.
- 19) Assist resident to lie down in the center of the bed making sure the resident is comfortable and in good body alignment.
- 20) Lowers bed.
- 21) Place call light or signaling device within easy reach of the resident.
- 22) Maintain respectful, courteous interpersonal interactions at all times.
- 23) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Bed Bath- 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 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) Fan fold bed linens at least down to the waist or moves 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, only expose one arm.
- 13) Wash arm, hand and underarm using soap and water.
- 14) Rinse arm, hand, and underarm.
- 15) Pat dry arm, hand and underarm.
- 16) Assist resident to put on a clean gown.
- 17) Empty, rinse, dry and return to storage.
- 18) Dispose of soiled linen in designated laundry hamper.
- 19) Lower bed.
- 20) Place call light or signaling device within easy reach of the resident.
- 21) Maintain respectful, courteous interpersonal interactions at all times.
- 22) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Bedpan and Output with Hand Washing

(One of the possible mandatory first tasks)

- 1) Knock on door.
- 2) Introduce yourself to the resident.

- 3) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 4) Explain the procedure to resident.
- 5) Provide for privacy.
- 6) Candidate puts on gloves.
- 7) Position resident on bedpan correctly (pan not upside down, is centered, etc.) using correct body mechanics.
- 8) Raise head of bed to comfortable level.
- 9) Leave call light or signaling device and tissue within reach of resident.
- 10) Step away to area of room away from resident.
- 11) When the RN Test Observer indicates, the candidate returns.
- 12) Wash/assist resident to wash hands.
- 13) Dry/assist resident to dry hands.
- 14) Discard soiled linen in designated laundry hamper.
- 15) Gently remove bedpan/fracture pan and hold while the RN Test Observer pours an unknown quantity of fluid into bedpan/fracture pan.
- 16) Place graduate on level, flat surface.
- 17) With graduate at eye level, read output.
- 18) Empty equipment used into designated toilet.
- 19) Rinse equipment used (bedpan/fracture pan and graduate) and empty rinse water into designated toilet.
- 20) Return equipment to storage.
- 21) Remove gloves turning inside out and dispose of gloves in appropriate container.
- 22) Record output on the provided, previously signed recording form.
- 23) Candidate's recorded output is within 25ml's of RN Test Observer's recorded output.
- 24) Place call light or signaling device within easy reach of the resident.
- 25) Maintain respectful, courteous interpersonal interactions at all times.
- 26) Wash hands: Begin by wetting hands.
- 27) Wash hands: Apply soap to hands.
- 28) Wash hands: Rub hands together using friction for at least 20 seconds with soap.
- 29) Wash hands: Interlace fingers pointing downward with soap.
- 30) Wash hands: Wash all surfaces of hands and wrists with soap.
- 31) Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.
- 32) Wash hands: Dry hands on clean paper towel(s).
- 33) Wash hands: Turn off faucet with a clean dry paper towel.
- 34) Wash hands: Discard paper towels into trash container as used.
- 35) Wash hands: Do not re-contaminate hands by touching the faucet or sink at any time during/after the hand washing procedure.

Catheter Care for a Female with Hand Washing

(One of the possible mandatory first tasks)

- 1) Knock on door.
- 2) Introduce yourself to the resident.

- 3) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 4) Explain the procedure to resident.
- 5) Provide for privacy.
- 6) Fill basin with warm water.
- 7) Candidate puts on gloves.
- 8) Avoid over exposure throughout the procedure.
- 9) Check to see that urine can flow, unrestricted, into the drainage bag (helpful to verbalize checking while looking for kinks in tubing, etc.).
- 10) Use soap and water to carefully wash around the catheter where it exits the urethra.
- 11) Hold catheter where it exits the urethra with one hand.
- 12) While holding the catheter where it exits the urethra, clean 3-4 inches down the catheter tube.
- 13) Clean with strokes only away from the urethra. (At least two strokes.)
- 14) Use a clean portion of the wash cloth for each stroke.
- 15) Rinse using strokes only away from the urethra.
- 16) Rinse using a clean portion of the wash cloth for each stroke.
- 17) Pat dry.
- 18) Do not allow the tube to be pulled at any time during the procedure.
- 19) Replace the resident's gown over the perineal area.
- 20) Replace top cover over the resident.
- 21) Leave resident in a position of safety and comfort.
- 22) Empty, rinse, dry and return basin to storage.
- 23) Remove gloves turning inside out and dispose of gloves in appropriate container.
- 24) Place call light or signaling device within easy reach of the resident.
- 25) Maintain respectful, courteous interpersonal interactions at all times.
- 26) Wash hands: Begin by wetting hands.
- 27) Wash hands: Apply soap to hands.
- 28) Wash hands: Rub hands together using friction for at least 20 seconds with soap.
- 29) Wash hands: Interlace fingers pointing downward with soap.
- 30) Wash hands: Wash all surfaces of hands and wrists with soap.
- 31) Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.
- 32) Wash hands: Dry hands on clean paper towel(s).
- 33) Wash hands: Turn off faucet with a clean dry paper towel.
- 34) Wash hands: Discard paper towels into trash container as used.
- 35) Wash hands: Do not re-contaminate hands by touching the faucet or sink at any time during/after the hand washing procedure.

Isolation Gown and Gloves, then Emptying a Urinary Drainage Bag with Hand Washing

(One of the possible mandatory first tasks)

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Face the back opening of the gown.
- 3) Unfold the gown.
- 4) Place arms through each sleeve.
- 5) Secure the neck opening.
- 6) Secure the waist making sure that the back flaps cover clothing as completely as possible.
- 7) Put on gloves.
- 8) Gloves overlap sleeves at the wrist.
- 9) Knock on door.
- 10) Introduce yourself to the resident.
- 11) Explain the procedure to 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 the 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 graduate and empty rinse water into designated toilet.
- 23) Return graduate to storage.
- 24) Leave resident in a position of comfort and safety.
- 25) Record output on the provided, previously signed recording form.

26) Candidate's measured output reading is within 25ml's of RN Test Observer's output reading.

- 27) Place call light or signaling device within easy reach of the resident.
- 28) Maintain respectful, courteous interpersonal interactions at all times.
- 29) Remove gloves, turning inside out.
- 30) Remove gloves BEFORE removing gown.
- 31) Dispose of the gloves in the appropriate container.
- 32) Unfasten gown at the neck.
- 33) Unfasten gown at the waist.
- 34) Remove gown by folding soiled area to soiled area.
- 35) Dispose of the gown in the appropriate container.
- 36) Wash hands: Begin by wetting hands.
- 37) Wash hands: Apply soap to hands.
- 38) Wash hands: Rub hands together using friction for at least 20 seconds with soap.
- 39) Wash hands: Interlace fingers pointing downward with soap.

- 40) Wash hands: Wash all surfaces of hands and wrists with soap.
- 41) Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.
- 42) Wash hands: Dry hands on clean paper towel(s).
- 43) Wash hands: Turn off faucet with a clean dry paper towel.
- 44) Wash hands: Discard paper towels into trash container as used.
- 36) Wash hands: Do not re-contaminate hands by touching the faucet or sink at any time during/after the hand washing procedure.

Perineal Care of a Female with Hand Washing

(One of the possible mandatory first tasks)

- 1) Knock on door.
- 2) Introduce yourself to the resident.
- 3) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 4) Explain the procedure to resident.
- 5) Provide for privacy.
- 6) Raise the bed height.
- 7) Fill basin with warm water.
- 8) Candidate puts on gloves.
- 9) Direct the RN Test Observer to stand on the opposite side of the bed or raise side rail on opposite side of the bed to provide for safety.
 - 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 under buttocks. (Candidate will choose barrier such as a towel, water proof pad, chux, etc.)
- 11) Expose perineum only.
- 12) Separate labia. (Candidate <u>must also verbalize</u> separating.)
- 13) Use water and soapy wash cloth.
- 14) Clean one side of labia from top to bottom.
- 15) Using a clean portion of a wash cloth, clean other side of labia from top to bottom.
- 16) Using a clean portion of a wash cloth, clean the vaginal area from top to bottom.
- 17) Use a clean wash cloth, rinse one side of labia from top to bottom.
- 18) Using a clean portion of a wash cloth, rinse the other side of labia from top to bottom.
- 19) Using a clean portion of a wash cloth, rinse the vaginal area from top to bottom.
- 20) Pat dry.
- 21) Covers the exposed area with the bath blanket.
- 22) Assist resident to turn onto side away from the candidate.
 - a. RN Test Observer may help hold the manikin on her side ONLY after the candidate has turned the manikin.
- 23) With a clean wash cloth.
- 24) Uses water, wash cloth and soap.
- 25) Clean from vagina to rectal area.
- 26) Use a clean portion of the wash cloth with any stroke.
- 27) Use a clean wash cloth, rinse from vagina to rectal area.
- 28) Use a clean portion of a wash cloth with any stroke.

- 29) Using a clean portion of a wash cloth, rinse the rectal area from vagina to rectal area.
- 30) Uses a clean portion of a wash cloth with any stroke.
- 31) Pat dry.
- 32) Safely remove barrier from under buttocks.
- 33) Position resident (manikin) on her back.
- 34) Dispose of soiled linen in designated laundry hamper.
- 35) Empty, rinse, dry and return equipment to storage.
- 36) Remove gloves turning inside out and dispose of gloves in appropriate container.
- 37) Lowers bed.
- 38) Place call light or signaling device and water within easy reach of the resident.
- 39) Maintain respectful, courteous interpersonal interactions at all times.
- 40) Wash hands: Begin by wetting hands.
- 41) Wash hands: Apply soap to hands.
- 42) Wash hands: Rub hands together using friction for at least 20 seconds with soap.
- 43) Wash hands: Interlace fingers pointing downward with soap.
- 44) Wash hands: Wash all surfaces of hands and wrists with soap.
- 45) Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.
- 46) Wash hands: Dry hands on clean paper towel(s).
- 47) Wash hands: Turn off faucet with a clean dry paper towel.
- 48) Wash hands: Discard paper towels into trash container as used.
- 49) Wash hands: Do not re-contaminate hands by touching the faucet or sink at any time during/after the hand washing procedure.

Denture Care

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.
- 3) Line bottom of sink with a protective lining that would help prevent damage to the dentures. (Towel, wash cloth or paper towels are allowed for lining.)
- 4) Put on gloves.
- 5) Apply denture cleanser.
- 6) Remove denture from cup.
- 7) Handle dentures carefully to avoid damage.
- 8) Handle dentures carefully to avoid contamination.
- 9) Rinse denture cup.
- 10) Thoroughly brush dentures including the inner, outer, and chewing surfaces of upper and lower dentures. (Only one plate is used during testing.)
- 11) Rinse dentures using clean cool water.
- 12) Place dentures in rinsed denture cup.
- 13) Add cool clean water to denture cup.
- 14) Rinse equipment.
 - a. Denture brush or toothbrush.
- 15) Return equipment to storage.
- 16) Discard protective lining in an appropriate container.

- 17) Remove gloves inside out and dispose of gloves in an appropriate container.
- 18) Place call light or signaling device within easy reach of the resident.
- 19) Maintain respectful, courteous interpersonal interactions at all times.
- 20) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Dressing a Bedridden Resident

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain 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) When dressing the resident in a button-up shirt, insert your 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 affected (weak) side first.
- 10) Assist the resident to raise their buttocks or turn 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 from the affected (weak) side first.
- 12) When putting on the resident's socks, draw the socks up the resident's foot until they are smooth.
- 13) Leave the resident in comfortably/properly dressed and in a position of safety.
- 14) Lower the bed.
- 15) Place call light or signaling device within easy reach of the resident.
- 16) Maintain respectful, courteous interpersonal interactions at all times.
- 17) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Feeding a Dependent Resident

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.
- 3) Ask the resident to state name and verify name matches the name on the diet card.
- 4) Protect clothing from soiling by using napkin, clothing protector, or towel.
- 5) Provide hand hygiene for the resident BEFORE feeding. (Candidate may use a disposable wipe to clean hands—or- wash the resident's hands with a wet wash cloth—or- may use hand sanitizer on the resident covering all surfaces of the resident's hands and rubbing the sanitizer in until dry.)

- 6) Ensure resident's hands are dry BEFORE feeding. (If candidate uses a wet wash cloth to wash the resident's hands, they will need to dry the resident's hands. If hand sanitizer or a disposable wipe was used, make sure the hands are dry.)
- 7) Position yourself at eye level facing the resident while feeding resident.
- 8) Describe the food being offered to the resident.
- 9) Offer each fluid frequently from each glass.
- 10) Offer food in small amounts at a reasonable rate, allowing resident to chew and swallow.
- 11) 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.
- 12) Leave resident clean.
 - a. Remove the clothing protector.
- 13) Record intake in percentage of total solid food eaten on provided, previously signed recording form.
- 14) Candidate's recorded consumed food intake is within 25 percentage points of the RN Test Observer's recorded food intake.
- 15) Record intake of sum total fluid consumed in ml on provided, previously signed recording form.
- 16) Candidate's recorded total consumed fluid intake is within 60ml's of the RN Test Observer's recorded fluid intake.
- 17) Place call light or signaling device within easy reach of the resident.
- 18) Maintain respectful, courteous interpersonal interactions at all times.
- 19) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Foot Care One Foot

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.
- 3) Fill foot basin with warm water.
- 4) Remove a sock from the (right/left) foot. (The scenario read to you will specify right or left.)
- 5) Immerse foot in warm water.
 - a. You may verbalize the 5 to 20 minutes soaking time after you begin soaking the foot.
 - b. Once the 5 to 20 minutes soaking time is verbalized, the RN Test Observer will acknowledge the stated time and say, "You may continue with your demonstration now."
- 6) Use water and soapy wash cloth.
- 7) Wash entire foot.
- 8) Wash between toes.
- 9) Rinse entire foot.
- 10) Rinse between toes.
- 11) Dry foot thoroughly.
- 12) Dry thoroughly between toes.
- 13) Warm lotion by rubbing it between hands.
- 14) Massage lotion over entire foot.
- 15) Avoid getting lotion between the toes.
- 16) If any excess lotion, wipe with a towel.

- 17) Replace sock on foot.
- 18) Empty, rinse, dry and return basin to storage.
- 19) Place dirty linen in designated laundry hamper.
- 20) Leave resident in a position of safety in proper body alignment in the chair.
- 21) Place call light or signaling device within easy reach of the resident.
- 22) Maintain respectful, courteous interpersonal interactions at all times.
- 23) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Making an Occupied Bed

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.
- 3) Gather linen.
- 4) Transport linen away from body.
- 5) Place linen on a clean surface. (May place linen on the overbed table, chair or bedside stand.)
- 6) Provide for privacy.
- 7) Raise bed height.
- 8) Resident is to remain covered at all times.
- 9) Assist resident to roll onto side.
- 10) Roll or fan fold soiled linen, soiled side inside, to the center of the bed.
- 11) Place clean bottom sheet on mattress.
- 12) Secure two fitted corners.
- 13) Roll or fan fold clean linen against the resident's back.
- 14) Assist the resident to roll over the bottom linen, preventing trauma and avoidable pain to resident.
- 15) Remove soiled linen without shaking.
- 16) Avoid touching linen to uniform.
- 17) Dispose of soiled linen in designated laundry hamper.
- 18) Pull through and smooth out the clean bottom linen.
- 19) Secure the other two fitted corners.
- 20) Place clean top linen and blanket or bed spread over covered resident.
- 21) Remove used linen keeping resident unexposed at all times.
- 22) Tuck in clean top linen at the foot of bed while providing room for feet to move.
- 23) Tuck in clean blanket or bed spread at the foot of the bed while providing room for feet to move.
- 24) Apply clean pillow case.
- 25) Gently lift resident's head while replacing the pillow.
- 26) Lower bed.
- 27) Return side rails to lowered position, if side rails were used.
- 28) Place the call light or signaling device within easy reach of the resident.
- 29) Maintain respectful, courteous interpersonal interactions at all times.
- 30) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Mouth Care—Brushing Teeth

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

Nail Care One Hand

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.
- 3) Fill basin with warm water.
- 4) Immerse right/left hand nails in warm water. (The scenario read to you will specify right or left.)
 - a. You may verbalize the at least 5 minutes soaking time after you begin soaking the nails.
 - b. Once the at least 5 minutes soaking time is verbalized, the RN Test Observer will acknowledge the stated time and say, "You may continue with your demonstration now."
- 5) Dry hand thoroughly.
- 6) Specifically, dry between the fingers.
- 7) Gently cleans under nails with an orange stick.
- 8) Gently pushes cuticles back with a towel or wash cloth.
- 9) Files each fingernail.
- 10) Empty, rinse and dry basin.
- 11) Return equipment to storage.

- 12) Discard soiled linen in designated laundry hamper.
- 13) Place call light or signaling device within easy reach of the resident.
- 14) Maintain respectful, courteous interpersonal interactions at all times.
- 15) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Pivot-Transfer a Weight Bearing, Non-Ambulatory 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 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) Adjust bed height to ensure resident's feet will be flat on the floor.
- 7) Assist resident to a sitting position.
- 8) Position wheelchair at the foot or head of the bed with the wheelchair arm/wheel touching the side of the bed.
- 9) Lock wheelchair brakes to ensure resident's safety.
- 10) Properly place gait belt around the resident's waist to stabilize trunk.
- 11) Tighten gait belt. Check gait belt for tightness by slipping fingers between gait belt and resident.
- 12) Grasp the gait belt with both hands.
- 13) Bring resident to a standing position using proper body mechanics.
- 14) Assist resident to pivot and sit in the wheelchair in a controlled manner that ensures safety.
- 15) Remove gait belt.
- 16) Place resident within easy reach of the call light or signaling device.
- 17) Maintain respectful, courteous interpersonal interactions at all times.
- 18) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Pivot-Transfer a Weight Bearing, Non-Ambulatory Resident from Wheelchair to Bed using a Gait Belt

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.
- 3) Obtain a gait belt.
- 4) Lock bed brakes to ensure resident's safety.
- 5) Adjust bed height to ensure resident's feet will be flat on the floor.
- 6) Position wheelchair at foot or head of bed with wheelchair arm/wheel touching the side of the bed.

- 7) Lock wheelchair brakes to ensure resident's safety.
- 8) Properly place gait belt around the resident's waist to stabilize trunk.
- 9) Tighten gait belt. Check gait belt for tightness by slipping fingers between gait belt and the resident.
- 10) Ensure the resident's feet are flat on the floor.
- 11) Ask resident to place hands on the wheelchair arm rests.
- 12) Grasp the gait belt with both hands.
- 13) Bring resident to standing position using proper body mechanics.
- 14) Assist resident to pivot and sit on the bed in a controlled manner that ensures safety.
- 15) Remove gait belt.
- 16) Remove non-skid footwear.
- 17) Assist resident to lie down in the center of the bed.
- 18) Make sure resident is comfortable and in good body alignment.
- 19) Lower bed.
- 20) Place call light or signaling device with easy reach of the resident.
- 21) Maintain respectful, courteous interpersonal interactions at all times.
- 22) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Position Resident on Side

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.
- 3) Provide for privacy.
- 4) Position bed flat.
- 5) Raise bed height.
- 6) Direct the RN Test Observer to stand on the side of the bed opposite working side of bed –or- raises side rail on side of the bed opposite working side of the bed to provide for safety.
- 7) From the working side of the bed, move upper body, hips and legs toward self to provide room on the bed that will be used to safely turn the resident on his/her side.
- 8) Assist/turn resident on his/her side.
- 9) Ensure that the resident's face never becomes obstructed by the pillow.
- 10) Check to be sure that resident is not lying on his/her downside arm.
- 11) Ensure resident is in correct body alignment.
- 12) Place support devices such as pillows, wedges, blankets, etc., to maintain correct body alignment and protect bony prominences- under the resident's head, the upside arm, behind the back and between the knees.
- 13) Leave resident in a position of comfort and safety.
- 14) Lower bed.
- 15) Place call light or signaling device within easy reach of the resident.
- 16) Maintain respectful, courteous interpersonal interactions at all times.
- 17) 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 Hip and 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 procedure to the resident.
- 3) Raise bed height.
- 4) Provide for privacy.
- 5) Position resident supine (bed flat).
- 6) Position resident in good body alignment.
- 7) Place one hand under the knee.
- 8) Place the other hand under the ankle.
- 9) Do not cause discomfort/pain any time during ROM.
- 10) ROM for hip: Move the entire leg away from the body.
 - a. abduction
- 11) Move the entire leg back 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 knee and hip at least three times.
- 17) Do not force any joint beyond the point of free movement.
- 18) Candidate <u>must ask</u> 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) Place call light or signaling device within easy reach of the resident.
- 22) Maintain respectful, courteous interpersonal interactions at all times.
- 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 Shoulder

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to the resident.
- 3) Provide for privacy.
- 4) Raise bed height.
- 5) Position resident supine (bed flat).
- 6) Position resident in good body alignment.
- 7) Place one hand under the elbow.

- 8) Place the other hand under the resident's wrist.
- 9) Do not cause discomfort/pain at any time during ROM.
- 10) Raise 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 the shoulder at least three times.
- 13) Continue same support of for shoulder joints by placing one hand under the resident's elbow and one hand under the resident's wrist.
- 14) Move the resident's entire arm out away from the body.
 - a. abduction
- 15) Return the resident's 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) Candidate <u>must ask</u> 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) Place call light or signaling device within easy reach of the resident.
- 22) Maintain respectful, courteous interpersonal interactions at all times.
- 23) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Vital Signs - Radial Pulse and Respirations

- 1) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.
- 2) Explain procedure to 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 or 30x2.
 - a. Tell the RN Test Observer when you start counting and tell her/him when you stop counting.
- 5) Record pulse rate on the provided, previously signed recording form.
- 6) Candidate's recorded pulse rate is within 4 beats of RN Test Observer's recorded pulse rate.
- 7) Count respirations for 60 seconds or 30x2.
 - a. Tell the RN Test Observer when you start counting and tell her/him when you stop counting.
- 8) Record respirations on the provided, previously signed recording form.
- 9) Candidate's recorded respiratory rate is within 2 breaths of the RN Test Observer's recorded respiratory rate.
- 10) Place call light or signaling device within easy reach of the resident.
- 11) Maintain respectful, courteous interpersonal interactions at all times.
- 12) Perform hand hygiene.
 - a. Cover all surfaces of hands with hand sanitizer.
 - b. Rub hands together until hands are completely dry.

Knowledge Test Vocabulary List

abandonment
abdominal thrust
abductor wedge
abnormal vital signs
absorption
abuse
accidents
accountable
activities
acute
adaptive
adaptive devices
adaptive equipment
adduction
ADL
admission
admitting resident
advance directives
afebrile
affected side
aging process
agitation
AIDS
Alzheimer's
ambulation
amputees
anatomy
anemia
angina
anterior
anti-embolitic stocking
antibiotics

antisepsis
antisepsis anxiety

i y List
apical
apnea
arthritis
aspiration
assault
assistive device
atrophy
audiologist
autoclave
axillary temperature
bacteria
basic needs
bathing
bed height
bed making
bedrails
bedrest
behavior
behavioral care plan
beliefs
biohazard
bladder training
bleeding
blindness
blood pressure
body alignment
body fluid
body language
body mechanics
body temperature
bone loss
bowel program
brain stem
breathing
brittle bones

burnout call light cancer cardiac arrest cardiopulmonary resuscitation cardiovascular system care impaired care plan care planning cast cataract catheter catheter care cc's in an ounce
cancer cardiac arrest cardiopulmonary resuscitation cardiovascular system care impaired care plan care planning cast cataract catheter catheter care
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cast cataract catheter catheter care
cataract catheter catheter care
catheter catheter care
catheter care
cc's in an ounce
central nervous system
chain of command
charge nurse
chemical disinfection
chemical restraint
chemotherapy
choking
chronic
circulation
circulatory system
cleaning
cleaning spills
clear liquid diet
clergy
cognitively impaired
cold pack
colostomy
colostomy care
coma
combative resident

communicable
communication
competency evaluation
conduct
confidentiality
conflict
conflict resolution
confused resident
congestive heart failure
constipation
contamination
contracture
converting measures
COPD
coughing excessively
cultural
culture
CVA
cyanotic
dangling
de-escalation
death and dying
decubitus ulcer
deeper tissue
dehydration
delegation
demanding resident
dementia
denture care
dentures
dependability
depression
development
developmental disability
diabetes

diaphragm
diastolic
diet
diets
digestion
dilate
dirty linen
discharging resident
disease
disease process
disinfection
disoriented
disposing of contaminated
materials
disrespect
dizziness
DNR
documentation
domestic abuse
dorsiflexion
dressing
droplets
drowsy
dying
dysphagia
dyspnea
dysuria
edema
elastic stockings
elderly
elimination
emesis
emesis basin
emotional abuse
emotional lability

emotional needs
emotional stress
emotional support
empathy
emphysema
enema
epilepsy
essential behaviors
ethics
etiquette
eye glasses
falls
fasting
fecal impaction
feces
feeding
fire
fire safety
first aid
flatus
Foley catheter
foot board
foot care
foot drop
Fowler's
fracture pan
fractures
fraud
frayed cord
gait belt
gastric feedings
gastrostomy tube
geriatrics
gerontology
gestures

gifts
gloves
grieving process
group settings
hand care
hand tremors
hand washing
health-care team
hearing aid
hearing impaired
hearing loss
heart attack
heart muscle
Heimlich maneuver
helping residents
hemiplegia
hereditary
hip prosthesis
HIPAA
HIV
holistic care
hormones
hospice
Huntington's
hyperglycemia
hypertension
hyperventilation
1&0
immobility
impaired
impairment
in-house transfer
in-service programs
incontinence
indwelling catheter

infection
infection control
infection prevention
initial observations
insomnia
intake
intake and output
integumentary system
interpersonal skills
invasion of privacy
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
measuring height
measuring temperature
mechanical lift
medical asepsis
medical record
medication administration

medications
memory loss
mental health
mentally impaired
microorganism
military time
minerals
mistakes
mobility
mouth care
moving
MSDS
mucous membrane
Multiple Sclerosis
musculoskeletal
nail care
nasal cannula
neglect
non-contagious disease
non-verbal communication
NPO
nursing assistant's role
nutrition
objective
objective data
OBRA
occupied bed
ombudsman
oral care
oral hygiene
oral temperature
orientation
oriented
osteoporosis
output

overbed table
oxygen
oxygen use
palliative care
paralysis
paranoia
Parkinson's
passive
pathogen
patience
perineal care
peripheral vascular disease
peristalsis
personal care
personal items
personal protective
equipment
personal values
pet therapy
phone etiquette
physical needs
physical therapist
physician's authority
plaque
plate rim
podiatrist
positioning
postmortem care
postural hypotension
PPE
precautions
pressure ulcer
preventing falls
privacy
progressive

prostate gland prosthesis psychiatrist psychological needs psychosocial pulse pureed diet quadriplegia quality of life RACE (acronym) radial range of motion reality orientation rectal rectal temperature refusal regulation rehabilitation religious service reminiscence therapy reminiscing renewal reporting reposition resident abuse resident pictures resident right resident treatment resident trust Resident's Bill of Rights	
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regulation rehabilitation religious service reminiscence therapy reminiscing renewal reporting reposition resident abuse resident belongings resident independence resident pain resident right resident treatment resident trust Resident's Bill of Rights	rectal temperature
rehabilitation religious service reminiscence therapy reminiscing renewal reporting reposition resident abuse resident belongings resident independence resident pain resident right resident treatment resident trust Resident's Bill of Rights	refusal
religious service reminiscence therapy reminiscing renewal reporting reposition resident abuse resident belongings resident independence resident pain resident right resident treatment resident trust Resident's Bill of Rights	regulation
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reminiscing renewal reporting reposition resident abuse resident belongings resident independence resident pain resident pictures resident right resident treatment resident trust Resident's Bill of Rights	religious service
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resident treatment resident trust Resident's Bill of Rights	resident pictures
resident trust Resident's Bill of Rights	resident right
Resident's Bill of Rights	resident treatment
	resident trust
resident's chart	Resident's Bill of Rights
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resident's environment
resident's families
residents
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
seclusion
secretions
seizure
self-esteem
semi fowlers
sensory system
sexual abuse
sexual harassment
sexual needs
sharing information
Sharp's container
shaving
shearing

side rails
Sitz bath
skin observation
slander
smoking
social needs
social worker
specimen
spills
spiritual needs
sputum specimen
stages of grief
standard precautions
state tested
stealing
stereotypes
stethoscope
stress
stroke
subjective
subjective data
sundowning
supine
supplemental feedings
survey
swelling

tachycardia
TED hose
temperature
tendons
terminal illness
terminology
thick fluid
threatening resident
thrombus
TIA
tips
toenails
trachea
transfer belt
transfers
transporting
transporting food
transporting linens
tub bath
twice daily
tympanic
tympanic temperature
unaffected
unconscious
unsteady
urethral

urinary catheter bag
urinary elimination
urinary system
urinary tract
urination
urine
UTI
varicose veins
vision change
vital signs
vitamins
vocabulary
vomitus
walker
wandering resident
water faucets
water intake
water pitcher
weakness
weighing
weight
well-being
wheelchair safety
white blood cells
withdrawn resident

Notes: