

**D&S Diversified Technologies
dba HEADMASTER**

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Department of Public Health & Human Services

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INTRODUCTION:

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

The Montana Department of Health monitors approved OBRA nurse aide training programs which provide specific standards for nurse aide related knowledge, skills and abilities. Their purpose is to make sure that Candidates who are seeking nurse aide certification understand these standards, can competently and safely perform the job of an entry-level nurse aide and are prepared to test.

The Montana Department of Health has contracted with D&S Diversified Technologies, dba HEADMASTER, to provide tests and scoring services for the Certified Nurse Aide Test. This handbook is designed to help prepare Candidates for the Montana approved Certified Nurse Aide Test. There are two parts to the Certified Nurse Aide Test—a multiple-choice Written/Oral Test and a Skill Test. Candidates must pass both parts of the test to be certified and listed on the Nurse Aide Registry.

To learn how to apply to take the Certified Nurse Aide Test, please contact HEADMASTER at (406) 442-8656. This handbook should be kept for future reference.

THE PAPER WRITTEN EXAM:

The Test Observer or Test Proctor will handout written test booklets and give instructions for taking a paper written exam. You will have ninety (90) minutes to complete the written exam, You will be told when fifteen (15) minutes are left. You may not ask questions about the content of the exam. (Such as “What does this question mean?”) Fill in only one (1) oval on the answer scan form for each question. **DO NOT mark in the testing booklet.** Marks in the testing booklet will not be acceptable as answers. Your answers must appear on the separate answer sheet. You must score at least 75% in order to pass the written exam. Anyone who tries to take materials or information from the testing room is subject to prosecution.

THE ON-LINE WRITTEN/ORAL EXAM:

An On-Line Written Exam is the written exam taken on a computer. Instead of filling in your answers with the bubbles on a scan form, you will record your answers in the computer, using your mouse. The Test Observer or Test Proctor will show you how to access your online written test and guide you through each step. You will have ninety (90) minutes to complete your on-line written exam. You will be told when (15) minutes are left. You may not ask questions about the content of the exam, (such as “What does this question means?”).

If you have difficulty reading English or need an Accommodation, you may want to request an On-Line “Oral” exam. You must request it when you submit your application. If requesting an On-Line Oral exam, the computer will read the test questions to you.

PAPER WRITTEN/ON-LINE EXAM:

The Paper Written/On-Line Exam consists of 72 multiple-choice questions. The subject areas are as follows:

- 1) **Safety**—8 questions—safety of residents, CNA’s, facility safety issues & safety of facility personnel in general.
- 2) **Communication & Interpersonal Skills**—6 questions—any type of communication, both verbal & nonverbal, written & spoken; any communication related to hearing, seeing, feeling, tasting or smelling.
- 3) **Infection Control**—5 questions—relating to the nature of infections; causes & prevention, correct methods & procedures for dealing with infection.
- 4) **Resident Rights**—5 questions—rights residents are legally entitled to; facility & CNA roles in insuring those rights; includes the promotion of resident’s independence.
- 5) **Data Collection**—3 questions—relating to data acquisition, handling and routing.
- 6) **Basic Nursing Skills**—11 questions—broad subject area including any act or activity that would be considered a basic skill necessary to perform the job of a CNA, includes data acquisition, handling and routing.
- 7) **Role & Responsibility**—11 questions—broad subject area including any act or activity or restorative services that would be considered part of the basic role or responsibility of a CNA in the workplace.
- 8) **Disease Process**—5 questions—dealing with the stages of diseases and/or the theory of disease and the detection, prevention or treatment of disease.
- 9) **Personal Care**—7 questions—activities or acts performed by a CNA for or to residents that are personal in nature and accommodations necessary for functionally impaired residents.
- 10) **Mental Health & Illness**—4 questions—mental processes of residents, signs and stages of mental states of residents both normal and care impaired; mental well-being & interaction of a CNA and co-workers.
- 11) **Care Impaired**—5 questions—dealing with residents that are limited either physically or mentally from receiving “standard” care. CNA’s must perform more extensively or differently to accommodate these residents.
- 12) **Ageing Process**—2 questions—awareness of older growth and development with regard to the ageing process.

THE SKILL EXAM—VERSION 59

The purpose of the skill exam is to assess your performance during the demonstration of five nurse aide skill tasks. You must score at least an 80% on each skill task without missing any “key steps” in order to pass the skill exam. You will find a complete list of skill tasks included in this handbook. Five (5) of these skill tasks will be randomly selected for you to perform for your skill exam. The steps that are listed for each skill task are the minimum number of steps required for a nurse aide to perform the task.

WHAT TO EXPECT:

- Each of five scenarios corresponding to your five assigned skill tasks will be read to you.
- Listen carefully to all instructions given by the tester. You may have the scenario repeated at any time during your skill test.
- Be sure you understand all instructions before you begin your skill test because you may not ask questions after the skill test begins.
- If you make a mistake while performing a skill task during the first (35) minutes given to complete the five (5) randomly selected nurse aide skill tasks, say so and then repeat the step or steps you believe you demonstrated incorrectly.
- Once your skill exam begins, the tester may not answer questions.
- If you fail one or more skill tasks, you will be required to retest on five skill tasks, one of which will be a skill task you failed plus hand washing and “three” new skill tasks.

SKILL EXAM INSTRUCTIONS:

The following instructions will be read by the RN Test Observer (TO)/Test Proctor to each candidate before their skill exam begins:

I will be observing and recording whether or not you perform the steps on each of the five tasks that make up your skill test. HEADMASTER scoring staff in Helena, MT will score your test. I will not know if you passed or failed.

I will ask you to actually perform and demonstrate every step on each of five tasks that the computer has randomly chosen. During the first 35 minutes of your skill test you may go back a correct anything you believe you demonstrated incorrectly. I will let you know when 15 minutes are remaining.

You will begin with the task of hand washing followed by four more tasks, which will be read to you. You don't have to remember these four tasks, because I will tell them to you again, one at a time, as you progress through the skill test. After demonstrating hand washing as your first task, you may just tell me when you would wash your hands during each of your remaining four tasks. It may help you to talk yourself through each step as you perform your five tasks.

Each task has its own scenario, which I will read to you before you begin each task. It may help you to relax if you picture yourself in your regular workplace and just demonstrate to me the way you normally perform each task. You may use any equipment necessary. You may move equipment as needed to accomplish your tasks. Try to relax, be calm, and show me your best work.

I will read one scenario at a time to you. After I read the scenario to you, please actually demonstrate the task. I must see you perform each step; verbalization of steps won't count. (The only exception would be after you have performed the hand washing skill task, you may verbalize hand washing at the appropriate time during each of the four remaining tasks. When you finish a task, tell me you are finished and I will read the next scenario to you.

Any time during the first thirty-five minutes of your skill test, you may repeat or correct any task or any step on a task that you believe you did incorrectly.

You may ask me to repeat any of the scenarios for you at any time during your skill test.

When all five tasks are finished, if you have used less than 35 minutes, you may go back and correct anything you think you performed incorrectly, or you may tell me you are finished with your skill test.

I cannot answer any questions once we begin the test. Do you have any questions now?

CANCELLATION \ RESCHEDULES \ NO SHOWS

Your written and skill exam will begin at the time pre-arranged between you and your tester. Report at least 20 minutes before your testing time.

Rescheduling and/or cancellations will ONLY be allowed for emergency situations or extenuating circumstances. You MUST contact your tester to arrange a reschedule or notice of cancellation at least one business day before your test date and start time.

Documentation is required for all emergency situations/extenuating circumstances. **If you do not provide sufficient notice (phone call within one business day (within a 24 hour period) from missed exam date) and the requested written documentation (within ten days of your missed exam date), you will be considered a "No Show" and no refund of fees will be given. If you wish to schedule another test, you will be required to submit a new test application and fees.**

LATEX \ POWDER ALLERGIES:

If you have an allergic reaction to latex or the powder in latex gloves, please bring latex/powder free gloves with you to the test site to use during your skill exam.

REQUESTS FOR SPECIAL TEST ACCOMMODATIONS:

If you are in need of special test accommodations, such as having your written test read to you, please contact or have your employer contact HEADMASTER to request an ADA Accommodation Form and submit it to HEADMASTER along with the rest of your application materials. Accommodation form 1404 is also available at www.hdmaster.com

Skill ADA accommodations, such as the inability to hear when performing the Blood Pressure skill task, etc. need to be approved by the Montana Department of Public Health and Human Services- Nurse Aide Registry. Phone: 406-444-7061.

CANDIDATES WITH TEMPORARY DISABILITIES:

Please note that the Test Observer/Test Proctor has the authority to deny testing to any candidate who expresses or has a noticeable temporary disability. The Manual Skill Exam includes some strenuous physical tasks. If the candidate cannot perform even one of the skill tasks due to a temporary disability, they should not come to the test site. Temporary disabilities such as: knee injury, back injury, pregnancy, recent surgery, etc., which would preclude the candidate from safely performing even one of the skill tasks are all reasons for denying testing unless the candidate has a specific doctor's okay. The Test Observer/Test Proctor or Actor do not cover personal bodily or physical injury. Therefore, you will not be allowed to test if you have a temporary disability.

If you are experiencing a temporary disability and do not test within four months from your date of hire, the specifics of your situation need to be documented and filed in your personnel file. You may also call the Montana Department of Health and Human Services-Nurse Aide Registry and obtain further information. Please remember, if your tester denies testing to you because of a temporary disability, they are acting to protect your safety.

If you arrive to test and express a temporary disability that has not been pre-approved by the Montana Department of Health & Human Services, the tester will deny testing and the responsible party paying for the test will forfeit all fees paid and the candidate will have to reschedule and pay for a new test date.

CANDIDATES WITH PERMANENT DISABILITIES:

If you have a permanent disability and need an ADA Accommodation, the Montana Department of Public Health & Human Services-Nurse Aide Registry must be informed. Please call 444-2099.

MANUAL SKILL LISTINGS:

ABDOMINAL THRUST:

1. Evaluates choking by asking resident "Are you choking?"
2. Candidate indicates s(he) would call for help.
3. Helps resident to stand up.
4. Moves behind resident.
5. Wraps arms around resident's waist.
6. Makes a fist with one hand.
7. Places the thumb side of the fist against the resident's abdomen.
8. Positions fist slightly above navel and below bottom of the sternum.
9. Grasps fist with other hand.
10. **Verbalizes** pressing fist and hand into the resident's abdomen with an inward, upward thrust.
11. **Verbalizes** s(he) would thrust (**for testing purposes only**) at least 3 times.
12. Candidate stops, asks resident, "Are you still choking?" Actor is to say, "No" and may breath and speak normally now.
13. Candidate should verbalize to the TO that they would repeat this procedure until it is successful or until victim loses consciousness.
14. Candidate leaves resident in supine/recovery position. (Circle which one applies.)
15. Candidate indicates s(he) would notify the charge nurse if help did not arrive during procedure.

AMBULATION WITH CANE OR WALKER:

1. Identifies hands should be washed.
2. Locks wheel chair and bed brakes.
3. Explains procedure to resident.
4. Brings resident to a sitting position.
5. Assists resident in putting on shoes or non-skid slippers, robe, etc.
6. Positions cane or walker correctly.
7. Assists resident to stand using correct body mechanics.
8. Insures resident stabilizes cane/walker.
9. Positions self behind and slightly to side of resident.
10. Safely ambulates resident at least 10 steps.
11. Assists resident to pivot.
12. Assists resident to sit, using correct body mechanics.
13. Identifies hands should be washed.
14. Maintains respectful, courteous interpersonal interactions at all times.
15. Leaves call light or signal calling device within easy reach of the resident.

AMBULATION WITH USE OF GAIT BELT:

1. Identifies hands should be washed.
2. Explains procedure to be performed to the resident.
3. Obtains gait belt.
4. Lowers bed so resident's feet will be flat on the floor when sitting on the edge of the bed.
5. Locks bed brakes to ensure resident's safety.
6. Locks wheel chair brakes to ensure resident's safety.
7. Brings resident to sitting position.

8. Assists resident to put on shoes or non-skid slippers.
9. Places gait belt around waist.
10. Tightens gait belt.
11. Checks gait belt by slipping fingers between gait belt and resident.
12. Stands in front of and faces the resident.
13. Grasps the gait belt on each side of the resident with an underhand grip.
14. Stabilizes the resident's legs.
15. Brings the resident to standing position, using proper body mechanics.
16. With one hand grasping gait belt and the other stabilizing resident by holding forearm, shoulder, or using other appropriate method to stabilize, ambulates the resident.
17. Assists resident to pivot/back up to the wheelchair.
18. Assists resident to sit in the wheelchair in a controlled manner that ensures safety.
19. Removes gait belt.
20. Leaves resident in position of comfort and safety.
21. Maintains respectful, courteous interpersonal interactions at all times.
22. Leaves call light or signal device within easy reach of the resident.
23. Identifies hands should be washed.

APPLYING ANTIEMBOLIC STOCKINGS:

1. Identifies hands should be washed.
2. Explains procedure to resident.
3. Provides for resident's privacy by exposing one leg.
4. Rolls, gathers, or turns stocking down to heel.
5. Places stocking over the toes, foot, and heel.
6. Rolls or pulls stocking up leg.
7. Checks toes for possible pressure from stocking and adjusts as needed.
8. Leaves resident with a stocking that is smooth and wrinkle free.
9. Leaves resident with a stocking that is properly placed.
10. Covers exposed leg.
11. Identifies hands should be washed.
12. Maintains respectful, courteous interpersonal interactions at all times.
13. Leaves call light or signal calling device within easy reach of the resident.
14. Treat resident gently during entire procedure.

BLOOD PRESSURE:

1. Identifies hands should be washed.
2. Explains procedure to the resident.
3. Provides for resident's privacy.
4. Assists resident into a comfortable position with forearm relaxed and supported in a palm-up position, approximately at the level of the heart.
5. Rolls resident's sleeve up about 5 inches above the elbow.
6. Applies the cuff around the upper arm just above the elbow.
7. Cleans earpieces of stethoscope appropriately and places in ears.
8. Cleans diaphragm.
9. Locates brachial artery with fingertips by feeling brachial pulse just above bend of elbow.
10. Places stethoscope over brachial artery.
11. Holds stethoscope snugly in place.

12. Inflates cuff (160-180 mmHG)
13. Slowly releases air from cuff to disappearance of pulsations.
14. Removes cuff.
15. Candidate records reading on recording sheet signed during equipment demonstration.
16. Candidate's recorded systolic and diastolic blood pressure are within 4 points of the Evaluator.
17. Identifies hands should be washed.
18. Gathered and used equipment:
 - a. correct size cuff.
 - b. teaching stethoscope
 - c. 2 alcohol swabs
 - d. pad and pencil.
19. Maintains respectful, courteous interpersonal interactions at all times.
20. Leaves call light or signal calling device within easy reach of the resident.

BRIEF APPLICATION:

1. Knocks on door.
2. Introduces self.
3. Explains procedure to resident.
4. Identifies hands should be washed.
5. Chooses correct brief and size per facility instructions.
6. Marks date, time and initials on brief per facility policy.
7. Provides privacy for the resident.
8. Elevates bed to comfortable working height.
9. Locks bed brakes.
10. Identifies that perineal care would be performed.
11. Places brief under buttocks with top of absorbent pad aligned just above the buttocks crease.
12. Grasps and stretches leg portion of front panel to extend elastic for groin placement.
13. Rolls ruffles away from groin.
14. Snuggly place bottom tabs angled towards abdomen on both sides.
15. Brushes skin folds of inner legs downward and away from the brief.
16. Places top tabs on each side angled toward bottom tabs.
17. Leaves resident in a position of comfort in good alignment.
18. Places call light within reach.
19. Identifies hands should be washed.
20. Verbalizes that the resident's brief should be checked every two hours.
21. Verbalizes that brief is to be changed PRN and that facility toileting and bowel and bladder protocol will be followed.

BRUSHING TEETH:

1. Identifies hands should be washed.
2. Explains procedure to the resident.
3. Provides for resident's privacy.
4. Drapes the chest as needed to prevent soiling.
5. Puts on disposable gloves.
6. Applies toothpaste to toothbrush.

7. Brushes resident's teeth, including the **inner surface** of all upper and lower teeth.
8. Brushes resident's teeth including the **outer surfaces** of all upper and lower teeth.
9. Brushes resident's teeth, including the **chewing surfaces** of all upper and lower teeth.
10. Cleans tongue.
11. Assists resident in rinsing mouth.
12. Wipes resident's mouth.
13. Removes soiled linen.
14. Leaves resident in position of comfort and safety.
15. Empties and cleans, dries emesis basin.
16. Rinses toothbrush.
17. Returns emesis basin and toothbrush to storage.
18. Places soiled linen in hamper.
19. Removes gloves, turning gloves inside out as they are removed.
20. Disposes of gloves in an appropriate container.
21. Identifies hands should be washed.
22. Gathered and used the appropriate equipment during the procedure:
 - a. toothbrush
 - b. emesis basin
 - c. toothpaste
 - d. glass of water
 - e. towel
23. Maintains respectful, courteous interpersonal interactions at all times.
24. Leaves call light or signal calling device within easy reach of the resident.

DENTURE CARE & ORAL MOUTHCARE:

1. Identifies hands should be washed.
2. Explains procedure to resident.
3. Provides for resident's privacy.
4. Puts on disposable gloves.
5. Lines sink with a washcloth.
6. Handles dentures carefully to avoid damage.
7. Takes dentures to the sink and thoroughly brushes the **inner surfaces** of the dentures.
8. Thoroughly brushes the **outer surfaces** of the dentures.
9. Thoroughly brushes the **chewing surfaces** of the dentures.
10. Thoroughly brushes the **upper/lower surface** of the dentures.
11. Rinses dentures using clean cool water.
12. Places dentures in rinsed denture cup.
13. Adds cool clean water to the denture cup.
14. Cleans and rinses resident's mouth. Brushes gums/tongue with toothbrush and toothpaste and rinses thoroughly with water OR mouthwash. Wipes residue from resident's face.
15. Returns resident to position of comfort and safety.
16. Cleans equipment.
17. Returns equipment to storage.
18. Discards towel and washcloth in linen hamper.
19. Removes gloves, turning gloves inside out as they are removed.
20. Disposes of gloves in an appropriate container.

21. Identifies hands should be washed.
22. Maintains respectful, courteous interpersonal interactions at all times.
23. Gathered and used equipment appropriately throughout the procedure.
 - a. denture container
 - b. denture brush
 - c. toothpaste
 - d. towel or washcloth
 - e. glass of water
 - f. mouthwash
24. Leaves call light or signal calling device within easy reach of the resident.

DRESSING A RESIDENT:

1. Identifies hands should be washed.
2. Explains the procedure to the resident.
3. Removes gown while providing for the resident's privacy by appropriately keeping the resident covered at all times.
4. Removes gown from strong (____) side first.
5. Places used gown in laundry hamper.
6. When dressing the resident in a shirt or blouse the candidate inserts his/her hand through the sleeve of the shirt or blouse and grasps the hand of the resident, dressing from the weak (____) side first.
7. The candidate assists the resident to raise his/her buttocks or rocks resident side to side and draws the pants over the buttocks and up to the resident's waist, always dressing from the weak side first.
8. When putting on the resident's socks, the candidate draws the socks up the resident's foot until they are smooth.
9. Leaves the resident in a position of comfort.
10. Leaves the resident properly dressed.
11. Identifies hands should be washed.
12. Maintains respectful, courteous interpersonal interactions at all times.
13. Leaves call light or signal calling device within easy reach of the resident.

FEEDING THE DEPENDENT RESIDENT:

1. Knocks on door.
2. Identifies hands should be washed.
3. Explains procedure to the resident.
4. Looks at diet card to check that the resident has received the correct tray.
5. Protects clothing from soiling by using napkin, clothing protector, or towel.
6. Washes resident's hands before feeding.
7. Dries resident's hands before feeding.
8. Sits down facing the resident while feeding the resident or assumes other posture so candidate is at eye level with the resident.
9. Describes the foods being offered to the resident.
10. Offers fluid frequently.
11. Offers small amounts of food at a reasonable rate.
12. Allows resident time to chew and swallow.
13. Wipes resident's hands and face during meal as needed.
14. Leaves resident clean and in a position of comfort.

15. Places soiled linen in hamper.
16. Records intake as a percentage of total solid food eaten on signed I/O pad.
17. **Observer records his/her own calculation first without looking at the candidate's calculation and then records the candidate's calculation from the recording sheet in space below only after the candidate has left the skill test area.**
18. Candidate's calculation must be within 25% of the Evaluator.
19. Candidate records fluid intake in cc/ml on pad provided.
20. **Observer records their own calculation first before looking at the candidate's calculation and then records the candidate's calculation from the pad in the space below only after the candidate has left the skill test area.**
21. The candidate's calculation is within 40 cc/ml of the Evaluator.
22. Maintains respectful, courteous interpersonal interactions at all times.
23. Leaves call light or signaling device within easy reach of the resident.
24. Identifies hands should be washed.

FLUID INTAKE:

1. Identifies hands should be washed.
2. Candidate observes dinner tray.
3. Uses pad, pencil and/or RN evaluator supplied calculator to arrive at the number of cc/ml consumed.
4. Candidate decides on cc/ml of **fluid consumed** from each container.
5. The Evaluator observes the candidate **calculating grand total cc/ml consumed** from all containers. This can either be done with paper, calculator or mentally.
6. Candidate obtains total fluid consumed in cc or ml.
7. Candidate records the **total cc or ml consumed** from the tray on signed recording sheet.
8. The Evaluator pre-measured total and candidate's calculated total are within required range.
9. Equipment utilized:
 - a. two 8oz (240 cc/ml) clear glasses; one 4oz (120cc/ml) clear juice glass placed on the tray.
 - b. calculator optional (only RN supplied calculator may be used).
 - c. RN supplied pad and pencil or I/O pad for recording.
10. Identifies hands should be washed.
11. Maintains respectful, courteous interpersonal interactions.
12. Places call bell within reach.

FOOT CARE ONE FOOT:

1. Identifies hands should be washed.
2. Explains procedure to the resident.
3. Fills foot basin with comfortably warm water.
4. Removes one sock.
5. Immerses foot in comfortably warm water for 10 to 20 minutes.
6. Removes foot from water.
7. Uses water and soapy washcloth.
8. Washes entire foot.

9. Washes between toes.
10. Rinses entire foot.
11. Rinses between toes.
12. Dries foot thoroughly, being careful to dry between toes.
13. Offers to cut toenails.
14. Warms lotion by rubbing it between hands.
15. Massages lotion over entire foot.
16. If excess lotion, wipes with a towel.
17. Replaces sock on foot.
18. Cleans equipment (washes, rinses & dries)
19. Returns equipment to storage area.
20. Place dirty linen in hamper or equivalent.
21. Maintains respectful, courteous interpersonal interactions.
22. Leaves resident in position of safety in proper alignment in the wheelchair.
23. Leaves call bell within easy reach of resident.
24. Identifies hands should be washed.

GOWN & GLOVES:

1. Identifies hands should be washed.
2. Candidate faces the back opening of the gown.
3. Candidate unfolds the gown.
4. Candidate places arms through each sleeve.
5. Candidate secures the neck opening.
6. Candidate secures the waist, making sure that the back flaps completely covers clothing.
7. Candidate puts on gloves.
8. Gloves overlap gown sleeves at the wrist.
9. Removes gloves before removing gown.
10. Removes gloves turning inside out and folding one glove inside the other.
11. Candidate does not touch outside of gloves with bare hand at any time.
12. Dispose of the gloves, without contaminating self, in appropriate container.
13. Identifies hands should be washed.
14. Unfastens gown at the neck.
15. Unfastens gown at the waist.
16. Removes gown by folding soiled area to soiled area.
17. Disposes of gown and gloves in an appropriate container.
18. Identifies hands should be washed.

HAIR CARE:

1. Identifies hands should be washed.
2. Gathers and uses appropriate equipment:
 - a. brush, comb or hair pick
3. Explains procedure to the resident.
4. May place a towel over shoulders or not use a barrier at all, either way is okay.
5. Asks resident how they would like his/her hair combed.
6. Combs/brushes hair gently and completely.
7. Leaves hair neatly brushed, combed and/or styled.
8. Removes hair from brush or comb.
9. Cleans, dries and returns equipment to storage.

10. Identifies hands should be washed.
11. Maintains respectful, courteous interpersonal interactions at all times.
12. Leaves call light or signal device within easy reach of the resident.

HANDWASHING:

1. Knocks on door.
2. Introduces him/her self to the resident.
3. Turns on water.
4. Thoroughly wets hands.
5. Applies liquid soap to hands.
6. Rubs hands together for 20 seconds using friction.
7. Using friction, rubs interlaced fingers together while pointing downward.
8. Washes all surfaces of hands with liquid soap.
9. Washes wrists with liquid soap.
10. Rinses hands/wrists thoroughly under running water with fingers pointed downward.
11. Dries hands on clean paper towel(s)
12. Turns off faucet with SECOND (last) clean dry paper towel, or with a dry section of a previously used paper towel.
13. Discards paper towels to trash container as used.
14. Does not re-contaminate hands at any time during the procedure.

MAKING AN OCCUPIED BED:

1. Identifies hands should be washed.
2. Gathers linen.
3. Transports linen away from the body.
4. Places clean linen **on a clean surface**. (bedside stand, chair, on a barrier, etc.)
5. Explains procedure to resident.
6. Provides privacy.
7. Elevates bed to appropriate working height.
8. Resident is to remain covered at all times with the sheet.
9. Gently removes pillow from under resident's head.
10. Candidate asks Evaluator to stand on opposite side of bed to provide safety when turning resident toward side of bed.
11. Rolls or fan folds linen, soiled side inside, to the center of the bed.
12. Places clean bottom sheet along the center of the bed and rolls or fan folds linen against resident's back and unfolds remaining half. Pulls corners tightly in place and tucks sheet securely under the mattress as necessary.
13. Asks Evaluator to move to opposite sides of bed to provide safety.
14. Assists the resident to roll over the bottom linen, toward Evaluator, preventing trauma and avoidable pain to resident.
15. Removes soiled linen without shaking, and places in hamper. Avoids placing dirty linen on the over bed table. Avoids touching linen to uniform.
16. Pulls through and smooths out the clean bottom linen.
17. Places clean top linen over covered resident. Removes used linen keeping resident unexposed at all times.
18. Tucks in top linen.
19. Makes toe pleat.
20. Applies clean pillow case, with zippers and/or tags to inside, gently lifting resident's head to replace the pillow.

21. Leaves resident in position of comfort and safety in a neatly made bed.
22. Identifies hands should be washed.
23. Maintains respectful, courteous interpersonal interactions at all times.
24. Leaves call light or signal calling device within easy reach of the resident.

MOUTHCARE OF A COMATOSE RESIDENT:

1. Knocks on door.
2. Introduces self.
3. Identifies hands should be washed.
4. Provides privacy - pulls curtain.
5. Positions resident in a **semi-fowlers or lateral position**, as appropriate to avoid choking or aspiration OR positions resident on side, as appropriate to avoid choking or aspiration.
6. Drapes chest/bed as needed to protect from soiling.
7. Puts on gloves.
8. Uses toothettes and prepared mouthwash cleaning solution.
9. Gently and thoroughly cleans the **inner surfaces** of all upper and lower teeth.
10. Gently and thoroughly cleans the **outer surfaces** of all upper and lower teeth.
11. Gently and thoroughly cleans the **chewing surfaces** of all upper and lower teeth.
12. Gently and thoroughly cleans the gums.
13. Gently and thoroughly cleans the tongue.
14. Dips un-used toothette into clean water.
15. Rinses mouth with water dipped toothette.
16. Cleans, dries face.
17. Returns resident to position of comfort and safety.
18. Cleans equipment (washes, rinses, & dries)
19. Replaces equipment.
20. Discards disposable items in waste can.
21. Discards towel and washcloth in linen hamper.
22. Removes gloves, turning inside out as they are removed.
23. Disposes of gloves properly.
24. Identifies hands should be washed.

NAIL CARE:

1. Identifies hands should be washed.
2. Provides privacy.
3. Explains procedure to the resident.
4. Insures resident's safety. Locks wheelchair brakes.
5. Immerses nails in comfortably warm water and soaks for at least five minutes. **The five minutes may be verbalized.**
6. Gently cleans under nails with file, orange stick or nail brush. Nails may be cleaned as they soak.
7. Dries hands thoroughly.
8. Specifically dries between fingers.
9. Gently pushes cuticle back with towel or orange stick.
10. **Verbalizes** technique used to cut nails.
11. **Verbalizes** technique to file nails.
12. Cleans equipment (washes, rinses & dries)

13. Returns equipment to storage.
14. Discards soiled linen in linen hamper or equivalent.
15. Identifies hands should be washed.
16. Gathered and used equipment appropriately.
 - a. towel
 - b. basin with warm water.
 - c. nail clippers
 - d. nail file
 - e. orange stick or nail brush
16. Maintains respectful, courteous interpersonal interactions at all times.
17. Leaves call light or signal calling device within easy reach of the resident.

PARTIAL BED BATH:

1. Identifies hands should be washed.
2. Explains procedure to resident.
3. Provides privacy.
4. Insures resident safety as appropriate.
5. Raises bed to appropriate working level.
6. Covers resident with a bath blanket. Removes top bed linens. Fanfolds to bottom of bed or places aside.
7. Removes resident's gown.
8. Place soiled gown in linen hamper.
9. Fills basin with comfortably warm water.
10. Washes face WITHOUT soap.
11. Rinses face.
12. Dries face.
13. Washes hands.
14. Rinses hands.
15. Dries hands.
16. Washes underarm.
17. Rinses underarm.
18. Dries underarm.
19. **Verbalizes steps for perineal care.** Verbalization **MUST** include:
 - a. wiping front to back
 - b. using gloves
 - c. correct procedure for removing gloves
 - d. proper disposal of used gloves
20. Puts a clean gown on the resident.
21. Properly cleans all equipment used (washed, rinses & dries)
22. Stores all equipment used.
23. Disposes of dirty laundry in linen hamper.
24. Identifies hands should be washed.
25. Maintains respectful, courteous interpersonal interactions at all times.
26. Gathered and used required equipment appropriately;
 - a. bath blanket or equivalent
 - b. washcloth
 - c. bath towel
 - d. resident gown
 - e. lotion—optional
 - f. disposable gloves

- g. linen hamper
 - h. basin of warm water
27. Leaves call light or signal calling device within easy reach of the resident.

PASSING FRESH WATER:

1. Identifies hands should be washed.
2. Assembles equipment as required:
 - a. ice (marbles can be used as simulated ice)
 - b. scoop
 - c. pitcher, other appropriate equipment
3. Knocks on door
4. Explains task to resident.
5. Obtains water pitcher from room. Empties water pitcher.
 - a. verbalizes cleaning water pitcher.
6. Scoops ice (marbles) into water pitcher.
7. Properly uses ice scoop or uses ice dispenser without contaminating water.
 - a. does not allow ice to touch hand and fall back into pitcher or scoop to touch pitcher.
8. Properly stores ice scoop, if scoop was used.
 - a. scoop placed in appropriate receptacle after each use.
9. Adds water to pitcher.
10. Returns pitcher to resident bedside table.
11. Offers resident a fresh glass of water.
12. Identifies hands should be washed.
13. Maintains respectful, courteous interpersonal interactions at all times.
14. Leaves call light or signal calling device within easy reach of the resident.

PERINEAL CARE FOR FEMALE:

1. Knocks on door.
2. Explains procedure to the resident.
3. Pulls curtain; provides for privacy.
4. Elevates bed to working height.
5. Identifies hands should be washed.
6. Puts on gloves.
7. Fills basin with comfortably warm water.
8. Places waterproof pad under buttocks.
9. Exposes perineum only.
10. Separates labia.
11. Uses water, **simulated soap** and washcloth for cleaning perineum.
12. Cleans one side of labia from top to bottom.
13. Uses a clean portion of washcloth with each stroke.
14. Cleans other side of labia from top to bottom
15. Uses a clean portion of a washcloth with each stroke.
16. Pat the perineum dry with towel.
17. Re-covers the exposed area with the bath blanket.
18. Assists resident (mannequin) to turn onto side away from the candidate.
19. Uses a clean washcloth to clean the rectal area.

20. Cleans area from vagina to rectal area with single strokes. Repeats this step as necessary using a different part of the washcloth for each stroke. May use more than one washcloth.
21. Pats area dry with a towel from vagina to anus.
22. Removes waterproof pad from under buttocks.
23. Discards soiled linen in hamper.
24. Turns gloves inside out as they are removed.
26. Disposes of gloves in appropriate manner.
27. Lowers bed, if it was raised.
28. Leaves resident in a position of comfort.
29. Place call bell with reach.
30. Identifies hands should be washed.
31. Maintains respectful courteous interpersonal interactions at all times.

PERINEAL CARE FOR UNCIRCUMCISED MALE:

1. Knocks on door.
2. Explains procedure to the resident.
3. Pulls curtain; provides for privacy.
4. Elevates bed to working height.
5. Identifies hands should be washed.
6. Puts on gloves.
7. Fills basin with comfortably warm water.
8. Places waterproof pad under buttocks.
9. Gently grasps penis
10. Uses water, **simulated soap** and washcloth.
11. Demonstrates or verbalizes retracting of the foreskin.
12. Cleans tip of penis using single strokes starting at the urethral opening and working outward with a circular motion with each stroke.
13. Uses a clean portion of a washcloth with each stroke.
14. Demonstrates or verbalizes replacement of foreskin.
15. Cleans the shaft of the penis using single strokes with firm downward motion.
16. Cleans the shaft of the penis using clean portion of washcloth with each stroke.
17. Cleans scrotum using clean portion of washcloth with each stroke.
18. Pats the penis and scrotum dry with towel.
19. Re-covers the exposed area with the bath blanket.
20. Assists resident to turn onto side away from the candidate.
21. Uses a clean washcloth to clean the rectal area.
22. Cleans area from scrotum to rectal area with single strokes.
23. Uses a different part of the washcloth for each stroke. May use more than one washcloth.
24. Pats area dry with a towel from scrotum to anus.
25. Removes waterproof pad from buttocks.
26. Discards soiled linen in hamper.
27. Turns gloves inside out as they are removed.
28. Disposes of gloves in appropriate manner.
29. Lowers bed, if it was raised.
30. Leaves resident in a position of comfort.
31. Places call bell within reach.
32. Identifies hands should be washed.
33. Maintains respectful, courteous interpersonal interactions at all times.

POSITION RESIDENT ON HIS/HER SIDE IN BED:

1. Identifies hands should be washed.
2. Explains what is to be done and how the resident may help.
3. Provides privacy.
4. Positions bed flat.
5. Adjusts bed to working height.
6. Removes pillow from under resident's head.
7. Insures resident safety by locking bed brakes.
8. Candidate instructs Evaluator to stand opposite working side of bed to provide for resident's safety prior to turning or may move opposite the working side of the bed and turns resident toward self or may use a turn sheet and weight shift technique to turn resident toward self.
9. Moves upper body toward self or uses a turn sheet and weight shift technique with proper body mechanics to first pull/move the resident to the working side of the bed and then moves to the opposite side of the bed and turns resident on his/her side toward self.
10. Moves hips toward self or uses a turn sheet and weight shift technique with proper body mechanics to turn resident on his/her side toward self.
11. Moves legs toward self or uses a turn sheet and weight shift technique with proper body mechanics to turn resident on his/her side toward self.
12. Crosses legs.
13. Assists/turns resident on side.
14. Places support devices such as pillows, wedges, blankets, etc to maintain correct body alignment and protect bony prominences. Support device is placed under the resident's head.
15. Support device is placed under the resident's upper arm.
16. Support device is placed behind the resident's back.
17. Support device is placed between the resident's knees.
18. Asks resident if s(he) is comfortable.
19. Lowers bed when finished, if it was raised.
20. Identifies hands should be washed.
21. Maintains respectful, courteous interpersonal interactions at all times.
22. Leaves call light or signal calling device within easy reach of the resident.

PULSE & RESPIRATION (VITAL SIGNS):

1. Knocks on door.
2. Identifies hands should be washed.
3. Explains procedure to resident.
4. Locates the radial pulse by placing tips of fingers on thumb side of the resident's wrist.
5. Candidate counts pulse for 60 seconds or (30 x 2)
6. Candidate records count on the signed recording sheet.
7. Candidate's recorded pulse rate is within 4 beats of Evaluator's recorded rate.
8. Candidate counts respirations for 60 seconds or (30 x2).
9. Candidate records count on the signed recording sheet.
10. The candidate's recorded respiratory rate is within 2 breaths of the Evaluator's recorded rate.

11. Gathered and used equipment as appropriate.
 - a. official I/O sheet or pad of paper and pencil/pen
 - b. watch.
12. Leaves resident in a position of comfort and safety.
13. Identifies that hands should be washed.
14. Maintains respectful, courteous interpersonal interactions at all times.
15. Leaves call light or signal calling device within easy reach of the resident.

RANGE OF MOTION EXERCISE:

1. Identifies hands should be washed.
2. Explains procedure to the resident.
3. Provides for resident's privacy.
4. Positions resident supine and in good body alignment.
5. Correctly supports the extremity/joint being exercised.
6. Moves shoulder through flexion, extension, rotation, abduction, and adduction as appropriate, at least three times.
7. Moves elbow through flexion, extension, rotation, abduction, and adduction as appropriate, at least three times.
8. Moves wrist through flexion, extension, rotation, abduction, and adduction as appropriate, at least three times.
9. Moves hip through flexion, extension, rotation, abduction, and adduction as appropriate, at least three times.
10. Moves knee through flexion, extension, rotation, abduction, and adduction as appropriate, at least three times.
11. Moves ankle joint through flexion, extension, rotation, abduction, and adduction as appropriate, at least three times.
12. Does not cause discomfort or pain and does not force any joint beyond the point of free movement.
13. Identifies hands should be washed.
14. Maintains respectful, courteous interpersonal interactions at all time.
15. Leaves call light or signal calling device within easy reach of the resident.

TEMPERATURE (PULSE & RESPIRATION):

(Digital, tympanic or temp dot thermometer)

1. Identifies hands should be washed.
2. Explains procedure to resident.
3. Provides for resident's privacy.
4. Correctly turns on digital or tympanic thermometer, or correctly handles temp dot thermometer.
5. Gently inserts bulb end of thermometer in mouth under tongue, or tympanic in ear or properly places temp dot thermometer.
6. Holds or leaves thermometer in place for appropriate length of time.
7. Removes thermometer.
8. Candidate reads and records the temperature on the pad of paper/I&O sheet.
9. Candidate's recorded temperature varies no more than 0.1degrees from the Evaluator's recorded temperature.

10. Candidate wipes the thermometer clean with alcohol pad or discards sheath or temp dot thermometer appropriately.
11. Locates the radial pulse by placing tips of fingers on thumb side of the resident's wrist.
12. Candidate counts pulse for 60 seconds or (30x2).
13. Candidate records count on the signed recording sheet.
14. Candidate's recorded pulse rate is within 4 beats of Evaluator's recorded rate.
15. Candidate counts respirations for 60 seconds or (30x2).
16. Candidate records count on the signed recording sheet.
17. The candidate's recorded respiratory rate is within 2 breaths of the Evaluator's recorded rate.
18. Gathered and used equipment as appropriate.
 - a. official I/O sheet/pad of paper and pen/pencil
 - b. watch
19. Identifies hands should be washed.
20. Maintains respectful, courteous interpersonal interactions at all times.
21. Leaves call light or signal calling device within easy reach of the resident.

TOILETING USING A BEDPAN:

1. Identifies hands should be washed.
2. Explains the procedure to the resident.
3. Provides privacy - pulls curtain.
4. Positions resident on bedpan correctly.
5. After placing bedpan, raises head of bed to comfortable level.
6. Leaves tissue within reach of resident.
7. Leaves call light within reach of resident.
8. Candidate leaves room or verbalizes that they are leaving the room, while moving to an area of the room away from the actor, depending on the test site.
9. When the Observer indicates, candidate returns.
10. Candidate puts on gloves.
11. Candidate gently removes bedpan.
12. Candidate measures output.
13. Empties and cleans receptacle (washes, rinses & dries)
14. Removes and disposes of gloves
15. Identifies hands should be washed.
16. Washes/assists resident to wash and dry hands.
17. Lowers bed, if it was raised.
18. Candidate records output on official I/O sheet.
19. Candidate's measurement reading is within 30cc of RN's reading.
20. Identifies hands should be washed.
21. Maintains respectful, courteous interpersonal interactions at all times.
22. Leaves call light or signaling device within reach of the resident.

TRANSFER FROM BED TO WHEELCHAIR USING A GAIT BELT:

1. Identifies hands should be washed.
2. Obtains correct size of gait belt.
3. Explains procedure to be performed to the resident.

4. Positions wheelchair at the foot or head of bed. Insures resident's safety. Locks wheelchair brakes.
5. Insures resident's safety. Locks bed brakes.
6. Insures resident's safety. Makes sure bed is in lowest position.
7. Brings resident to a sitting position using proper body mechanics.
8. Assists resident in putting on non-skid slippers or shoes.
9. Places gait belt around the resident, below the rib cage and above his/her waist, to stabilize trunk.
10. Tightens gait belt so that fingers of candidate's hand can be slipped between gait belt and resident.
11. Brings resident to standing position using proper body mechanics.
12. With one hand grasping gait belt and the other stabilizing resident by holding forearm, shoulder, or using another appropriate method to stabilize, transfers resident from bed to wheelchair.
13. Assists resident to pivot and sit in a controlled manner that ensures safety.
14. Removes gait belt.
15. Identifies hands should be washed.
16. Maintains respectful, courteous interpersonal interactions at all times.
17. Leaves call light or signal calling device within easy reach of the resident.

TRANSFER FROM WHEELCHAIR TO BED USING A GAIT BELT:

1. Identifies hands should be washed.
2. Explains procedure to be performed to the resident.
3. Positions wheelchair at foot of bed.
4. Insures resident's safety. Locks wheelchair brakes.
5. Insures resident's safety. Locks bed brakes.
6. Insures resident's safety. Places bed in the lowest position.
7. Places gait belt around the resident, below the rib cage and above waist, to stabilize trunk.
8. Tightens gait belt so that fingers of candidate's hand can be comfortably slipped between gait belt and resident.
9. Instructs resident to move hips forward to front of wheelchair seat.
10. Instructs resident to place hands on wheelchair arm rests.
11. Candidate uses his/her legs to stabilize resident.
12. Assists resident to standing position using underhand grip on gait belt.
13. Assists resident to standing position using proper body mechanics.
14. Assists resident to pivot in a controlled manner that ensures safety.
15. Assists resident to sit on bed using correct body mechanics.
16. Removes gait belt.
17. Removes footwear.
18. Assists resident to move to center of bed and lie, using correct body mechanics.
19. Makes sure resident is comfortable and in good body alignment.
20. Identifies hands should be washed.
21. Maintains respectful, courteous interpersonal interactions at all times.
22. Leaves call light or signal calling device within easy reach of the resident.

URINARY DRAINAGE BAG:

1. Identifies hands should be washed.
2. Explains procedure to resident.
3. Pulls curtain—provides privacy.
4. Puts on gloves.
5. Places a barrier on the floor under the drainage bag
6. Places the graduate on the barrier.
7. Assures the bag is below the bladder.
8. Assures the drainage tube is not kinked.
9. Opens the drain to allow the urine to flow into the graduate.
10. Allows the urine to flow into the graduate.
11. Avoids touching the tip of the tubing to the graduate.
12. Clamps tubing.
13. Wipes the drain with antiseptic wipe.
14. Inserts a plug or protective cap into tubing or into holder.
15. Places graduate on flat surface.
16. Measures output at eye level.
17. Empty, rinses, dries and stores graduate.
18. Turns gloves inside out as they are removed.
19. Identifies hands should be washed.
20. Candidate records his/her output reading on signed recording sheet.
21. Candidate's measurement is within 10 cc/ml of the Evaluator's pre-measured amount.
22. Leaves resident in a position of safety and comfort.
23. Leaves call light or signal calling device within easy reach of the resident.
24. Maintains respectful, courteous interpersonal interactions.

WEIGHING AN AMBULATORY RESIDENT:

1. Identifies hands should be washed.
2. Explains procedure to resident.
3. Insures resident's safety. Locks wheelchair brakes. Use of gait belt is optional but procedure must be performed safely.
4. Balances or zeros scale, before weighing resident.
5. Checks that resident is balanced and centered on scale with arms at side.
6. Checks that resident is not holding onto anything that would alter reading of the weight.
7. Appropriately adjusts weights until scale is in balance.
8. Reads weight and height and records it on signed recording sheet.
9. Candidate's recorded weight varies no more than 1 lb from actual reading.
10. Candidate's recorded height varies no more than 1/2 inch from actual reading.
11. Returns resident to position of comfort and safety.
12. Identifies hands should be washed.
13. Maintains respectful, courteous interpersonal interactions at all times.
14. Leaves call light or signal calling device within easy reach of the resident.

TEST DAY - WHAT TO BRING?

You are **REQUIRED** to bring **“two forms of identification”** to the test site to sit for your exam:

- (1) a non-expired, signed, photo, identification, such as a driver’s license, DMV ID or passport.
- (2) your Social Security card.

IF YOU FORGET these two required forms of identification, YOU WILL NOT BE ALLOWED TO TEST and will need to repay and reapply for a new test date.

You need to bring two sharpened #2 pencils with erasers if you are taking a paper written exam.

TESTING POLICY:

Testing applications must be complete and accurate. Applications with missing information will be returned to sender. Payment is required with each test request. Money orders, Visa or Mastercard are the only acceptable forms of payment. **NO PERSONAL CHECKS!**

HEADMASTER requires with your application, that you send verification of your training, such as a copy of your graduation certificate or a signed affidavit from your training instructor verifying that you have completed a Montana approved, 75-hour NA training course. **An affidavit for the training instructor to sign is included on the backside of the application form.**

Candidates whose certification has lapsed must complete a Montana approved 75-hour CNA training course or challenge the test. **If testing is requested without training, the candidate will be considered a "Challenge". Out-of-State training does not count. As a "Challenge" you have only one (1) attempt at passing both the written and skill exam.** If, as a challenge test candidate, you fail either the written or skill exam, you may not schedule testing until you have completed a Montana approved, 75-hour CNA training course. Once training is completed the candidate must test on both the written and skill test and will be allowed three attempts to pass. **PAYMENT IS REQUIRED FOR EACH ATTEMPT.**

You need to arrive at your assigned test site twenty (20) minutes before the scheduled start time for the test.

Rescheduling and/ or cancellations will **ONLY** be allowed for emergency situations or extenuating circumstances. Documentation is required for all emergency situations or extenuating circumstances. You must contact your tester to arrange a reschedule or a notice of cancellation within one business day before your test date and start time. **If you do not provide sufficient notice (phone call within one business day from the missed exam date) and the requested written documentation (within ten days of your missed exam date), you will be considered a “No Show” and no refund of fees will be given.**

If you wish to schedule another test, you will be required to submit a new test application and fees.

Cellular phones, beepers or any other electronic devices are not permitted during testing and there is no place for storage of personal belongings.

You are not permitted to bring personal belongings such as briefcases, large bags, study materials, extra books, or papers into the testing room. Any such materials brought into the testing room will be collected and returned to you when you have completed your exam. You only use a calculator provided by the RN Test Observer.

You may not take any notes or other materials from the testing room.

You are not permitted to eat, drink, or smoke during the test.

If you cause a disturbance of any kind or engage in any kind of misconduct, you will be dismissed from the test and reported to your state agency. Decisions regarding disciplinary measures will be decided by the state agency.

No visitors, guests, pets, or children are allowed during testing.

You may not test if you have any type of physical limitation (excluding pre-approved ADA accommodations) that would prevent you from performing your duties as a NA. Examples: Cast, Brace, Crutches, etc. Call HEADMASTER immediately if you are on Doctor's orders.

SECURITY:

Anyone who removes or tries to remove test material or information from the test site will be prosecuted. Study materials may not be brought to the test or used during testing. If you give or receive help from anyone during testing, the test will be stopped, your test will not be scored, you will be dismissed from the testing room and your name will be reported to the appropriate agency.

TEST RESULTS:

HEADMASTER will score and mail your test results on the day we receive your test from the test site. The report will indicate whether you have passed or failed the written/oral test and/or skill test. If you failed, the report will indicate the content areas where you need improvement. If you have failed your exam, you will need to resubmit your application to HEADMASTER. If you successfully pass both the written/oral test and skill test, you will be placed on the MT Nurse Aide Registry and receive your certification within five to ten working days.

THE REGISTRY:

The MT Nurse Aide Registry maintains information regarding the certification of nurse aides in Montana. The Registry operates according to federal and state requirements and guidelines. Anyone may contact the Registry to inquire about his or her status as a nurse aide. Contact the Montana Nurse Aide Registry with questions about lapsed certification or transfer of certification to or from another state. (406)444-4980.

REPORTING IRREGULARITIES:

Candidates may report any irregularity that may or may not have had bearing on the outcome of his/her nurse aide test by requesting and completing a Reporting Irregularities Form. Contact HEADMASTER within 24 hours of the test (800) 393-8664.

PRACTICE EXAM:

Practice exams are available. Visit our Website @ www.hdmaster.com. Notice the free question of the day and the free ten question practice test. There are also practice tests, based on the Montana state test plan that are available for purchase. These practice exams are mastery based tests requiring the candidate to get each question correct before moving on to the next question. Practice test results include missed vocabulary word feedback and overall score based on 1st attempt responses to questions.

One (1) Test \$6.95
Five (5) Tests \$27.25@ \$5.45ea
Twenty (20) Tests \$79.00@ \$3.95ea
One hundred (100) Tests \$195.00@ \$1.95ea

ON-LINE TEST RESULTS:

Available as of April 11, 2006 you can visit our website at www.hdmaster.com to view your test results. Under the title “**Licensing/Certification**” click on the State of Montana. On the Montana webpage under the heading of “**On-Line Testing**” second paragraph down click on “**On-Line Test Results**”.

The procedure is as follows: go to our website www.hdmaster.com and choose “Montana” then choose “On-Line Test Results” and enter your SSN# without hyphens. Next your testing date 01/01/2011 (remember double-digits forward slashes) and lastly your birthdate mm/dd/yyyy (remember double-digits/forward slashes). It will ask you to “Submit Score Report” and say “yes” to the Security Warning.

Please allow until after 6:00 p.m. the day your test has been submitted for your test results to be available online. After verifying you have passed your exam, please allow up to ten (10) working days to be placed on the Montana Nurse Aide Registry.

VOCABULARY
STUDY LIST:

abdominal thrust
abnormal
accidents
activity
adduction
ADL's
admission
aging process
AIDS
alarms
Alzheimer's
ambulate with assistance
ambulation
anemia
Angina pectoris
angry resident
anterior
antibiotics
anxiety
aphasia
appropriate response
arteries
arteriosclerosis
arthritis
aseptic
aspiration
atrophy
axillary temperature
back strain
bacteria
bargaining
basic needs
basic skin care
bathing
bed bath
bed position
bed rest
bedfast
bedpan
bedsore
bladder training
bleeding
blindness
blood pressure

bodily fluids
body language
body mechanics
body temperature
bowel and bladder
programs
bowel movements
brain stem
break time
breathing
broken equipment
call light
cancer
cane
cardiovascular system
care plan
caring for elderly
cast
cataracts
catheter drainage bag
central nervous system
cerebral vascular
accident
charge nurse
chart
chemotherapy
choking
chronic disease
circulatory system
cleaners
cleaning spills
cleaning up of spills
clear liquid diet
clergy
cold compress
colostomy
colostomy bag
combative resident
communicable
communication
communication with
depressed resident
compensation
confidentiality
confused resident
congestive heart failure

constipation
contaminated clothing
contaminated hands
contamination
contracture
converting units
coping mechanisms
coughing excessively
CPR
CVA resident
cyanosis
decubitus ulcer
dehydration
demanding resident
dementia
denial
dentures
depression
dermatitis
diabetes
diabetes mellitus
dialysis
diaphragm
diarrhea
diastolic
diet
digestion
digestive system
discharging resident
disease producing
organisms
disinfection
dizziness
DNR
documentation
draw/lift
dressing resident
dry skin
dying process
dysphasia
dyspnea
edema
elastic stockings
electrical equipment
elimination of wastes
emesis basin

emotional abuse
emotional needs
emotional support
empathy
emphysema
enema
ethical code
ethical issues
evacuation
exercise
eye glasses
facility policy
falls
fatigue
feces
feeding resident
feeding tube
fingernail care
fire
fire safety procedures
fluid intake
fob interview
Foley catheter
foot drop
fractures
frequent urination
function with assistance
gait belt
gastrostomy tube
geriatrics
germ transmission
glass thermometer
gloves
grieving process
group settings
growth
hair care
hand tremors
hand-washing
health-care team
hearing aid
hearing impaired
heart
height
Heimlich maneuver
HIV

hug
hydration
hypertension
hyperventilation
hypoglycemia
immobility
impaction
impairment
in-house
in-service programs
incontinence
indwelling catheter
infection
initial observations
input and output
insulin
intake and output
integumentary system
international time
interpersonal skills
interventions
isolation
job description
lethargy
lift/draw sheets
linen
lying on side
making occupied bed
mask
Maslow's hierarchy
material safety data
mealtime
medical asepsis
medications
memory loss
mentally impaired
microorganisms
minerals
mistakes
mistreatment
mobility
money
mouth care
moving a dependent
resident
moving a resident

mucous
Multiple Sclerosis
myocardial infarction
nasal cannula
natural disaster
needles
neglect
new resident
non-contagious disease
nonverbal
communication
nosocomial
NPO
nurses station
nursing assistant
behavior
nursing assistant's role
nursing station
nutrition
objective
observation
ombudsman
oral hygiene
oral temperature
osteoarthritis
osteoporosis
ostomy bag
oxygen
paralysis
paranoia
Parkinson's
partial bath
patience
perineal care
peristalsis
personal care
personal hygiene
personal items
personal possessions
personal stress
pet therapy
phantom pain
physical needs
physician's authority
policy book
positioning a resident

positioning resident
positive attitude
prefix
pressure sore
pressure ulcer
preventing injury
privacy
prone
prostate gland
prosthesis
protective equipment
psychological needs
pulmonary disease
pulse
quadriplegia
radial
ramps
range of motion
rationalization
rectal temperature
reddened/discolored
area
rehabilitation
religious service
reminiscence
renal failure
reporting abnormal
changes
reposition residents
resident abuse
resident belongings
resident independence
resident rights
resident's bill of rights
resident's chart
resident's environment
resident's families
residents
resident's environment
respectful treatment
respiration
respirations
respiratory condition
responding to resident
behavior
restorative care

restraints
right to equal care
right to refuse care
scale
secretions
seizure
severe tremors
sexual activity
sexual advances
sexual expression
sexual needs
sexuality
sexually transmitted
diseases
sharps container
shaving
shearing of skin
side rails
Sims position
skin breakdown
smoking
social well being
soiled linen
specimen
spilled food
spills
spiritual needs
standard precautions
standard/universal
precautions
state survey
stealing
stereotypes
stethoscope
stomach
stool specimen
stress
stroke
subjective
suicide
sun-downing
supine
supplemental feedings
suspected abuse
swelling
systolic

TED hose
terminal illness
threatening resident
thrombus
tips
toenails
toileting schedule
TPR
transferring
treating residents with
respect
tub bath
twice daily
tympanic temperatures
ulcers
unconscious
uncovered food
uniform
universal precautions
unopened mail
unsteady
urinary catheter bag
urinary system
urinary tract
urine
visually impaired
vital signs
vitamins
vomiting
vomit
walker
wandering resident
water faucets
weak side
weakness
weight
wheelchair safety
white blood cells
Withdrawal

SAMPLE TEST QUESTIONS:

The following questions are samples of the kinds of questions that you will find on the Written/Online Test. Check your answers to these questions in the box below:

- 1. Linen from an isolated room should be placed:**
 - (a) in a wastepaper basket lined with a red bag
 - (b) with all other linens
 - (c) in a laundry hamper at least two doors away
 - (d) in a hamper lined with a yellow biohazard laundry bag

- 2. Before giving a back rub, the bottle of lotion can be placed in a basin of warm water for several minutes so that:**
 - (a) the bottle is sanitary
 - (b) the lotion will not be cold
 - (c) the lotion will be easier to apply
 - (d) the lotion will relieve itching

- 3. 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 whose floor the linen fell on

- 4. A soft, synthetic fleece pad placed beneath the client:**
 - (a) takes pressure off the back
 - (b) provides warmth for the client
 - (c) gives the client a sense of security
 - (d) should only be used with bedridden clients

- 5. A client's psychological needs:**
 - (a) should be given minor consideration
 - (b) make the client withdrawn and secretive
 - (c) are nurtured by doing everything for the client
 - (d) are nurtured when clients are treated like individuals

Correct Answers: 1D, 2B, 3C, 4A, 5D

REGISTRY VIEWS AND NEWS:

BURN ALERT!! Hot Moist Pack/Rice Pack/Hydrocollators:

Several residents have been burned, in the past 6 months while receiving heat treatments for pain. The injuries incurred have been first and second degree burns.

Please keep in mind that elderly residents have reduced sensation of the skin. Elderly persons have more fragile skin; and, frequently have impaired cognition as well as impaired ability to communicate and move independently. Disease processes e.g. Diabetes and Peripheral Vascular Disease make residents a higher risk for injury.

Heat packs are a useful pain management technique. However, be very careful in the use of these products. Keep in mind that, per Federal Regulation, hand basin and bath water temperatures cannot exceed 120 degrees in a nursing home due to potential injury. Hot packs and rice packs can cause the same types of injury and are frequently left in place 15 minutes at a time. Hydrocollator temperatures are between 160 and 167 degrees F. **If you have any questions, please call the Certification Bureau at 406) 444-2099.**

WHAT IS ELDER ABUSE?

Montana law defines abuse as the infliction of physical or mental injury or the deprivation of food, shelter, clothing or services necessary to maintain the physical or mental health of an older person or a person with a developmental disability without lawful authority.

The Federal definition of abuse is the willful infliction of injury, unreasonable confinement, intimidation, or punishment with resulting physical harm, pain or mental anguish. Neglect is the failure to provide goods and services necessary to avoid physical harm, mental anguish, or mental illness.

Report to above in accordance with 42 CFR 483.13 (b) & © :