



**RN TEST OBSERVER: PLEASE SIGN AND RETURN THIS FORM (1504OR) WITH YOUR TEST MATERIALS**

**OREGON NURSING ASSISTANT – HEADMASTER/D&S DIVERSIFIED TECHNOLOGIES**  
**OBSERVER EQUIPMENT LIST PRE-TEST INVENTORY CHECK LIST OREGON - FORM 1504OR**

The testing site must have all of the equipment and supplies necessary for RN test observers to properly observe the candidate’s demonstrations of any of the Oregon approved randomly selected, skill tasks. The RN observer is required to review all of the skill tests received prior to use and insure that the proper test site equipment is available prior to testing. Please refer to and check off each item on the following list of required test equipment and supplies all needed for each test event to be successful.

**Equipment Provided by Testing Site**

- Bedpans – 1 Standard and 1 Fracture Pan
- Bedside stand
- Call bell (doesn't have to be a working call bell)
- Dentures, denture container, denture cleanser
- Foley catheter
- Food tray, plate, silverware
- Gait belts
- Graduate
- Temporal Contact-Slide Thermometer
- Hand Sanitizer
- Hand washing sink with warm running water, soap (liquid, foam or bar) *(no rinse soaps are not allowed)*, & paper towels *(sink cannot be used for dirty water disposal)*
- Toilet or Commode
- Laundry receptacle
- Linens including: bedspread, blanket (top linens), fitted sheets, flat sheets, pillows (4), pillow cases, bath blanket, clothing protector, incontinence pads, towels, washcloths, and resident gown *(tie type, no snap gowns)*
- Long term care bed with working brakes, side rails, feet and head adjustment controls, and whole bed up/down controls *(beds that when not in lowest position brakes are locked (legs) are not allowed, must have brakes that can be manually engaged)*
- Mannequin (anatomically correct peri area for both female and male)
- Disposable adult briefs
- Plastic garbage bags (for garbage can – disposal of brief)
- Over bed stand
- Teaching – (bi-aural) stethoscope and two sizes of blood pressure cuffs
- Urinary bag
- Walker
- Wash basins, emesis basins
- Wastebasket
- Wheelchair with working brakes *(foot rests off for testing)*
- Working privacy curtain(s) *(Portable curtains not allowed)*
- Clock in knowledge test room
- Clock in skills lab – easily visible for skills testing (over bed)

**CELL PHONES CANNOT BE USED AS TIMERS DURING TESTING!**

- 2 Clear 240 cc glasses – 1 clear 120 cc juice glass
- 1 Clear 240 cc glass for Actor (feeding skill)
- #2 pencils for paper knowledge test administration
- Actor’s toothbrush, toothpaste, toothettes and paper cup
- Alcohol/antiseptic wipes
- Ear buds or Headphones (for oral test administration on MP3 player or computer)
- Digital oral thermometer and sheaths for probe
- Disposable gloves
- Disposable gowns (may tie or have Velcro/tape)
- Emery boards, orange stick
- Nail file
- Knee high anti-embolism elastic stocking that fits actor
- Soap (liquid, foam or bar) *(no rinse soaps are not allowed)*
- Lotion
- Official data recording forms (post it pads provided by Headmaster) (template also available on website)
- Over sized button-up shirt (short or long sleeved is okay), sweat pants, easy to put on shoes and socks
- Pencils/pens and small clipboard for recording forms and recordings
- Pre-measured “urine” fluid amounts in unmarked containers (hint: use yellow food coloring in water) with a syringe to fill drainage bags
- Sample food items: snack size container of applesauce, pudding etc.
- Mandatory Client Diet Card (provided by Headmaster), napkins and spoon
- Tissues, toilet paper
- Watch with a second hand
- Two audible count-down timers (one for 15 minutes left warning and 1 for 45 minute time up warning) or a multiple setting timer
- Recommended to carry your own electronic blood pressure monitor, cuff, finger pulse oximeter, and temporal contact-slide thermometer as backup

**ROOM REQUIREMENTS**

- **Distraction Free Skills Lab** - for administration of skills exam (with all equipment and supplies listed available and in good working order)
- **Distraction Free Knowledge Test Room** – for administration of the Knowledge Exam
- **Holding or Waiting Area** – where candidates may wait to take the exam

**RN Test Observer Provided Equipment and Consumables**

**RN Test Observers:** Checking this box means I certify all the equipment and supplies listed herein, were in good working order and were available to be used during my test event, otherwise specifically list the defective or missing equipment/supplies here.

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Please call D&SDT-HEADMASTER at 800-393-8664 if we can be of assistance.

**RN Observer Affidavit:**

I am an Oregon certified RN test observer and I provided secure, consistent, unbiased, testing oversight and administration during this test event.

Test Observer Signature: \_\_\_\_\_ Email: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_