



D&S Diversified Technologies LLP

Headmaster LLP

# Arizona Nurse Aide CANDIDATE HANDBOOK

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VERSION 29

D&S Diversified Technologies (D&S DT) – Headmaster

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HEADMASTER  
TMU©

## Contact Information

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## INTRODUCTION

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

As defined in the OBRA regulations, a Nurse Aide Competency Evaluation program provides specific standards for nurse aide-related knowledge and skills. This program aims to ensure that candidates 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 nurse aide competency examination process and is designed to help prepare candidates for testing. The examination has two parts: a multiple-choice knowledge test and a skill test. Candidates must be registered, complete approved training, pass both parts of the exam, and meet all other Arizona Board of Nursing (AZBN) requirements for certification in Arizona.

The State of Arizona has approved D&S Diversified Technologies, LLP (D&SDT)-HEADMASTER, LLP to provide nurse aide tests and scoring services. For questions not answered in this handbook, please contact D&SDT-HEADMASTER at (800) 393-8664 or go to D&SDT-HEADMASTER's [Arizona Nurse Aide web page](#) or at [www.hdmaster.com](http://www.hdmaster.com) and click on 'Arizona CNA'. The information in this handbook will help you prepare for your examination.

## PROOF OF LEGAL PRESENCE IN THE UNITED STATES

Every Arizona nurse aide student must have proof of legal presence in the United States on file with the Arizona State Board of Nursing. For instructions on submitting your proof of legal presence documents, refer to the Arizona State Board of Nursing website at [www.azbn.gov](http://www.azbn.gov). A link to AZBN's website, with a comprehensive list of documents acceptable as proof of legal presence, is available on the [Arizona webpage](#).

## CERTIFIED NURSE AIDE (CNA) | LICENSED NURSE AIDE (LNA)

The Arizona State Board of Nursing (Board) has two levels of nurse aides.

### Certified Nurse Aide (CNA)

Upon passing the required knowledge and skill competency exam components, to be placed on the CNA Registry as a certified nurse aide (CNA), candidates will need to go to AZBN's website at [www.azbn.gov](http://www.azbn.gov), click on "Apply for an Arizona License or Certificate" and complete the online application, which will include the uploading of your citizenship documents (proof of legal presence) and certificate of completion from your training program.

### Licensed Nurse Aide (LNA)

In addition to the requirements for being on the CNA Registry (see paragraph above), an LNA applicant must complete the online application, submit their fingerprints, and pay a fee to AZBN. If the applicant meets Board requirements, the Board will license the applicant as an LNA, and the applicant can use the initials "LNA." The online application process for LNAs is available on the Board's website: [www.azbn.gov](http://www.azbn.gov); click "Apply for an Arizona License or Certificate."

## AMERICANS WITH DISABILITIES ACT (ADA)

### ADA Compliance

The Arizona Board of Nursing (AZBN) 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 the examination. D&SDT-HEADMASTER must approve accommodations in advance of the examination. The request for accommodations can be found on the [D&SDT-HEADMASTER web page](#), where you can click the PDF Fillable [ADA Accommodation Form 1404](#). Fill out the ADA Request and attach the required documentation found on the second page of the request form to an email to [arizona@hdmaster.com](mailto:arizona@hdmaster.com) for review regarding an accommodation.

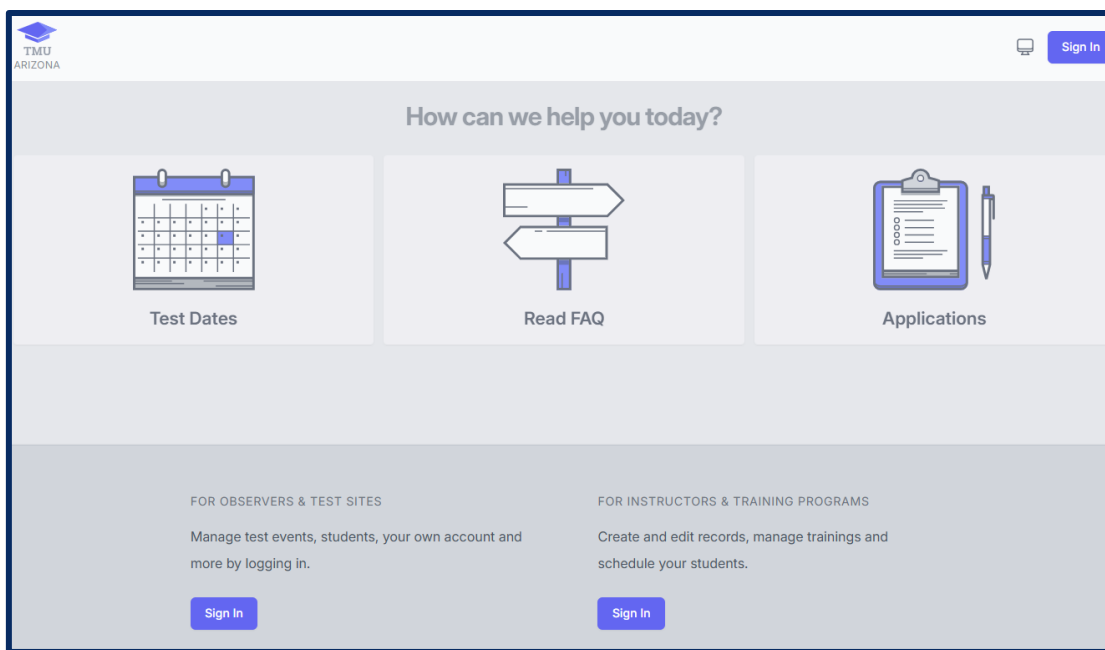
ADA Accommodation Request Applications submitted without the required supporting documentation of a diagnosed disability will not be reviewed until the required documentation is provided. D&SDT-HEADMASTER will email you if further documentation or information is required using the email in your TMU© account.

**Please allow additional time for your request to be approved.** If you have questions regarding the ADA review process or specific required documentation, please call D&SDT-HEADMASTER at (800) 393-8664.

## ARIZONA TESTMASTER UNIVERSE© (TMU©)

### Arizona TMU© Home Page

This is the Arizona TMU© main page, [az.tmutest.com](http://az.tmutest.com)



→ Click on 'Test Dates' to see the calendar of available test events and their location

→ Click on 'Read FAQ' for frequently asked questions

→ Click on 'Applications' for frequently used applications

## Complete your TMU© Account

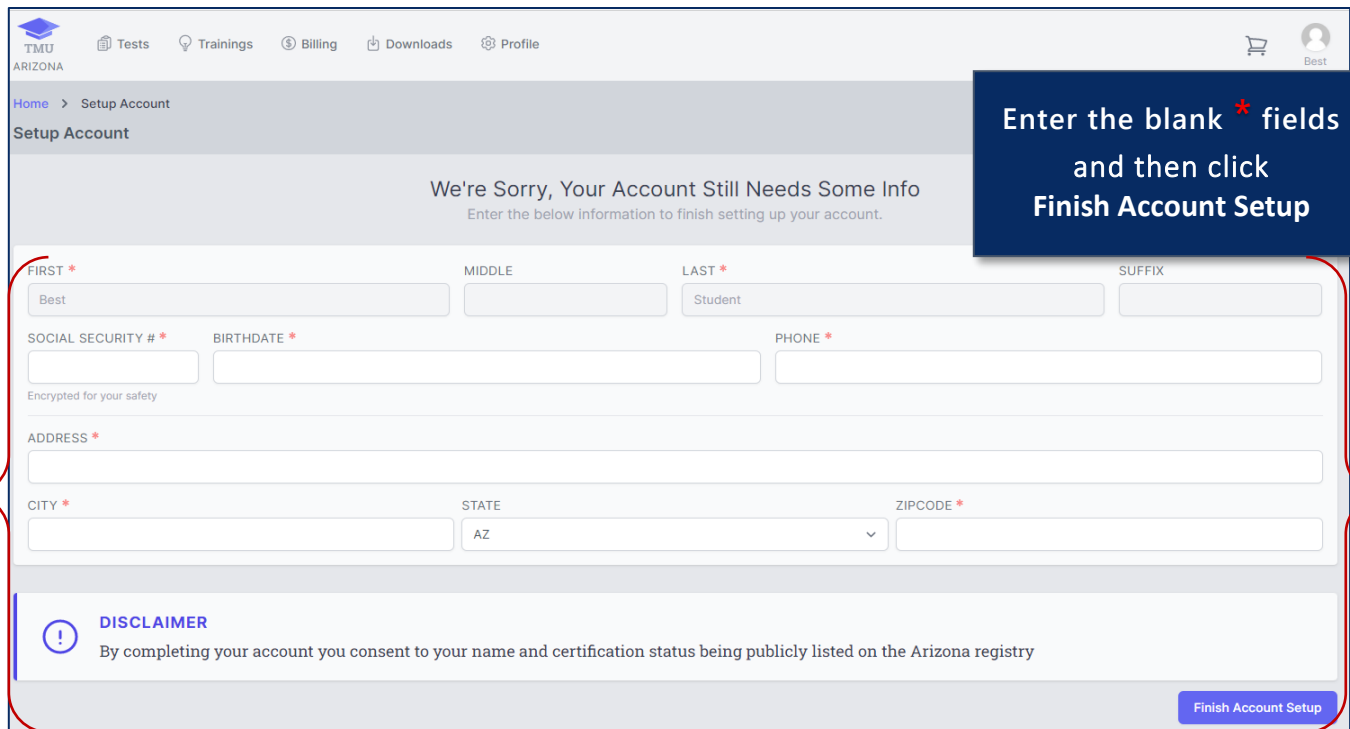
Your training program will enter your initial registration information in D&SDT-HEADMASTER's Arizona TestMaster Universe (TMU©) software.

**IMPORTANT:** Before you can test, you must sign in to your TMU© account using your secure Email or Username and Password and complete the missing demographic information prior to testing. Failure to do so may result in you being turned away from testing. You will be marked as a no-show for your event and will forfeit your testing fees.

- Upon receiving your confirmation email from TMU© (check your junk/spam mail) that your account has been created, you need to sign in to your account, update your password, and complete your demographic information. **This must be done before scheduling a test event**

If you do not know your Email or Username and Password, enter your email address and click "Forgot Your Password?" You will be asked to re-enter your email, and a 'reset password link' will be sent to your email (see instructions under [Forgot your Password and Recover your Account](#)). If you cannot sign in, contact D&SDT-HEADMASTER at (800) 393-8664.

*This is the screen you will see the first time you sign in to your TMU© account with the **demographic information you need to enter to complete your account**:*



TMU ARIZONA

Tests Trainings Billing Downloads Profile

Home > Setup Account

Setup Account

We're Sorry, Your Account Still Needs Some Info  
Enter the below information to finish setting up your account.

Enter the blank \* fields and then click Finish Account Setup

FIRST \* MIDDLE LAST \* SUFFIX

Best Student

SOCIAL SECURITY # \* BIRTHDATE \* PHONE \*

Encrypted for your safety

ADDRESS \*

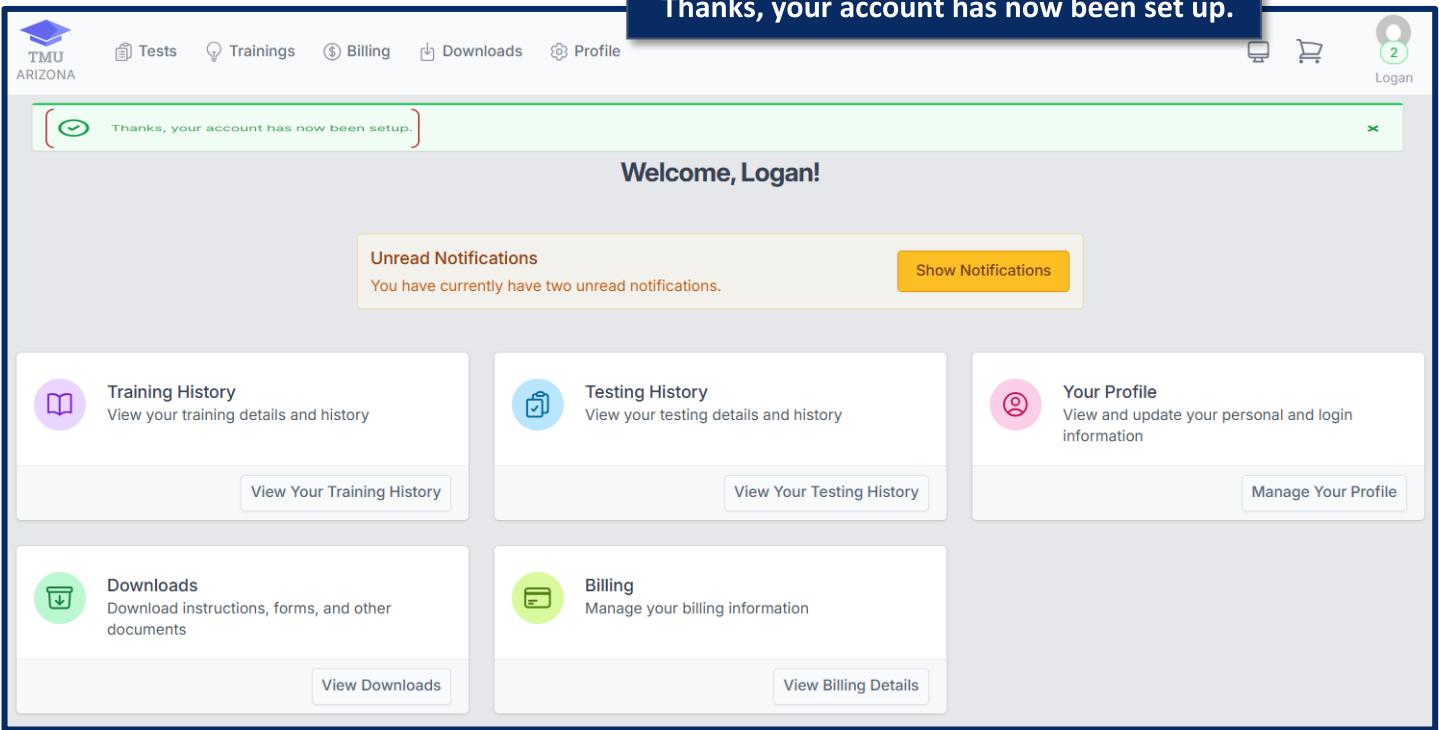
CITY \* STATE ZIPCODE \*

AZ

**DISCLAIMER**  
By completing your account you consent to your name and certification status being publicly listed on the Arizona registry

Finish Account Setup

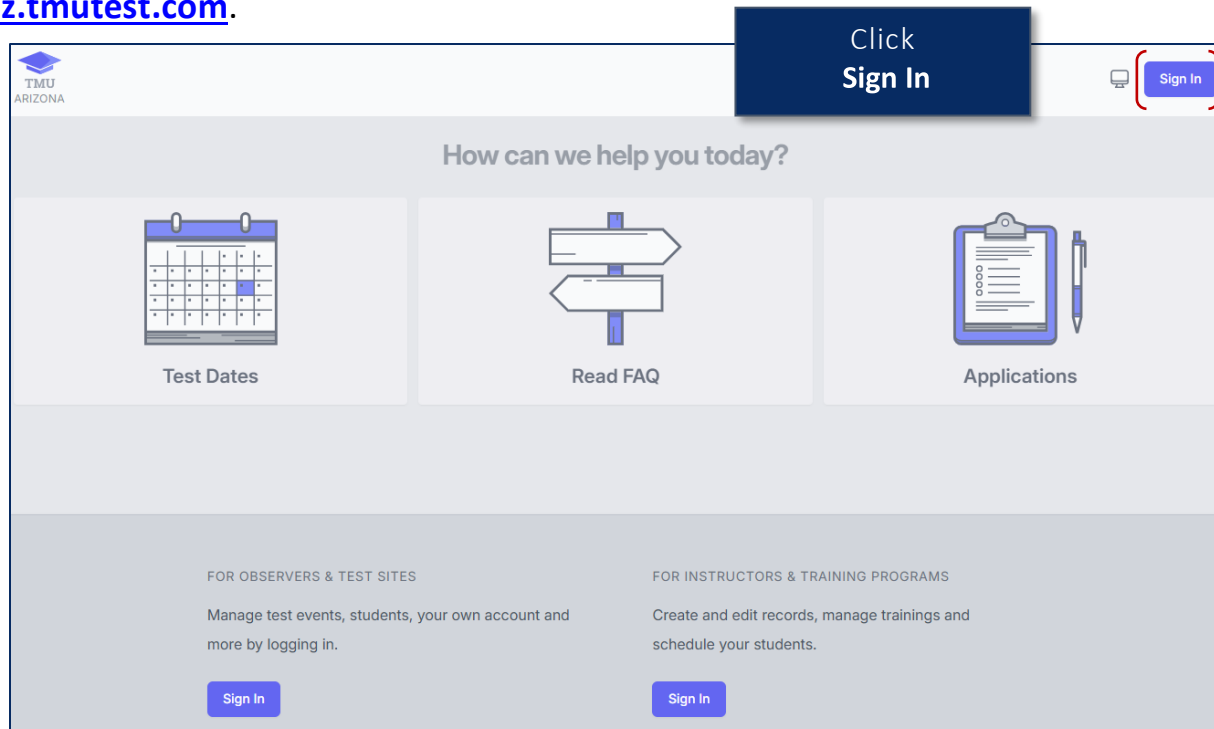
This is the candidate's home page:



## Forgot your Password and Recover your Account

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

Go to [az.tmutest.com](https://az.tmutest.com).





TMU ARIZONA

Sign In

USERNAME OR EMAIL

PASSWORD

☐ REMEMBER ME

Sign In

Click  
**Forgot Your Password?**

**Forgot Your Password?**

Type in your Email Address

Click **Recover Account**

- ◆ An email with the reset link will be sent 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** if you have already updated your demographic information in your account)

Click **Recover Account**

You will receive the message,  
**We have emailed your password reset link! Please allow a few minutes for the email to be delivered.**

Recover Your Account

Using your Email Address

E-MAIL ADDRESS \*

Recover Account

OR

Using other Information

LAST 4 OF SSN \*

DATE OF BIRTH \*

LAST NAME \*

ZIP CODE \*

Recover Account

### Recover Your Account

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

Using your Email Address

E-MAIL ADDRESS \*

Recover Account

OR

Using other Information

LAST 4 OF SSN \*

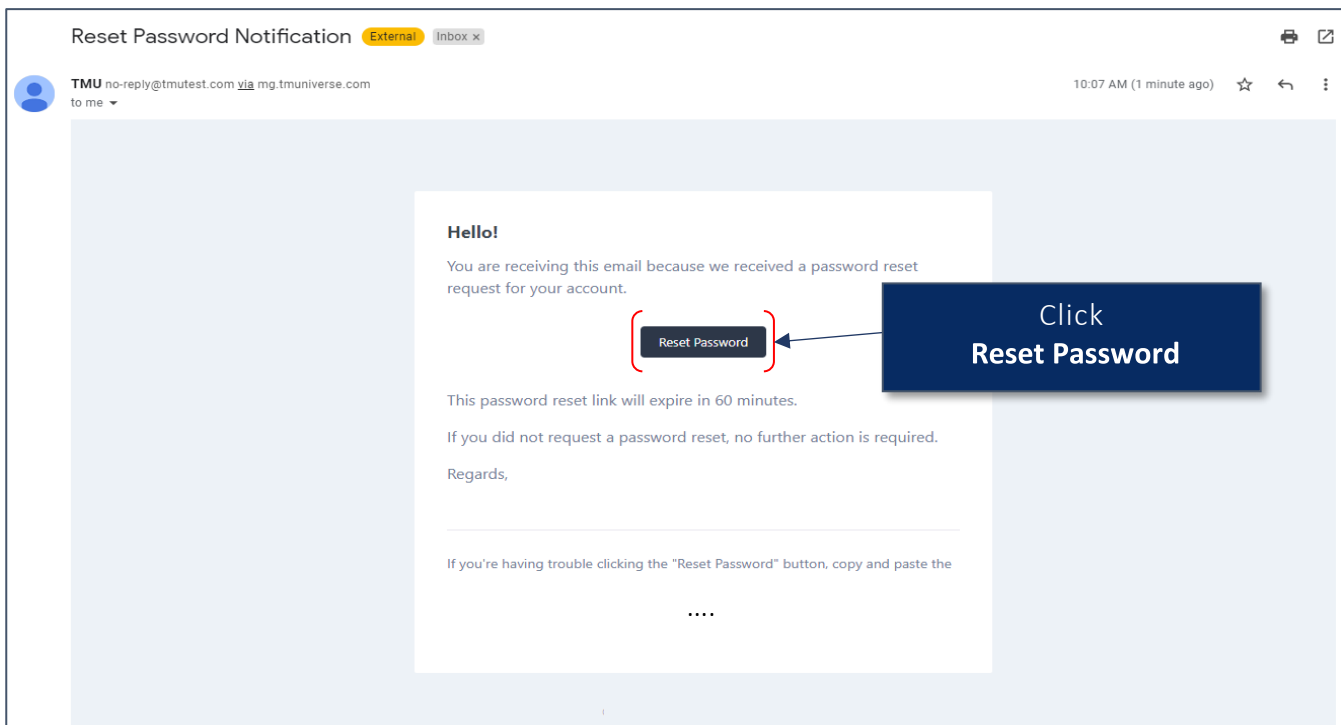
DATE OF BIRTH \*

LAST NAME \*

ZIP CODE \*

Recover Account

*This is what the email will look like (check your junk/spam folder for the email):*



**Note:** If you do not reset your password right away, the link will expire in 60 minutes, and you will need to request a new link after that time.

### Reset Your Password

E-MAIL ADDRESS


PASSWORD

CONFIRM PASSWORD

[Reset Password](#)

Type in your **Password** and **Confirm Password**, then click **Reset Password**

*This is the home screen you will see once you have reset your password:*



Tests

Trainings

Billing

Downloads

Profile

2

Logan

## Welcome, Logan!

Unread Notifications

You have currently have two unread notifications.

Show Notifications

Training History

View your training details and history

View Your Training History

Testing History

View your testing details and history

View Your Testing History

Your Profile

View and update your personal and login information

Manage Your Profile

Downloads

Download instructions, forms, and other documents

View Downloads

Billing

Manage your billing information

View Billing Details

## THE ARIZONA NURSE AIDE COMPETENCY EXAM

### Payment Information

Exam Description	Price
<b>Knowledge Exam</b> <i>-or- Knowledge Retake</i>	<b>\$35.00</b>
<b>Audio Version of the Knowledge Exam</b> <i>-or- Audio Knowledge Retake</i> [\$35 + \$10 = \$45] (The knowledge test questions and answers are read through the computer and listened to through headphones/earbuds while you read along.)	<b>\$45.00</b>
<b>Skills Test</b> <i>-or- Skills Retake</i>	<b>\$95.00</b>

### Schedule an Arizona Nurse Aide Exam

#### NURSE AIDE TRAINING PROGRAM CANDIDATES

To schedule an examination date, candidates must have successfully completed an Arizona Board of Nursing (AZBN) approved Nurse Aide (NA) training program or have an AZBN-approved NA Education Waiver. In addition, all Nurse Aide certification exam candidates must be registered with D&SDT-HEADMASTER by their training program, unless the AZBN grants a waiver. Your registration information will be transmitted to the AZBN upon passing both portions of the Nurse Aide competency exam.

Once your completed record is in the D&SDT-HEADMASTER TestMaster Universe© (TMU©) database, you may pay your testing fees and schedule your exam date online at the Arizona TMU© webpage at [az.tmutest.com](http://az.tmutest.com) using your email and password (see instructions under **Forgot your Password and Recover your Account**, **Self-Pay of Testing Fees**, and **Schedule/Reschedule a Test Event**). Securely processed Visa or MasterCard credit/debit card information is required when scheduling online. You can schedule and/or reschedule your test event up to the business day before your chosen test date, and receive your test confirmation notification online or on-screen while you are logged in. You may log in 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 Arizona TMU© webpage at [az.tmutest.com](http://az.tmutest.com) with your email and password.

If you cannot schedule/reschedule online, please call D&SDT-HEADMASTER at (800) 393-8664 during regular business hours, 6:00AM to 6:00PM, Mountain Time (MT), Monday through Friday, excluding Holidays, for assistance.

**Note:** Some training programs pre-pay testing fees for their graduating students. Your program/instructor will inform you if this is the case. Before scheduling a test, verify with your instructor whether the training program has already prepaid for it.

## EDUCATION WAIVERS FOR MILITARY, FOREIGN GRADUATE, OR NURSING STUDENTS

If you have an AZBN-approved Nurse Aide Education Waiver (military, foreign graduate, or nursing student), you will need to complete, upload your approved NA Education Waiver from AZBN, and submit the **Nurse Aide Education Waiver Application** found at [az.tmutest.com/apply/2](https://az.tmutest.com/apply/2).

Once D&SDT-HEADMASTER approves your application, you will receive an email and text message with your Username and Temporary Password to sign in to your TMU© account, pay your testing fees, and schedule a test event. Please follow the instructions in the **Complete your TMU© Account**, **Self-Pay of Testing Fees**, and **Schedule/Reschedule a Test Event** sections.

## Self-Pay of Testing Fees in TMU©

Testing fees must 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 notifying you that you are eligible to schedule a test date. Some training programs pre-pay testing fees for their graduating students. Your program/instructor will inform you if this is the case. Before scheduling a test, verify with your instructor whether the training program has already prepaid for it.

Securely processed Visa or MasterCard credit/debit card information is required to pay testing fees online.



EXAM	REASON
Medication Assistant Knowledge <span style="background-color: #f0f0f0;">Not Eligible</span>	Arizona Medication Assistant Training Training
<div style="border: 1px solid red; padding: 2px;">Arizona Certified Nurse Aide Knowledge <span style="background-color: #f0f0f0;">Not Eligible</span></div>	<div style="border: 1px solid red; border-radius: 50%; padding: 2px;">Payment Required</div>
Arizona Medication Assistant Skill <span style="background-color: #f0f0f0;">Not Eligible</span>	Arizona Medication Assistant Training Training
<div style="border: 1px solid red; padding: 2px;">Arizona Certified Nurse Aide Skill <span style="background-color: #f0f0f0;">Not Eligible</span></div>	<div style="border: 1px solid red; border-radius: 50%; padding: 2px;">Payment Required</div>

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 **Add Selected Items to Cart**

Add Selected Items to Cart

[Home](#) > [Cart](#)

**Cart**

{

Added Arizona Certified Nurse Aide Skill to your cart.  
 Added Arizona Certified Nurse Aide Knowledge to your cart.

x

DESCRIPTION	ITEM TYPE	AMOUNT	
Arizona Certified Nurse Aide for Sample Candidate	Knowledge	35.00	<div style="border: 1px solid #ccc; padding: 2px;">Remove</div>
Arizona Certified Nurse Aide for Sample Candidate	Skill	95.00	<div style="border: 1px solid #ccc; padding: 2px;">Remove</div>
<b>Total:</b>		<div style="border: 1px solid red; padding: 2px;"><b>\$ 130.00</b></div>	

Pay with Credit Card

[Home](#) > Prepay

### Prepay to Schedule

Enter the Credit Card information and then click **Submit Payment**.  
You will receive a receipt of the transaction.

What You're Paying For	
DESCRIPTION	COST
Arizona Certified Nurse Aide for Sample Candidate	35.00
Arizona Certified Nurse Aide for Sample Candidate	95.00
<b>Total:</b>	<b>\$ 130.00</b>

Pay with a Card

CARDHOLDER NAME  CARD NUMBER

EXP MONTH  EXP YEAR  SECURITY CODE

CARDHOLDER ADDRESS

CITY  STATE  ZIP CODE

Payment refunds may be subject to a processing fee per your state's refund policy

**Submit Payment**

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

*-continued on the next page-*

## SCHEDULE / RESCHEDULE A TEST EVENT

The dashboard shows a navigation bar with 'Tests' highlighted. A callout box points to the 'Tests' menu and the 'View Your Testing History' button in the 'Testing History' section.

**Welcome, Logan!**

**Unread Notifications**  
You have currently have two unread notifications. [Show Notifications](#)

**Training History**  
View your training details and history  
[View Your Training History](#)

**Testing History**  
View your testing details and history  
[View Your Testing History](#)

**Your Profile**  
View and update your personal and login information  
[Manage Your Profile](#)

**Downloads**  
Download instructions, forms, and other documents  
[View Downloads](#)

**Billing**  
Manage your billing information  
[View Billing Details](#)

Click **Tests**  
-or-  
**View Your Testing History**

The 'Scheduling' table lists test events. The 'Eligible' status is highlighted in green. A callout box explains that all eligible test events will appear in this format and that the 'Schedule' button should be clicked to the right of the test component.

EXAM	REASON
Medication Assistant Knowledge <b>Not Eligible</b>	Arizona Medication Assistant Training Training
Arizona Certified Nurse Aide Knowledge <b>Eligible</b>	
Arizona Medication Assistant Skill <b>Not Eligible</b>	Arizona Medication Assistant Training Training
Arizona Certified Nurse Aide Skill <b>Eligible</b>	

**Schedule**

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

To select a test component (knowledge or skills) click **Schedule** to the right of the test component you want to schedule.

The 'Find Event' screen shows a table of available test events. A callout box explains that this is the next screen showing available events and that the 'Schedule' button should be clicked to the right of the site and date.

[Home](#) > [Tests](#) > Find Event

**Find Event ARIZONA NURSE AIDE**

TEST DATE	TEST SITE	SCHEDULING FOR
01/24/2024 8:00 AM MST	PRACTICE TEST SITE (TS) PHOENIX, AZ	K Arizona Certified Nurse Aide S Arizona Certified Nurse Aide

**Schedule**

This is the next screen that opens showing you available events. Click **Schedule** to the right of the site and date you want to test.

### az.tmutest.com says

Schedule into this Event on 01/24/2024 for Arizona Certified Nurse Aide Knowledge, Arizona Certified Nurse Aide Skill . Are you sure?

**OK** **Cancel**

To confirm this is the site and date you want to schedule, click **OK**

Home > Tests

**Your Tests**

Student CANDIDATE, SAMPLE scheduled into Skill for Certified Nurse Aide.  
 Student CANDIDATE, SAMPLE scheduled into Knowledge for Certified Nurse Aide.

Scheduling		
Exam	Status	Reason
Certified Nurse Aide Knowledge	Not Eligible	Already Scheduled
Certified Nurse Aide Skill	Not Eligible	Already Scheduled

Testing History				
Test Date	Exam	Test Site	Status	Actions
01/24/2024 8:00 AM MST	Arizona Certified Nurse Aide Knowledge	PRACTICE TEST SITE (TS) PHOENIX, AZ	Scheduled	Actions ▾
01/24/2024 8:00 AM MST	Arizona Certified Nurse Aide Skill	PRACTICE TEST SITE (TS) PHOENIX, AZ	Scheduled	Actions ▾

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

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

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

*See the test confirmation page on the next page.*

**Test Confirmation Page**

**Reschedule**

**Get Map**

## RESCHEDULE A TEST EVENT SCREENSHOTS

You may reschedule an exam date online in your TMU© account at [az.tmutest.com](https://az.tmutest.com) up until one (1) business day, excluding Saturdays, Sundays, and Holidays, before your scheduled exam date.

If you need to reschedule your test date, click **Reschedule** under **Actions** to select a new date.

az.tmutest.com says

**Reschedule this Knowledge Exam? Are you sure?**

OK
Cancel

## 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 refer you to read the Arizona candidate handbook, as it will give you specific instructions on what time to arrive, ID requirements, dress code, etc.

**Note:** Failure to read the candidate handbook could result in a no-show status for your test event if you do not adhere to the testing policies, etc.

***It is important you read this letter!***

Test Confirmation Letter

Scheduled Test Confirmation - Arizona Arizona Certified Nurse Aide

[Get Map](#) [Print Page](#)

Test Date:	02/07/2026
Test Time:	9:30 AM MST
Test Exam:	Knowledge - Arizona Certified Nurse Aide
Test Site:	PRACTICE TEST SITE (TS) 625 BARNEY STREET PHOENIX, AZ 59602

Click **Print Page** to print your confirmation letter.

Click **Get Map** to get Google Maps directions to the test site.

**SAMPLE TEST CANDIDATE**  
3310 MCHUGH LANE  
MESA, AZ 85202

TESTING BEGINS AT **9:30 AM MST** ON **02/07/2026**:

- You **MUST** be at your confirmed test site waiting area/room **20 minutes in advance** of your scheduled exam start time, **9:30 AM MST**, to check in.
  - Testing **begins** promptly at the start time noted on this test confirmation.
- If you are unable to access your account, go to <https://az.tmutest.com>, click on 'Forgot Password', enter your Email, then click on 'Send Reset Password Link' and follow the directions. If you need further assistance, please call D&SDT-Headmaster at 1.800.393.8664.

**NURSE AIDE CANDIDATES:** Refer to the **Nurse Aide Competency Exam** section of the **Arizona Nurse Aide Candidate Handbook** regarding requirements for testing and what to expect on your test day. Failure to do so may result in you being turned away from testing and forfeiting your testing fees. Review this specific information prior to your testing date.

[Click to open the Nurse Aide Candidate Handbook](#)

**MEDICATION ASSISTANT CANDIDATES:** Refer to the **Medication Assistant Competency Exam** section of the **Arizona Medication Assistant Candidate Handbook** regarding requirements for testing and what to expect on your test day. Failure to do so may result in you being turned away from testing and forfeiting your testing fees. Review this specific information before your testing date.

[Click to open the Medication Assistant Candidate Handbook](#)

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

## View your Notifications in TMU©

Remember to check your 'notifications' in your TMU© account for important notices regarding your selected test events and other information.

See the screenshots that follow on the next page.

Any unread notifications will appear in the box below.  
Click on- **Show Notifications** to open your notifications.

Welcome, Logan!

**Unread Notifications**  
You have currently have two unread notifications.

Show Notifications

**Training History**  
View your training details and history  
View Your Training History

**Testing History**  
View your testing details and history  
View Your Testing History

**Your Profile**  
View and update your personal and login information  
Manage Your Profile

**Downloads**  
Download instructions, forms, and other documents  
View Downloads

**Billing**  
Manage your billing information  
View Billing Details

Home > Inbox

Your Notifications

Mark Unread Mark as Read Send to Trash Clear All Notifications

<input type="checkbox"/>	TITLE	SENT	MESSAGE	<input type="button" value="View"/>
<input type="checkbox"/>	Test Results Available	5 days ago	Your knowledge test results are available	<input type="button" value="View"/>
<input type="checkbox"/>	Scheduled Into Event	6 days ago	You were scheduled into a Test Event	<input type="button" value="View"/>

Click on- **VIEW** to open each of your notifications.

Notification example when scheduled into a test event:

Home > Inbox > View Notification

**Scheduled Into Event** 23 minutes ago

You have been scheduled for Skill Exam **Arizona Certified Nurse Aide** beginning **01/24/2024 8:00 AM MST** at Test Site **PRACTICE TEST SITE (TS)**

← Back to All Messages Send to Trash Mark as Unread

## Time Frame for Testing from Training Program Completion

You will be scheduled to take your initial knowledge and skill tests on the same day. You must schedule a test **within two years of your training program's completion date**. After two years, you must complete another AZBN-approved training program 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 inform you if this is the case. Before 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 Arizona TMU© site.

If you have any questions regarding your test scheduling, call D&SDT-HEADMASTER at (800) 393-8664 during regular business hours, 6:00AM to 6:00PM MT, Monday through Friday, excluding Holidays.

---

## Test Day

### EXAM CHECK-IN

You **must** arrive at your confirmed test site's waiting area/room **20 minutes before** your scheduled exam start time.

- Testing **begins** promptly at the start time noted on your test confirmation.
- You need to ensure you are at the event in the waiting area/room **20 minutes before the start time** to allow time to get checked in with the RN Test Observer.
  - *For example*, if your test starts at 8:00AM, you **must** be at the test site waiting area/room for check-in by 7:40AM.

**Note:** If you arrive late, you will not be permitted to take the test.

---

## TESTING ATTIRE

The required testing attire applies to both the knowledge and skills exams.

- You must be in full clinical attire:
  - This consists of a scrub top and scrub bottoms.
  - Closed-toed shoes.
  - Scrubs and shoes can be any color/design.
- You may bring a standard watch with a second hand.
- Smartwatches, smart glasses, fitness monitors, or Bluetooth-connected devices are not allowed.
- Long hair must be pulled back.

**NOTE:** You must be dressed in professional nursing attire at the discretion of the RN Test Observer.

You will not be admitted for testing if you are not wearing professional nursing (scrubs) attire and closed-toed shoes. You will be considered a no-show status. You will forfeit your testing fees and must pay for another exam date.

## IDENTIFICATION

---

You must bring a **U.S. GOVERNMENT-ISSUED, PHOTO-BEARING FORM OF IDENTIFICATION**.

Only original forms of identification are allowed. Photocopies, faxes, emails, screenshots, and electronic or digitally stored identification documents (e.g., Apple Wallet or Google Wallet) **will not be accepted**.

Examples of the forms of U.S. government-issued, acceptable photo IDs are:

- **State-issued Driver's License** (*Arizona Driver's License must be issued after [January 1, 1997](#)*)
  - You may use the letter issued by 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** (*Arizona Driver's License must be issued after [January 1, 1997](#)*)
- **U.S. Passport** (Foreign Passports and Passport Cards are not acceptable)
  - \* *Exception: A foreign passport with a U.S. visa within the passport is acceptable.*
- **Permanent Resident Card** (Green Card or Alien Registration Card) / Employment-Work Authorization Card issued by the U.S. Citizenship and Immigration Services (USCIS)
  - \* *The new redesigned permanent resident card ISSUED from January 30, 2023, to the present day is acceptable. The old card, issued before January 1, 2023, is acceptable as long as it has not expired.*
- **Tribal Identification Card** (*must contain a photo and be issued by a [federally recognized](#) Tribal Nation/Indian Tribe*)

The **FIRST** and **LAST** names **listed on your identification presented** to the RN Test Observer during check-in at your test event **MUST EXACTLY MATCH** the FIRST and LAST names entered in your TMU© account. You may call D&SDT-HEADMASTER at (800) 393-8664 during regular business hours, 6:00AM to 6:00PM MT, Monday through Friday, excluding holidays, to confirm that your name of record matches your U.S. government-issued photo-bearing form of identification, or sign in to your TMU© account to check or change your demographic information. See more information under [Demographic Updates / Changes / Corrections](#).

### Note:

- **You will not be admitted for testing if you do not bring proper/valid identification.**
  - Check to ensure that the FIRST and LAST printed names on your identification card match the current name on record in your TMU© account.
- A driver's license or state-issued ID card with a hole punched in it is NOT VALID and will not be accepted as an acceptable form of ID.
- A school ID **is not** an acceptable form of ID.
- In cases where names do not match, your ID is not proper/valid, or it has a hole punched in it, this is considered a no-show status, 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 the skills lab. Please keep your ID with you throughout the exam.

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## DEMOGRAPHIC UPDATES / CHANGES / CORRECTIONS

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Name changes (marriage/divorce, etc.), date-of-birth changes, Social Security number corrections, etc., must be verified with appropriate documentation. Please complete the [DEMOGRAPHIC CHANGE/CORRECTION REQUEST FORM](#) and upload your demographic change/correction documentation. The form is under 'APPLICATIONS' on the Arizona TMU© main web page (before you log in to your account), or click on this link: <https://az.tmutest.com/apply/7>.

## Instructions for the Knowledge and Skill Exams

Test instructions for the knowledge and skill exams will be provided in written format in the waiting area when you check in for your test.

These instructions outline the process and what to expect during your exams. Please read the instructions **before** entering the knowledge test room or skill demonstration lab. The instructions will be left in the waiting area during testing for your reference throughout your time at the test site. The RN Observer or Knowledge Test Proctor will ask questions about the instructions you read when entering the knowledge test room and skill test lab.

The **Knowledge and Skill Exam Instructions** are available under the '**DOWNLOADS**' tab in your TMU© account. For instructions, refer to the [Access the Candidate Handbook and Testing Instructions](#) section of this handbook.

## Testing Policies

The following policies are observed at each test site:

- Communication between the candidate and the testing team must be in English.
- Make sure you have signed in to your TMU© account at [az.tmutest.com](http://az.tmutest.com) well before your test date to update your password and complete your demographic information. Refer to this handbook's [Complete Your TMU© Account](#) section for instructions and information.
  - **If you have not signed in and completed/updated your TMU© account when you arrive for your test, you may not be admitted to the exam, and any exam fees paid will NOT be refunded.**
- Testing begins promptly at the start time noted on your confirmation. You **must** be in the test site waiting area/room **to check in 20 minutes before your scheduled start time**. If your test start time is 8:00AM, you must be in the test site waiting area/room **by 7:40AM**. If you arrive late to your confirmed exam, you will not be admitted. Any exam fees paid *will NOT be refunded*.
- If you do not bring a valid and appropriate U.S. government-issued 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** printed names listed on your ID presented to the RN Test Observer during check-in at your test event **DO NOT MATCH** the FIRST and LAST names that were entered in the Arizona nurse aide TMU© database, you will not be admitted to the exam, and any exam fees paid *will NOT be refunded*.
- If you do not wear professional nursing clinical attire and closed-toed shoes and conform to all testing policies for both the knowledge (including retakes) and skills portion of the exam, you will not be admitted to the exam, and any exam fees paid *will NOT be refunded*.
- If you do not show up for your exam day, or are considered a NO-SHOW STATUS (*see details in this handbook's [No-Show Status](#) section*) for any reason, any test fees paid will NOT be refunded. You must repay your testing fees online in your TMU© account using your Email or Username and Password to schedule another exam date.
  - If your exam is paid for by a U.S. government-funded facility, you (the candidate) will be charged a NO SHOW fee, which must be paid before you can schedule a new test date.
- **ELECTRONIC DEVICES AND PERSONAL ITEMS:** Cell phones, smartwatches, fitness monitors, electronic recording devices, Bluetooth-connected devices (including smart glasses), and personal items (such as water bottles, purses, briefcases, large bags, study materials, extra books, or papers) are not permitted to

be on or near you in either testing room. The testing team will inform you of the designated area for placing your personal items and electronic devices, and you will collect them when you complete your test(s).

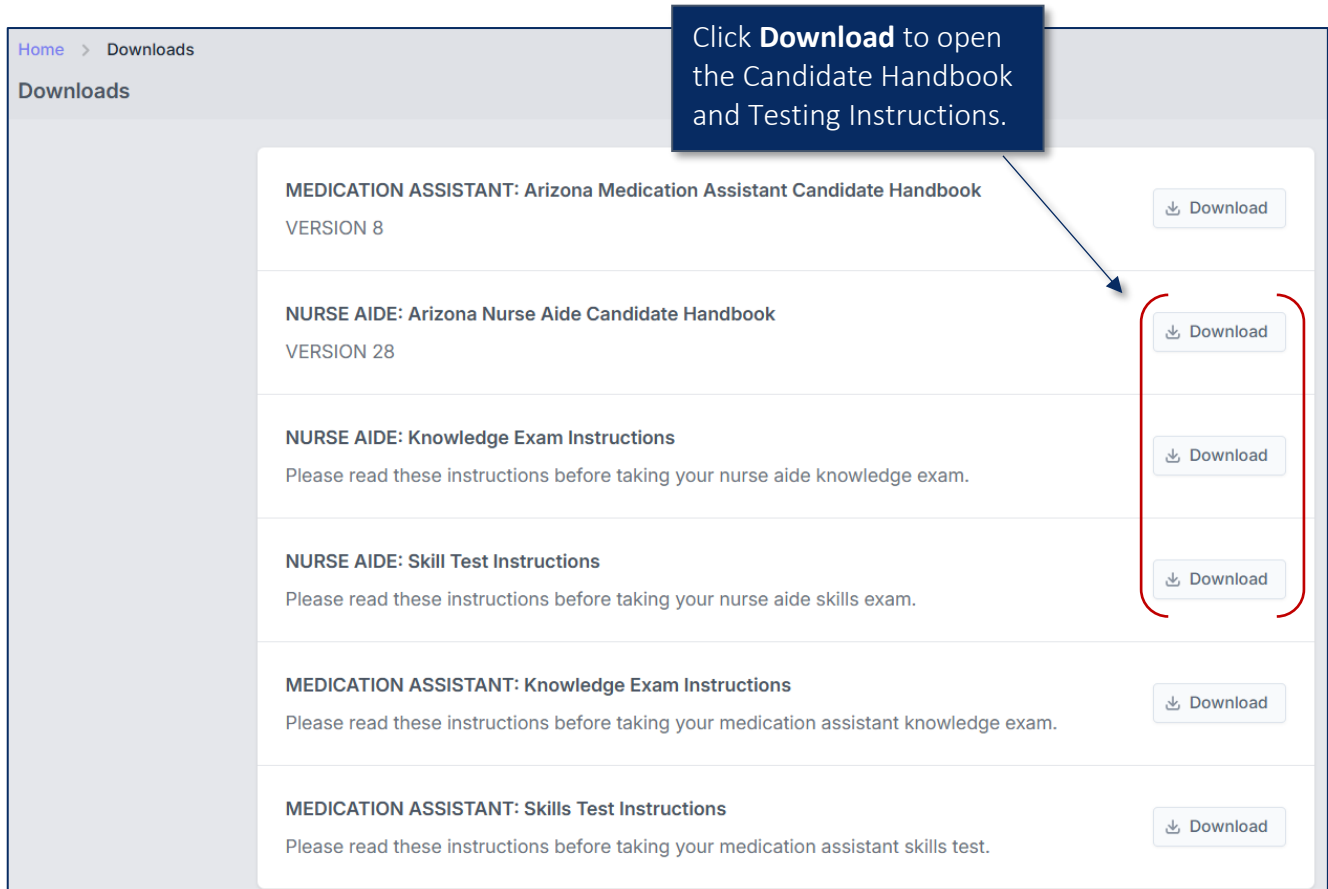
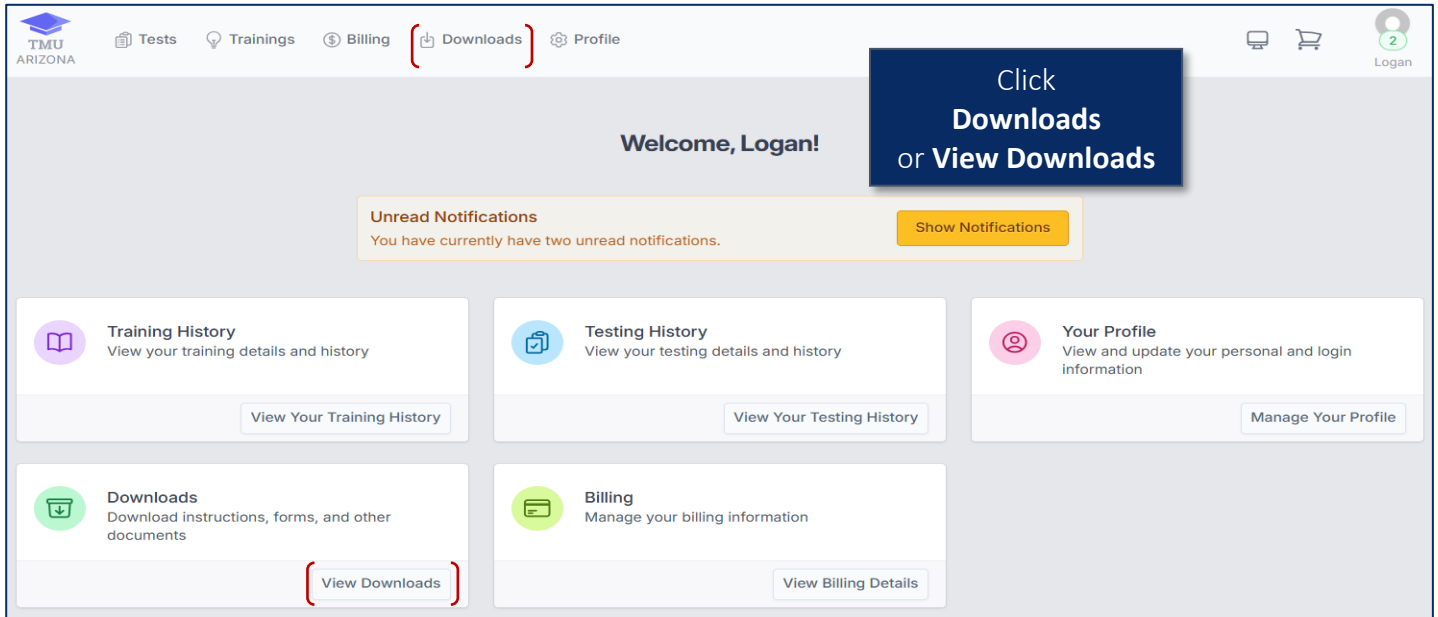
- All electronic devices must be **turned off**, including smartwatches, smart glasses, fitness monitors, and Bluetooth-connected devices (including smart glasses), which must be removed from your wrist or body. If the RN Test Observer or Knowledge Test Proctor has any inclination that you are wearing Bluetooth-connected smart glasses, you will be asked to show the glasses to them for examination.
- Anyone caught using any electronic recording device during either component (knowledge or skills) of the exam will be dismissed from the exam and testing room(s), your test will be scored as a failed attempt, you will forfeit all testing fees, and you will be reported to the Arizona State Board of Nursing (AZBN). You may, however, use personal devices in the waiting area during your free time. Please refer to the **Security** section of this handbook for detailed information.
- You are encouraged to bring a jacket, snack, drink, or study material while waiting to test.
- **LANGUAGE TRANSLATION DICTIONARIES:** Per the Arizona State Board of Nursing, translation dictionaries (either paper format or electronic), translating devices, or non-approved language translators **are not allowed**.
- **SCRATCH PAPER AND CALCULATORS:** If needed, you may do math calculations on scratch paper or with the basic calculator provided by the KTP.
- You may not remove any notes or other materials from the testing room.
- You are not permitted to eat, drink, or smoke (e-cigarettes or vape) during the exam.
- You are not allowed to leave the testing room (knowledge test room or skills lab) once the exam has begun ***for any reason***. If you do leave during your test event, you will not be allowed back into the testing room to finish your exam.
- Behavioral misconduct or unlawful acts by test candidates are strictly prohibited at any stage of the competency evaluation. Such actions may result in dismissal from the test site, denial of testing privileges, and reporting to your training program and the Arizona State Board of Nursing (AZBN). Please refer to the **Security** section of this handbook for detailed information.
- Test sites, RN Test Observers, Knowledge Test Proctors, and Actors are not responsible for the candidate's personal belongings at the test site.
- No visitors, guests, pets (including companion and emotional support animals), or children are allowed.
  - Service animals (a dog that has been individually trained to perform specific tasks for people with disabilities) are allowed. We encourage you to contact D&SDT-HEADMASTER at (800) 393-8664 or via email at [arizona@hdmaster.com](mailto:arizona@hdmaster.com) once you have scheduled a test date, so that we can notify the testing team.
  - If you attend your event with guests, pets (including companion or emotional support animals), or children of any age, you will not be permitted to test and will forfeit all testing fees paid.
- **You may not test if you are ill (sick).** Call D&SDT-HEADMASTER at (800) 393-8664 immediately to reschedule (see the ***note*** below).
  - **You may not test** if you have any physical limitation (excluding pre-arranged ADAs) that would prevent you from performing your duties as a nurse aide. (Examples: cast, arm/leg braces, crutches, etc.) Call D&SDT-HEADMASTER at (800) 393-8664 immediately to reschedule if you are on doctor's orders (see the ***note*** below).

**NOTE:** Please refer to the handbook's **Reschedule Policy** and **No-Show Exceptions** sections.

→ Reschedules will not be granted less than one (1) full business day before a scheduled test date.

- **Please review this Arizona Nurse Aide Candidate Handbook before your test day for any testing and/or policy updates.**
- The Candidate Handbook and testing instructions can also be accessed within your TMU© account under your 'DOWNLOADS' tab.

## ACCESS THE CANDIDATE HANDBOOK AND TESTING INSTRUCTIONS





## Security

Behavioral misconduct or unlawful acts by test candidates are strictly prohibited at any stage of the competency evaluation. Such actions may result in dismissal from the test site, denial of testing privileges, and reporting to your training program and the Arizona State Board of Nursing (AZBN).

You will be asked to leave the test site, your test will be stopped and scored as a failed attempt, and you will forfeit any testing fees if you, which may include, but are not limited to, the following circumstances:

- Are caught cheating
- Refuse to follow directions
- Use abusive language or threaten others
- Disrupt the examination environment
- Are visibly impaired
- Engage in unprofessional or aggressive behavior
- Attempt to remove test material, take notes, or copy information
- Give or receive unauthorized help during testing, including using electronic devices (e.g., cell phones, smartwatches) or navigating to other browsers during your exam

A report of your behavior will be sent to your training program and AZBN, and you are subject to legal prosecution to the fullest extent of the law. You may not be eligible to retake the test for at least 6 months and may require AZBN approval.

## Reschedule Policy

All candidates may reschedule online at no cost at [az.tmutest.com](http://az.tmutest.com) up to one (1) business day before the scheduled test date, excluding Saturdays, Sundays, and holidays.

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 TMU© account at [az.tmutest.com](http://az.tmutest.com). (See instructions under [Schedule / Reschedule a Test Event](#)).

- ❖ **Example:** If you are scheduled to take your exam on a Saturday, Sunday, or Monday, you would need to reschedule by the close of business on the Thursday before your scheduled exam. D&SDT-HEADMASTER is open 6:00AM to 6:00PM MT, Monday through Friday, excluding holidays.
- ❖ Please see the [Reschedule a Test Event Screenshots](#) for a visual of rescheduling an exam date.

The scheduled test date is on a:	Reschedule before 6:00PM MT 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

**Note:** Reschedules will not be granted fewer than one full business day before the 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 indicates you are not interested in taking the Arizona Nurse Aide Certification Exam.

### SCHEDULED IN A TEST EVENT

- 1) If you are scheduled for a test event, you can request a refund of the testing fees paid by filling out and submitting the [\*\*CANDIDATE-Refund Request Fillable Form\*\*](#) on D&SDT-HEADMASTER's [\*\*Arizona web page\*\*](#) at least one (1) full business day before 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 the close of business on the Thursday before your scheduled exam. D&SDT-HEADMASTER is open until 6:00PM MT, Monday through Friday, excluding holidays.
- 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 the original testing fees with HEADMASTER. Requests for refunds submitted more than 30 days after the original payment of testing fees with HEADMASTER will not be approved.

### NOT SCHEDULED IN A TEST EVENT

- 1) Refund requests must be made within thirty (30) days of the original payment of testing fees with HEADMASTER. Requests for refunds submitted more than 30 days after the original payment of testing fees with HEADMASTER will not be approved.
- 2) To request a refund for testing fees paid, you must fill out and submit the [\*\*CANDIDATE-Refund Request Fillable Form\*\*](#) on D&SDT-HEADMASTER's [\*\*Arizona web page\*\*](#). 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.

## Unforeseen Circumstances Policy

If an exam date is canceled due to weather or other unforeseen circumstances, D&SDT-HEADMASTER staff will make every effort to contact you using the contact information (phone number/email) we have on file in your TMU© account to reschedule you for no charge to a mutually agreed-upon new test date.

Therefore, you must keep your contact information up to date in case we need to contact you (*\*see examples below for reasons we may not be able to contact you that you are responsible for*).

If D&SDT-HEADMASTER is unable to reach you via phone call or email with the information in your TMU© account (*\*see examples below*) due to an unforeseen circumstance for a test event you are scheduled for, you will be removed from the test event, and D&SDT-HEADMASTER will not reschedule you until we hear back from you.

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

- If D&SDT-HEADMASTER leaves you a message or emails you at the phone number or email in your TMU© account and:
  - you do not call us back in a timely manner
  - your phone number is disconnected/your voice mailbox is full
  - you do not check your messages in a timely manner
  - you do not check your email or reply to our email in a timely manner
  - your email is invalid, or you are unable to access your email for any reason

See more information under **No-Show Exceptions**.

## No-Show Status

If you are scheduled for your exam and do not show up without notifying D&SDT-HEADMASTER at least one (1) full business day before your scheduled testing event, **excluding** Saturdays, Sundays, and holidays, OR if you are turned away for lack of proper identification, not arriving on time to the test site or any other reason to deem you ineligible to test, you will be considered a **NO-SHOW status**. You will forfeit all fees paid and must sign in to your TMU© account to repay or submit a new testing fee to schedule a new test event.

These fees partially offset D&SDT-HEADMASTER's costs incurred for services requested and the resulting work that is performed. If a reschedule or refund request is not made or received before the one (1) full business day preceding a scheduled test event, excluding Saturdays, Sundays, and holidays (see examples under Reschedule a Test Event and Refund of Testing Fees Paid), a NO-SHOW status will exist. 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, provided **the required documentation is received within the appropriate time frames outlined below**:

⇒ Complete, upload the required documentation, and submit (within the required time frames outlined below) the **No Show Exception Form** available on the Arizona TMU© main page under 'APPLICATIONS', or click this link:

**<https://az.tmutest.com/apply/12>**

- **Car breakdown or accident**: D&SDT-HEADMASTER must be contacted via phone call, fax, or email within one business day. A tow bill, police report, or other appropriate documentation showing your name and the provider of the service name must be submitted within **three (3) business days** of the exam date. If we do not receive proof within 3 business days, your no-show status will stand, and you will be required to repay your testing fee.
- **Weather or road condition-related issue**: D&SDT-HEADMASTER must be contacted via phone call, fax, or email within one business day. 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 3 business days, your no-show status will stand, and you will be required to repay your testing fee.

- **Medical emergency or illness:** D&SDT-HEADMASTER must be contacted via phone, fax, or email within one business day. A doctor's note showing your name and the provider of the service name, or on the provider's letterhead, must be submitted within **three (3) business days** of the missed exam date. If we do not receive proof within 3 business days, your no-show status will stand, and you will be required to repay your testing fee.
- **Death in the family:** D&SDT-HEADMASTER must be contacted via phone call, fax, or email within one business day. An immediate family obituary or letter on your behalf from the funeral home showing your name must only be submitted within **seven (7) business days** from a missed exam date. If we do not receive proof within 7 business days, your no-show status will stand, and you will be required to repay your testing fee. (The immediate family includes the parent, grandparent, great-grandparent, sibling, children, spouse, or significant other.)
- **Remotely proctored testing issues:** D&SDT-HEADMASTER must be contacted via phone, fax, or email within one business day. Appropriate documentation showing your name and the provider of the service name must be submitted within **three (3) business days** of the exam date. If we do not receive proof within 3 business days, your no-show status will stand, and you will be required to repay your testing fee.
  - **Internet outage or issue:** Documentation showing your name and the Internet provider showing outage date and times.
  - **Computer or cell phone issue:** If the computer or cell phone fails to work, documentation from a computer repair technician/shop or other appropriate documentation showing your name and the provider of the service is required.

## Candidate Feedback – Exit Survey

Candidates can complete an exit survey via a link when checking their test results in their TMU© account. The survey is confidential and will not affect the outcome of any test. You are encouraged to complete the survey with honest feedback on the examination process to help improve testing.

## Test Results

After you have completed both the Knowledge Exam and Skill Test components of the competency exam, your test results will be officially scored and double-checked by D&SDT-HEADMASTER scoring teams. Official test results will be available after 6:00PM (MT) on the business day after your test event by signing in to your TMU© account. D&SDT-HEADMASTER cannot release test results over the phone.

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

Sign in to your TMU© account at [az.tmutest.com](https://az.tmutest.com) to view your test results. The screenshots on the following pages show an example of test results.

Tests
Trainings
Billing
Downloads
Profile

2
Logan

Click Tests or View Your Testing History

Welcome, Logan!

**Unread Notifications**  
 You have currently have two unread notifications.
 Show Notifications

**Training History**  
 View your training details and history
 View Your Training History

**Testing History**  
 View your testing details and history
 View Your Testing History

**Your Profile**  
 View and update your personal and login information
 Manage Your Profile

**Downloads**  
 Download instructions, forms, and other documents
 View Downloads

**Billing**  
 Manage your billing information
 View Billing Details

Home > Test History

Your Tests

**Scheduling**

Exam	Status	Reason	
Medication Assistant Knowledge	Not Eligible	Missing required Training Arizona Medication Assistant Training	
Arizona Certified Nurse Aide Knowledge	Not Eligible	Payment Required	<a href="#">View Available Test Dates</a>
Arizona Medication Assistant Skill	Not Eligible	Missing required Training Arizona Medication Assistant Training	
Arizona Certified Nurse Aide Skill	Not Eligible	Payment Required	<a href="#">View Available Test Dates</a>

Add Selected Items to Cart

**Pretest Scheduling**

Pretest	
Medication Aide Training Pretest Skill	Eligible

Begin Test

**Testing History**

Please take our satisfaction survey

Test Date	Exam	Test Site	Status	Actions
12/06/2025 1:00 PM MST	Arizona Certified Nurse Aide Knowledge	VALLEY ACADEMY FOR CAREER & TECH EDUC.- V'ACTE (TS) COTTONWOOD, AZ	Failed	<div> <span>Details</span> <span>Print Test Results</span> </div>
12/06/2025 1:00 PM MST	Arizona Certified Nurse Aide Skill	VALLEY ACADEMY FOR CAREER & TECH EDUC.- V'ACTE (TS) COTTONWOOD, AZ	Failed	<div> <span>Details</span> <span>Print Test Results</span> </div>

## Knowledge and Skills Test Results Example:

← Back
Print

**HEADMASTER, LLP**  
 P.O. BOX 6609, HELENA, MT 59604-6609  
 800-393-8664 — FAX: 406-442-3357 WWW.HDMASTER.COM

### ARIZONA ARIZONA CERTIFIED NURSE AIDE EXAM RESULTS REPORT

**IMPORTANT TEST RESULTS**

TEST DATE: Saturday, December 6, 2025

Dear JOSE,

You have **failed** the knowledge portion of the Arizona Certified Nurse Aide exam.

Your overall knowledge test score is 64.00%.

You must have an overall score of 75% or better to pass.

You have **failed** the skill portion of the Arizona Certified Nurse Aide exam.

You must correctly perform all of the **key steps** and **80%** of all non-key steps on each assigned task to pass the skill test.

A passing score **does not** imply certification. You must verify on the registry.

Any weaknesses indicated in your test results are listed below:

**Knowledge Exam Results By Subject Area**

Basic Nursing Skills	44%
Care Impaired	100%
Communication	86%
Data Collection	67%
Disease Process	75%
Infection Control	63%
Mental Health	75%
Aging Process and Restorative Care	25%
Personal Care	44%
Resident's Rights	67%
Role and Responsibility	71%
Safety	71%

**Manual Skill Task(s) Failed:** Ambulating Resident with a Walker using a Gait Belt

**Vocabulary words to study:** bathing, gerontology, integumentary system, tachycardia, gloves, infection control, pulse oximetry, delegation, restraints, disease, documentation, assistive device, pronation, infection control, sundowning, aspiration, validation therapy, mouth care, positioning, quality of life, resident rights, anti-embolic / elastic stockings / TED hose, communication, death and dying, falls, vomitus, reminiscing, bed cradle

**Skill Exam Incomplete Steps**

**Perineal Care for a Female Resident W/ Hand Washing**

Raises the bed to a comfortable working...

Uses a clean portion of the washcloth fo...

Uses a clean portion of the washcloth fo...

Uses a clean portion of the washcloth fo...

Uses a clean portion of the washcloth fo...

Uses a clean portion of the washcloth fo...

Uses a clean portion of the washcloth fo...

**Ambulating Resident with a Walker using a Gait Belt**

Performs hand hygiene. (Covers all surfa...

Locks bed brakes.

## Test Attempts

You have **unlimited attempts** to pass the exam's knowledge and skill test portions **within two (2) years from your nurse aide training program completion date**. If you do not complete testing within two years of completing training, you must complete a new AZBN-approved training program to become eligible to further attempt the Arizona nurse aide examinations.

- An attempt means checking in for the competency evaluation, entering the knowledge test area, receiving instructions from the KTP or the skills test area, and receiving instructions from the RN Test Observer, including the skills to be performed. If a candidate declines to begin the test after instructions have been provided, the attempt will be scored as failed.

Per the Arizona Board of Nursing, any candidate who fails their knowledge exam for the third time or any subsequent knowledge exam **will be required to wait 45 days before scheduling a retest**. This does not apply to failed attempts on the manual skill test.

## Retaking the Nurse Aide Exam

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 pay 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© account with your Email or Username and Password at [az.tmutest.com](http://az.tmutest.com). (See instructions with screenshots under **Schedule / Reschedule a Test Event**.)

You will need to pay with a Visa or Master Card before you can schedule.

If you need assistance scheduling your re-test, please call D&SDT-HEADMASTER at (800) 393-8664 during regular business hours, 6:00AM to 6:00PM MT, Monday through Friday, excluding holidays. We can assist you in scheduling a test or retest date, provided your fees have been paid.

## Test Review Requests

You may request a review of your test results or dispute any other testing condition. The purpose of this review process is to ensure fairness and accuracy in the evaluation of your test.

**\*PLEASE READ BEFORE FILLING OUT THE TEST REVIEW REQUEST:** Please call D&SDT-HEADMASTER at (800) 393-8664 during regular business hours, Monday through Friday, 6:00AM to 6:00PM MT, excluding holidays, and discuss the test outcome you are questioning before committing to sending the \$25 test review request deposit fee. Once you have further details about the scoring of your test, you will often understand the scoring process and learn how to 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.

**There is a \$25 non-refundable test review deposit fee.** To request a review, complete the [Test Review Request and Payment Application](#), available on the Arizona TMU© main page (before you log in to your account) at [az.tmutest.com](http://az.tmutest.com). Test Review Requests must be received **within three (3) business days from the official scoring of your test** (excluding Saturdays, Sundays, and holidays). Late requests will be denied and will not be considered.

Since one qualification for certification as a nurse aide in Arizona is demonstrated by examination of minimum nurse aide knowledge and skills, the likely outcome of your review will determine who pays for any re-tests that may be granted. If, after investigation, the review finding is in your favor, you will be refunded the \$25 test review

deposit. If the findings of the review are *not in your favor*, the \$25 test review deposit will stand, and the fee is non-refundable.

D&SDT-HEADMASTER will review your detailed recollection, your knowledge test markings, and any skill task measurements you recorded at the time of your test, in addition to reviewing markings, notations, and measurements recorded by the RN Test Observer at the time of your test. We will interview the RN Test Observer, Actor, or Knowledge Test Proctor about the facts detailed in your dispute documentation. D&SDT-HEADMASTER will re-check the scoring of your test and may contact you and/or the RN Test Observer, Actor, and/or Knowledge Test Proctor, and other candidates who were on-site at your test event for any additional information about the test event.

D&SDT-HEADMASTER cannot review test results or reviews with the candidate's instructor/training program. After a candidate turns 18, D&SDT-HEADMASTER will discuss test results or test reviews only with the candidate. D&SDT-HEADMASTER will not review test results or reviews with family members or anyone else on the candidate's behalf once the candidate is 18.

D&SDT-HEADMASTER will complete your review request within ten (10) business days of receiving it in a timely manner. D&SDT-HEADMASTER will email the review results to your email address and the Arizona State Board of Nursing (AZBN).

## APPLY FOR AN ARIZONA LICENSE OR CERTIFICATE

After you have successfully passed both the knowledge and skill test components of the nurse aide exam, your test results will be sent electronically to the Arizona Board of Nursing by D&SDT-HEADMASTER.

You will be certified by the Board only after you complete the AZBN (CNA or LNA – please refer to **Certified Nurse Aide/Licensed Nurse Aide** section) application process online, which includes uploading your citizenship documents (proof of legal residence) and completion of training certificate from your training program, and meet all Board requirements (see the additional requirements needed to apply for LNA licensure at the AZBN website).

For information on completing your online application for certification with the Arizona State Board of Nursing, go to AZBN's website at [www.azbn.gov](http://www.azbn.gov) and click on 'Apply for an Arizona License or Certificate'.

## THE KNOWLEDGE/AUDIO EXAM

### Knowledge Exam Content

The Knowledge Test consists of 75 multiple-choice questions. Questions are selected from subject areas aligned with the Arizona State Board of Nursing-approved Arizona test plan and include all required categories defined in federal regulations.

The subject areas are as follows on the next page.



## SUBJECT AREAS

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

## Knowledge Exam Information

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

The Knowledge Test Proctor will hand out materials, if needed, and provide instructions for taking the Knowledge Exam. You will have **sixty (60) minutes to complete the 75-question exam**. The multiple-choice questions will be presented to you, one at a time, on the computer screen to select answers A, B, C, or D. You can navigate through the exam questions with the previous and next buttons. You will be told when fifteen (15) minutes remain. You may not ask questions about the content of the Knowledge Exam, such as “What does this question mean?”

**You must have a score of 75% or better to pass the knowledge portion of the exam.**

All test sites in Arizona utilize electronic TMU© testing using Internet-connected computers. The knowledge exam portion of your exam will be displayed on a computer screen for you to read and to type or click your answers.

**NOTE: You will need your TMU© Username or Email and Password to sign in to your knowledge exam.** Please see the information under **Complete your TMU© Account** to sign in to your TMU© account.

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

### TRANSLATION DICTIONARIES

Per the Arizona State Board of Nursing, translation dictionaries (either paper format or electronic), translating devices, or non-approved language translators **are not allowed**.

### SCRATCH PAPER AND CALCULATOR

If needed, you may do math calculations on the scratch paper provided by the KTP. If you need a calculator, please quietly alert the Knowledge Test Proctor; one will be provided.

- Any scratch paper and/or provided calculator must be left with the KTP when testing is done.

When you leave the testing room, you must leave all test materials in it. Anyone who takes or tries to take materials, notes, or information from the room is subject to prosecution and will be reported to the Arizona State Board of Nursing (AZBN).



## KNOWLEDGE EXAM SUBJECT AREA DEFINITIONS

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**Aging Process and Restorative Care:** Questions concerning the process and progression of humans becoming what they will be as they move along the timeline of their lives, and the maintenance of physical, mental, and psychosocial function.

**Basic Nursing Skills:** Questions concerning any act or activity that would be considered a basic skill necessary to perform the job of a CNA.

**Care Impaired:** Questions concerning dealing with residents who are physically or mentally limited from receiving “standard” care. CNAs must perform more extensively or differently to accommodate these residents.

**Communication:** Questions concerning any type of communication, verbal and nonverbal, written, spoken, or any communication related to hearing, seeing, feeling, tasting, or smelling.

**Data Collection:** Questions concerning data acquisition, handling, and routing.

**Disease Process:** Questions concerning the stages of diseases and/or the theory of diseases, and the detection, prevention, or treatment of diseases.

**Infection Control:** Questions concerning the nature of infections, infection causes and prevention, and correct methods and procedures for dealing with infections.

**Mental Health:** Questions concerning the mental processes of residents, the signs and stages of mental states of residents, both normal and care impaired, or the mental well-being and interaction of the CNA and their co-workers.

**Personal Care:** Questions concerning activities or acts performed by the CNA for or to residents that are personal in nature.

**Resident Rights:** Questions concerning the rights to which the residents are legally entitled and the facility and CNA’s role in ensuring those rights.

**Role and Responsibility:** Questions concerning any act or activity that would be considered part of the basic role of the CNA in the workplace or a basic responsibility of a CNA in the workplace.

**Safety:** Questions concerning the safety of residents, CNAs, facility safety issues, and the safety of facility personnel in general.

## Knowledge Exam Audio Version

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An audio (oral) version of the knowledge exam is available. However, there is an additional \$10 charge for the audio version (\$45 total), and you must request the audio version ***before submitting your testing fee payment.***

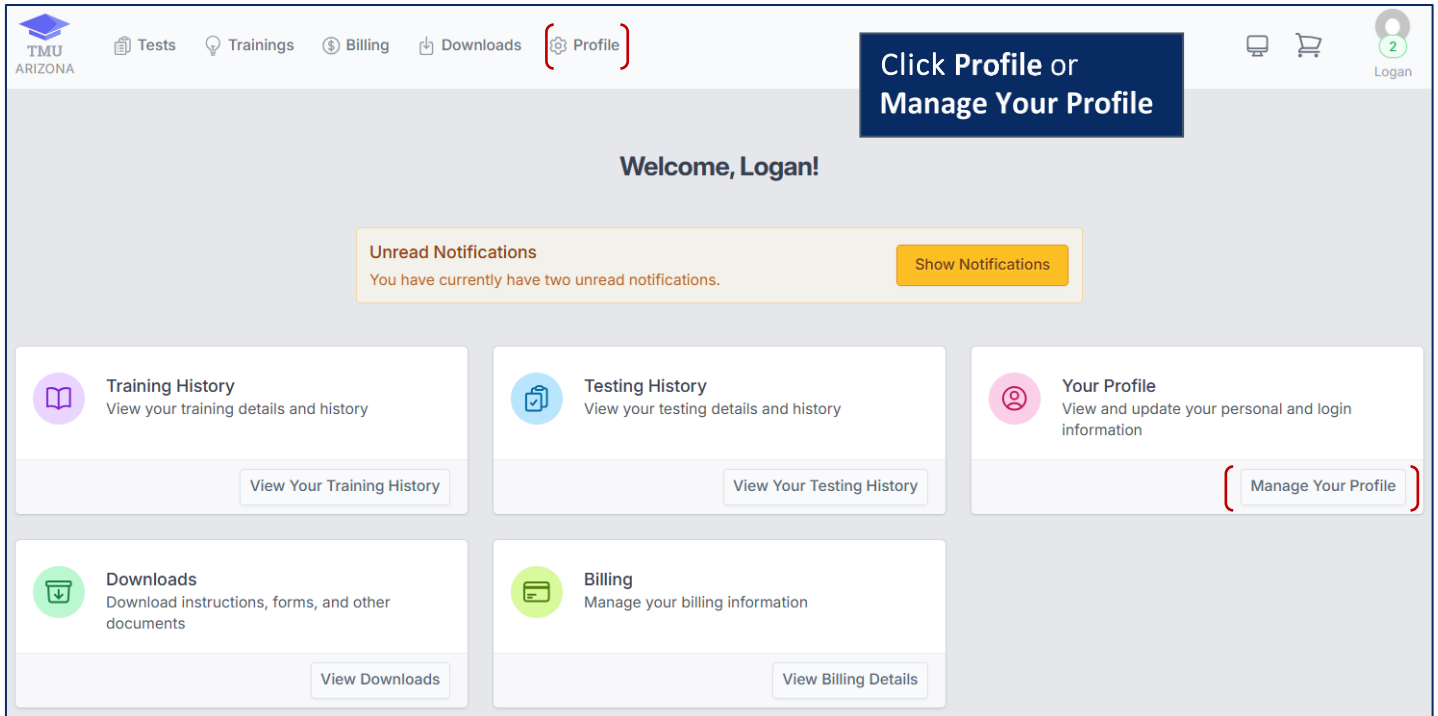
**NOTE:** Only the first 63 questions will be read orally on the Audio Knowledge Exam. To assess English reading comprehension, the remaining 12 questions must be answered without oral assistance.

→ EXCEPTION: All questions will be read orally if the candidate has an approved ADA.

## SELECTING AN AUDIO VERSION OF THE KNOWLEDGE EXAM

To select the Audio version of the knowledge exam, follow the instructions with the screenshots below.

Under your *PROFILE*, check the **‘Enable Audio Testing’** to receive an Audio version of the Knowledge Exam:



Notifications ☒ RECEIVE TEXT MESSAGE NOTIFICATIONS (requires valid phone number)

Testing Preferences ☒ ENABLE AUDIO TESTING

Address \*  3359 Queen City Ave

CITY  STATE

Photo  No file chosen

Timezone

Theme

Remember to check the **‘Enable Audio Testing’** **BEFORE YOU SCHEDULE** your knowledge exam.

To choose the knowledge exam's audio option, click on the box to the left of Enable Audio Testing.

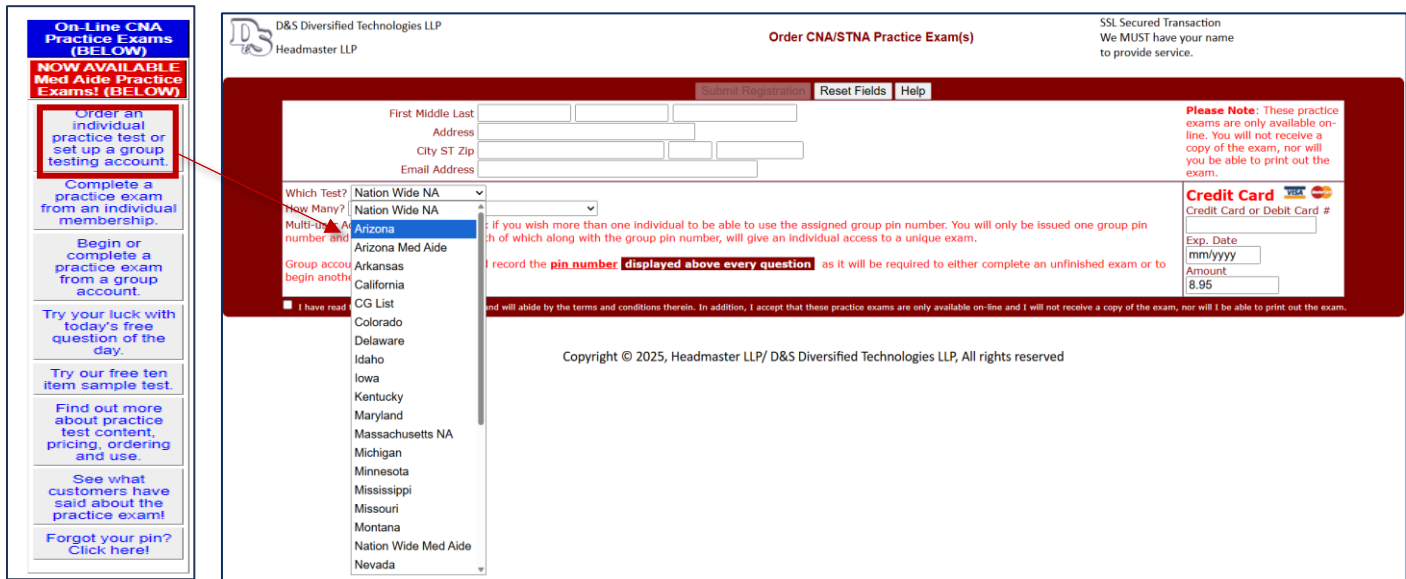
Then click **Save Changes** at the bottom of the screen to save.

The questions are read to you in a neutral tone and can be heard through wired headphones or earbuds plugged into the computer. **Bluetooth-connected devices (which also include smart glasses) are not allowed.** When taking an electronic Audio exam, the audio control buttons will appear on the computer screen, allowing you to play, rewind, or pause the audio as needed.

## Knowledge Practice Test

D&SDT-HEADMASTER offers a free knowledge test question of the day and a ten-question online static practice test available on our website at [www.hdmaster.com](http://www.hdmaster.com). Candidates may purchase randomly generated, complete practice tests aligned with the state test plan. A mastery-learning method is employed, and each practice test will be unique. This means that candidates must answer the question they are attempting correctly before proceeding to 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.

**NOTE:** Make sure you select **ARIZONA** from the drop-down list.



The screenshot shows the 'Order CNA/STNA Practice Exam(s)' page. On the left, a sidebar lists options: 'On-Line CNA Practice Exams (BELOW)', 'NOW AVAILABLE Med Aide Practice Exams! (BELOW)', 'Order an individual practice test or set up a group testing account.', 'Complete a practice exam from an individual membership.', 'Begin or complete a practice exam from a group account.', 'Try your luck with today's free question of the day.', 'Try our free ten item sample test.', 'Find out more about practice test content, pricing, ordering and use.', 'See what customers have said about the practice exam!', and 'Forgot your pin? Click here!'. The main form area has a red header with the company logo and name. It includes fields for 'First Middle Last', 'Address', 'City ST Zip', and 'Email Address'. A 'Which Test?' dropdown menu is set to 'Nation Wide NA', and a 'How Many?' dropdown is set to 'Nation Wide NA'. A state selection dropdown menu is open, showing a list of states with 'Arizona' highlighted. Below this, there is a 'Group account begin another' checkbox and a 'CG List' section. A 'Please Note' box states: 'These practice exams are only available on-line. You will not receive a copy of the exam, nor will you be able to print out the exam.' A 'Credit Card' section includes fields for 'Credit Card or Debit Card #', 'Exp. Date', 'Amount', and '8.95'. At the bottom, there is a copyright notice: 'Copyright © 2025, Headmaster LLP/ D&S Diversified Technologies LLP, All rights reserved'.

The following is a sample of the kinds of questions that you will find on the Knowledge/Audio exam:

**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's 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 DEMONSTRATION SKILL TEST

- The purpose of the Skill Test is to evaluate your performance when demonstrating AZBN-approved nurse aide skill tasks. You will find a complete list of skill tasks in this handbook.
- You will be asked to present your ID, which you showed the RN Test Observer at check-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 three (3) or four (4) tasks will have scenarios associated with them. The scenarios will be read to you by the RN Test Observer immediately before you are asked to do each task.
- You will be allowed **thirty-five (35) minutes** to complete your three or four tasks. After twenty (20) minutes have elapsed, you will be alerted when 15 minutes remain.
- Listen carefully to all instructions given by the RN Test Observer. You may request to have any of the scenarios repeated **at any time** during your Skill Test up until you run out of time or tell the RN Test Observer that you are finished with your skill task demonstrations.
- You must correctly perform all of the **key** steps (in **bold** font) and 80% of all non-key steps on each task assigned to pass the Skill Test. Steps marked with an \* are weighted more than steps without an \* when your percentage score is calculated.
- 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 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 35 minutes or until you tell the RN Test Observer you are finished with the Skill Test.
- At any time during any task, you may direct the RN Test Observer to move anywhere needed to assist in providing safety for the resident.
- 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 or simulated WILL NOT COUNT.**

## Skill Test Recording Form

If your skill test includes a skill task that requires recording a count or measurement, the RN test observer will provide a recording form similar to the one displayed. You are required to sign the recording form during the demonstration of the equipment/supplies.

### Recording Form →

Candidate's Name: _____ PLEASE PRINT	
PULSE: _____ beats	RESPIRATIONS: _____ breaths
BLOOD PRESSURE: _____ mmHG / _____ mmHG	
URINARY OUTPUT: _____ ml	
GLASS 1: _____	
GLASS 2: _____	
TOTAL FLUID INTAKE: _____ ml	FOOD INTAKE: _____ %
Candidate's Signature: _____	

## Skill Test Tasks

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

- Catheter Care for a Female Resident, Empty a Urinary Drainage Bag, Measure and Record Output with Hand Washing [DEMONSTRATED ON A MANIKIN]
- Don an Isolation Gown and Gloves, Assist Resident with a Bedpan, Measure and Record Output, Doff the Gown and Gloves with Hand Washing
- Perineal Care for a Female Resident with Hand Washing [DEMONSTRATED ON A MANIKIN]
- Perineal Care for a Male Resident and Changing a Soiled Brief with Hand Washing [DEMONSTRATED ON A MANIKIN]

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

You will also receive an additional two (2) or three (3) randomly selected tasks from the Skill Task listing below. These selected tasks will make up your personalized and unique skill test. Each skill test randomly assigned by the TMU© skill test assignment algorithm will be comparable in overall difficulty.

## Skill Tasks Listing

To receive credit, you must actually perform and demonstrate every step during your skill test demonstration.

The steps listed for each task are required for a nurse aide candidate to successfully demonstrate minimum proficiency in the skill task for the RN Test Observer. **The steps will be performed on a live resident actor for all but three tasks: catheter care and perineal care tasks will be performed on a manikin.** You will be scored only on the steps listed.

You must score **80%** on each task **without missing key steps (bolded)** to pass the skill component of your competency evaluation.

If you fail the Skill Test, there will always be one of the first mandatory tasks to start each Skill Test. The other tasks in your Skill Test are randomly selected to ensure each Skill Test is comparable in difficulty and has an average

completion time. The RN Test Observer will observe your demonstrations of your skill tasks and record what they see you do. D&SDT-HEADMASTER scoring teams will officially score and double-check your test.

**Note:** The skill task steps included in this handbook are offered as guidelines to help prepare candidates for the Arizona 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.

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## MANDATORY TASKS

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### CATHETER CARE FOR A FEMALE RESIDENT, EMPTY A URINARY DRAINAGE BAG, MEASURE AND RECORD OUTPUT WITH HAND WASHING

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*(One of the possible mandatory first tasks)* [DEMONSTRATED ON A MANIKIN]

- 1) Greet the resident by name.
- 2) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 3) Introduce yourself by name.
- 4) Explain the procedure to the resident/manikin.
- 5) Provide privacy for the resident; pull the privacy curtain.
- 6) Put on gloves.
- 7) Lift the resident's gown to expose the catheter area.
- 8) Check that urine can flow unrestricted into the drainage bag.
  - a. *It would be helpful to verbalize checking while looking for kinks in tubing, etc.*
- 9) Use a washcloth with soap and water to carefully wash around the catheter where it exits the urethra.
- 10) Hold the catheter where it exits the urethra with one hand.**
- 11) While holding the catheter with fingers where it exits the urethra, clean 3-4 inches down the catheter tube.
- 12) Clean with stroke(s) only away from the urethra.**
- 13) Use a clean portion of a washcloth for any strokes.
- 14) Rinse using stroke(s) only away from the urethra.
- 15) Rinse using a clean portion of a washcloth for any strokes.
- 16) Pat dry.
- 17) Do not allow the tubing to be pulled at any time during the procedure.
- 18) Replace the top cover over the resident (manikin).
- 19) Leave the resident in a position of comfort.
- 20) Place a barrier on the floor under the drainage bag.
- 21) Place the graduate on the previously placed barrier.
- 22) Open the drain to allow the urine to flow into the graduate.
- 23) Completely empty drainage bag.
- 24) Avoid touching the graduate with any part of the tubing.
- 25) Close the drain.
- 26) Wipe the drain with an alcohol wipe AFTER emptying the drainage bag.
- 27) Replace the drain in the holder.
- 28) Place the graduate on a level, flat surface.
- 29) With the graduate at eye level, read the output.

- 30) Empty, rinse, and dry (with a clean, dry paper towel) the equipment and return to storage.
- 31) Record output on the previously signed recording form.
- 32) The candidate's measured output reading is within 30 mL of the RN Test Observer's output reading.**
- 33) Remove gloves, turning them inside out, and dispose of them in the designated container (trash can).
- 34) Wash hands: Begin by wetting your hands.
- 35) Apply soap to hands.
- 36) Rub hands together using friction with soap.
- 37) Rub hands together for at least twenty seconds with soap.
- 38) Interlace fingers pointing downward with soap.
- 39) Lather all surfaces of hands with soap.
- 40) Lather wrists with soap.
- 41) Rinse hands thoroughly under running water with fingers pointed downward.
- 42) Dry hands with a clean paper towel(s).
- 43) Turn off the faucet with a clean, dry paper towel.
- 44) Discard paper towels in a trash container.
- 45) Do not re-contaminate hands at any point by touching the faucet or sink during/after the procedure.
- 46) Place the call light or signaling device and water within easy reach of the resident.
- 47) Maintain respectful, courteous interpersonal interactions at all times.

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## **DON AN ISOLATION GOWN & GLOVES, ASSIST RESIDENT WITH A BEDPAN, MEASURE AND RECORD OUTPUT, REMOVE GOWN & GLOVES 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 your hands together until they are completely dry.
- 2) Face the back opening of the gown.
- 3) Unfold the gown.
- 4) Place arms through each sleeve.
- 5) Fasten the neck opening.
- 6) Fasten the waist.
- 7) Make sure the back flaps cover clothing as completely as possible.
- 8) Put on gloves.
- 9) Gloves overlap sleeves at the wrist.
- 10) Greet the resident by name.
- 11) Introduce yourself by name.
- 12) Explain the procedure to the resident.
- 13) Provide privacy for the resident; pull the privacy curtain.
- 14) Position the resident on the *fracture pan* correctly using correct body mechanics. *(Only using a fracture pan in this task.)*
- 15) Raise the head of the bed to a comfortable level.
- 16) Place the call light and tissue within easy reach of the resident.
- 17) Step away to a private area of the room away from the resident.
- 18) When signaled by the RN Test Observer, the candidate returns.
- 19) Obtain a wet washcloth with soap.
- 20) Provide the washcloth with soap for the resident to wash their hands.

- 21) Provide a wet washcloth for the resident to rinse their hands.
- 22) Provide a towel or dry washcloth for the resident to dry their hands.
- 23) Lower the head of the bed.
- 24) Place soiled linen in a designated laundry hamper.
- 25) Gently remove the fracture pan and hold it while the RN Test Observer adds a known quantity of fluid.
- 26) Measure the output.
- 27) Empty, rinse, and dry the equipment (with a clean, dry paper towel), and return to storage.
- 28) Record the output on the previously signed recording form.
- 29) The candidate's recorded output is within 30 mL of the RN Test Observer's recorded output.**
- 30) Place the call light or signaling device and water within easy reach of the resident.
- 31) Maintain respectful, courteous interpersonal interactions at all times.
- 32) Remove gloves, turning them inside out.
- 33) Remove gloves BEFORE removing the gown.**
- 34) Dispose of the gloves in the designated container (trash can).
- 35) Unfasten the gown at the waist.
- 36) Unfasten the gown at the neck.
- 37) Remove the gown by slipping your hands underneath the gown at the neck and shoulder, and always fold/roll soiled area to soiled area.
- 38) Dispose of the gown in the designated container.
- 39) Wash hands: Begin by wetting your hands.
- 40) Apply soap to hands.
- 41) Rub hands together using friction with soap.
- 42) Rub hands together for at least twenty seconds with soap.
- 43) Interlace fingers pointing downward with soap.
- 44) Lather all surfaces of hands with soap.
- 45) Lather wrists with soap.
- 46) Rinse hands thoroughly under running water with fingers pointed downward.
- 47) Dry hands with a clean paper towel(s).
- 48) Turn off the faucet with a clean, dry paper towel.
- 49) Discard paper towels in a trash container.
- 50) Do not re-contaminate hands at any point by touching the faucet or sink during/after the procedure.

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## PERINEAL CARE FOR A FEMALE RESIDENT WITH HAND WASHING

---

*(One of the possible mandatory first tasks)* [DEMONSTRATED ON A MANIKIN]

- 1) Greet the resident by name.
- 2) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 3) Introduce yourself by name.
- 4) Explain the procedure to the resident (manikin).
- 5) Provide privacy for the resident; pull the privacy curtain.**
- 6) Remove covers from the resident.
- 7) Fill a basin with comfortably warm water.
- 8) Raise the bed to a comfortable working height.
- 9) Direct the RN Test Observer to stand on the opposite side of the bed to provide for safety. (\*)



- 10) Turn the resident toward the RN Test Observer or raise the resident's hips and place a waterproof pad under the buttocks.
- 11) Put on gloves.
- 12) Lift the resident's gown to expose the perineum only.
- 13) Separate labia. (*Candidate must also verbalize separating.*)
- 14) Use water and a soapy washcloth.
- 15) Clean one side of the labia from top to bottom. (\*)
- 16) Using a clean portion of the washcloth, clean the other side of the labia from top to bottom.
- 17) Using a clean portion of the washcloth, clean the vaginal area from top to bottom.
- 18) Using a clean washcloth, rinse one side of the labia from top to bottom.
- 19) Using a clean portion of the washcloth, rinse the other side of the labia from top to bottom.
- 20) Using a clean portion of the washcloth, rinse the vaginal area from top to bottom.
- 21) Dry the area.
- 22) Cover the exposed area with the resident's gown.
- 23) Assist the resident in turning onto their side away from the candidate.
- 24) With a clean washcloth, water, and soap, clean the rectal area.
- 25) Clean the area from the vagina to the rectal area. (\*)
- 26) Use a clean portion of the washcloth with any stroke.
- 27) Using a clean portion of the washcloth, rinse the rectal area from the vagina to the rectal area.
- 28) Uses a clean portion of the washcloth with any stroke.
- 29) Dry area.
- 30) Turn the resident toward the RN Test Observer or raise their hips and remove the waterproof pad from under their buttocks.
- 31) Position the resident (manikin) on their back.
- 32) Place soiled linen in a designated laundry hamper.
- 33) Lower bed.
- 34) Empty, rinse, and dry (with a clean, dry paper towel) the equipment and return to storage.
- 35) Remove gloves, turning them inside out, and dispose of them in the designated container (trash can).
- 36) Wash Hands: Begin by wetting your hands.
- 37) Apply soap to hands.
- 38) Rub hands together using friction for at least 20 seconds with soap.
- 39) Interlace fingers pointing downward with soap.
- 40) Lather all surfaces of hands and wrists with soap.
- 41) Rinse hands thoroughly under running water with fingers pointed downward.
- 42) Dry hands with a clean paper towel(s).
- 43) Turn off the faucet with a clean, dry paper towel(s).
- 44) Discard paper towels in a trash container.
- 45) Do not re-contaminate hands at any point by touching the faucet or sink during/after the procedure.
- 46) Place the call light or signaling device and water within easy reach of the resident.
- 47) Maintain respectful, courteous interpersonal interactions at all times.

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## PERINEAL CARE FOR A MALE RESIDENT AND CHANGING THEIR SOILED BRIEF WITH HAND WASHING

---

*(One of the possible mandatory first tasks)* [DEMONSTRATED ON A MANIKIN]

- 1) Greet the resident by name.
- 2) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 2) Introduce yourself by name.
- 3) Explain the procedure to the resident (manikin).
- 4) Provide privacy for the resident; pull the privacy curtain.**
- 5) Remove covers from the resident.
- 6) Obtain a new brief.
- 7) Mark the date and time on the brief.
- 8) Initial brief.
- 9) Fill a basin with comfortably warm water.
- 10) Raise the bed to a comfortable working height.
- 11) Direct the RN Test Observer to stand on the opposite side of the bed to provide for safety.
- 12) Put on gloves.
- 13) Turn the resident toward the RN Test Observer or raise the resident's hips and place a waterproof pad under their buttocks.
- 14) Lift the resident's gown to expose the perineum only.
- 15) Remove the soiled brief from front to back.
- 16) Dispose of the soiled brief by placing it into a plastic bag – tie/seal the bag and place it in the trash.
- 17) Gently grasp the penis.
- 18) Use water and a soapy washcloth.
- 19) Using a clean portion of the washcloth, clean the tip of the penis, starting at the urethral opening, working away with a circular motion.
- 20) Using a clean portion of the washcloth for each stroke, clean the shaft of the penis from the urethra to the base of the shaft.
- 21) Using a clean portion of the washcloth, clean the scrotum.
- 22) Using a clean washcloth, rinse.
- 23) Using a clean portion of the washcloth for each stroke, rinse the penis.
- 24) Using a clean portion of the washcloth with each stroke, rinse the scrotum.
- 25) Dry area.
- 26) Cover the exposed area with the resident's gown.
- 27) Assist the resident in turning onto their side away from the candidate.
- 28) Use a clean washcloth with water and soap to clean the rectal area.
- 29) Using a clean portion of the washcloth for each stroke, clean the area from the scrotum to the rectal area.
- 30) Using a clean portion of the washcloth for each stroke, rinse the area from the scrotum to the rectal area.
- 31) Dry the area.
- 32) Turn the resident toward the RN Test Observer or raise the resident's hips and remove the waterproof pad from under their buttocks.
- 33) Position the resident (manikin) on their back.
- 34) Correctly apply the brief.
- 35) Place soiled linen in a designated laundry hamper.
- 36) Lower bed.

- 37) Empty, rinse, and dry (with a clean, dry paper towel) the equipment and return to storage.
- 38) Remove gloves, turning them inside out, and dispose of them in the designated container (trash can).
- 39) Wash Hands: Begin by wetting your hands.
- 40) Apply soap to hands.
- 41) Rub hands together using friction for at least 20 seconds with soap.
- 42) Interlace fingers pointing downward with soap.
- 43) Lather all surfaces of hands and wrists with soap.
- 44) Rinse hands thoroughly under running water with fingers pointed downward.
- 45) Dry hands with a clean paper towel(s).
- 46) Turn off the faucet with a clean, dry paper towel.
- 47) Discard paper towels in a trash container.
- 48) Do not re-contaminate hands at any point by touching the faucet or sink during/after the procedure.
- 49) Place the call light or signaling device and water within easy reach of the resident.
- 50) Maintain respectful, courteous interpersonal interactions at all times.

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## OTHER TASKS

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### AMBULATING RESIDENT WITH A WALKER USING A GAIT BELT

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- 1) Greet the resident by name.
- 2) Perform hand hygiene
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 3) Introduce yourself by name.
- 4) Explain the procedure to the resident.
- 5) Lock the bed brakes to ensure the resident's safety.**
- 6) Lock the wheelchair brakes to ensure the resident's safety.**
- 7) Bring the resident to a sitting position.
- 8) Place a gait belt around the resident, below the rib cage and above the waist, to stabilize the trunk.
- 9) Tighten the gait belt so your fingers can be comfortably slipped between the gait belt and the resident.
- 10) Assist the resident in putting on non-skid slippers/shoes. (No non-skid socks.)
- 11) Ensure feet are flat on the floor. *(If needed, may assist the resident to scoot to the edge of the bed.)*
- 12) Position the walker in front of the resident.
- 13) Assist the resident in standing and ensure that the resident has a stabilized walker.
- 14) Position yourself behind and slightly to the side of the resident.
- 15) Ambulate the resident at least 10 steps to a wheelchair.
- 16) Assist the resident in turning and sitting in the wheelchair, using correct body mechanics.
- 17) Remove the gait belt.
- 18) Perform hand hygiene
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 19) Place the resident within easy reach of the call light or signaling device and water.
- 20) Maintain respectful, courteous interpersonal interactions at all times.

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## APPLY THE RESIDENT'S ANTI-EMBOLIC STOCKING TO ONE LEG

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- 1) Greet the resident by name.
- 2) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 3) Introduce yourself by name.
- 4) Explain the procedure to the resident.
- 5) Provide for the resident's privacy by only exposing one leg.
- 6) Gather or turn the stocking down inside out to the heel.
- 7) Place the stocking over the toes, foot, and heel, and roll OR pull up the leg.
- 8) Check toes for possible pressure from the stocking and adjust as needed. (\*)
- 9) Leave the resident with a stocking that is smooth and wrinkle-free. (\*)
- 10) Leave the resident with a stocking that is properly placed without restriction.**
- 11) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 12) Place the call light or signaling device and water within easy reach of the resident.
- 13) Maintain respectful, courteous interpersonal interactions at all times.

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## BED BATH FOR RESIDENT- FACE AND ONE ARM, HAND AND AXILLA

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- 1) Greet the resident by name.
- 2) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 3) Introduce yourself by name.
- 4) Explain the procedure to the resident.
- 5) Provide privacy for the resident; pull the privacy curtain.
- 6) Raise the bed to a comfortable working height.
- 7) Prepare the resident for a complete bath, even though you will demonstrate a partial bath.
- 8) Cover the resident with a bath blanket.
- 9) Remove the top bed linens to the foot of the bed.
- 10) Remove the resident's gown without exposing the resident.
- 11) Fill a basin with comfortably warm water.
- 12) Wash and dry the resident's face WITHOUT SOAP.
- 13) Use a clean portion of the washcloth and wipe the resident's eyes gently from inner to outer using a clean portion of the washcloth with each stroke.
- 14) Place a towel under the resident's arm; only expose one arm.
- 15) Wash arm, hand, and axilla using soap and water.
- 16) Rinse arm, hand, and axilla.
- 17) Dry arm, hand, and axilla.
- 18) Assist the resident in putting on a clean gown.
- 19) Lower bed.
- 20) Empty, rinse, and dry (with a clean, dry paper towel) the equipment and return to storage.
- 21) Place soiled linen in a designated laundry hamper.

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

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## **DENTURE CARE – CLEANING UPPER OR LOWER DENTURE**

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(ONLY ONE PLATE IS USED FOR TESTING)

- 1) Greet the resident by name.
- 2) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 3) Introduce yourself by name.
- 4) Explain the procedure to the resident.
- 5) Line the sink with a protective lining to help prevent damage to the denture. *(Use a cloth towel or washcloth; do not use paper towels.)*
- 6) Put on gloves.
- 7) Remove the denture from the cup.
- 8) Handle the denture carefully to avoid damage.
- 9) Never place the denture in/on a contaminated surface.
- 10) Rinse the denture cup.
- 11) Apply denture cleanser and thoroughly brush the denture, including the inner, outer, and chewing surfaces, the groove, and/or plate that will touch any gum surface. *(Only one plate is used during testing.)*
- 12) Rinse the denture using clean, cool water.
- 13) Place the denture in the denture cup.
- 14) Add cool, clean water to the denture cup.
- 15) Empty, rinse, and dry (with a clean, dry paper towel) the equipment and return to storage.
- 16) Discard the protective lining in a designated container.
- 17) Remove gloves, turning them inside out, and dispose of them in a designated container (trash can).
- 18) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 19) Place the call light or signaling device and water within easy reach of the resident.
- 20) Maintain respectful, courteous interpersonal interactions at all times.

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## **DRESSING A BEDRIDDEN RESIDENT WITH AN AFFECTED (WEAK) SIDE**

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- 1) Greet the resident by name.
- 2) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 3) Introduce yourself by name.
- 4) Explain the procedure to the resident.
- 5) Provide privacy for the resident; pull the privacy curtain.
- 6) Keep the resident covered while removing the gown.

- 7) The resident always remains lying in bed.
- 8) Remove the gown from the unaffected side first. (\*)
- 9) Place the soiled gown in a designated laundry hamper.
- 10) From the affected (weak) side first, dress the resident in a shirt or blouse, insert your hand through the sleeve of the shirt or blouse, and grasp the resident's affected hand. (\*)
  - a. *Candidate is free to position the resident in a manner acceptable to dress the resident, but never sits the resident on the side of the bed.*
- 11) From the affected (weak) side first, dress the resident in pants, assist the resident in raising their buttocks, or turn the resident from side to side and draw the pants over their buttocks and up to the resident's waist. (\*)
- 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 correct body alignment and properly dressed.
- 14) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 15) Place the call light or signaling device and water within easy reach of the resident.
- 16) Maintain respectful, courteous interpersonal interactions at all times.

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## FEEDING A DEPENDENT RESIDENT

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- 1) Greet the resident by name.
- 2) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 3) Introduce yourself by name.
- 4) Explain the procedure to the resident.
- 5) Look at (pick up) the diet card and indicate that the resident has received the correct tray.
- 6) Position the resident in an upright position. At least 45 degrees.**
- 7) Provide hand hygiene for the resident before feeding. (*Candidate may use hand sanitizer on the resident, covering all surfaces of the resident's hands and rubbing the sanitizer in until dry, or wash and dry the resident's hands using a wet washcloth with soap.*)
- 8) Protect clothing from soiling using a napkin, clothing protector, or towel.
- 9) Place soiled linen in a designated laundry hamper.
- 10) Remain at eye level or below while feeding the resident.
- 11) Describe the foods being offered to the resident.
- 12) Offer water or other fluid frequently from each glass.
- 13) Offer food in small amounts at a reasonable rate, allowing the resident to chew and swallow.
- 14) Wipe the resident's hands and face during the meal as needed.
- 15) Leave the resident clean and in a position of comfort.
- 16) Record intake in the percentage of total solid food eaten on the provided, previously signed recording form.
- 17) Record the total fluid intake consumed in mL on the provided, previously signed recording form.
- 18) The candidate's recorded consumed food intake is within 25 percentage points of the RN Test Observer's recorded food intake.**
- 19) The candidate's recorded total consumed fluid intake is within 45 mL of the RN Test Observer's recorded fluid intake.**

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

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## **MAKING AN OCCUPIED BED**

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- 1) Greet the resident by name.
- 2) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 3) Introduce yourself by name.
- 4) Gather linen.
- 5) Transport linen correctly without touching your uniform.
- 6) Place linen on a clean barrier, such as a cloth towel or chux pad.  
*(May place linen on the over-bed table, seat of the chair, on the bedside stand, or over the end of the bed.)*
- 7) Explain the procedure to the resident.
- 8) Provide privacy for the resident; pull the privacy curtain.
- 9) Direct the RN Test Observer to stand on the opposite side of the bed to provide safety. (\*)
- 10) Raise the bed to a comfortable working height.
- 11) The resident is to remain covered at all times.
- 12) Assist the resident in rolling onto their side toward the RN Test Observer. Instruct the RN Test Observer to remain standing on the opposite side of the bed.
- 13) Roll or fan-fold soiled linen, soiled side inside, to the center of the bed.
- 14) Place a clean bottom sheet along the center of the bed and roll or fan-fold linen against the resident's back, and unfold the remaining half.
- 15) Secure two fitted corners.
- 16) Direct the RN Test Observer to stand on the opposite side of the bed. (\*)
- 17) Assist the resident in rolling over the bottom linens, preventing trauma and avoidable pain to the resident.
- 18) Remove soiled linen without shaking.
- 19) Avoid placing dirty linen on the over-bed table, chair, or floor.
- 20) Avoid touching the linen on your uniform.
- 21) Place soiled linen in a designated laundry hamper.
- 22) Pull through and smooth out the clean bottom linen.
- 23) Secure the other two fitted corners.
- 24) The resident's body never touches the bare mattress. (\*)
- 25) Place clean top linen and blanket or bedspread over the covered resident.
- 26) Remove used linen, keeping the resident unexposed at all times.
- 27) Tuck in the top linen and blanket or bedspread at the foot of the bed.
- 28) Make mitered corners at the foot of the bed.
- 29) Apply a clean pillowcase with zippers and/or tags to the inside.

- 30) Gently lift the resident's head while replacing the pillow.
- 31) Lower bed.
- 32) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 33) Place the call light or signaling device and water within easy reach of the resident.
- 34) Maintain respectful, courteous interpersonal interactions at all times.

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## **MOUTH CARE—BRUSHING THE RESIDENT’S TEETH**

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- 1) Greet the resident by name.
- 2) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 2) Introduce yourself by name.
- 3) Explain the procedure to the resident.
- 4) Provide privacy for the resident; pull the privacy curtain.
- 5) Drape the resident’s chest with a towel to prevent soiling.
- 6) Put on gloves.
- 7) Apply toothpaste to the toothbrush.
- 8) Brush the resident's teeth, including the inner, outer, and chewing surfaces of all upper and lower teeth.**
- 9) Clean the resident’s tongue.
- 10) Assist the resident in rinsing their mouth.
- 11) Wipe the resident's mouth.
- 12) Remove soiled linen.
- 13) Place soiled linen in a designated laundry hamper.
- 14) Empty container.
  - a. *The container can be the emesis basin or a disposable cup.*
- 15) Rinse and dry the emesis basin, if used, with a clean, dry paper towel or discard disposable items in a designated container (trash can).
- 16) Rinse the toothbrush.
- 17) Return equipment to storage.
- 18) Remove gloves, turning them inside out, and dispose of them in a designated container (trash can).
- 19) Leave the resident in a position of comfort.
- 20) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 21) Place the call light or signaling device and water within easy reach of the resident.
- 22) Maintain respectful, courteous interpersonal interactions at all times.



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## MOUTH CARE FOR A COMATOSE RESIDENT

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- 1) Greet the resident by name.
- 2) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 3) Introduce yourself by name.
- 4) Provide privacy for the resident; pull the privacy curtain.
- 5) **Turn the resident to a side-lying position to avoid choking or aspiration.** *(If the candidate needs assistance turning the resident on their side, the candidate may ask the RN Test Observer for assistance.)*
- 6) Drape chest/bed as needed to protect from soiling.
- 7) Put on gloves.
- 8) Use swabs, and a cleaning solution. *(Do not use a toothbrush or toothpaste.)*
- 9) Gently and thoroughly clean all upper and lower teeth inner, outer, and chewing surfaces.
- 10) Gently and thoroughly clean the gums and tongue.
- 11) Wipe the resident's mouth.
- 12) Leave the resident in a position of comfort.
- 13) Discard disposable items [swab(s)] in a trash can.
- 14) Place the towel and/or the washcloth in a designated laundry hamper.
- 15) Remove gloves, turning them inside out, and dispose of them in a designated container (trash can).
- 16) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 17) Place the call light or signaling device and water within easy reach of the resident.
- 18) Maintain respectful, courteous interpersonal interactions at all times.

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## POSITION THE RESIDENT ON THEIR SIDE IN BED

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- 1) Greet the resident by name.
- 2) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 3) Introduce yourself by name.
- 4) Explain the procedure to the resident.
- 5) Provide privacy for the resident; pull the privacy curtain.
- 6) Position the bed flat. Raise the bed to a comfortable working height.
- 7) Ensure the resident's face is never obstructed by the pillow. (\*)
- 8) Direct the RN Test Observer to stand on the opposite side of the bed to provide for safety, or always turn the resident towards yourself. (\*)
- 9) From the working side of the bed, move the head, hips, and legs toward yourself to provide room on the bed to safely turn the resident on their side.
- 10) May remain on the working side of the bed and turn the resident toward the previously positioned RN Test Observer, or if the RN Test Observer wasn't directed to the side opposite the working side of the bed, move to the opposite side of the bed and turn the resident toward yourself.
- 11) Assist/turn the resident on their side.
- 12) The resident is placed on the correct side, as the RN Test Observer read in the scenario.
- 13) Ensure that the resident is not lying on their downside arm.

- 14) Maintain correct body alignment.
- 15) 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. (\*)
- 16) Lower bed.
- 17) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 18) Place the call light or signaling device and water within easy reach of the resident.
- 19) Maintain respectful, courteous interpersonal interactions at all times.

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## RANGE OF MOTION FOR THE RESIDENT'S HIP AND KNEE

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- 1) Greet the resident by name.
- 2) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 3) Introduce yourself by name.
- 4) Explain the procedure to the resident.
- 5) Provide privacy for the resident; pull the privacy curtain.
- 6) Position the bed flat.
- 7) Position the resident supine.**
- 8) Correctly support the resident's joints at all times by placing one hand under their knee and the other hand under their ankle.
- 9) Move the entire leg away from the body (abduction).
- 10) Move the entire leg back toward the body (adduction).
- 11) Complete abduction and adduction of the hip three times.
- 12) Continue correctly supporting joints by placing one hand under the resident's knee and the other hand under the resident's ankle.
- 13) Bend the resident's knee and hip toward the resident's trunk (flexion of hip and knee at the same time).
- 14) Straighten the knee and hip (extension of the knee and hip at the same time).
- 15) Complete flexion and extension of the knee and hip three times.
- 16) Do not cause discomfort or pain, and do not force any joint beyond the point of free movement.**
- 17) You must ask the resident if you are causing them any pain or discomfort.**
- 18) Leave the resident in a comfortable position.
- 19) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 20) Place the call light or signaling device and water within easy reach of the resident.
- 21) Maintain respectful, courteous interpersonal interactions at all times.

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## RANGE OF MOTION FOR THE RESIDENT'S SHOULDER

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- 1) Greet the resident by name.
- 2) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 3) Introduce yourself by name.
- 4) Explain the procedure to the resident.
- 5) Provide privacy for the resident; pull the privacy curtain.
- 6) Position the resident supine.**
- 7) Correctly support the resident's joint by placing one hand under their elbow and the other hand under their wrist.
- 8) Raise the resident's arm up and over the resident's head (flexion).
- 9) Bring the resident's arm back down to the resident's side (extension).
- 10) Complete the full range of motion for the shoulder through flexion and extension three times.
- 11) Continue supporting joints correctly by placing one hand under their elbow and the other hand under the resident's wrist.
- 12) Move the resident's entire arm out away from the body (abduction).
- 13) Return the resident's arm to the middle of the resident's body (adduction).
- 14) Complete the full range of motion for the shoulder through abduction and adduction three times.
- 15) Do not cause discomfort or pain, and do not force any joint beyond the point of free movement.**
- 16) You must ask the resident if you are causing them any pain or discomfort.**
- 17) Leave the resident in a comfortable position.
- 18) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 19) Place the call light or signaling device and water within easy reach of the resident.
- 20) Maintain respectful, courteous interpersonal interactions at all times.

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## VITAL SIGNS: COUNT AND RECORD THE RESIDENT'S RADIAL PULSE AND RESPIRATIONS, THEN PIVOT-TRANSFER A WEIGHT-BEARING, NON-AMBULATORY RESIDENT FROM BED TO WHEELCHAIR USING A GAIT BELT

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- 1) Greet the resident by name.
- 2) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 3) Introduce yourself by name.
- 4) Explain the procedure to the resident.
- 5) Locate the resident's radial pulse by placing the tips of fingers on the thumb side of the resident's wrist.
- 6) *Count the resident's pulse for 60 seconds or 30x2.*
  - a. *Tell the RN Test Observer when you start counting and tell them when you stop counting.*
- 7) Record the pulse rate on the previously signed recording form.
- 8) The candidate's recorded pulse rate is within four (4) beats of the RN Test Observer's recorded pulse rate.**

- 9) Count the resident's respirations for 60 seconds or 30x2.
  - a. Tell the RN Test Observer when you start counting and tell them when you stop counting.
- 10) Record the respirations on the previously signed recording form.
- 11) The candidate's recorded respiration count is within two (2) breaths of the RN Test Observer's recorded respiration count.**
- 12) Obtain a gait belt.
- 13) Position the wheelchair at the foot or head of the bed.
- 14) Lock the wheelchair brakes to ensure the resident's safety.**
- 15) Lock the bed brakes to ensure the resident's safety.**
- 16) Using proper body mechanics, assist the resident to a sitting position (on the edge of the bed).
- 17) Place a gait belt around the resident, below the rib cage and above the waist, to stabilize the trunk.
- 18) Tighten the gait belt so your fingers can be comfortably slipped between the gait belt and the resident.
- 19) Assist in putting on non-skid slippers/shoes. (No non-skid socks.)
- 20) Adjust the bed so that the resident's feet are comfortably flat on the floor. *(If needed, assist the resident in scooting to the edge of the bed.)*
- 21) Grasp the gait belt with both hands to stabilize the resident.
- 22) Using proper body mechanics, bring the resident to a standing position.
- 23) Do not attempt to ambulate the resident.**
- 24) Assist the resident in pivoting and sitting in a controlled manner.
- 25) Remove the gait belt.
- 26) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 27) Place the resident within easy reach of the call light or signaling device and water.
- 28) Maintain respectful, courteous interpersonal interactions at all times.

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## **VITAL SIGNS: COUNT AND RECORD THE RESIDENT'S RADIAL PULSE AND RESPIRATIONS, THEN PIVOT-TRANSFER A WEIGHT-BEARING, NON-AMBULATORY RESIDENT FROM WHEELCHAIR TO BED USING A GAIT BELT**

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- 1) Greet the resident by name.
- 2) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 3) Introduce yourself by name.
- 4) Explain the procedure to the resident.
- 5) Locate the resident's radial pulse by placing the tips of your fingers on the thumb side of the resident's wrist.
- 6) Count the resident's pulse for 60 seconds or 30x2.
  - a. Tell the RN Test Observer when you start counting and tell them when you stop counting.
- 7) Record the pulse rate on the previously signed recording form.
- 8) The candidate's recorded pulse rate is within four (4) beats of the RN Test Observer's recorded pulse rate.**
- 9) Count the resident's respirations for 60 seconds or 30x2.
  - a. Tell the RN Test Observer when you start counting and tell them when you stop counting.
- 10) Record respirations on the previously signed recording form.

- 10) **The candidate's recorded respiration count is within two (2) breaths of the RN Test Observer's recorded respiration count.**
- 11) Position the wheelchair at the foot or head of the bed.
- 12) Adjust the bed so that the resident's feet are comfortably flat on the floor when sitting on the edge of the bed.
- 13) **Lock the wheelchair brakes to ensure the resident's safety.**
- 14) **Lock the bed brakes to ensure the resident's safety.**
- 15) Place a gait belt around the resident, below the rib cage and above the waist, to stabilize the trunk.
- 16) Tighten the gait belt so your fingers can be comfortably slipped between the gait belt and the resident.
- 17) Grasp the gait belt with both hands to stabilize the resident.
- 18) Using proper body mechanics, bring the resident to a standing position.
- 19) **Do not attempt to ambulate the resident.**
- 20) Assist the resident in pivoting and sitting on the bed in a controlled manner.
- 21) Remove the gait belt.
- 22) Assist the resident in removing their non-skid slippers.
- 23) Assist the resident to move to the center of the bed, supporting the resident's extremities as necessary.
- 24) Make sure the resident is comfortable and in good body alignment.
- 25) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 26) Place the resident within easy reach of the call light or signaling device and water.
- 27) Maintain respectful, courteous interpersonal interactions at all times.

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## **VITAL SIGNS: TAKING AND RECORDING THE RESIDENT'S MANUAL BLOOD PRESSURE**

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- 1) Greet the resident by name.
- 2) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 3) Introduce yourself by name.
- 4) Explain the procedure to the resident.
- 5) Provide privacy for the resident; pull the privacy curtain.
- 6) Assist the resident into a comfortable sitting or recumbent position with their forearm relaxed and supported in a palm-up position.
- 7) If the resident is wearing a shirt with sleeves, roll the sleeve up about 5 inches above their elbow.
- 8) Apply the cuff around the resident's upper arm just above their elbow and line the cuff arrows up with the brachial artery.
- 9) Clean the earpieces of the stethoscope appropriately and place them in your ears.
- 10) Clean the diaphragm of the stethoscope.
- 11) Place the stethoscope over the resident's brachial artery.
- 12) Hold the stethoscope snugly in place.
- 13) Inflate cuff *to 30mmHG above* the RN Test Observer provided loss of pulse number.
- 14) Slowly release air from the cuff until the disappearance of pulsations.
- 15) Remove the cuff.

- 16) The candidate will only be allowed **one (1) attempt per arm.**
  - a. No re-pumping on the same arm will be allowed – only one pump on each arm (this includes any re-attempts/corrections made).
  - b. The RN Test Observer will inform the candidate when they have reached their max number of attempts (1 per arm) and state, ‘You have reached your maximum number of attempts; please move forward with your task.’
- 17) Record the resident’s blood pressure reading on the provided, previously signed recording form.
- 18) The candidate's recorded systolic blood pressure is within 6mmHg of the RN Test Observer's recorded systolic blood pressure.**
- 19) The candidate's recorded diastolic blood pressure is within 8mmHg of the RN Test Observer's recorded diastolic blood pressure.**
- 20) Perform hand hygiene.
  - a. Cover all surfaces of hands with hand sanitizer.
  - b. Rub your hands together until they are completely dry.
- 21) Place the call light or signaling device and water within easy reach of the resident.
- 22) Maintain respectful, courteous interpersonal interactions at all times.

## KNOWLEDGE EXAM VOCABULARY LIST

abandonment	airborne precautions	aspiration
abbreviations	alarms	assistive device
abdominal thrust	alternating pressure mattress	atrophy
abduction	Alzheimer's	autoimmune
abductor wedge	ambulation	axillary temperature
abnormal vital signs	amputees	bargaining
absorption	anatomy	basic needs
abuse	anger	basic nursing skills
accidents	angina	basic nutrition
accountable	anorexia	bathing
activities	anterior	<b>bathing resident</b>
acute	anti-embolic / elastic stockings / TED hose	bed bath
adaptive	antibiotics	bed cradle
adduction	anxiety	bed height
ADL	aphasia	bed making
admission	apical	bedrest
advanced directives	apnea	behavior
afebrile	appropriate response	beliefs
affected side	arteries	biohazard
aggressive resident	arthritis	bladder training
aging	aseptic	bleeding
AIDS		blindness

blood pressure
body language
body mechanics
body systems
body temperature
bowel program
BPH
bradycardia
breathing
broken equipment
burnout
call light
cancer
cane use
cardiac arrest
cardiopulmonary resuscitation
cardiovascular system
care impaired
care plan
cares
cast
cataracts
catheter bag
catheter care
cc's in an ounce
cell phones
central nervous system
cerebral vascular accident
certification renewal
chain of command
charge nurse
chemical restraints
chemotherapy
chest pain
choking
chronic
circulation
circulatory system
clarification
cleaning
cleaning spills
clear liquid diet
Clostridium Difficile (C-diff)
CNA/LNA

cold application
colostomy
comatose resident
combative resident
comfort
comfort care
communicable
communication
complete bed bath
compression
confidentiality
conflict
conflict resolution
confused resident
confusion
congestive heart failure
constipation
constrict
contact isolation
contamination
continuity
contractures
converting measures
COPD
coronary artery disease
CVA
cyanotic
dangling
data collection
death and dying
de-escalation
defamation
dehydration
delegation
delirium
delusions
dementia
denture care
dependability
depression
dermatitis
developmental disability
diabetes
dialysis

diastolic
diet
dietary
digestion
digestive system
dining room
discharging resident
disease
disease process
disinfection
disoriented
disposable gloves
disrespect
disrespectful treatment
dizziness
DNR
documentation
domestic abuse
dorsiflexion
dressing
droplets
drowsy
dysphagia
dysphasia
dyspnea
dysuria
edema
elevate head
elopement
emergency response
emergency situation
emesis
emotional needs
emotional stress
emotional support
empathy
emphysema
end of life
epilepsy
ethics
etiquette
evacuation
extension
extremity

eyeglasses
falls
fecal impaction
feces
feeding
feeding tubes
fingernail care
fire
fire safety
first aid
flatus
flexion
fluid
fluid imbalance
Foley catheter
foot care
foot drop
footboard
foreskin
Fowler's position
fractures
frayed cord
gait belt
gastrostomy tube
geriatrics
germ transmission
gerontology
gifts
gloves
grieving process
hair care
hallucinations
hand hygiene
hand tremors
hand washing
harm
healthcare-acquired infection
hearing aid
hearing impaired
hearing loss
heart muscle
heart rates
heat application
helping residents

hemiplegia
hemorrhage
hepatitis B
high Fowler's
hip surgery
HIPAA
HIV
hoarding
holistic care
hormones
hospice care
hydration
hygiene
hyperglycemia
hypertension
hyperventilation
hypoglycemia
identification
ileostomy
immobility
immune
impairment
in-house transfer
incident reports
incontinence
indwelling catheter
infection control
initial observations
insomnia
insulin
intake and output (I&O)
integumentary system
inter-generational care
interpersonal skills
invasion of privacy
isolation
IV care
jaundice
job description
kidney failure
lateral position
legal ethics
legal responsibility
lice

life support
life threatening
lift/draw sheet
lifting
linen
listening
living will
localized infection
logrolling
low-sodium diet
Maslow
masturbation
material safety data sheets
measuring
measuring height
measuring temperature
mechanical lift
medical asepsis
medical record
medications
memory loss
mental health
mental illness
metastasis
microorganism
military time
milliliters (mL)
misappropriation
misconceptions
misconduct
mites
mobility
morning care
mouth care
moving
mucous membrane
Multiple Sclerosis
musculoskeletal system
nail care
nausea and vomiting
needles
neglect
negligence
non-contagious disease



nonverbal communication
nosocomial
NPO
nurse's station
nursing assistant's role
nutrients
nutrition
objective data
OBRA
observation
ombudsman
open-ended questions
oral care
oral temperature
orientation
orthopnea
orthopneic
orthostatic hypotension
OSHA
osteoarthritis
osteoporosis
oxygen
oxygen concentrator
oxygen cylinder
oxygen use
pain
palliative care
paralysis
paranoia
Parkinson's
partial assistance
passive
passive ROM
pathogens
pediculosis
perineal care
peripheral vascular disease
peristalsis
person-centered care
personal care
personal items
personal protective equipment (PPE)
personal stress

petit mal seizure
phantom pain
phobia
phone etiquette
physical needs
physician's authority
physiology
plaque
pneumonia
policy book
positioning
postmortem care
post-operative pneumonia
pressure injury
preventing injury
privacy
professional boundaries
professionalism
progressive
promoting independence
pronation
prone
prostate gland
prosthesis
providing privacy
psychological needs
pulse
pulse oximetry
pureed diet
quadrant
quadriplegia
quality of life
radial
range of motion
receptive aphasia
rectal
refusal
regulation
reimbursement
religious rights
religious service
reminiscence therapy
reminiscing
reporting

reporting changes
reposition
reproductive system aging
resident belongings
resident-centered care
resident harm
resident independence
resident rights
resident's chart
resident's environment
respectful treatment
respiration
respiratory
respiratory disease
respiratory system
responding to resident behavior
responsibility
restorative care
restraints
resuscitation
risk factor
role and responsibility
rotation
safety
safety data sheet
safety precautions
sanitizer
scabies
scale
scope of practice
seclusion
security
seizure
self-esteem
Semi-Fowlers
sensory system
sexual needs
sharps container
shaving
shearing
shingles
shock
side rails

Sitz bath
skin
sleep
smoking
social needs
soiled linen
specimen
spills
spiritual needs
sputum
standard precautions
sterile
sterilization
stethoscope
stress
stroke
sub-acute care
subjective data
substance abuse
suicide
sundowning
supine
supplemental feedings
suprapubic
survey
swelling
systemic infection

systolic
tachycardia
tachypnea
task
temperature
tendons
terminal illness
terminology
thickened liquids
threatening resident
tips
toenails
toileting schedule
TPR
trachea
transfers
transmission
trochanter roll
tub bath
tube feeding
tubing
twice daily
tympanic
types of care
types of isolation
unaffected
unconscious

undressing
unsteady
urinary catheter
urinary elimination
urinary problems
urinary system
urinary tract infection (UTI)
urination
validation therapy
varicella virus
violent behavior
vision change
visual impairment
vital signs
vomit
walker
wandering resident
warm and cold application
water faucets
water pitcher
weak side
weight
what to report
wheelchair safety
white blood cells

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