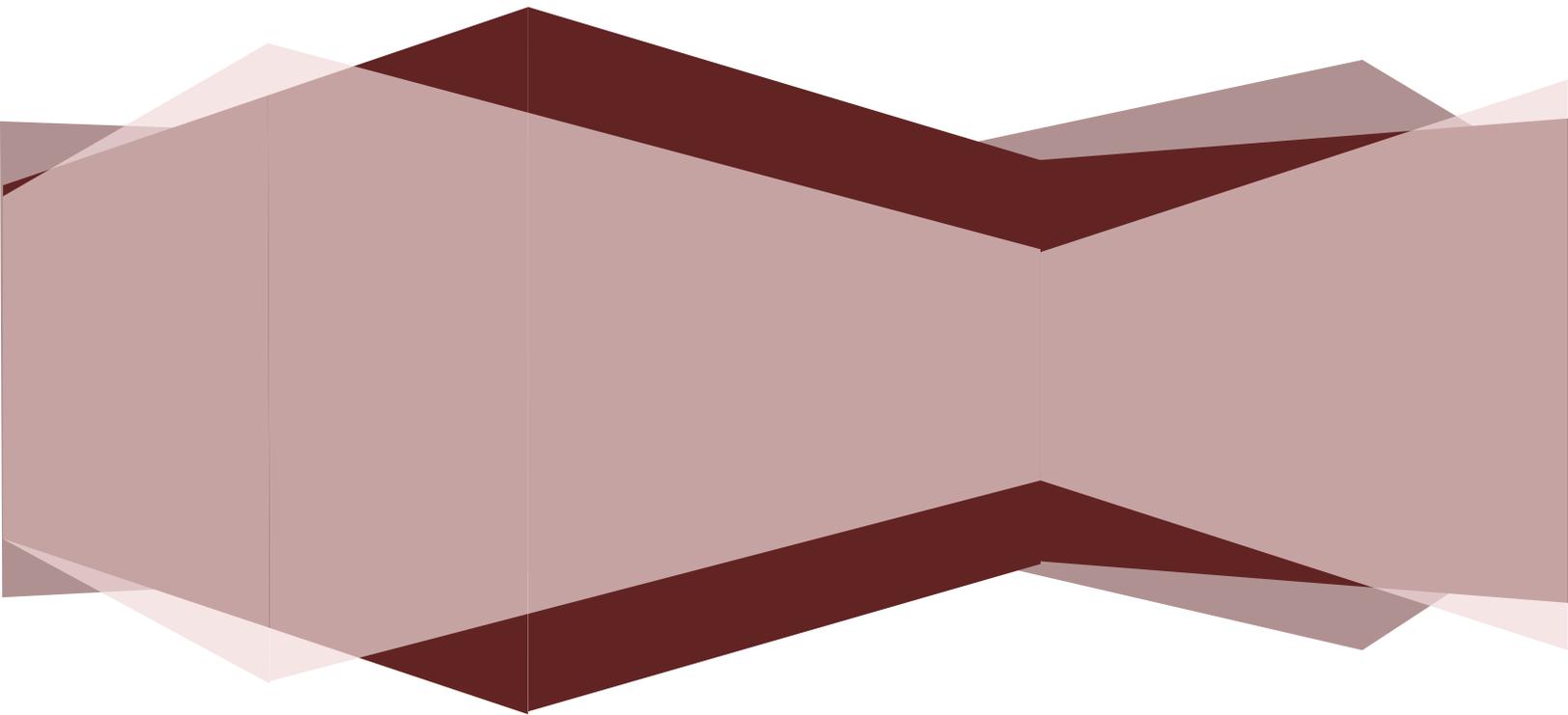


Arkansas Mock Skills

Effective for testing July 2020

Updated: July 1, 2020



AMBULATION FROM BED TO WHEELCHAIR USING A GAIT BELT

	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Obtain gait belt for the resident.	
	Lock bed brakes to ensure resident's safety.	
	Adjust bed height to ensure resident's feet will be flat on the floor.	
	Bring resident to sitting position with resident's feet flat on the floor.	
	Properly place gait belt around resident's waist to stabilize trunk.	
	Tighten gait belt.	
	Check gait belt for tightness by slipping fingers between gait belt and resident.	
	Assist resident to put on non-skid footwear BEFORE standing.	
	Bring resident to standing position.	
	Use proper body mechanics at all times.	
	Grasp gait belt.	
	Stabilize resident.	
	Ambulate resident at least 10 steps to the wheelchair.	
	Lock wheelchair brakes to ensure resident's safety.	
	Assist resident to pivot/turn.	
	Sit resident in the wheelchair.	
	Sit resident in a controlled manner.	
	Ensure safety at all times.	
	Remove gait belt.	
	Place resident within easy reach of call light or signaling device.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

AMBULATION FROM WHEELCHAIR TO BED USING A GAIT BELT

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Obtain gait belt for the resident.	
Lock bed brakes to ensure resident's safety.	
Adjust bed height to ensure resident's feet will be flat on the floor.	
Lock wheelchair brakes to ensure resident's safety.	
Properly place gait belt around resident's waist to stabilize trunk.	
Tighten gait belt.	
Check gait belt for tightness by slipping fingers between gait belt and resident.	
Ensure resident's feet are flat on the floor.	
Ask resident to place hands on wheelchair arm rests.	
Grasp gait belt with both hands.	
Bring resident to standing position.	
Use proper body mechanics at all times.	
Continue to grasp the gait belt.	
Stabilize resident.	
Ambulate resident at least 10 steps to the bed.	
Assist resident to pivot/turn.	
Sit resident on the bed.	
Sit resident on the bed in a controlled manner.	
Ensure safety at all times.	
Remove gait belt.	
Remove non-skid footwear.	
Assist resident to lie down in the center of the bed.	
Make sure the resident is comfortable and in good body alignment.	
Lower bed.	
Place call light or signaling device within easy reach of resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

BED BATH (PARTIAL) – WHOLE FACE AND ONE ARM, HAND AND UNDERARM

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide for privacy.	
Fill basin with warm water.	
Raise bed height.	
Cover resident with a bath blanket.	
Fanfold bed linens at least down to the waist or move linens to opposite side.	
Remove resident's gown without exposing resident.	
Dispose of gown in designated laundry hamper.	
Wash face WITHOUT SOAP.	
Pat dry face.	
Place towel under arm, exposing one arm.	
Wash arm with soap.	
Wash hand with soap.	
Wash underarm with soap.	
Rinse arm.	
Rinse hand.	
Rinse underarm.	
Pat dry arm.	
Pat dry hand.	
Pat dry underarm.	
Assist resident to put on a clean gown.	
Empty equipment.	
Rinse equipment.	
Dry equipment.	
Return equipment to storage.	
Dispose of soiled linen in designated laundry hamper.	
Lower bed.	
Place call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

BEDPAN AND OUTPUT WITH HAND WASHING REQUIRED

(ONE OF THE POSSIBLE MANDATORY FIRST TASKS)

	Knock on door.	
	Introduce yourself to resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Provide for privacy.	
	Put on gloves.	
	Position resident on bedpan/fracture pan correctly. (Pan not upside down, is centered, etc.)	
	Position resident on bedpan/fracture pan using correct body mechanics.	
	Raise head of bed to comfortable level.	
	Leave tissue within reach of resident.	
	Leave call light or signaling device within reach of resident.	
	Step away to an area of the room away from the resident.	
	When the RN Test Observer indicates, candidate returns.	
	Obtain a wet wash cloth.	
	Wash/assist resident to wash hands.	
	Dry/assist resident to dry hands.	
	Discard soiled linen in designated laundry hamper.	
	Gently remove bedpan/fracture pan.	
	Hold the bedpan/fracture pan for the RN Test Observer while an unknown quantity of liquid is poured into bedpan/fracture pan.	
	Place graduate on level, flat surface.	
	With graduate at eye level, read output.	
	Empty equipment used into designated toilet. (Bedpan/Fracture Pan – Graduate)	
	Rinse equipment used and empty rinse water into designated toilet. (Bedpan/Fracture Pan – Graduate)	
	Return equipment to storage.	
	Remove gloves turning inside out.	
	Dispose of gloves in the appropriate container.	
	Record output on previously signed recording form.	
	Candidate's measured reading is within 25ml of RN Test Observer's reading.	
	<i>Continued -></i>	

	Place call light or signaling device within reach of the resident.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Wash hands: Begin by wetting hands.	
	Wash hands: Apply soap to hands.	
	Wash hands: Rub hands together using friction with soap.	
	Wash hands: Rub hands together for at least twenty (20) seconds with soap.	
	Wash hands: Interlace fingers pointing downward with soap.	
	Wash hands: Wash all surfaces of hands with soap.	
	Wash hands: Wash wrists with soap.	
	Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.	
	Wash hands: Dry hands on clean paper towel(s).	
	Wash hands: Turn off faucet with a clean, dry paper towel.	
	Wash hands: Discard paper towels to trash container as used.	
	Washes hands: Does not re-contaminate hands by touching faucet or sink at any time during/after the hand washing procedure.	

CATHETER CARE FOR A FEMALE WITH HAND WASHING REQUIRED

(ONE OF THE POSSIBLE MANDATORY FIRST TASKS)

Knock on door.	
Introduce yourself to resident.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide for privacy.	
Fill basin with warm water.	
Put on gloves.	
Avoid over exposure throughout the procedure.	
Check to see that urine can flow, unrestricted, into the drainage bag. (Helpful to verbalize checking while looking for kinks in tubing, etc.)	
Use soap and water to carefully wash around the catheter where it exits the urethra.	
Hold catheter where it exits the urethra with one hand.	
While holding catheter where it exits the urethra, clean 3-4 inches down the catheter tube.	
Clean with strokes only away from the urethra. (At least 2 strokes.)	
Use clean portion of wash cloth for each stroke.	
Rinse using strokes only away from the urethra.	
Rinse using clean portion of wash cloth for each stroke.	
Pat dry.	
Do not allow the tube to be pulled at any time during the procedure.	
Replace gown over resident's perineal area.	
Replace top cover over resident.	
Leave resident in a position of safety and comfort.	
Empty basin.	
Rinse and dry basin.	
Return basin to storage.	
Remove gloves turning inside out.	
Dispose of gloves in the appropriate container.	
Place call light or signaling device within reach of resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Wash hands: Begin by wetting hands.	
Wash hands: Apply soap to hands.	
Wash hands: Rub hands together using friction with soap.	
Wash hands: Rub hands together for at least twenty (20) seconds with soap.	

Continued ->

	Wash hands: Interlace fingers pointing downward with soap.	
	Wash hands: Wash all surfaces of hands with soap.	
	Wash hands: Wash wrists with soap.	
	Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.	
	Wash hands: Dry hands on clean paper towel(s).	
	Wash hands: Turn off faucet with a clean, dry paper towel.	
	Wash hands: Discard paper towels to trash container as used.	
	Washes hands: Does not re-contaminate hands by touching faucet or sink at any time during/after the hand washing procedure.	

DENTURE CARE

	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Line bottom of the sink with a protective lining that would help prevent damage to the dentures. (Towel, wash cloth or paper towels are allowed for lining.)	
	Put on gloves.	
	Apply denture cleanser.	
	Remove denture from cup.	
	Handle denture carefully to avoid damage.	
	Handle denture carefully to avoid contamination.	
	Rinse denture cup.	
	Thoroughly brush denture inner surfaces of upper or lower dentures.	
	Thoroughly brush denture outer surfaces of upper or lower dentures.	
	Thoroughly brush denture chewing surfaces of upper or lower dentures.	
	Rinse denture using clean cool water.	
	Place denture in rinsed cup.	
	Add cool clean water to denture cup.	
	Rinse equipment. a. Denture brush or toothbrush	
	Return equipment to storage.	
	Discard protective lining in an appropriate container.	
	Remove gloves, turning inside out as they are removed.	
	Dispose of gloves in an appropriate container.	
	Place call light or signaling device within easy reach of resident.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

DRESSING BEDRIDDEN RESIDENT

	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Provide for privacy.	
	Raise bed height.	
	Keep resident covered while removing gown.	
	Remove gown from unaffected side first.	
	Place used gown in designated laundry hamper.	
	Dress the resident in a button-up shirt. Insert hand through the sleeve of the shirt and grasp the hand of the resident.	
	When dressing the resident in a button-up shirt, always dress from the affected (weak) side first.	
	Assist the resident to raise her/his buttocks or turn the resident from side to side and draw the pants over the buttocks and up to the resident's waist.	
	When dressing the resident in pants, always dress the affected (weak) side leg first.	
	Put on the resident's socks. Draw the socks up the resident's foot until they are smooth.	
	Leave the resident comfortably/properly dressed.	
	Leave the resident in a position of safety.	
	Lower bed.	
	Place call light or signaling device within easy reach of the resident.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

FEEDING THE DEPENDENT RESIDENT

	<p>Perform hand hygiene.</p> <ul style="list-style-type: none"> a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry. 	
	Explain the procedure to the resident.	
	Ask resident to state name and verify name matches the name on the diet card.	
	Protect clothing from soiling by using napkin, clothing protector, or towel.	
	Provide hand hygiene for the resident BEFORE feeding. (Candidate may use a disposable wipe and dispose of in trash can –or- wash resident’s hands with a wet wash cloth –or- they may rub hand sanitizer over all surfaces of the resident’s hands until dry.)	
	Ensure resident's hands are dry BEFORE feeding. (If a wet wash cloth was used, the candidate will need to dry the resident’s hands. If a disposable wipe or hand sanitizer was used, must make sure hands are dry.)	
	Position yourself at eye level facing the resident while feeding resident.	
	Describe the foods being offered to the resident.	
	Offer each fluid frequently from each glass.	
	Offer small amounts of food at a reasonable rate.	
	Allow resident time to chew and swallow.	
	<p>Wipe resident's face during meal at least one time.</p> <ul style="list-style-type: none"> a. Actor will say, “I’m full” before all the solid food and fluids are gone. 	
	Leave resident clean. (Remove the clothing protector).	
	Record intake as a percentage of total solid food eaten on the previously signed recording form.	
	Candidate's calculation must be within 25 percentage points of the RN Test Observer’s.	
	Record estimated intake of total fluid consumed on the previously signed recording form.	
	Candidate's calculation must be within 60ml of the RN Test Observer's.	
	Place call light or signaling device within easy reach of the resident.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	<p>Perform hand hygiene.</p> <ul style="list-style-type: none"> a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry. 	

FOOT CARE ONE FOOT

	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Fill foot basin with warm water.	
	Remove a sock from the (right/left) foot. (The scenario read to you will specify right or left.)	
	Immerse foot in warm water. a. You may verbalize the 5 to 20 minutes soaking time after you begin soaking the foot.	
	Use water and soapy wash cloth.	
	Wash entire foot.	
	Wash between toes.	
	Rinse entire foot.	
	Rinse between toes.	
	Dry foot thoroughly.	
	Dry thoroughly between toes.	
	Warm lotion by rubbing it between hands.	
	Massage lotion over entire foot.	
	Avoid getting lotion between the toes.	
	If any excess lotion, wipe with a towel.	
	Replace sock on foot.	
	Empty basin.	
	Rinse basin.	
	Dry basin.	
	Return basin to storage area.	
	Place dirty linen in designated laundry hamper.	
	Leave resident in position of safety in proper alignment in the chair.	
	Place call light or signaling device within reach of resident.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

ISOLATION GOWN AND GLOVES AND EMPTY URINARY BAG WITH HAND WASHING REQUIRED

(ONE OF THE POSSIBLE MANDATORY FIRST TASKS)

	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Face the back opening of the gown.	
	Unfold the gown.	
	Place arms through each sleeve.	
	Secure the neck opening.	
	Secure the waist, making sure that the back flaps cover clothing as completely as possible.	
	Put on gloves.	
	Glove overlap gown sleeves at the wrist.	
	Knock on door.	
	Introduce yourself to resident.	
	Explain the procedure to the resident.	
	Place a barrier on the floor under the drainage bag.	
	Place the graduate on the previously placed barrier.	
	Open the drain to allow the urine to flow into the graduate.	
	Avoid touching the graduate with the tip of the tubing.	
	Close the drain.	
	Wipe the drain with alcohol wipe AFTER emptying drainage bag.	
	Replace drain in holder.	
	Place graduate on level, flat surface	
	With graduate at eye level, read output.	
	Empty graduate into designated toilet.	
	Rinse equipment emptying into designated toilet.	
	Return equipment to storage.	
	Leave resident in a position of comfort and safety.	
	Record the output on previously signed recording form.	
	Candidate's recorded measurement is within 25ml of the RN Test Observer's measurement.	
	Place call light or signaling device within reach of the resident.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Remove gloves, turning inside out.	
	Remove gloves BEFORE removing gown.	
	Dispose of the gloves in appropriate container.	
	Unfasten gown at the neck.	<i>Continued -></i>

	Unfasten gown at the waist.	
	Remove gown by folding soiled area to soiled area.	
	Dispose of gown in an appropriate container.	
	Wash hands: Begin by wetting hands.	
	Wash hands: Apply soap to hands.	
	Wash hands: Rub hands together using friction with soap.	
	Wash hands: Rub hands together for at least twenty (20) seconds with soap.	
	Wash hands: Interlace fingers pointing downward with soap.	
	Wash hands: Wash all surfaces of hands with soap.	
	Wash hands: Wash wrists with soap.	
	Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.	
	Wash hands: Dry hands on clean paper towel(s).	
	Wash hands: Turn off faucet with a clean, dry paper towel.	
	Wash hands: Discard paper towels to trash container as used.	
	Washes hands: Does not re-contaminate hands by touching faucet or sink at any time during/after the hand washing procedure.	

MAKING AN OCCUPIED BED

	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Gather linen and transport linen away from body.	
	Place clean linen on a clean surface (beside stand, chair, or overbed table).	
	Provide for privacy.	
	Raise bed height.	
	Resident is to remain covered at all times.	
	Assist resident to roll onto side.	
	Roll or fan fold soiled linen, soiled side inside, to the center of the bed.	
	Place clean bottom sheet on mattress.	
	Secure two fitted corners.	
	Roll or fan fold clean linen against resident's back.	
	Assist the resident to roll over the bottom linen, preventing trauma and avoidable pain to resident.	
	Remove soiled linen without shaking.	
	Avoid touching linen to uniform.	
	Dispose of soiled linen in designated laundry hamper.	
	Pull through and smooth out the clean bottom linen.	
	Secure the other two fitted corners.	
	Place clean top linen over covered resident.	
	Place clean blanket or bed spread over covered resident.	
	Remove used linen keeping resident unexposed at all times.	
	Tuck in clean top linen at the foot of bed, while providing room for feet to move.	
	Tuck in clean blanket or bed spread at the foot of bed, while providing room for feet to move.	
	Apply clean pillowcase.	
	Gently lift resident's head while replacing the pillow.	
	Lower bed.	
	Return side rails to lowered position, if side rails were used.	
	Place call light or signaling device within easy reach of the resident.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

MOUTH CARE – BRUSHING TEETH

	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Provide for privacy.	
	Put on gloves only AFTER supplies have been gathered.	
	Drape resident's chest with a towel (cloth or paper) to prevent soiling.	
	Wet toothbrush.	
	Apply toothpaste to toothbrush.	
	Brush resident's teeth, including the inner surfaces of all upper and lower teeth.	
	Brush resident's teeth, including the outer surfaces of all upper and lower teeth.	
	Brush resident's teeth, including chewing surfaces of all upper and lower teeth.	
	Clean resident's tongue.	
	Assist the resident in rinsing mouth.	
	Wipe resident's mouth.	
	Remove soiled chest barrier.	
	Place soiled chest barrier (cloth or paper) in the appropriate container.	
	Empty emesis basin.	
	Rinse emesis basin.	
	Dry emesis basin.	
	Rinse toothbrush.	
	Return equipment to storage.	
	Remove gloves turning inside out.	
	Dispose of gloves in appropriate container.	
	Leave resident in position of comfort.	
	Place call light or signaling device within easy reach of the resident.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

NAIL CARE ONE HAND

	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to resident.	
	Fill basin with warm water.	
	Immerse right/left hand nails in comfortably warm water. (The scenario read to you will specify right or left.)	
	Verbalize to soak nails for at least five (5) minutes.	
	Dry hand thoroughly.	
	Specifically dry between fingers.	
	Gently clean under nails with orange stick.	
	Gently push cuticle back with a towel/wash cloth.	
	File each fingernail.	
	Empty equipment.	
	Rinse equipment.	
	Dry equipment.	
	Return equipment to storage.	
	Discard soiled linen in designated laundry hamper.	
	Place call light or signaling device within easy reach of the resident.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

PERINEAL CARE FOR A FEMALE WITH HAND WASHING REQUIRED

(ONE OF THE POSSIBLE MANDATORY FIRST TASKS)

	Knock on door.	
	Introduce yourself to the resident.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident. (manikin)	
	Provide for privacy.	
	Raise the bed height.	
	Fill basin with warm water.	
	Put on gloves.	
	Direct RN Test Observer to stand on the opposite side of the bed, or raise side rail on opposite side of bed to provide for safety. a. RN Test Observer DOES NOT move into position unless directed to do so by the candidate.	
	Turn resident or raise hips and place barrier under buttocks. (Candidate will choose barrier such as a towel, water proof pad, chux, etc.)	
	Expose perineum only.	
	Separate labia. (Candidate <i>must also verbalize</i> separating.)	
	Use water and soapy wash cloth.	
	Clean one side of labia from top to bottom.	
	Use a clean portion of a wash cloth, clean other side of labia from top to bottom.	
	Use a clean portion of a wash cloth; clean the vaginal area from top to bottom.	
	Use a clean wash cloth, rinse one side of labia from top to bottom.	
	Use a clean portion of a wash cloth; rinse other side of labia from top to bottom.	
	Use a clean portion of a wash cloth; rinse the vaginal area from top to bottom.	
	Pat dry.	
	Covers the exposed area with the bath blanket.	
	Assist resident to turn onto side away from the candidate. a. RN Test Observer may help hold the manikin on her side ONLY after the candidate has turned the manikin.	
	Use a clean wash cloth.	
	Use water, wash cloth and soap.	
	Clean from vagina to rectal area.	<i>Continued -></i>

	Use a clean portion of a wash cloth with any stroke.	
	Use a clean wash cloth.	
	Rinse from vagina to rectal area.	
	Use a clean portion of a wash cloth with any stroke.	
	Pat dry.	
	Safely remove barrier from under buttocks.	
	Position resident (manikin) on her back.	
	Dispose of soiled linen in designated laundry hamper.	
	Empty equipment.	
	Rinse equipment.	
	Dry equipment.	
	Return equipment to storage.	
	Remove gloves, turning inside out.	
	Dispose of gloves in appropriate container.	
	Lower bed.	
	Place call light or signaling device within easy reach of resident.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Wash hands: Begin by wetting hands.	
	Wash hands: Apply soap to hands.	
	Wash hands: Rub hands together using friction with soap.	
	Wash hands: Rub hands together for at least twenty (20) seconds with soap.	
	Wash hands: Interlace fingers pointing downward with soap.	
	Wash hands: Wash all surfaces of hands with soap.	
	Wash hands: Wash wrists with soap.	
	Wash hands: Rinse hands thoroughly under running water with fingers pointed downward.	
	Wash hands: Dry hands on clean paper towel(s).	
	Wash hands: Turn off faucet with a clean, dry paper towel.	
	Wash hands: Discard paper towels to trash container as used.	
	Washes hands: Does not re-contaminate hands by touching faucet or sink at any time during/after the hand washing procedure.	

PIVOT TRANSFER A WEIGHT BEARING, NON-AMBULATORY RESIDENT FROM BED TO WHEELCHAIR USING A GAIT BELT

	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Obtain a gait belt.	
	Lock bed brakes to ensure resident's safety.	
	Assist resident in putting on non-skid footwear.	
	Adjust bed height to ensure resident's feet will be flat on the floor.	
	Assist resident to a sitting position.	
	Position wheelchair at the foot or head of the bed with arm/wheel touching the side of the bed.	
	Lock wheelchair brakes to ensure resident's safety.	
	Place gait belt around resident's waist to stabilize trunk.	
	Tighten gait belt.	
	Check gait belt for tightness by slipping fingers between gait belt and resident.	
	Grasp gait belt with both hands.	
	Bring resident to standing position.	
	Use proper body mechanics.	
	Assist resident to pivot and sit in the wheelchair in a controlled manner that ensures safety.	
	Remove gait belt.	
	Place call light or signaling device within easy reach of the resident.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

PIVOT TRANSFER A WEIGHT BEARING, NON-AMBULATORY RESIDENT FROM WHEELCHAIR TO BED USING A GAIT BELT

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Obtain a gait belt.	
Lock bed brakes to ensure resident's safety.	
Adjust bed height to ensure resident's feet will be flat on the floor.	
Position wheelchair at foot or head of bed with arm/wheel touching the side of the bed.	
Lock wheelchair brakes to ensure resident's safety.	
Place gait belt around resident's waist to stabilize trunk.	
Tighten gait belt.	
Check gait belt for tightness by slipping fingers between gait belt and resident.	
Ensure the resident's feet are flat on the floor.	
Ask resident to place hands on wheelchair arm rest.	
Grasp the gait belt with both hands.	
Bring resident to a standing position using proper body mechanics.	
Assist resident to pivot and sit on bed in a controlled manner that ensures safety.	
Remove gait belt.	
Remove non-skid footwear.	
Assist resident to lie down in center of bed.	
Make sure resident is comfortable and in good body alignment.	
Lowere bed.	
Place call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

POSITIONING RESIDENT ON SIDE

	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to resident.	
	Provide for privacy.	
	Position bed flat.	
	Raise bed height.	
	Direct the RN Test Observer to stand on the side of the bed opposite working side of bed, or raise side rail on side of the bed opposite working side of bed to provide safety.	
	From the working side of bed - move resident's upper body toward self to provide room on the bed that will be used to safely turn the resident on her/his side.	
	From the working side of the bed - move resident's hips toward self to provide room on the bed that will be used to safely turn the resident on her/his side.	
	From the working side of the bed - move resident's legs toward self to provide room on the bed that will be used to safely turn the resident on her/his side.	
	Assist/turn resident on his/her left/right side. (Side will be read to candidate by RN Test Observer.)	
	Ensure that the resident's face never becomes obstructed by the pillow.	
	Check to be sure resident is not lying on down side arm.	
	Ensure resident is in correct body alignment.	
	Place support devices under the resident's head.	
	Place support devices under the resident's upside arm.	
	Place support devices behind back.	
	Place support devices between knees.	
	Leave resident in a position of comfort and safety.	
	Lower bed.	
	Place call light or signaling device within easy reach of the resident.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

RANGE OF MOTION FOR HIP AND KNEE

	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Raise bed height.	
	Provide for privacy.	
	Position resident supine (bed flat).	
	Position resident in good body alignment.	
	Place one hand under the knee.	
	Place the other hand under the ankle.	
	Do not cause discomfort/pain at any time during the ROM procedure.	
	ROM for Hip: Move the entire leg away from the body. a. abduction	
	Move the entire leg toward the body. a. adduction	
	Complete abduction and adduction of the hip at least three times.	
	Continue to correctly support joints by placing one hand under the resident's knee and the other hand under the resident's ankle.	
	Bend the resident's knee and hip toward the resident's trunk. a. flexion of hip and knee at the same time	
	Straighten the knee and hip. a. extension of knee and hip at the same time	
	Complete flexion and extension of the knee and hip at least three times.	
	Do not force any joint beyond the point of free movement.	
	Candidate <u>must ask</u> at least once during the ROM exercise if there is/was any discomfort/pain.	
	Leave resident in a comfortable position.	
	Lower bed.	
	Place call light or signaling device within easy reach of the resident	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

RANGE OF MOTION SHOULDER

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide for privacy.	
Raise bed height.	
Position resident supine (bed flat).	
Position resident in good body alignment.	
Place one hand under the resident's elbow.	
Place other hand under the resident's wrist.	
Do not cause discomfort/pain at any time during ROM procedure.	
Raise the resident's arm up and over the resident's head. a. flexion	
Bring the resident's arm back down to the resident's side. a. extension	
Complete flexion and extension of shoulder at least three times.	
Continue same support for shoulder joints by placing one hand under the resident's elbow and the other hand under the resident's wrist.	
Move the resident's entire arm out away from the body. a. abduction	
Return arm to the resident's side. a. adduction	
Complete abduction and adduction of the shoulder at least three times.	
Do not force any joint beyond the point of free movement.	
Candidate <i>must ask</i> at least once during the ROM exercise if there is/was any discomfort/pain.	
Leave resident in a comfortable position.	
Lower bed.	
Place call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	

VITAL SIGNS - PULSE AND RESPIRATIONS

	<p>Perform hand hygiene.</p> <ul style="list-style-type: none"> a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry. 	
	Explain the procedure to resident.	
	Locate the radial pulse by placing tips of fingers on thumb side of the resident's wrist.	
	<p>Count pulse for 60 seconds or 30x2.</p> <ul style="list-style-type: none"> a. Tell the RN Test Observer when you start counting and tell her/him when you stop counting. 	
	Record your pulse rate reading on the previously signed recording form.	
	Recorded pulse rate is within 4 beats of RN Test Observer's recorded rate.	
	<p>Count respirations for 60 seconds or 30x2.</p> <ul style="list-style-type: none"> a. Tell the RN Test Observer when you start counting and tell her/him when you stop counting. 	
	Record your respirations reading on the previously signed recording form.	
	Recorded respiratory rate is within 2 breaths of the RN Test Observer's recorded rate.	
	Place call light or signaling device within easy reach of the resident.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	<p>Perform hand hygiene.</p> <ul style="list-style-type: none"> a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry. 	