



D&S Diversified Technologies LLP

Headmaster LLP

Ohio State Tested Nurse Aide Candidate Handbook

**Updated: August 26, 2022*

Version 22

***UPDATE IN HANDBOOK - EFFECTIVE JULY 30, 2022:**

PER ODH: The State of Ohio has implemented emergency rules for the nurse aide training and competency evaluation program. **You must have a score of 70% or better to pass the knowledge portion of the exam.**

Other Updates Effective September 1st, 2022:

- ❖ Virtual knowledge test information – pages 25-26.
- ❖ Changes to the knowledge test subject area question numbers and minor edits to skill task steps are colored **red** for ease of locating.
- ❖ The Weighing an Ambulatory Resident will no longer be tested.
- ❖ Testing attire additional requirement: Fingernails need to be short (no longer than ¼ inch in length), well-kept (filed, no jagged edges) and clean – page 12.

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Contact Information

Questions regarding: testing process • test scheduling • eligibility to test: (877) 851-2355		
Questions regarding: the Nurse Aide Registry • renewals • challenges • demographic changes • out of state reciprocity: (800) 582-5908		
<i>D&S Diversified Technologies, LLP</i> PO Box 418 Findlay, OH 45839 Email: ohio@hdmaster.com Web Site: www.hdmaster.com TMU@: https://oh.tmuniverse.com	Monday through Friday 8:00AM – 8:00PM (EST)	Phone #: (877) 851-2355 Fax #: (406) 442-3357 (applications, scheduling and payment forms) Fax #: (419) 422-8328 (test review, reschedule, refund, no show, ADA and other documentation)
<i>Ohio Department of Health Ohio Nurse Aide Registry (NAR)</i> 246 North High Street Columbus, OH 43215 Email: NAR@odh.ohio.gov	Monday through Friday 8:00AM – 5:00PM (EST)	Phone #: (800) 582-5908 Fax #: (614) 564-2461
<i>Ohio Department of Health Nurse Aide Training and Competency Evaluation Program (NATCEP)</i> 246 North High Street Columbus, OH 43215 Email: NATCEP@odh.ohio.gov Website: www.odh.ohio.gov	Monday through Friday 8:00AM – 5:00PM (EST)	Phone #: (614) 752-8285 Fax #: (614) 564-2596

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Introduction

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

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

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

D&S Diversified Technologies, LLP (D&SDT) has been approved to provide tests and scoring services for nurse aide testing. For questions not answered in this handbook, please contact D&SDT at (877)851-2355 or go to D&SDT's [Ohio STNA](#) [←click link] webpage. The information in this handbook will help you prepare for your examination.

Nurse Aide Registry Requirements

The Nurse Aide Registry provides a list of all State Tested Nurse Aides (STNA) in Ohio. The registry also maintains records of those nurse aides who have had a finding of abuse, neglect or misappropriation of property against them.

The Nurse Aide Registry keeps track of those individuals who have met written and skills test criteria to be certified for employment in long-term care settings, usually nursing homes. Once certified, nurse aides must meet certain requirements to maintain their certification and continue to be listed on the Nurse Aide Registry as able to work in Ohio. Please review the [Nurse Aide Registry Requirements](#). The registry also maintains records of those nurse aides who have had a finding of abuse, neglect or misappropriation of property against them.

The most significant achievement for this area was giving facilities or any individual the ability to inquire on the status of a state tested nurse aide by accessing the registry through the internet. This gives the customer three options to conduct an inquiry. They can call the nurse aide registry and use the voice automated system, talk to a nurse aide registry customer service technician, or use the web-based verification system. This addition will reduce the time it takes to verify the status of a state tested nurse aide. Select the link to access the Nurse Aide Registry: [NURSE AIDE REGISTRY](#)

Additional questions regarding nurse aide registry requirements, lapsed certification and transfer of certification to or from another state may be addressed to the Nurse Aide Registry at (800)582-5908. If you have questions regarding location and dates for nurse aide training classes you may call (614) 752-8285 or view the [NATCEP Program](#) information page.

Criteria to Waive the Nurse Aide Training Requirement

Certain individuals who may submit documentation to ODH for approval and written verification to waive the nurse aide training requirement to sit for the Ohio nurse aide exam are outlined below:

- An individual enrolled in a pre-licensure program of nursing education approved by the board of nursing, or by an agency of another state that regulates nursing education, who has provided the director or the director's designee with a certificate from the program indicating that the individual has successfully completed the courses that teach basic nursing skills including infection control, safety and emergency procedures, and personal care.
- An individual who has the equivalent of twelve months or more of full-time employment in the preceding five years in a position with hospital experience that includes the provision of direct patient care involving the performance of daily living activities, such as toileting, bathing, feeding, dressing, etc.
- An individual with military occupational training and experience in the United States Armed Forces in positions including, but not limited to, Medical Specialist, Healthcare Specialist, and Hospital Corpsman, may qualify for this waiver if they can provide documentation of at least sixteen hundred (1600) hours of providing direct patient care involving the performance of daily living activities. The documentation can include official training documents and/or a letter on official letterhead that identifies each exact job task that meets the direct care/performance of daily living requirement, totaling a minimum of 1600 hours signed by a supervisor.

When a candidate is scheduled by D&SDT, we will notify the candidate via email and text message of their test date and time. If you do not receive an email or text from D&SDT within 5 business days of sending us your scheduling request and payment, call us immediately or during non-business hours, leave us a message on the answering machine at (877)851-2355.

You can also view your Test Confirmation Letter any time by signing into your TMU© account with your Email or Username and Password. (See 'Test Confirmation Letter', for instructions and screen shots.)

Active Duty and Veteran GI Bill Benefits

D&SDT has been approved by the Department of Veterans Affairs (VA) as an approved testing vendor for the Ohio STNA exam. If you are an active duty or retired service member you may be eligible for reimbursement of exam fees if funds are available through your GI Bill. To request VA reimbursement of exam fees you must provide your receipt of paying your STNA exam fees along with a completed VA Application for Reimbursement of Licensing or Certification Test Fees [Form 22-0803](#) to the VA for reimbursement. Additional information regarding the GI Bill can be found on the [VA website](#).

Priority of Service on Test Day

If you are active or retired military, veteran or spouse of a veteran, you are eligible to receive priority of service on testing day. To qualify, you must provide the following additional proof of service documentation to the RN Test Observer at check-in on test day:

- Department of Defense Identification Card (active, retired or TDRL).
- DD214 Military Discharge Certificate indicating disposition of discharge.

- Report of Separation from the national archives at the National Personnel Records Center (NPRC) in St. Louis, Missouri.
- Veterans Identification Card from the Department of Veterans Affairs.

Americans with Disabilities Act (ADA)

ADA Compliance

The Ohio Department of Health (ODH) Office of Health Assurance and Licensing Nurse Aide Training Competency Evaluation Program (NATCEP) Unit and D&SDT provide reasonable accommodations for candidates with disabilities or limitations that may affect their ability to perform the nurse aide competency examination. Accommodations are granted in accordance with the Americans with Disabilities Act (ADA).

If you have a qualified disability or limitation, you may request special accommodations for examination. Accommodations must be approved by D&SDT in advance of examination. The request for accommodations can be found on the [D&SDT-HEADMASTER webpage](#) or by clicking on this link: [ADA Accommodation Form 1404](#). This form must be submitted to D&SDT with required documentation listed on the second page of the ADA application in order to be reviewed for a special accommodation. Please allow additional time for your request to be approved. If you have any questions regarding the ADA review process or specific required documentation, please call D&SDT at (877)851-2355.

ADA request forms submitted without supporting documentation of a diagnosed disability will not be accepted or reviewed.

Please allow additional time for your request to be approved. If you have any questions regarding the ADA review process or specific required documentation, please call D&SDT at (877)851-2355.

The Ohio Nurse Aide Competency Exam

Payment Information

Exam Description	Price
Knowledge Test or Retake	\$26
Oral Knowledge Test or Retake	\$36
Skill Test or Retake	\$78

Complete your Initial Log In

Your initial registration information will be entered in the D&SDT Ohio STNA TestMaster Universe (TMU©) database.

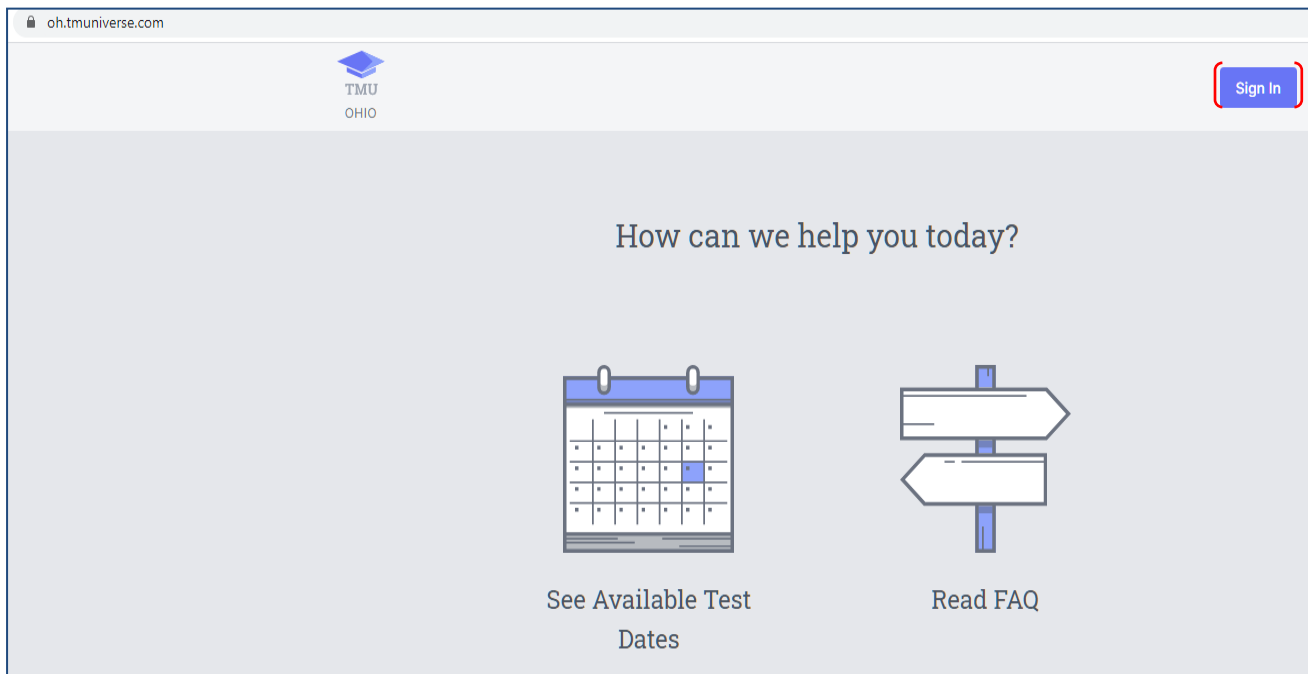
Ohio STNA Candidate Handbook

IMPORTANT: Before you can test, you must sign in to TMU© (<https://oh.tmuniverse.com>) using your secure Email or Username and Password and verify that your demographic information is correct.

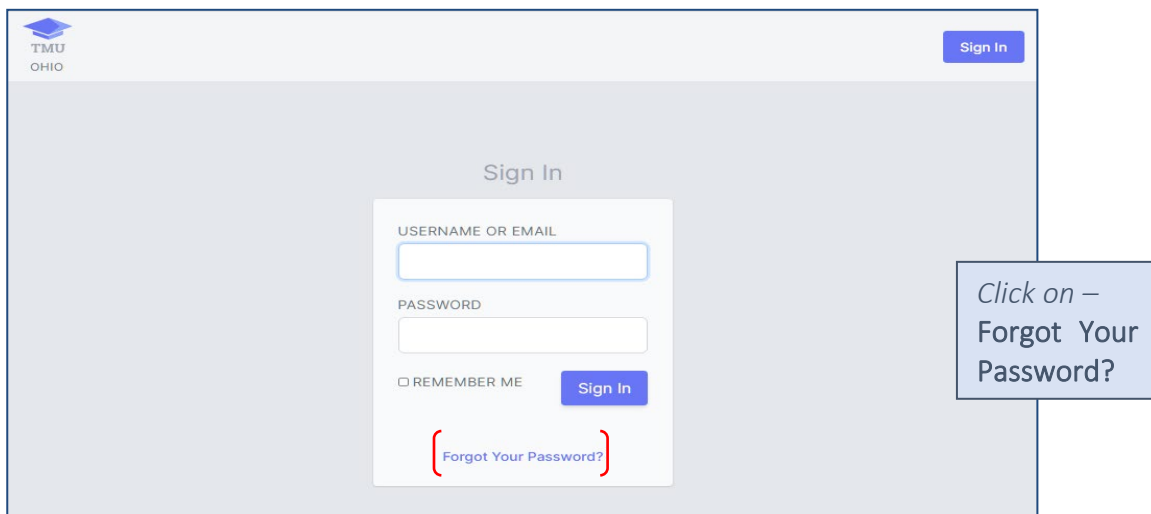
- It is highly recommended that when you receive your confirmation email from TMU© (check your junk/spam mail) that your record has been created, that you sign in to your record, update your password and verify your demographic information.

If you do not know your Email or Username and Password, enter your email address and click on “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 are unable to sign in for any reason, contact D&SDT at (877)851-2355.

This is the Ohio STNA TMU© main page <https://oh.tmuniverse.com>:



Forgot your Password and Recover your Account



Ohio STNA Candidate Handbook

Type in your Email Address

Click on –
Recover Account

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

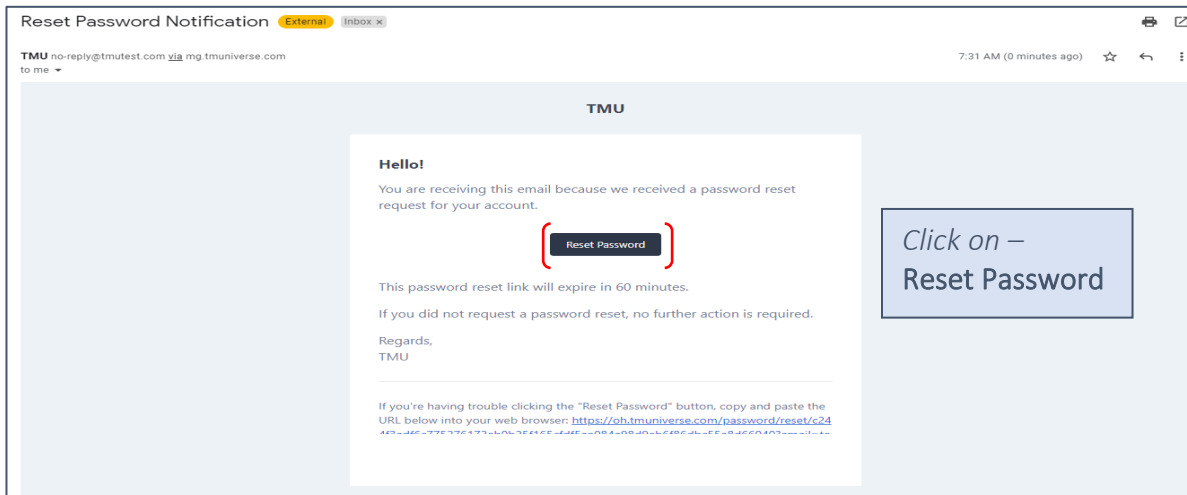
Click on the reset link in your email to reset your password. (See next page.)

-OR-

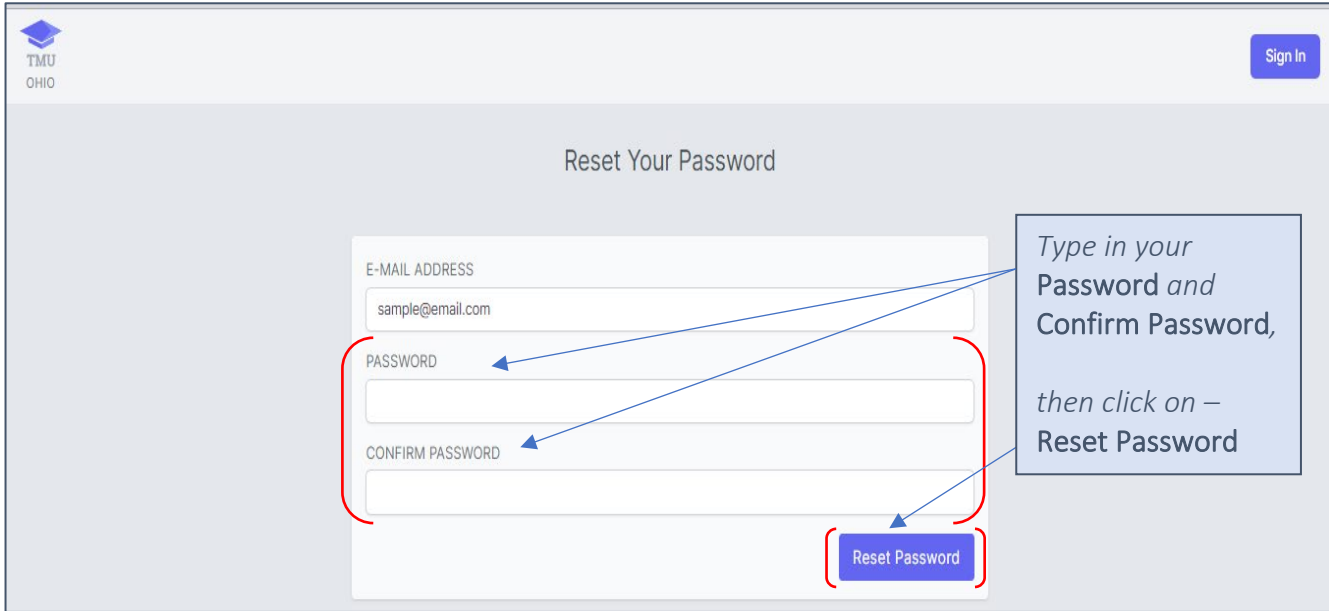
You can type in the requested data under **Using other Information**

Click on -
Recover Account

Email you will receive to reset your password:



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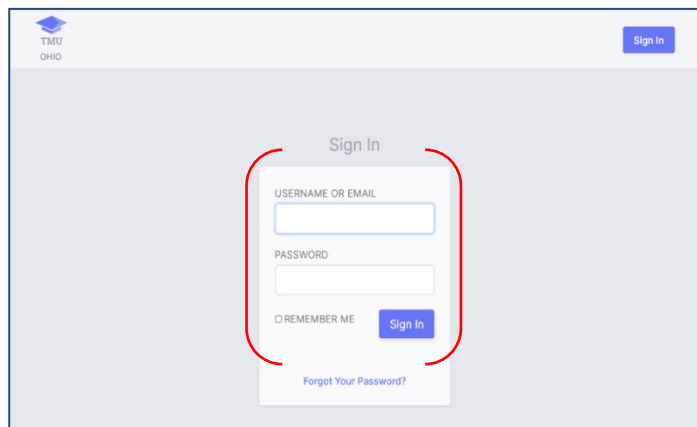
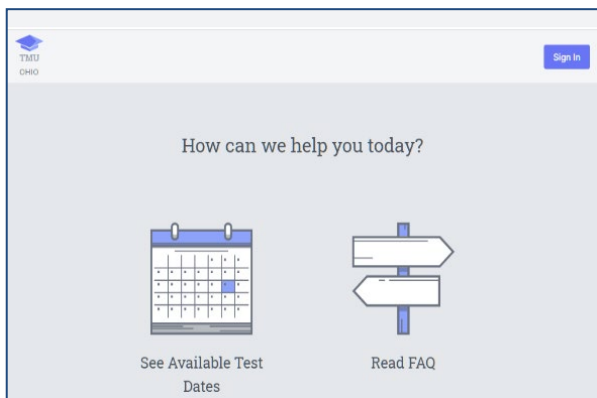


Schedule an Exam

Once your completed record is in the D&SDT Ohio STNA TestMaster Universe© (TMU©) database, and you have verified that all information is correct, you may schedule your exam date online at the Ohio TMU© webpage at <https://oh.tmuniverse.com> using your Email or Username and Password (instructions with screen shots below). If you are unable to sign in with your email, please call D&SDT-HEADMASTER for assistance at (877)851-2355.

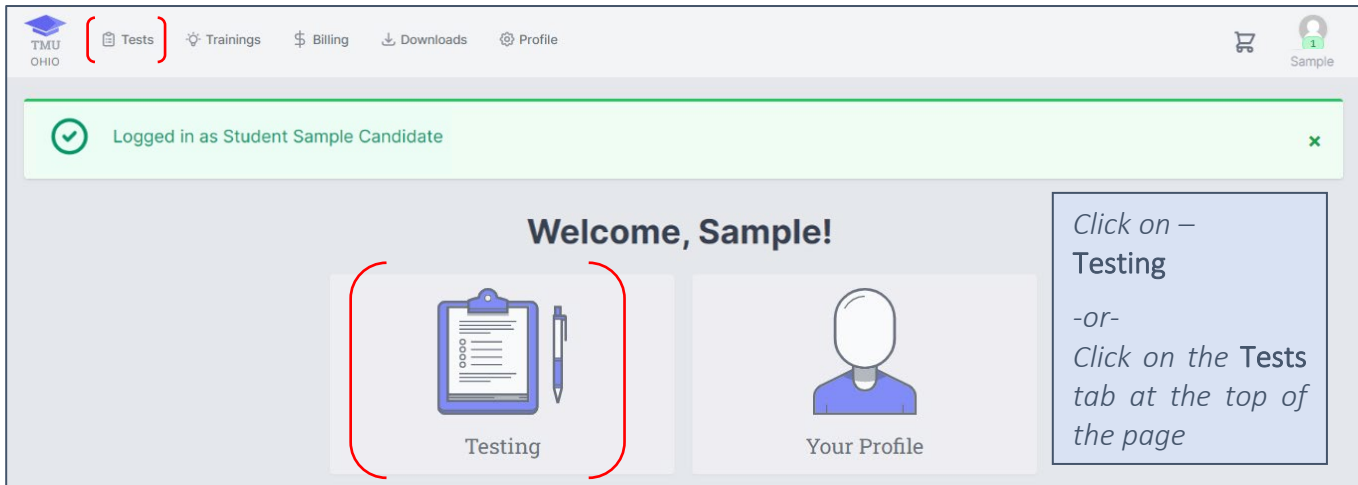
Securely processed Visa or MasterCard credit card or debit card information is required when scheduling online. After paying your testing fees, you will be able to schedule and/or reschedule up to 1 full business day prior to a scheduled test date of your choice. You will receive your test confirmation notification by email, text or by signing in to your account. You may login with any Internet connected device. To schedule or reschedule your test date, sign in to the Ohio TMU© webpage at <https://oh.tmuniverse.com> with your Email or Username and Password. If you are unable to schedule/reschedule on-line, please call D&SDT at (877)851-2355 for assistance.

This is the Ohio STNA TMU© main page:



Ohio STNA Candidate Handbook

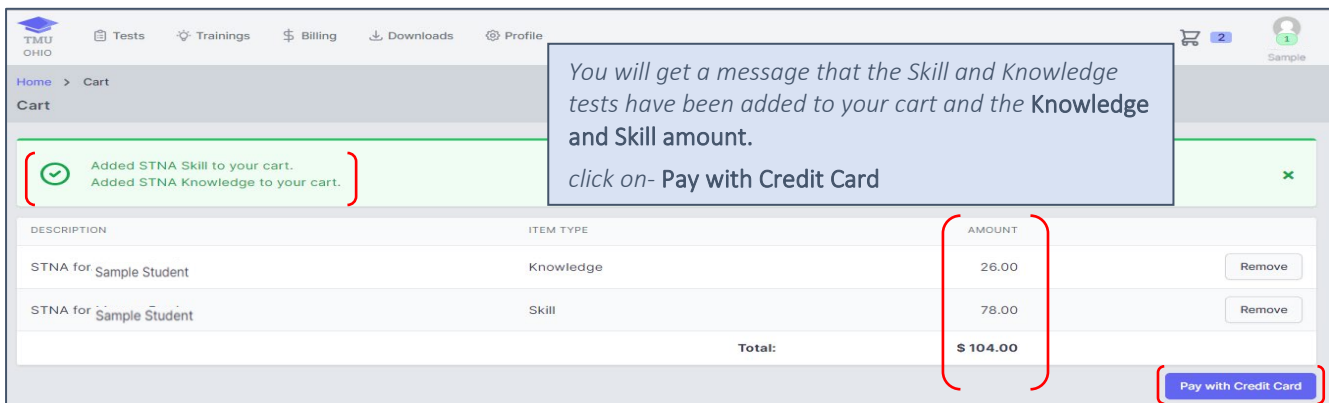
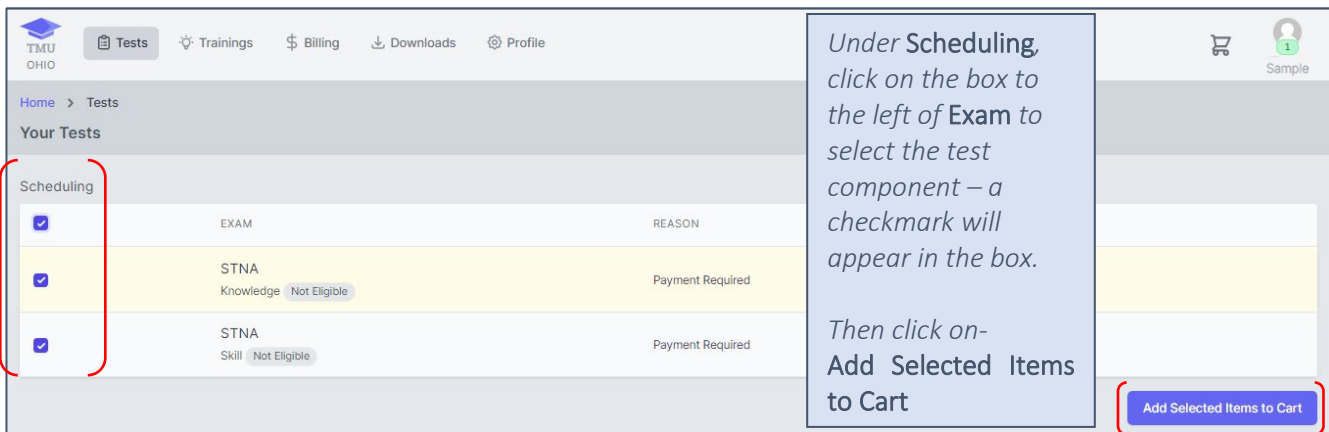
This is the home screen you will see once you have signed in:



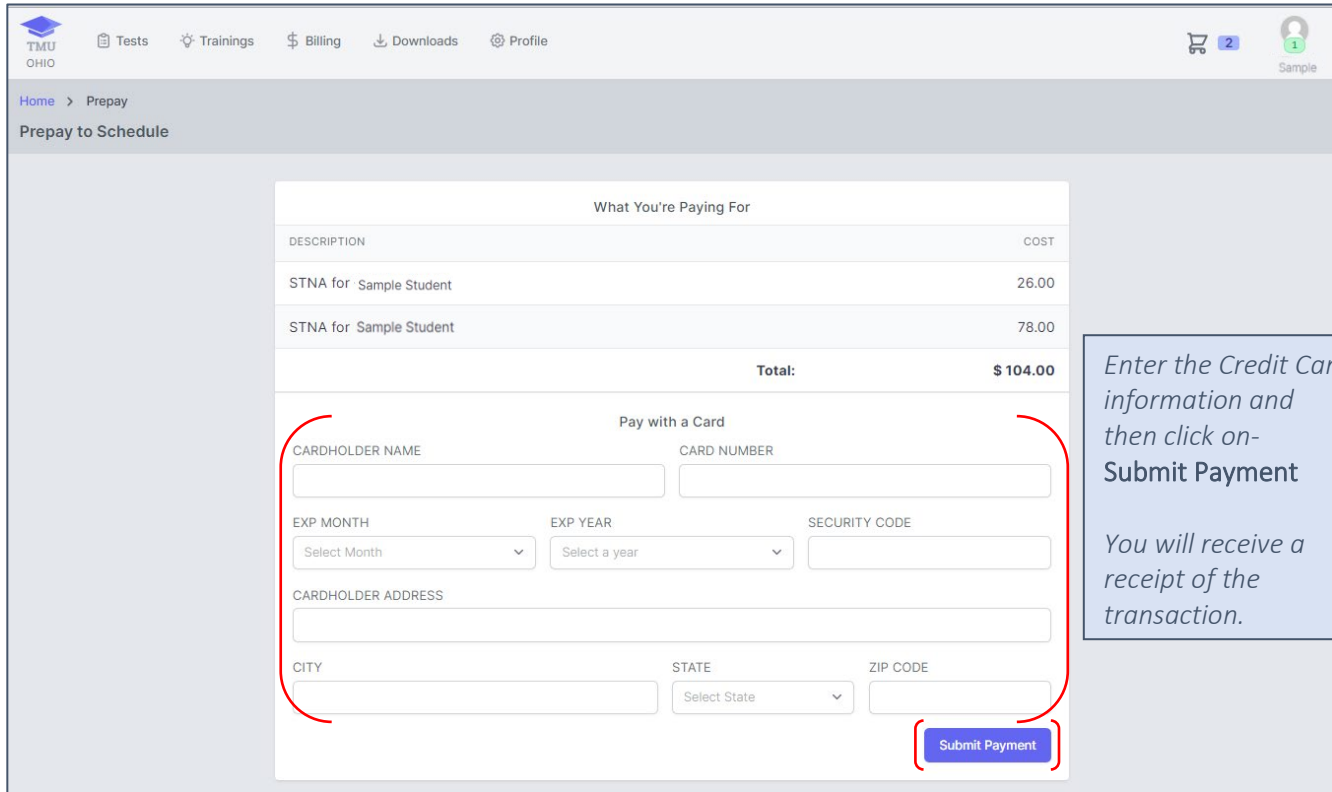
Self-Pay of Testing Fees in TMU©

Testing fees will need to be paid before you can schedule a test date. Some training programs pre-pay testing fees for their graduating students. Your program/instructor will have informed you if this is the case. Prior to scheduling a test, verify with your instructor if the training program has already prepaid for your test.

Securely processed Visa or MasterCard credit card or debit card information is required when paying testing fees online.



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TMU OHIO | Tests | Trainings | Billing | Downloads | Profile | Sample

Home > Prepay

Prepay to Schedule

What You're Paying For	
DESCRIPTION	COST
STNA for Sample Student	26.00
STNA for Sample Student	78.00
Total:	\$ 104.00

Pay with a Card

CARDHOLDER NAME CARD NUMBER

EXP MONTH EXP YEAR SECURITY CODE

CARDHOLDER ADDRESS

CITY STATE ZIP CODE

Enter the Credit Card information and then click on-Submit Payment

You will receive a receipt of the transaction.

You may also pay your testing fees by emailing, accounting@hdmaster.com, mailing P.O. Box 6609, Helena, MT 59604, or faxing, (406)442-3357, a \$5.00 fax fee applies, to D&SDT-Headmaster a paper [Scheduling and Payment Form 1402OH](#), along with your payment (money order, cashier's check, facility check, Visa or MasterCard). No personal checks or cash are accepted. **Please make money orders or cashier checks out to D&SDT**. All D&SDT forms can be found on the [Ohio STNA webpage](#).

If you fax your D&SDT Scheduling and Payment Form 1402OH, a credit card payment is required and a \$5 Priority Fax Service Fee applies. If we are able to schedule you to test within ten business days of your requested test date a \$15 Express Service Fee and/or a \$39.50 Overnight Express Shipping Fee per candidate may apply.

Once we receive your scheduling and payment form and process your payment, you will be notified via email and text message that you are eligible to schedule into a test event. If you do not receive an email or text message within 5 days of submitting your Scheduling and Payment form, please call D&SDT to check on the status at (877)851-2355. You will then need to sign in to your TMU© record (<https://oh.tmuniverse.com>) using your Email or Username and Password. Please see instructions under **"Schedule/Reschedule a Test Date"**. D&SDT **does not send** postal mail test confirmation letters to candidates.

Note: Candidate Payment and Scheduling Form 1402's with any missing or incomplete information, payment or signatures will not be processed and the form will be shredded. If a money order or cashier's check was sent with the form, it will be mailed back to the candidate.

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

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Schedule/Reschedule into a Test Event

TMU OHIO Tests Trainings Billing Downloads Profile

Sample

Logged in as Student Sample Candidate

Welcome, Sample!

Testing Your Profile

TMU OHIO Tests Trainings Billing Downloads Profile

Sample

Home > Tests

Your Tests

Scheduling

EXAM	REASON
STNA Knowledge Eligible	
STNA Skill Eligible	

Testing History

No test history on record.

Schedule Schedule

All eligible test events will appear in this format.

To select a test, click on - Schedule next to the corresponding test component, knowledge or skills.

TMU OHIO Tests Trainings Billing Downloads Profile

Sample

Home > Tests > Find Event

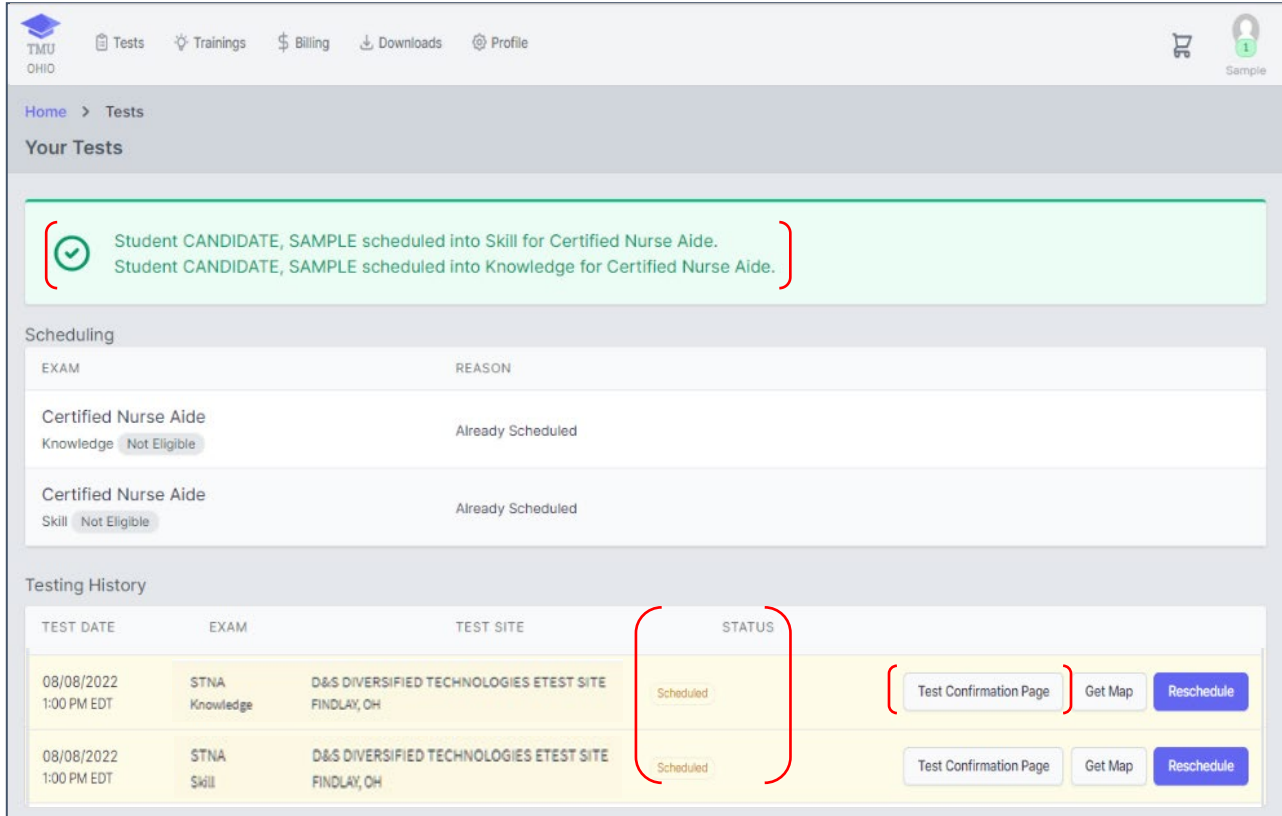
Find Event OH STNA TESTING

TEST DATE	TEST SITE	SCHEDULING FOR
08/08/2022 1:00 PM EDT	SCIOTO COUNTY CTC/PS (TESTING) LUCASVILLE, OH	K STNA S STNA
08/08/2022 8:30 AM EDT	SCIOTO COUNTY CTC/PS (TESTING) LUCASVILLE, OH	K STNA S STNA
08/09/2022 3:30 PM EDT	BALIZZA HCS (TESTING) CINCINNATI, OH	K STNA S STNA
08/09/2022 4:00 PM EDT	DLM Group (Testing) Cleveland, OH	K STNA S STNA
08/10/2022 8:00 AM EDT	WASHINGTON COUNTY CAREER CENTER (TESTING) MARIETTA, OH	K STNA S STNA

Schedule Schedule Schedule Schedule Schedule

To select a test site and test date, click on - Schedule

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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	REASON
Certified Nurse Aide Knowledge Not Eligible	Already Scheduled
Certified Nurse Aide Skill Not Eligible	Already Scheduled

Testing History

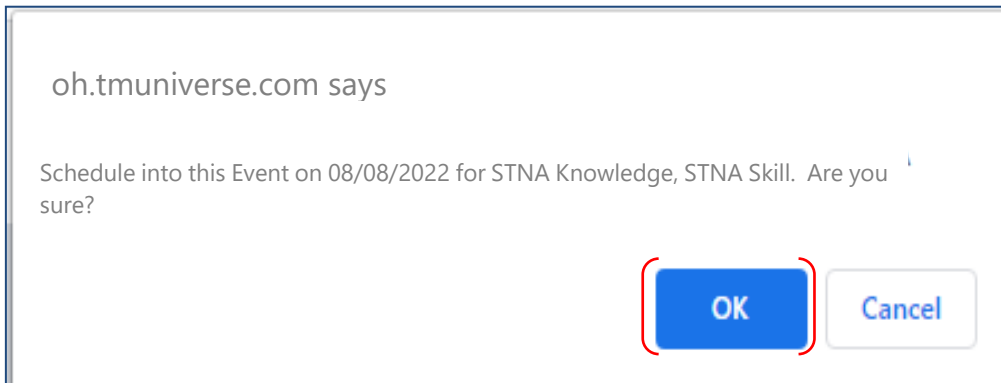
TEST DATE	EXAM	TEST SITE	STATUS	
08/08/2022 1:00 PM EDT	STNA Knowledge	D&S DIVERSIFIED TECHNOLOGIES ETEST SITE FINDLAY, OH	Scheduled	Test Confirmation Page Get Map Reschedule
08/08/2022 1:00 PM EDT	STNA Skill	D&S DIVERSIFIED TECHNOLOGIES ETEST SITE FINDLAY, OH	Scheduled	Test Confirmation Page Get Map Reschedule

The screen above confirms you are scheduled into a test date to take your knowledge and skills exam.

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

Click on-

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



oh.tmuniverse.com says

Schedule into this Event on 08/08/2022 for STNA Knowledge, STNA Skill. Are you sure?

[OK](#)
[Cancel](#)

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

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.

Please review the Ohio STNA Candidate Handbook for specific instructions on time to arrive at test event, ID requirements, testing attire, testing policies and procedures, what to expect, etc.

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Note: Failure to read the candidate handbook could result in No Show for your test event for not adhering to the policies of testing, etc.

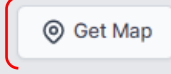
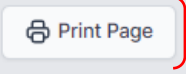
It is important you read this letter!

Test Confirmation Letter

Click on-
Print Page to print your confirmation letter.

Click on-
Get Map to get directions to the test site.

Scheduled Test Confirmation - Ohio STNA

Test Date: 08/08/2022
Test Time: 1:00 PM EDT
Test Exam: Knowledge - STNA
Test Site: SCIOTO COUNTY CTC/PS (TESTING)
LUCASVILLE, OH 45648

CANDIDATE ONE PRACTICE
PO BOX 418
FINDLAY, OH 45839

Please refer to the [Ohio STNA Candidate Handbook](#) for important information regarding ID requirements, testing attire, what to expect on testing day, etc.

Please see the **‘Virtual Knowledge Exam Option’** under the Knowledge/Oral Test section if you are interested in taking your knowledge exam virtually from your home, etc. If you have any questions regarding your test scheduling, call D&SDT at (877)851-2355, Monday through Friday, excluding holidays, 8:00AM to 8:00PM EST.

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

Time Frame for Testing from Training Program Completion

You must schedule a test date **within two years of your date of training program completion**. After two years, you must complete another ODH approved training program in order to be eligible to schedule testing.

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

If you have any questions regarding your test scheduling, call D&SDT at (877)851-2355, during regular business hours 8:00AM to 8:00PM, EST, Monday through Friday, excluding holidays.

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Exam Check-In

You should arrive at your confirmed test site between twenty and thirty (20-30) minutes before your exam is scheduled to start. (*For example:* if your test start time is 8:00AM – you need to be at the test site for check-in no later than 7:30 to 7:40AM.)

- If you are scheduled into a virtual knowledge exam, please see procedures/policies under **'Virtual Knowledge Exam Option'** in the Knowledge/Oral Test section.

Testing Attire

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

- You must be in full clinical attire
 - Which consists of a scrubs top and scrub pants, scrub skirt (long, loose-fitting) or scrub dress (long, loose-fitting).
 - No opened toed shoes (example; flip-flops or sandals) are allowed.
 - Scrubs and shoes can be any color/design.
- No wrist watches, smart watches or fitness monitors are allowed.
- Long hair must be pulled back.
- **EFFECTIVE 9-1-2022:** Fingernails need to be short (no longer than ¼ inch in length), well-kept (filed, no jagged edges) and clean.



Note: You will not be admitted for testing if you are not wearing scrubs attire, the appropriate shoes and long hair pulled back with short, well-kept and clean fingernails. You will be considered a NO SHOW. You will forfeit your testing fees and have to pay for another exam date.

Identification

Mandatory: You must bring a **US GOVERNMENT ISSUED, PHOTO-BEARING, SIGNED, NON-EXPIRED FORM OF IDENTIFICATION and your ORIGINAL SOCIAL SECURITY CARD.** A letter from the Social Security office cannot be accepted. Only original IDs and social security cards are accepted. No photocopies, faxes or images are allowed. Examples of the forms of US government issued, signed, photo ID's that are acceptable are:

- State or other United States Government Issued Driver's License
- State issued Identification Card (*non-expired from any state is acceptable*)
- US Passport (Foreign Passports and Passport Cards *are not acceptable*)
 - *Exception: A Foreign Passport that contains a US VISA is acceptable*
- Military Identification (*that meets all identification criteria*)
- Alien Registration/Work Authorization Card (*that meets all identification requirements – *may contain a fingerprint in place of a signature*)
- Concealed Hand Gun Carry Permit (*that meets all identification criteria*)

The **FIRST** and **LAST** names listed on the ID and social security card presented to the RN Test Observer during sign-in at your test event **MUST EXACTLY MATCH** the FIRST and LAST names that were entered in the Ohio STNA TMU© database.

If you need to apply for new social security card, please do not schedule your test date until you have received your new card from the Social Security office.

Any name changes that need to be made (due to marriage, divorce, etc.) must have legal documentation submitted to D&SDT at least two (2) business days prior to your scheduled test date. You may call D&SDT at (877)851-2355 to confirm that your name of record matches your US government issued ID and original social security card, or sign in to your record in TMU© to check on or change your demographic information.

Note:

- **You will not be admitted for testing if you do not bring proper/valid identification and your original social security card.**
 - Be sure your US government issued identification is not expired and that both your ID and original social security card are signed.
 - Check to be positive that both your FIRST and LAST printed names on your photo ID and original social security card match your current name of record in TMU©.
 - A driver's license or state-issued ID card that has a hole punched in it is NOT VALID and will not be accepted as an acceptable form of ID.

- In cases where names do not match or your ID(s) are not proper/valid, you will be considered a NO SHOW and you will forfeit your testing fees and have to pay for another exam date.

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

Instructions for the Knowledge and Skill Tests

Test instructions for the knowledge and skill tests will be provided in written format in the waiting area when you sign-in for your test. Oral and PDF versions are also available anytime from your smart phone via the knowledge test (paper and electronic versions and virtual version) and skill test instruction links on the D&SDT's Ohio STNA webpage, www.hdmaster.com, under the Candidate column.

These instructions detail the process and what you can expect during your exams. Please read through the instructions (or listen to them on your smart phone) **before** entering the knowledge or virtual knowledge test room or skill demonstration lab. The instructions will be left in the waiting area during testing for you to refer to throughout your time at the test site. The RN Test Observer and Knowledge Test Proctor will ask you questions about the instructions you read when you enter the knowledge test room and/or skill test lab.

- If you are scheduled into a virtual knowledge exam, please see procedures/policies under '**Virtual Knowledge Exam Option**' in the Knowledge/Oral Test section for information and where the Virtual Knowledge Test Instructions can be found on the Ohio STNA webpage at www.hdmaster.com, click on Ohio STNA.

Testing Policies

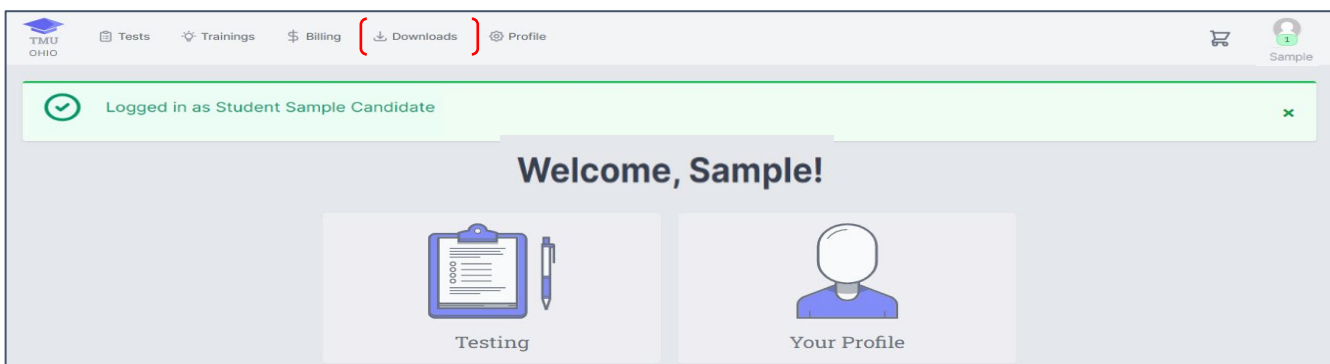
The following policies are observed at each test site—

- Make sure you have signed in to your TMU© record at <https://oh.tmuniverse.com> before your test date to update your password and verify your demographic information. Refer to the **‘Complete Your Initial Sign In’** section of this handbook for instructions and information.
 - If you have not signed in and updated your password and verified your demographics in your TMU© record when you arrive for your test, you may not be admitted to the exam and any exam fees paid *will NOT be refunded*.
- Plan to be at the test site up to six (6) hours.
- If you arrive late for your confirmed exam (you need to be at the test site to check in at least 20-30 minutes before your scheduled start time – if your test start time is 8:00AM, you need to be at the test site by 7:40AM at the latest), you will not be admitted to the exam, considered a No Show, and any exam fees paid *will NOT be refunded*.
 - If you are scheduled into a virtual knowledge exam, please see procedures/policies under **‘Virtual Knowledge Exam Option’** in the Knowledge/Oral Test section.
- If you do not bring valid and appropriate US government issued, non-expired, signed photo ID and your signed original social security card, you will not be admitted to the exam, considered a No Show and any exam fees paid *will NOT be refunded*.
 - If the FIRST and LAST printed names on your ID and original social security card do not match your current name of record, you will not be admitted to the exam, considered a No Show and any exam fees paid *will NOT be refunded*.
- If you do not wear full clinical attire and shoes with long hair pulled back and fingernails short, well-kept and clean and conform to all testing policies for both the knowledge and skills portion of the exam, you will not be admitted to the exam, considered a No Show and any exam fees paid *will NOT be refunded*.
- If you NO SHOW for your exam day, any test fees paid *will NOT be refunded*. You must re-pay your testing fees on-line in your own TMU© record or submit Form 1402OH (Scheduling and Payment Form) to schedule another exam date.
- If you refuse to show the RN Test Observer your required ID and original social security card and/or refuse to sign your signature on the required sign-in forms, you will not be allowed to test. You will be asked to leave the test site, considered a No Show and any exam fees paid *will NOT be refunded*.
- **ELECTRONIC DEVICES AND PERSONAL ITEMS:** Cell phones, smart watches, fitness monitors, electronic recording devices, Bluetooth-connected devices 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. You will be informed by the testing team of the designated area to place your personal items and electronic devices and you are to collect these items when you complete your test(s).
 - No wrist watches are allowed to be on or near you in either testing room.
 - All electronic devices must be **turned off**. Smart watches, fitness monitors and Bluetooth-connected devices must be removed from your wrist/body.
 - You are not allowed to have coats or hooded apparel covering your head during testing in the testing rooms.
 - If you are scheduled into a virtual knowledge exam, please see procedures/policies under **‘Virtual Knowledge Exam Option’** in the Knowledge/Oral Test section.

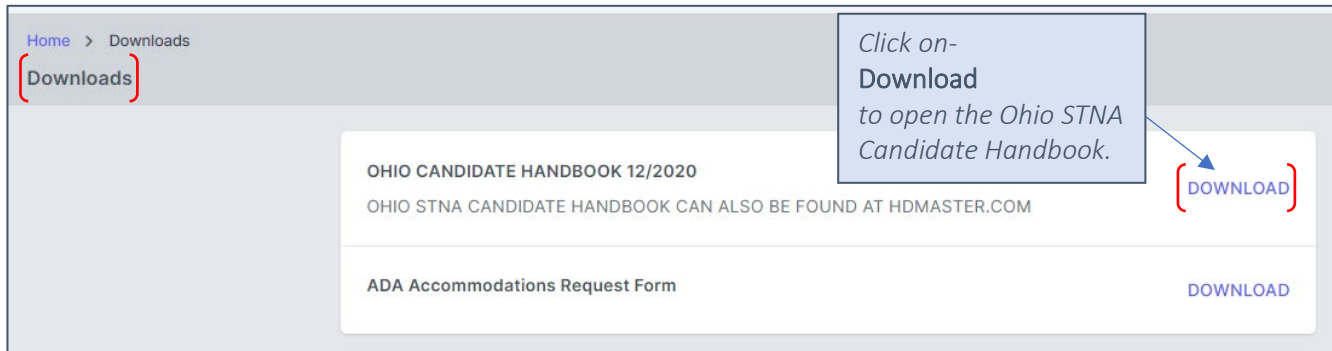
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- Anyone caught using any type of electronic recording device during testing will be removed from the testing room(s), have their test scored as a failed attempt, forfeit all testing fees and will be reported to their training program and the Ohio Department of Health (ODH).
- Candidates with long hair will be asked to pull their hair back by the testing team to ensure that no Bluetooth devices are being used.
- You may, however, use personal devices during your free time in the waiting area.
- You are encouraged to bring a jacket, snack, drink or study material to have during your free time in the waiting area.
- Foreign language paper word-for-word translation dictionaries are allowed and must be shown to the RN Test Observer at check-in (for both a virtual knowledge test and an on-site test event) and to the Knowledge Test Proctor when you enter the knowledge test room (on-site test event). If there is any writing or definitions, the translation dictionary will not be permitted to be used during testing. Electronic dictionaries are not allowed.
- You may not remove any notes or other materials from the testing room.
- You are not permitted to eat, drink, smoke, use e-cigarettes or vape during the exam.
- You are not allowed to leave the testing room (knowledge test room or skills lab) once the exam has begun **for any reason**. If you do leave during your test event, you will not be allowed back into the testing room to finish your exam.
- If you are discovered causing a disturbance of any kind, engaging in any kind of misconduct or try to take any notes or testing materials from the testing room, you will be dismissed from the exam, your test will be scored as a failed attempt, you will forfeit all testing fees paid and you will be reported to your training program and the Ohio Department of Health (ODH).
- No visitors, guests, pets (including companion animals) or children are allowed.
 - Service animals with an approved ADA accommodation in place are allowed.
- You may not test if you have any type of physical limitation (excluding pre-arranged ADA's) that would prevent you from performing your duties as an STNA. (Examples: cast, arm/leg braces, crutches, etc.) Call D&SDT at (877)851-2355 immediately if you are on doctor's orders. You must image and email, ohio@hdmaster.com or fax, (419)422-8328, a doctor's order **within three (3) business days** of your scheduled exam day to qualify for a free reschedule.
- Test sites, RN Test Observers, Knowledge Test Proctors and Actors are not responsible for candidate personal belongings at the test site.
- **Please refer to this Ohio STNA Candidate Handbook before your test day for any updates to testing and/or policies.**

The Candidate Handbook can also be accessed within your TMU@ record under your 'Downloads' tab:



Ohio STNA Candidate Handbook



Inclement Weather and Unforeseen Circumstances Policies

If an exam date is cancelled due to weather or other unforeseen circumstances, D&SDT-Headmaster staff will make every effort to contact you via email, text message and phone call using the contact information we have on file 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.

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

- The county you reside in or the county of the testing site is placed on a Level 2 or Level 3 snow emergency.
 - LEVEL 2 SNOW EMERGENCY: Roadways are hazardous with blowing and drifting snow. Roads may also be very icy. Only those who feel it is necessary to drive should be out on the roads. Motorists should use extreme caution.
 - LEVEL 3 SNOW EMERGENCY: All roadways are closed to non-emergency personnel. No one should be driving during these conditions unless it is absolutely necessary to travel or a personal emergency exists. Those traveling on the roads may subject themselves to arrest.
- The test site closes.
- The test observer cancels the test event.
- There is an accident due to weather on your route to the test site, in which case:
 - Documentation from the Department of Transportation Services or a Police report is required within 3 business days of your scheduled exam day to qualify for a free reschedule.

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

Candidate Feedback – Exit Survey

Candidates are provided the opportunity to complete an exit survey via a link to a Google Docs Survey when checking their test results in their TMU© record. The survey is confidential and will not have any bearing on the outcome of any test. You are encouraged to complete the survey questions with honest feedback regarding the examination process to help improve the testing process.

Security

If you refuse to follow directions, use abusive language or disrupt the examination environment, your test will be stopped and scored as a failed attempt. You will be dismissed from the testing room and will forfeit any testing fees paid and a report of your behavior will be given to your training program

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and the Ohio Department of Health (ODH). You will not be allowed to retest for a minimum period of six (6) months.

Anyone who removes or tries to remove test material or takes notes or information from the test site will be reported to their training program and the Ohio Department of Health (ODH) and is subject to prosecution to the full extent of the law. Your test will be scored as a failed attempt and you will forfeit any testing fees paid. You will not be allowed to retest for a minimum period of six (6) months.

If you give or receive help from anyone during testing (which also includes the use of any electronic recording devices such as cell phones, smart watches, navigating to other browsers/sites during your TMU© electronic exam), your test will be stopped and scored as a failed attempt. You will be dismissed from the testing room and will forfeit any testing fees paid. You will be reported to your training program and ODH and you may need to obtain permission from ODH in order to be eligible to test again.

Reschedules

All candidates may reschedule for free online at <https://oh.tmuniverse.com> any time up until one (1) business day before a scheduled test day, 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 record at <https://oh.tmuniverse.com> using your Email or Username and Password. **(See instructions under ‘Schedule/Reschedule into a Test Event’.)**

- *Example:* If you are scheduled to take your exam on a Friday, you would need to reschedule by close of business (D&SDT is open until 8:00PM Eastern Standard, Monday-Friday excluding holidays) the Wednesday before your scheduled exam.

Scheduled test date is on a:	Reschedule the previous:
Monday	The previous Thursday <i>(by 8:00PM Eastern time)</i>
Tuesday	The previous Friday <i>(by 8:00PM Eastern time)</i>
Wednesday	The previous Monday <i>(by 8:00PM Eastern time)</i>
Thursday	The previous Tuesday <i>(by 8:00PM Eastern time)</i>
Friday	The previous Wednesday <i>(by 8:00PM Eastern time)</i>
Saturday	The previous Thursday <i>(by 8:00PM Eastern time)</i>
Sunday	The previous Thursday <i>(by 8:00PM Eastern time)</i>

Note: Reschedules will not be granted less than one (1) full business day prior to a scheduled test date.

Refund of Testing Fees Paid

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

Scheduled in a Test Event

- 1) If you are scheduled in a test event, a refund request of testing fees paid must be made by filling out and submitting the [Refund Request Fillable Form 1405](#) on D&SDT- Headmaster’s main webpage at www.hdmaster.com at least **one (1) full business day** prior to your scheduled test event (excluding Saturdays, Sundays and holidays). No phone calls will be accepted.

- *Example:* If you are scheduled to take your exam on a Saturday, Sunday or Monday, you would need to request a refund by filling out and submitting the Refund Request Fillable Form on the D&SDT-Headmaster main webpage at www.hdmaster.com by close of business the Thursday before your scheduled exam. D&SDT is open until 8:00PM Eastern time, 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 testing fees with D&SDT. Any requests for refunds made beyond the 30 days of payment of testing fees with D&SDT *will not be issued*.

Not Scheduled in a Test Event

- 1) Refund requests must be made within thirty (30) days of payment of testing fees with D&SDT. Any requests for refunds made beyond the 30 days of payment of testing fees with D&SDT *will not be issued*.
- 2) A refund request of testing fees paid must be made by filling out and submitting the [Refund Request Fillable Form 1405](#) on D&SDT-Headmaster's main webpage at www.hdmaster.com. No phone calls will be accepted.
- 3) Refund requests made in the required time frame qualify for a full refund of any testing fees paid minus a \$35 refund processing fee.

No Shows

If you are scheduled for an exam and you do not show up without notifying D&SDT at least one (1) full business day prior to your scheduled testing event, **excluding** Saturdays, Sundays and holidays, OR if you are turned away for lack of proper identification, proper attire, or any other reason to deem you ineligible to test, you will be considered a **NO SHOW**. You will forfeit all fees paid and sign into your TMU© record to repay or submit a new testing fee to schedule yourself into a new test event

These fees partially offset D&SDT cost incurred for services requested and resulting work that is performed. If a reschedule or refund request is not received before the one (1) full business day prior to a scheduled test event, excluding Saturdays, Sundays and holidays (see examples under Reschedules and Refund of Testing Fees Paid), a NO SHOW status will exist and you will forfeit your testing fees and must repay the full testing fee to secure a new test event.

No Show Exceptions

Exceptions to the No Show status exist. If you are a No Show for any test component for any of the following reasons, test fees will be refunded or a free reschedule will be authorized to the remitter of record **with appropriate documentation provided within the required time frame**.

- **Car breakdown or accident:** D&SDT must be contacted within one business day via phone call, fax or email and a tow bill, road report, police report or other appropriate documentation must be submitted within **three (3) business days** of the exam date. If we do not receive proof within the 3-business day time frame you will have to pay as though you were a No Show.

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- **Weather or road condition related issue:** D&SDT must be contacted within one business day via phone call, fax or email and a road report, weather report or other appropriate documentation must be submitted within **three (3) business days** of the exam date. If we do not receive proof within the 3-business day time frame you will have to pay as though you were a No Show.
- **Medical emergency or illness:** D&SDT must be contacted within one business day via phone call, fax or email and a doctor's note must be submitted within **three (3) business days** of the missed exam date. If we do not receive proof within the 3-business day time frame you will have to pay as though you were a No Show.
- **Death in the family:** D&SDT must be contacted within one business day via phone call, fax or email and an obituary for **immediate family only** submitted within **seven (7) business days** from a missed exam date. If we do not receive proof within the 7-business day time frame you will have to pay as though you were a No Show. (Immediate family includes parents, grand and great-grand parents, siblings, children, spouse or significant other.)
- **Virtual testing issues:** D&SDT-Headmaster must be contacted within one business day via phone call, fax or email and appropriate documentation must be submitted within **three (3) business days** of the exam date. If we do not receive proof within the 3-business day time frame you will have to pay as though you were a No Show.
 - **Internet outage or issue:** Documentation from Internet provider showing outage date and times.
 - **Computer or cell phone issue:** If computer or cell phone fail to work for any reason, documentation from a computer repair technician/shop or other appropriate documentation.

Test Results

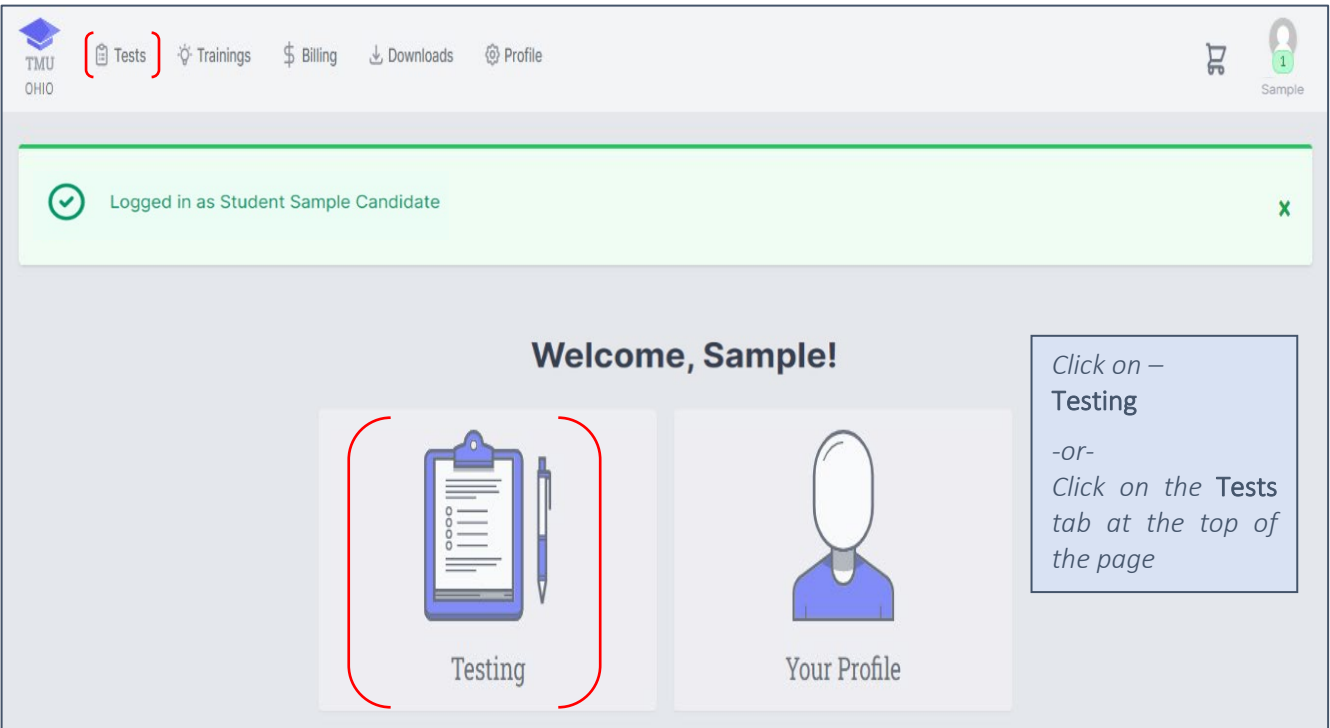
After you have completed both the Knowledge Test and Skill Test components of the competency exam, your test results will be officially scored and double checked by D&SDT scoring teams. Official test results will be available by signing in to your TMU© record after 6:00PM (EST) the business day after your test event.

D&SDT does not send postal mail test result letters to candidates.

-Continued on next page-

Ohio STNA Candidate Handbook

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



Welcome, Sample!

Click on – Testing
-or-
Click on the Tests tab at the top of the page



Home > Tests

Your Tests

Scheduling

<input type="checkbox"/>	EXAM	REASON
<input type="checkbox"/>	STNA Knowledge Not Eligible	Payment Required
<input type="checkbox"/>	STNA Skill Not Eligible	Previously Passed

Add Selected Items to Cart

Testing History

TEST DATE	EXAM	TEST SITE	STATUS
07/26/2022 12:00 PM EDT	STNA Knowledge	WINDSOR RESOURCE (Testing) YOUNGSTOWN, OH	Failed
07/26/2022 12:00 PM EDT	STNA Skill	WINDSOR RESOURCE (Testing) YOUNGSTOWN, OH	Passed

Please take our satisfaction survey

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

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Sample STNA exam results report:

OHIO STNA EXAM RESULTS REPORT

IMPORTANT TEST RESULTS

TEST DATE: Tuesday, July 26, 2022

Dear DANIELLE,

You have **failed** the knowledge portion of the STNA exam.
 Your overall knowledge test score is 70.89%.
 You must have an overall score of **75%** or better to pass.
 You have **passed** the skill portion of the STNA exam.

Any weaknesses indicated in your test results are listed below:

Knowledge Exam Results By Subject Area

Safety	75%
Communication	83%
Infection Control	100%
Resident Rights	80%
Data Collection	75%
Basic Nursing Skills	64%
Role / Responsibility	78%
Disease Process	50%
Mental Health	86%
Personal Care	64%
Care Impaired	50%
Older Adult Growth and Development	33%

Skill Exam Incomplete Steps

Ambulation with Walker (10-2020)
 Positioned walker.
 Stabilized walker using hand and/or foot...
 Removed gait belt.
 Performed hand hygiene. (Covered all sur...
PPE and Mouth Care (10-2020)
 Rinsed toothbrush.

[**Vocabulary words to study:** cuing, mechanical lift, Resident safety, disease process, fecal impaction, catheter, mental health, adaptive device, distal, depression, resisting Care, restraints, restraint alternative, communication, aging, walker, medical record, chain of command, resident identification, centered care, body mechanics, subjective, personal care]

NOTE: Federal and State regulations allow health care facilities to employ students for up to 120 days from the day employment and training is offered in an approved facility-based nurse aide training and competency evaluation program. However, if you fail three attempts on either portion of the state competency exam, the facility is no longer allowed to employ you to perform nurse aide duties.

Test Attempts

You have **three (3) attempts** to pass the knowledge and skill test portions of the exam within two (2) years from your date of nurse aide training program completion. If you do not complete testing within two years from completion of training, you must complete a new ODH approved training program in order to become eligible to further attempt Ohio STNA examinations.

Ohio Nurse Aide Registry Certification

After you have successfully passed both the Knowledge Test and Skill Test components of the nurse aide exam, your test results will be sent electronically to the Ohio Department of Health by D&SDT. You will be placed on the Ohio Nurse Aide Registry.

Laminated Certified STNA Card

Your passed results letter with your laminated STNA card will be mailed to the address in your record by D&SDT.

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Retaking the STNA Test

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

You can schedule a test or re-test on-line in your TMU© record with your Email or Username and Password online at: <https://oh.tmuniverse.com>. (See instructions with screen shots under 'Schedule/Reschedule into a Test Event'.)

You will need to pay with a Visa or Master Card before you are able to schedule. Or, you may schedule a re-test by completing the Scheduling and Payment [Form 1402CND-OH](#).

- You will need to submit your Scheduling and Payment Form 1402CND-OH to D&SDT either by fax at (406)442-3357 (\$5.00 extra fax fee applies), email at accounting@hdmaster.com (scan or image and attach) or mail to P.O. Box 6609, Helena, MT 59604.

If you need assistance scheduling your re-test, please call D&SDT at (877)851-2355 during regular business hours 8:00AM to 8:00PM Monday through Friday, EST, excluding holidays. We are able to assist you in scheduling a test or re-test date as long as your fees have been paid first.

Test Review Requests

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

PLEASE READ BEFORE FILLING OUT THE TEST REVIEW REQUEST: Please call D&SDT at (877)851-2355, during regular business hours, 8:00AM to 8:00PM, Monday through Friday, EST, excluding holidays, and discuss the test outcome you are questioning before committing to sending the \$25 test review request deposit fee. Many times, once you have further details about the scoring of your test, you will understand the scoring process and learn how you can better prepare yourself for subsequent exam attempts. If, after discussion with D&SDT staff, you still have a concern with your testing process that affected the outcome of your exam, you may submit a Test Review Request.

Since one qualification for certification as an STNA in Ohio is demonstration by examination of minimum nurse aide knowledge and skills, the likely outcome of your review will determine who pays for your re-test. If the results of the review are in your favor, D&SDT will pay for your re-test fee and you will not be charged the \$25 test review deposit. D&SDT will review your detailed recollection, your knowledge test markings and any skill task measurements you recorded at the time of your test, in addition to reviewing markings, notations and measurements recorded by the RN Test Observer at the time of your test. D&SDT will re-check the scoring of your test and may contact you and/or the RN Test Observer for any additional recollection of your test(s). After a candidate reaches the age of 18, D&SDT

will only discuss test results or test disputes with the candidate or the candidate's training program. D&SDT will not review test results or disputes with family members or anyone else on behalf of the candidate once the candidate is 18 years of age. D&SDT will complete your review request within 10 business days of the receipt of your timely review request and will email the review results to your email address of record.

The Knowledge/Oral Test

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

The Knowledge Test Proctor will hand out materials and give instructions for taking the Knowledge Test. You will have a maximum of ninety (90) minutes to complete the 79 question Knowledge Test. You will be told when fifteen (15) minutes remain. You may not ask questions about the content of the Knowledge Test (such as "What does this question mean?") For paper tests, fill in only one (1) oval on the answer sheet for each question. Do not mark in the testing booklet. Marks in the test booklet will not be accepted as answers. Your answers must appear on the separate scan form answer sheet.

- For paper Knowledge tests, you must bring several sharpened Number 2 pencils with erasers. Do not bring or use ink pens.
- The Knowledge Test Proctor will have scratch paper and a basic calculator available for use during your knowledge exam.

PER ODH: The State of Ohio has implemented emergency rules for the nurse aide training and competency evaluation program.

EFFECTIVE 7-30-2022: You must have a score of **70%** or better to pass the knowledge portion of the exam.

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

NOTE: You will need your TMU© Username or Email and Password to sign in to your knowledge test. Please see the information under '**Complete Your Initial Training**' to sign in to your record in TMU©.

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

An audio (Oral) version of the knowledge test is available. However, you must request an Oral test before you submit your testing fee payment. There is an additional fee of \$10 (total for Knowledge Oral is \$36.00) for an Oral version of the Knowledge test. For paper tests: the questions are read to you, in a neutral manner from an MP3 player with control buttons enabling you to play, rewind or pause questions as needed, in addition to having the knowledge test booklet and scan form. For TMU© electronic tests: the questions are read to you, in a neutral manner, and can be heard through headphones/ear buds plugged into the computer. When taking an electronic Oral exam, the oral

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control buttons will be displayed on the computer screen enabling you to play, rewind or pause questions as needed

Note: On the Oral Knowledge Test, **only the first 59 questions will be read orally**, the remaining 20 questions will have to be answered without oral assistance to assess English reading comprehension.

Selecting an Oral Exam

To select the Oral version of the knowledge test, follow the instructions with screen shots that follow:

Checking the Enable Audio Testing to receive an Oral version of the Knowledge Exam:

The screenshot shows the TMU OHIO candidate portal. At the top, there is a navigation bar with icons for Tests, Trainings, Billing, Downloads, and Profile. A notification banner at the top indicates the user is logged in as 'Student Sample Candidate'. The main content area features a 'Welcome, Sample!' message and two large buttons: 'Testing' (with a clipboard icon) and 'Your Profile' (with a person icon). A red box highlights the 'Your Profile' button. Below this, the 'Testing Preferences' section is visible, with a red box around the 'ENABLE AUDIO TESTING' checkbox, which is checked. A blue callout box on the right provides instructions: 'Click on – Profile or Your Profile', 'Click on the box to the left of Enable Audio Testing to choose the Oral option of the knowledge exam', and 'then click Save Changes at the bottom of the screen to save.' Below the callout, a red warning states: 'Remember to check the Audio Tests? BEFORE YOU SCHEDULE your knowledge exam.' At the bottom right, a 'Save Changes' button is highlighted with a red box.

Click on – Profile or Your Profile

Click on the box to the left of **Enable Audio Testing** to choose the Oral option of the knowledge exam

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

Remember to check the Audio Tests? BEFORE YOU SCHEDULE your knowledge exam.

The knowledge and/or oral knowledge test is in English. Foreign language paper word-for-word translation dictionaries are allowed and must be shown to the RN Test Observer at check-in (for both a virtual knowledge test and an on-site test event) and to the Knowledge Test Proctor when you enter the knowledge test room (on-site test event). If there is any writing or definitions, the translation dictionary will not be permitted to be used during testing. Electronic dictionaries are not allowed.

All test materials (including scratch paper and calculator) must be left in the testing room. Anyone who takes or tries to take materials, notes or information from the testing room is subject to prosecution and will be reported to their training program and to the Ohio Department of Health.

Virtual Knowledge Exam Option

You will have the option to take the knowledge exam virtually. It is important that you read the Virtual Knowledge Test Instructions available on D&SDT-Headmaster's Ohio STNA webpage at www.hdmaster.com before you sign in to your virtual exam.

Virtual Knowledge Test Candidate Requirements

Candidates must have:

- An updated version of Google Chrome as your Internet browser.
 - **Internet Explorer is not supported by TMU©.**
- A reliable Internet (Wi-Fi) connection.
- A personal computer/tablet/laptop to log into TMU© to access the knowledge test.
- **Your Email or Username and Password to take the virtual TMU© Knowledge test.**
- A smartphone to access the 'facetime app' that you will need to have downloaded.
 - D&SDT-Headmaster will provide you information of the 'facetime app' you will need before test day.
 - The night before your scheduled virtual knowledge exam, D&SDT-Headmaster will email you a reminder with the password protected link to join the test event.
- A distraction and interruption free area of your home, etc., where you will be testing.

Virtual Knowledge Test Instructions

- Please remember to read the Virtual Knowledge Test Instructions available on D&SDT-Headmaster's Ohio STNA webpage at www.hdmaster.com, click on Ohio STNA, then click on Virtual Knowledge Test Instructions.

Scheduling a Virtual Knowledge Test

You will need to sign in to your TMU© record using your Username or Email and Password and follow the instructions to 'Schedule/Reschedule into a Test Event'. Please make sure you have met the 'Virtual Knowledge Test Candidate Requirements' listed above before scheduling a virtual knowledge exam.

- The test site location for a virtual knowledge exam will be "Virtual Knowledge Test Site".
- Once scheduled, a test confirmation will be sent via email and/or text message (see the 'Schedule/Reschedule into a Test Event' and the 'Test Confirmation Letter' section for information to access your test confirmation.)
- Instructions and the link to download the 'facetime app', including the meeting ID and Password for the virtual knowledge event you are scheduled for will be emailed to you.

Virtual Knowledge Test Sign-In

You are required to be signed in to the virtual link for the sign in process with the test proctor **prior (10-20 minutes)** to the start time listed on your test confirmation. If you are not signed into your virtual exam prior to the time listed on your test confirmation, you will not be allowed to test, considered a No Show and forfeit your testing fees paid and have to pay for another test date.

- You will need to show your two forms of mandatory identification to the test proctor at sign in before starting your virtual knowledge exam. Please see the 'Identification' section for specifics.
- You will be required to show your surroundings to the test proctor during sign-in before starting your virtual knowledge exam.

Virtual Knowledge Test Policies

All **'Testing Policies'** and **'Security'** measures are adhered to during the virtual knowledge exam. Please refer to those sections for information.

- The 'facetime app' link must be maintained during the entire knowledge test.
- If the 'facetime app' connection is lost, you must immediately reconnect or be subject to being exited from the test by the test proctor and your test scored as a failed attempt.
- Please see virtual knowledge test issues information under the 'No Show Exceptions' section.

Please call D&SDT at (877)851-2355 if you have any questions, concerns or need assistance scheduling into a virtual knowledge exam.

Knowledge Test Content

The Knowledge Test consists of 79 multiple-choice questions. Questions are selected from subject areas based on the ODH approved Ohio test plan and include questions from all the required categories as defined in the federal regulations. The subject areas are as follows:

Knowledge Test Subject Areas:

SUBJECT AREA	NUMBER OF QUESTIONS
Basic Nursing Skills	11
Care Impaired	6 5
Communication	6
Data Collection	4
Disease Process	4
Infection Control	5 7
Mental Health	7
Older Adult Growth & Development	4
Personal Care	11

Resident Rights	5
Role and Responsibility	87
Safety	8

Knowledge Practice Test

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

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

1. **Clean linens that touch the floor should be:**
 - (A) Picked up quickly and placed back on the clean linen cart
 - (B) Used immediately on the next resident bed
 - (C) Considered dirty and placed in the soiled linen hamper
 - (D) Used only in the room with the floor the linen fell on

2. **When you are communicating with residents, you need to remember to:**
 - (A) Face the resident and make eye contact
 - (B) Speak rapidly and loudly
 - (C) Look away when they make direct eye contact
 - (D) Finish all their sentences for them

3. **A resident’s psychological needs:**
 - (A) Should be given minor consideration
 - (B) Make the resident withdrawn and secretive
 - (C) Are nurtured by doing everything for the resident
 - (D) Are nurtured when residents are treated like individuals

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

The Manual Skill Test

- The purpose of the Skill Test is to evaluate your performance when demonstrating Ohio approved nurse aide skill tasks. You will find a complete list of skill tasks in this handbook.
- You will be asked to re-present your ID that you showed the RN Test Observer at sign-in.
- Be sure you understand all instructions you read while in the waiting area before you begin your skill task demonstrations. You may not ask questions once the Skill Test begins and the timer starts. Once the Skill Test begins, the RN Test Observer may not answer questions.

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- 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 a maximum of **thirty-five (35) minutes** to complete your three (3) or four (4) tasks. After 20 minutes have elapsed, you will be alerted that 15 minutes remain.
- Listen carefully to all instructions given by the RN Test Observer. You may request to have any of the scenarios repeated **at any time** during your Skill Test up until you run out of time or tell the RN Test Observer that you are finished with your skill task demonstrations.
- You must correctly perform all of the **key** steps (in bold font) and 80% of all non-key steps on each task assigned in order to pass the Skill Test.
- If you believe you made a mistake while performing a task, tell the RN Test Observer you would like to make a correction. You will need to correctly demonstrate the step or steps on the task you believe you performed incorrectly in order to receive credit for the correction.
- You may repeat or correct **any step** or **steps** on any task you believe you have performed incorrectly at **any time** during your allotted thirty-five minutes or until you tell the RN Test Observer you are finished with the Skill Test.
- The skill task steps are not order dependent, unless the words BEFORE or AFTER are used in a step.
- When you finish each task, verbally tell the RN Test Observer you are finished and move to the designated “relaxation area.” When the RN Test Observer and actor have set up and are ready for your next skill task demonstration, the RN Test Observer will read the scenario for your next task.
- **All steps must actually be demonstrated. Steps that are only verbalized WILL NOT COUNT.**

Skill Test Recording Form

The RN test observer will provide a recording form similar to the one displayed below if your skill test includes a skill task which requires recording a count or measurement. You will be asked to sign your recording form during the equipment/supplies demonstration before you start your skill test.

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NEW Recording Form:
 (The weight has been removed.)

Candidate's Name: _____	
PLEASE PRINT	
PULSE: _____ <i>beats</i>	RESPIRATIONS: _____ <i>breaths</i>
URINE 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 five tasks with embedded hand washing using soap and water as your first mandatory task:

- Bedpan and Output with required Hand Washing
- Catheter Care for a Female with required Hand Washing
- Changing an Adult Brief with Perineal Care for a Male with required Hand Washing
- Empty a Urinary Drainage Bag with required Hand Washing
- Perineal Care for a Female with required Hand Washing

You will also be assigned one of the following four tasks requiring you to put on personal protective equipment (gown, gloves and goggles or face shield) at the beginning of the task, demonstrate the task and then properly remove the gown, gloves and goggles or face shield:

- PPE and Bed Bath (Partial – Whole Face and One Arm/Hand/Underarm)
- PPE and Denture Care
- PPE and Feeding a Dependent Resident
- PPE and Mouth Care (Brushing Teeth)

You will also receive an additional one (1) or two (2) 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

Every step must actually be performed and demonstrated during your skill test demonstration in order to receive credit.

The steps that are listed for each task are the steps required for a nurse aide candidate to successfully demonstrate minimum proficiency of the skill task for the RN Test Observer. The steps will be performed on a live resident actor for most of the tasks (the catheter care for a female, changing an

adult brief with perineal care for a male and the perineal care for a female will be done on a manikin). You will be scored only on the steps listed.

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

If you fail the Skill Test, one of the tasks on your retest will be a task you previously failed. There will always be one of the first mandatory tasks to start each Skill Test. The other tasks included on your Skill Test are randomly chosen so that every Skill Test is comparable in difficulty and average length of time to complete. The RN Test Observer will observe your demonstrations of your skill tasks and record what they see you do. D&SDT 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 Ohio STNA 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.

1. AMBULATION USING A GAIT BELT

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Obtain a gait belt for the resident.
- 4) **Lock designated bed brake(s) to ensure resident's safety.**
- 5) **Lock wheelchair brakes to ensure resident's safety.**
- 6) Assist resident to put on non-skid footwear.
- 7) Lower bed to a position so the resident's feet will be flat on the floor when sitting on bed.
- 8) Bring resident to a sitting position with resident's feet flat on the floor.
- 9) Place gait belt around resident's waist to stabilize trunk.
- 10) Tighten gait belt.
- 11) Check gait belt for tightness by slipping fingers between gait belt and resident.
- 12) Face resident and grasp gait belt with both hands.
- 13) Bring resident to a standing position using proper body mechanics at all times.
- 14) Grasp gait belt with one hand with other hand stabilizing resident by holding forearm, shoulder or using other appropriate method to stabilize the resident.
- 15) Position self behind and slightly to side of the resident.
- 16) Ambulate resident at least 10 steps to the wheelchair.
- 17) Assist resident to pivot/turn and sit in the wheelchair in a controlled manner ensuring safety at all times.
- 18) Remove gait belt.
- 19) Maintain respectful, courteous interpersonal interactions at all times.
- 20) Place call light or signal device within easy reach of the resident.
- 21) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

2. AMBULATION WITH A WALKER USING A GAIT BELT

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Obtain a gait belt for the resident.
- 4) Lock designated bed brake(s) to ensure resident's safety.**
- 5) Lock wheelchair brakes to ensure resident's safety.**
- 6) Assist the resident to put on non-skid footwear.
- 7) Bring resident to a sitting position with resident's feet flat on the floor.
- 8) Place gait belt around resident's waist to stabilize trunk.
- 9) Tighten gait belt.
- 10) Check gait belt for tightness by slipping fingers between gait belt and resident.
- 11) Position walker.
- 12) Assist resident to standing position using proper body mechanics at all times.
- 13) Stabilize walker using hand and/or foot.
- 14) Position self behind and slightly to the side of the resident.
- 15) Ambulate resident at least 10 steps to the wheelchair.
- 16) Assist resident to pivot/turn and sit in the wheelchair in a controlled manner ensuring safety at all times.
- 17) Remove gait belt.
- 18) Maintain respectful, courteous interpersonal interactions at all times.
- 19) Place call light or signal device within easy reach of the resident.
- 20) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

3. APPLYING AN ANTI-EMBOLIC STOCKING TO ONE LEG

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Raise the bed between mid-thigh and waist level.
- 4) Provide privacy for resident, pull privacy curtain.
- 5) Provide for resident's privacy by only exposing one leg.
- 6) Roll, gather or turn stocking down inside out to the heel.
- 7) Place stocking over resident's toes, foot and heel.
- 8) Roll or pull stocking up one leg.
- 9) Check toes for possible pressure from stocking and adjust as needed.
- 10) Leave resident with a stocking that is smooth and wrinkle free.
- 11) Lower bed.
- 12) Open privacy curtain.

- 13) Maintain respectful, courteous interpersonal interactions at all times.
- 14) Place call light or signal device within easy reach of the resident.
- 15) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

4. BEDPAN AND OUTPUT WITH HAND WASHING

(One of the possible first mandatory tasks.)

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Gather supplies.
- 4) Provide privacy for resident, pull privacy curtain.
- 5) Put on gloves.
- 6) Position resident on standard bedpan/fracture pan with pan in correct orientation and using correct body mechanics.
- 7) Raise head of the bed.
- 8) Leave tissue within reach of resident.
- 9) Leave call light or signaling device within reach of resident.
- 10) Step away from the resident until the RN Test Observer identifies that the resident is finished.
- 11) Upon returning, lower the head of the bed.
- 12) Gently remove the bedpan.
- 13) Hold the bedpan while the RN Test Observer pours fluid into bedpan.
- 14) Place the graduate on a flat surface for reading output at eye level and pours fluid into graduate.
- 15) Empty graduate into designated toilet.
- 16) Rinse and dry bedpan and graduate and return to storage.
- 17) ~~Wash resident's hands using a wet wash cloth.~~ *Replaced with: Obtain a wet washcloth and wash/assist resident to wash hands.*
- 18) ~~Dry resident's hands with a dry towel.~~ *Replaced with: Dry/assist resident to dry hands.*
- 19) Discard soiled linens in designated laundry hamper.
- 20) Remove gloves turning inside out as they are removed and dispose in designated container.
- 21) Leave resident in a position of comfort and safety.
- 22) Record output on the provided, previously signed recording form.
- 23) Candidate's recorded output is within 25 ml's of RN Test Observer's recorded output.**
- 24) Open privacy curtain.
- 25) Maintain respectful, courteous interpersonal interactions at all times.
- 26) Place call light or signal device within easy reach of the resident.
- 27) Wash hands: Turn on water.
- 28) Wash hands: Wet all surfaces of hands.
- 29) Wash hands: Wet wrists.
- 30) Wash hands: Apply soap to hands.
- 31) Wash hands: Rub hands together using friction.

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- 32) Wash hands: While hands are not under running water, rub hands together for at least 20 seconds.
- 33) Wash hands: Interlace fingers pointing downward.
- 34) Wash hands: Wash all surfaces of hands and wrists with soap.
- 35) Wash hands: Rinse hands and wrists thoroughly under running water with fingers pointed downward.
- 36) Wash hands: Dry hands and wrists on clean paper towel(s).
- 37) Wash hands: Immediately discard paper towel(s) in trash can.
- 38) Wash hands: Turn off faucet with a clean, dry paper towel.
- 39) Wash hands: Do not re-contaminate hands at any time during the hand washing procedure.**

5. CATHETER CARE FOR A FEMALE WITH HAND WASHING

(One of the possible first mandatory tasks.)

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Fill basin with comfortably warm water.
- 4) Provide privacy for resident, pull privacy curtain.
- 5) Raise side rail opposite working side of bed, or request RN Test Observer or Actor to opposite working side of bed.
- 6) Raise bed between mid-thigh and waist level.
- 7) Put on gloves.
- 8) Place a bath blanket or clean sheet over resident to maintain privacy.
- 9) Turn resident [manikin] (side-to-side), or raise hips and place waterproof pad under resident [manikin].
- 10) Verbalize the act of checking, while physically checking, to see that urine can flow unrestricted into the drainage bag.
- 11) ~~Use soap and water to carefully wash in a circular motion around the drainage tube where it exits the urethra.~~ *Replaced with: Use soap and water to carefully wash around the catheter where it exits the urethra.*
- 12) With one hand holding the catheter near the urethra to prevent tugging on catheter.**
- 13) Cleans at least 3-4 inches from the urethra down the drainage tube with other hand.
- 14) Clean with stroke(s) only away from the urethra. (A wash cloth wrapped around the tubing with one stroke is okay.)**
- 15) Use a clean portion of a wash cloth for any stroke.
- 16) Rinse with stroke(s) only away from the urethra. (A wash cloth wrapped around the tubing with one stroke is okay.)**
- 17) Use a clean portion of a wash cloth for any stroke.
- 18) Pat dry with a clean towel.
- 19) Do not allow the tube to be pulled at any time during the procedure.
- 20) Replace top cover over resident.
- 21) Remove bath blanket or sheet.
- 22) Remove waterproof pad, without friction, by turning resident [manikin] side-to-side, or raised hips.

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- 23) Dispose of all soiled linens in designated container.
- 24) Empty, rinse, dry and return equipment to storage.
- 25) Remove gloves turning inside out as they are removed and dispose in designated container.
- 26) Open privacy curtain.
- 27) Lower bed.
- 28) Lower side rail(s), if side rails were used.
- 29) Leave resident in a position of comfort and safety.
- 30) Maintain respectful, courteous interpersonal interactions at all times.
- 31) Place call light or signaling device within easy reach of the resident.
- 32) Wash hands: Turn on water.
- 33) Wash hands: Wet all surfaces of hands.
- 34) Wash hands: Wet wrists.
- 35) Wash hands: Apply soap to hands.
- 36) Wash hands: Rub hands together using friction.
- 37) Wash hands: While hands are not under running water, rub hands together for at least 20 seconds.
- 38) Wash hands: Interlace fingers pointing downward.
- 39) Wash hands: Wash all surfaces of hands and wrists with soap.
- 40) Wash hands: Rinse hands and wrists thoroughly under running water with fingers pointed downward.
- 41) Wash hands: Dry hands and wrists on clean paper towel(s).
- 42) Wash hands: Immediately discard paper towel(s) in trash can.
- 43) Wash hands: Turn off faucet with a clean, dry paper towel.
- 44) **Wash hands: Do not re-contaminate hands at any time during the hand washing procedure.**

6. CHANGING AN ADULT BRIEF, PROVIDE PERINEAL CARE FOR A MALE WITH HAND WASHING

(One of the possible first mandatory tasks.)

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident [manikin].
- 3) Fill basin with comfortably warm water.
- 4) Provide privacy for resident, pull privacy curtain.
- 5) Raise bed between mid-thigh and waist level.
- 6) Raise side rail opposite working side of bed, or request RN Test Observer or Actor to opposite working side of bed.
- 7) Obtain brief.
- 8) Put on gloves.
- 9) Place bath blanket or clean sheet over resident to maintain privacy.
- 10) Place waterproof pad under resident's buttocks by turning resident toward side, or raise hips.
- 11) Expose perineum only.
- 12) Unfasten wet brief on both sides.
- 13) Remove soiled brief under resident [manikin] by rolling resident [manikin] side-to-side OR raise hips.
- 14) Discard soiled brief in the designated container.

- 15) Gently grasp the penis.
- 16) Use water and a soapy wash cloth.
- 17) Clean tip of penis starting at the urethral opening working outward with a circular motion.
- 18) Clean shaft of the penis with downward motions.
- 19) Use a clean portion of a wash cloth with each stroke.**
- 20) Clean scrotum with a clean portion of a wash cloth.
- 21) Rinse penis with a new wash cloth.
- 22) Rinse penis using a clean portion of a wash cloth with each stroke.
- 23) Rinse scrotum using a clean portion of a wash cloth with each stroke.
- 24) Pat the area dry.
- 25) Recover the exposed area with the bath blanket or clean sheet.
- 26) Assist resident to turn onto side away from the working side of the bed.
- 27) Use a new, soapy wash cloth to clean the rectal area.
- 28) Clean area from scrotum to rectal area using a clean portion of a wash cloth with each stroke.**
- 29) Rinse area from scrotum to rectal area using a clean portion of a wash cloth with each stroke.
- 30) Pat the area dry.
- 31) Apply a new brief by rolling resident [manikin] side-to-side OR raise hips.
- 32) Pull front of brief through ensuring brief is even on both sides of the resident [manikin] and fasten brief securely on both sides.
- 33) Remove waterproof pad, without friction, by turning resident [manikin] side-to-side, or raise hips.
- 34) Remove bath blanket or sheet.
- 35) Dispose of all soiled linen in the designated container.
- 36) Position resident on his back.
- 37) Lower bed.
- 38) Lower side rail(s), if side rails were used.
- 39) Empty, rinse, dry and return equipment to storage.
- 40) Remove gloves turning inside out as they are removed and dispose in designated container.
- 41) Open privacy curtain.
- 42) Leave resident in a position of comfort and safety.
- 43) Maintain respectful courteous, interpersonal interactions at all times.
- 44) Place call light or signaling device within easy reach of resident.
- 45) Wash hands: Turn on water.
- 46) Wash hands: Wet all surfaces of hands.
- 47) Wash hands: Wet wrists.
- 48) Wash hands: Apply soap to hands.
- 49) Wash hands: Rub hands together using friction.
- 50) Wash hands: While hands are not under running water, rub hands together for at least 20 seconds.
- 51) Wash hands: Interlace fingers pointing downward.
- 52) Wash hands: Wash all surfaces of hands and wrists with soap.
- 53) Wash hands: Rinse hands and wrists thoroughly under running water with fingers pointed downward.
- 54) Wash hands: Dry hands and wrists on clean paper towel(s).

- 55) Wash hands: Immediately discard paper towel(s) in trash can.
- 56) Wash hands: Turn off faucet with a clean, dry paper towel.
- 57) **Wash hands: Do not re-contaminate hands at any time during the hand washing procedure.**

7. DRESSING A BEDRIDDEN RESIDENT

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Provide privacy for resident, pull privacy curtain.
- 4) Raise bed between mid-thigh and waist level.
- 5) Keep resident covered while removing gown.
- 6) Remove gown from unaffected side first.
- 7) Place soiled gown in designated container.
- 8) When dressing the resident in a shirt/blouse, insert your hand through the sleeve of the shirt/blouse and grasp the hand of the resident.
- 9) When dressing the resident in a shirt/blouse, always dresses from the affected side first.
- 10) When dressing the resident in pants, assist the resident to raise her/his hips or turn resident from side-to-side and pull the pants over the buttocks and up to the resident's waist.
- 11) When dressing the resident in pants, always dress the resident from the affected side first.
- 12) Apply resident's non-skid footwear.
- 13) Leave the resident comfortably and properly dressed and in a position of safety.
- 14) Lower bed.
- 15) Open privacy curtain.
- 16) Maintain respectful, courteous interpersonal interactions at all times.
- 17) Place call light or signaling device within easy reach of the resident.
- 18) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

8. EMPTYING A URINARY DRAINAGE BAG WITH HAND WASHING

(One of the possible first mandatory tasks.)

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Provide privacy for resident, pull privacy curtain.
- 4) Raise bed between mid-thigh and waist level.
- 5) Put on gloves.
- 6) Place a barrier on the floor under the drainage bag.
- 7) Place the graduate on the previously placed barrier.
- 8) Open the drain to allow the urine to flow into the graduate until bag is empty.
- 9) Avoid touching the graduate with the tip of the tubing.
- 10) Close the drain.
- 11) Wipe the drain with an antiseptic wipe AFTER the drainage bag is empty.

- 12) Replace drain in holder.
- 13) Lower bed.
- 14) Place graduate on level, flat surface.
- 15) With graduate at eye level, read output.
- 16) Empty graduate into designated toilet.
- 17) Rinse, dry and return equipment to storage.
- 18) Remove gloves turning inside out as they are removed and dispose in designated container.
- 19) Leave resident in a position of comfort and safety.
- 20) Record output on the provided, previously signed recording form.
- 21) Candidate's measured output reading is within 25 ml's of RN Test Observer's output reading.**
- 22) Open privacy curtain.
- 23) Maintain respectful, courteous interpersonal interactions at all times.
- 24) Place call light or signaling device within easy reach of the resident.
- 25) Wash hands: Turn on water.
- 26) Wash hands: Wet all surfaces of hands.
- 27) Wash hands: Wet wrists.
- 28) Wash hands: Apply soap to hands.
- 29) Wash hands: Rub hands together using friction.
- 30) Wash hands: While hands are not under running water, rub hands together for at least 20 seconds.
- 31) Wash hands: Interlace fingers pointing downward.
- 32) Wash hands: Wash all surfaces of hands and wrists with soap.
- 33) Wash hands: Rinse hands and wrists thoroughly under running water with fingers pointed downward.
- 34) Wash hands: Dry hands and wrists on clean paper towel(s).
- 35) Wash hands: Immediately discard paper towel(s) in trash can.
- 36) Wash hands: Turn off faucet with a clean, dry paper towel.
- 37) Wash hands: Do not re-contaminate hands at any time during the hand washing procedure.**

9. HAIR CARE

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Place a towel on resident's shoulders.
- 4) Ask resident how s(he) would like her/his hair styled.
- 5) Comb/brush/style hair gently and completely.
- 6) Discard linen in designated container.
- 7) Leave hair neatly brushed/combed/styled.
- 8) Maintain respectful, courteous interpersonal interactions at all times.
- 9) Place call light or signaling device within easy reach of the resident.
- 10) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

10. MAKING AN OCCUPIED BED

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Gather linen and transport correctly.
- 3) Place linen on a clean surface. May place linen on the over-bed table, over the back of a chair, on bedside stand or over the foot of the bed.
- 4) Explain procedure to be performed to the resident.
- 5) Provide privacy for resident, pull privacy curtain.
- 6) **Raise side rail opposite working side of bed, or request RN Test Observer to opposite working side of bed.**
- 7) Raise bed to between mid-thigh and waist level.
- 8) Assist resident to roll onto side toward raised side rail or RN Test Observer.
- 9) Roll or fan fold soiled linen, soiled side inside, to the center of the bed.
- 10) Place clean bottom sheet along the center of the bed and roll or fan fold linen against resident's back and unfold remaining half.
- 11) Secure two fitted corners of the clean bottom sheet.
- 12) **Raise side rail on other side of the bed, or request RN Test Observer to opposite working side of the bed.**
- 13) Assist the resident to roll over the bottom linen, preventing trauma and avoidable pain to resident at all times.
- 14) Remove soiled linen without shaking.
- 15) Avoid touching linen to uniform.
- 16) Dispose of soiled linen in designated container.
- 17) Pull through and smooth out the clean bottom linen.
- 18) Secure the other two fitted corners.
- 19) Place clean top linen and blanket or bed spread over covered resident while removing used linen.
- 20) Keep resident unexposed at all times.
- 21) Tuck in top linen and blanket or bedspread at the foot of bed.
- 22) Make mitered corners at the foot of the bed.
- 23) Apply clean pillow case, with zippers and/or tags of pillow to inside.
- 24) Gently lift resident's head while replacing the pillow.
- 25) Leave bed completely and neatly made without wrinkles.
- 26) Lower bed.
- 27) Lower side rails, if side rails were used.
- 28) Open privacy curtain.
- 29) Maintain respectful, courteous interpersonal interactions at all times.
- 30) Place call light or signaling device within easy reach of the resident.
- 31) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

11. NAIL CARE

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Immerse resident's nails in comfortably warm water.
- 4) Soak nails for at least five minutes. The five minutes may be verbalized by the candidate and acknowledged by the RN Test Observer.
- 5) Gently push cuticle back with a wet wash cloth.
- 6) Dry hand thoroughly, making sure to dry carefully between the fingers.
- 7) Gently clean under the nails with an orange stick.
- 8) File each fingernail.
- 9) Empty, rinse, dry and return equipment to storage.
- 10) Discard soiled linen in designated container.
- 11) Discard orange stick in the designated container.
- 12) Maintain respectful, courteous interpersonal interactions at all times.
- 13) Place call light or signaling device within easy reach of the resident.
- 14) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

12. PERINEAL CARE FOR A FEMALE WITH HAND WASHING

(One of the possible first mandatory tasks.)

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident [manikin].
- 3) Fills basin with comfortably warm water
- 4) Provide privacy for resident, pull privacy curtain.
- 5) Raise side rails on opposite working side of the bed, or request the RN Test Observer or Actor to opposite working side of the bed.
- 6) Raise the bed to between mid-thigh and waist level.
- 7) Place bath blanket or clean sheet over resident.
- 8) Put on gloves.
- 9) Place waterproof pad under resident's buttocks by turning resident side-to-side or raise hips.
- 10) Expose perineum only.
- 11) Use water and a soapy wash cloth.
- 12) Clean both sides and middle of labia from top to bottom with a clean portion of the wash cloth for each stroke.**
- 13) Rinse area from top to bottom with a clean portion of the wash cloth with each stroke.
- 14) Pat the area dry with a clean portion of the towel for each pat.
- 15) Cover the exposed area with the bath blanket or clean sheet.
- 16) Assist resident to turn onto side away from the working side of the bed.
- 17) With a new clean wash cloth with water and soap, clean the rectal area.

- 18) Clean the rectal area from vagina to rectal area using at least two single strokes with a clean portion of the wash cloth for each single stroke.
- 19) Rinse the rectal area from vagina to rectal area using at least two single strokes.
- 20) Pat dry area from vagina to rectal area.
- 21) Remove waterproof pad from under buttocks, without friction, by turning resident [manikin] side-to-side or raise hips.
- 22) Position resident on her back.
- 23) Remove bath blanket or sheet.
- 24) Dispose of all soiled linen in the designated container.
- 25) Empty, rinse, dry and return equipment to storage.
- 26) Remove gloves, turning inside out as they are removed and dispose in designated container.
- 27) Lower bed.
- 28) Lower side rail(s), if side rails were used.
- 29) Open privacy curtain.
- 30) Maintain respectful, courteous interpersonal interactions at all times.
- 31) Place call light or signaling device within easy reach of the resident.
- 32) Wash hands: Turn on water.
- 33) Wash hands: Wet all surfaces of hands.
- 34) Wash hands: Wet wrists.
- 35) Wash hands: Apply soap to hands.
- 36) Wash hands: Rub hands together using friction.
- 37) Wash hands: While hands are not under running water, rub hands together for at least 20 seconds.
- 38) Wash hands: Interlace fingers pointing downward.
- 39) Wash hands: Wash all surfaces of hands and wrists with soap.
- 40) Wash hands: Rinse hands and wrists thoroughly under running water with fingers pointed downward.
- 41) Wash hands: Dry hands and wrists on clean paper towel(s).
- 42) Wash hands: Immediately discard paper towel(s) in trash can.
- 43) Wash hands: Turn off faucet with a clean, dry paper towel.
- 44) Wash hands: Do not re-contaminate hands at any time during the hand washing procedure.

13. PPE (GOWN, GLOVES, GOGGLES OR FACE SHIELD) AND BED BATH- WHOLE FACE AND ONE ARM, HAND AND UNDERARM

(One of the possible mandatory PPE tasks.)

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Unfold the gown.
- 3) Don (put on) gown fully covering torso and wrapping gown around the back.
- 4) Fasten at the neck and the waist.
- 5) Put on goggles or face shield appropriately over eyes or face.
- 6) Put on gloves.
- 7) Extend gloves over the wrists of the gown.
- 8) Explain procedure to be performed to the resident.

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- 9) Fill basin with comfortably warm water.
- 10) Provide privacy for resident, pull privacy curtain.
- 11) Raise bed between mid-thigh and waist level.
- 12) Cover resident with a bath blanket or clean sheet.
- 13) Fanfold bed linens down to waist or move linens to opposite side.
- 14) Remove resident's gown without exposing resident.
- 15) Dispose of gown in designated container.
- 16) Wash face WITHOUT SOAP and pat dry.
- 17) Place towel under arm, expose one arm.
- 18) Wash arm, hand and underarm using soap and water.
- 19) Rinse arm, hand, and underarm.
- 20) Pat dry arm, hand and underarm.
- 21) Assist resident to put on a clean gown.
- 22) Empty, rinse and dry equipment and return to storage.
- 23) Dispose of soiled linen in designated container.
- 24) Lower bed.
- 25) Open privacy curtain.
- 26) Maintain respectful, courteous interpersonal interactions at all times.
- 27) Place call light or signaling device within easy reach of the resident.
- 28) Remove gloves BEFORE gown turning inside out as they are removed.
- 29) Dispose of gloves in designated container.
- 30) Remove goggles or face shield from the back by lifting ear pieces or headband.
- 31) Place goggles or face shield in designated container.
- 32) Unfasten gown at the neck.
- 33) Unfasten gown at the waist.
- 34) Pull gown away from neck, touching only the inside of the gown.
- 35) Turn gown inside out and roll into a bundle.
- 36) Dispose of gown in designated container.
- 37) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

14. PPE (GOWN, GLOVES, GOGGLES OR FACE SHIELD) AND DENTURE CARE

(One of the possible mandatory PPE tasks.)

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Unfold the gown.
- 3) Don (put on) gown fully covering torso and wrapping gown around the back.
- 4) Fasten at the neck and the waist.
- 5) Put on goggles or face shield appropriately over eyes or face.
- 6) Put on gloves.
- 7) Extend gloves over the wrists of the gown.
- 8) Explain the procedure to be performed to the resident.

- 9) Line bottom of the sink with a protective lining that would help prevent damage to the dentures. (Use cloth towel or wash cloth, do not use paper towels.)
- 10) Remove dentures from cup.
- 11) Handle dentures carefully to avoid damage being careful to avoid contamination.
- 12) Empty and rinse denture cup.
- 13) Apply toothpaste.
- 14) Thoroughly brush dentures including the inner, outer, and chewing surfaces of upper or lower dentures. (Only one plate is used during testing. Toothettes may be utilized instead of a toothbrush as long as all surfaces listed are cleaned.)
- 15) Rinse dentures using clean cool water.
- 16) Place dentures in rinsed denture cup.
- 17) Add cool clean water to denture cup.
- 18) Clean and dry equipment and return to storage.
- 19) Discard protective lining in designated container.
- 20) Maintain respectful, courteous interpersonal interactions at all times.
- 21) Place call light or signaling device within easy reach of the resident.
- 22) Remove gloves BEFORE gown turning inside out as they are removed.
- 23) Dispose of gloves in designated container.
- 24) Remove goggles or face shield from the back by lifting ear pieces or headband.
- 25) Place goggles or face shield in designated container.
- 26) Unfasten gown at the neck.
- 27) Unfasten gown at the waist.
- 28) Pull gown away from neck, touching only the inside of the gown.
- 29) Turn gown inside out and roll into a bundle.
- 30) Dispose of gown in designated container.
- 31) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

15. PPE (GOWN, GLOVES, GOGGLES OR FACE SHIELD) AND FEEDING A DEPENDENT RESIDENT

(One of the possible mandatory PPE tasks.)

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Unfold the gown.
- 3) Don (put on) gown fully covering torso and wrapping gown around the back.
- 4) Fasten at the neck and the waist.
- 5) Put on goggles or face shield appropriately over eyes or face.
- 6) Put on gloves.
- 7) Extend gloves over the wrists of the gown.
- 8) Explain the procedure to be performed to the resident.
- 9) Verbalize identifying the resident's name against the diet card and verbalize that the resident has received the correct tray while actually checking the diet card and tray.
- 10) Position the resident in an upright position that is at least 45 degrees.
- 11) Protect clothing from soiling by using napkin, clothing protector, or towel.

- 12) Wash and dry resident's hands BEFORE feeding.
- 13) Discard soiled linen in designated container.
- 14) Remain at eye level facing the resident while feeding resident.
- 15) Describe the foods being offered to the resident.
- 16) Offer each fluid frequently.
- 17) Offer food in small amounts at a reasonable rate, allowing resident time to chew and swallow.
- 18) Wipe resident's face during meal at least one time.
- 19) Leave resident clean and in bed with the head of the bed set up to at least 30 degrees.
- 20) Record intake in percentage of total solid food eaten on provided, previously signed recording form.
- 21) Candidate's recorded consumed food intake must be within 25 percentage points of the RN Test Observer's recorded food intake.**
- 22) Record the sum of total fluid consumed in ml on provided, previously signed recording form.
- 23) Candidate's recorded total consumed fluid intake is within 60 ml's of the RN Test Observer's recorded fluid intake.**
- 24) Maintain respectful, courteous interpersonal interactions at all times.
- 25) Place call light or signaling device within easy reach of the resident.
- 26) Remove gloves BEFORE gown turning inside out as they are removed.
- 27) Dispose of gloves in designated container.
- 28) Remove goggles or face shield from the back by lifting ear pieces or headband.
- 29) Place goggles or face shield in designated container.
- 30) Unfasten gown at the neck.
- 31) Unfasten gown at the waist.
- 32) Pull gown away from neck, touching only the inside of the gown.
- 33) Turn gown inside out and roll into a bundle.
- 34) Dispose of gown in designated container.
- 35) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

16. PPE (GOWN, GLOVES, GOGGLES OR FACE SHIELD) AND MOUTH CARE—BRUSHING TEETH

(One of the possible mandatory PPE tasks.)

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Unfold the gown.
- 3) Don (put on) gown fully covering torso and wrapping gown around the back.
- 4) Fasten at the neck and the waist.
- 5) Put on goggles or face shield appropriately over eyes or face.
- 6) Put on gloves.
- 7) Extend gloves over the wrists of the gown.
- 8) Explain the procedure to be performed to the resident.
- 9) Gather equipment/supplies.
- 10) Provide privacy for resident, pull privacy curtain.

- 11) ~~Drape the chest with towel (cloth or paper) to prevent soiling.~~ *Replaced with: Drape the chest with a chest barrier (cloth or paper towel) to prevent soiling.*
- 12) Wet toothbrush and apply a small amount of toothpaste to toothbrush. (If available, toothettes may be utilized instead of the toothbrush as long as all of the surfaces listed are cleaned.)
- 13) Brush resident's teeth, including the inner, outer, and chewing surfaces of all upper and lower teeth.**
- 14) Clean tongue.
- 15) Assist resident in rinsing mouth.
- 16) Wipe resident's mouth.
- 17) ~~Remove soiled chest barrier (cloth or paper) and place in designated container.~~ *Replaced with: Remove clothing protector and place in the appropriate container.*
- 18) Empty, rinse and dry emesis basin.
- 19) Rinse toothbrush.
- 20) Return equipment to storage.
- 21) Leave resident in a position of comfort.
- 22) Open privacy curtain.
- 23) Maintain respectful, courteous interpersonal interactions at all times
- 24) Place call light or signaling device within easy reach of the resident.
- 25) Remove gloves BEFORE gown turning inside out as they are removed.
- 26) Dispose of gloves in designated container.
- 27) Remove goggles or face shield from the back by lifting ear pieces or headband.
- 28) Place goggles or face shield in designated container.
- 29) Unfasten gown at the neck.
- 30) Unfasten gown at the waist.
- 31) Pull gown away from neck, touching only the inside of the gown.
- 32) Turn gown inside out and roll into a bundle.
- 33) Dispose of gown in designated container.
- 34) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

17. POSITION RESIDENT IN BED ON SIDE

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain procedure to be performed to the resident.
- 3) Provide privacy for resident, pull privacy curtain.
- 4) Position bed flat.
- 5) Raise bed between mid-thigh and waist level.
- 6) Raise side rail on side of the bed opposite working side of the bed, or request RN Test Observer to opposite working side of the bed.**
- 7) From the working side of the bed, gently move upper body toward self.
- 8) From the working side of the bed, gently move hips toward self.
- 9) From the working side of the bed, gently move legs toward self.

- 10) Assist/turn resident onto correct side stated by RN Test Observer.
- 11) Ensure that resident's face never becomes obstructed by the pillow.
- 12) Check to be sure resident is not lying on his/her downside arm.
- 13) Place support devices under the resident's head, the upside arm, behind the back and between the knees.
- 14) Ensure resident is in correct body alignment.**
- 15) Leave resident in a position of comfort and safety.
- 16) Lower side rails, if side rails were used.
- 17) Lower bed.
- 18) Open privacy curtain.
- 19) Maintain respectful, courteous interpersonal interactions at all times.
- 20) Place call light or signaling device within easy reach of the resident.
- 21) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

18. RANGE OF MOTION FOR HIP AND KNEE

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain procedure to be performed to the resident.
- 3) Raise bed between mid-thigh and waist level.
- 4) Provide privacy for resident, pull privacy curtain.
- 5) Position resident supine (bed flat).
- 6) Leave the resident in good body alignment.
- 7) Place one hand under the knee and the other hand under the ankle.
- 8) Move the entire leg away from the body. (abduction)
- 9) Move the entire leg back toward the body. (adduction)
- 10) Complete abduction and adduction of the hip at least three times.
- 11) Continue to correctly support joints by placing one hand under the resident's knee and the other hand under the resident's ankle.
- 12) Bend the resident's knee and hip toward the resident's trunk. (flexion of the hip and knee at the same time)
- 13) Straighten the knee and hip. (extension of the knee and hip at the same time)
- 14) Complete flexion and extension of knee and hip at least three times.
- 15) Candidate must ask at least once if they are causing any pain or discomfort.**
- 16) Do not force any joint beyond the point of free movement.
- 17) Leave resident in a comfortable position.
- 18) Lower bed.
- 19) Open privacy curtain.
- 20) Maintain respectful, courteous interpersonal interactions at all times.
- 21) Place call light or signaling device within easy reach of the resident.
- 22) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

19. RANGE OF MOTION FOR SHOULDER

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident.
- 3) Raise bed between mid-thigh and waist level.
- 4) Provide privacy for resident, pull privacy curtain.
- 5) Position resident supine (bed flat).
- 6) Leave resident in good body alignment.
- 7) Place one hand under their elbow and the other hand under the resident's wrist.
- 8) Raise 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 flexion and extension of the shoulder at least three times.
- 11) Continue to correctly support joints by placing one hand under the resident's 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 resident's side. (adduction)
- 14) Complete abduction and adduction of the shoulder at least three times.
- 15) Candidate must ask at least once if they are causing any pain or discomfort.**
- 16) Do not force any joint beyond the point of free movement.
- 17) Leave resident in a comfortable position.
- 18) Lower bed.
- 19) Open privacy curtain.
- 20) Maintain respectful, courteous interpersonal interactions at all times.
- 21) Place call light or signaling device within easy reach of the resident.
- 22) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

20. STAND AND PIVOT-TRANSFER RESIDENT FROM BED TO WHEELCHAIR USING A GAIT BELT

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident and obtain a gait belt.
- 3) Position wheelchair in close proximity of the bed.
- 4) Lock wheelchair brakes to ensure resident's safety.**
- 5) Lock designated bed brake(s) to ensure resident's safety.**
- 6) Assist resident in putting on non-skid footwear.
- 7) Assist resident to a sitting position and lower bed so resident's feet are flat on the floor when resident is sitting on the bed.
- 8) Place a gait belt around the resident's waist to stabilize trunk.
- 9) Tighten gait belt.
- 10) Check gait belt for tightness by slipping fingers between gait belt and resident.
- 11) Face resident and grasp the gait belt with both hands.
- 12) Bring resident to a standing position using proper body mechanics.

- 13) Assist resident to pivot and sit in the wheelchair in a controlled manner that ensures safety.
- 14) Remove gait belt.
- 15) Maintain respectful, courteous interpersonal interactions at all times.
- 16) Place call light or signaling device within easy reach of the resident.
- 17) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

21. STAND AND PIVOT-TRANSFER RESIDENT FROM WHEELCHAIR TO BED USING A GAIT BELT

- 1) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain the procedure to be performed to the resident and obtain a gait belt.
- 3) Position wheelchair in close proximity of the bed.
- 4) **Lock wheelchair brakes to ensure resident's safety.**
- 5) **Lock designated bed brake(s) to ensure resident's safety.**
- 6) Lower bed to a position so the resident's feet will be flat on the floor when the resident is transferred to the bed.
- 7) Place gait belt around resident's waist to stabilize trunk.
- 8) Tighten gait belt.
- 9) Check gait belt for tightness by slipping fingers between the gait belt and the resident.
- 10) Face resident and grasp the gait belt with both hands.
- 11) Bring resident to a standing position using proper body mechanics.
- 12) Assist resident to pivot and sit on the bed in a controlled manner that ensures safety.
- 13) Remove gait belt.
- 14) Assist resident in removing outer footwear.
- 15) Assist resident to move to center of bed and lie down, supporting extremities as necessary.
- 16) Ensure resident is comfortable.
- 17) Leave the resident in good body alignment.
- 18) Maintain respectful, courteous interpersonal interactions at all times.
- 19) Place call light or signaling device within easy reach of the resident.
- 20) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

22. VITAL SIGNS - PULSE AND RESPIRATIONS

- 1) Perform hand hygiene.
 - a. Covers all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.
- 2) Explain procedure to be performed to the resident.
- 3) Provide privacy for resident, pull privacy curtain.
- 4) Locate the radial pulse by placing tips of fingers on thumb side of the resident's wrist.
- 5) Count pulse for a full 60 seconds.
 - a. *Verbally tell the RN Test Observer when you start counting and when you stop counting.*
- 6) Record pulse rate on the provided, previously signed recording form.

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- 7) **Candidate's recorded pulse rate is within 4 beats of RN Test Observer's recorded pulse rate for the full 60 seconds.**
- 8) Count respirations for a full 60 seconds.
 - a. *Verbally tell the RN Test Observer when you start counting and when you stop counting.*
- 9) Record respirations on provided, previously signed recording form.
- 10) **Candidate's recorded respiratory rate is within 2 breaths of the RN Test Observer's recorded respiratory rate for the full 60 seconds.**
- 11) Open privacy curtain.
- 12) Maintain respectful, courteous interpersonal interactions at all times.
- 13) Place call light or signaling device within easy reach of the resident.
- 14) Perform hand hygiene.
 - a. Cover all surfaces of the hands with hand sanitizer.
 - b. Rub hands together to dry.

Weighing an Ambulatory Resident – *To be removed from testing September 1, 2022.*

Knowledge Test Vocabulary List

abdominal thrust	agitation	aseptic
abduction	airborne precautions	aseptic technique
abduction pillow	airway obstruction	aspiration
abuse	alarm	assault
accidents	Alzheimer's	assistive device
activities	Alzheimer's disease	auditory hallucinations
adaptive device	ambulation	bacteria
adaptive equipment	anger	balance
adduction	angina	bargaining
ADL	anti-embolitic stocking	basic needs
admission	anxiety	bathing
admitting resident	apathy	battery
advance directives	aphasia	bed cradle
affected side	apnea	bed measurement
aggressive resident	appropriate response	bedpan
aging	aromatherapy	behavior
aging process	arthritis	behaviors

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benign prostatic hypertrophy (BPH)
biohazard
bladder training
blindness
blood borne pathogen
blood in urine
blood pressure
body fluid
body language
body mechanics
body systems
body temperature
bowel elimination
bowel movement
bowel program
BPH
bradycardia
breathing
breathing rates
call light
call signal
cancer
cane use
cardiac arrest
cardiovascular system
care conference
care impaired
care plan
cares

cast
cataract
catheter
catheter care
cc's in an ounce
C-Difficile
centered care
central nervous system
cerebral vascular accident
cerebrovascular accident (CVA)
chain of command
chain of infection
charge nurse
chemical restraint
chemical safety
chest pain
CHF
choking
circulation
clarification
cleaning spills
clear liquid diet
cognitive impairment
cognitively impaired
cold compress
colostomy care
comfort care
communicable

communicating effectively
communication
communication terms
competency evaluation program
conduct
confidentiality
conflict resolution
confused resident
confusion
congestive heart failure
constipation
constrict
contamination
continuity
contracture
converting measures
COPD
cueing
cultural
CVA
death and dying
dehydration
delegation
delusions
dementia
denture care
dentures
dependability
depression

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diabetes
diabetic
dialysis
diastolic
diet
digestion
dilate
discharge
discharging resident
disease
disease process
disinfecting
disinfection
disoriented
disrespect
dizziness
DNR
documentation
dressings
droplet precautions
dry skin
dying
dysphagia
dyspnea
dysuria
edema
elastic hose
elastic stockings
elevate head
elimination

emergency situation
emesis
emesis basin
emotional support
empathy
emphysema
end of life
enteral feeding
enteral nutrition
ethics
evacuation
extremity
eye glasses
facial care
falls
fecal impaction
feeding
feeding tubes
financial abuse
financial exploitation
fire
fire safety
flatus
fluid
fluid intake
Foley catheter
foot care
foot drop
force fluid
Fowler's

fraud
frayed cord
free from disease
frequent urination
gait belt
gastric feedings
gastrostomy tube
geriatric chair
geriatrics
gerontology
gestures
gifts
gown removal
gown removal with IV bag
grieving process
HAI
hair care
halitosis
hallucination
hand hygiene
hand tremors
hand washing
harm
hearing
hearing aid
hearing impaired
heart rates
hemiplegia
hepatitis B

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hierarchy of needs	lateral position	moving
HIPAA	legal ethics	moving a resident
HIV	lift/draw sheet	multiple sclerosis
hoarding	lifting	musculoskeletal
hormones	linen	musculoskeletal system
hospice	linen handling	nail care
human emotion	liquid diet	neglect
hydration	listening	negligence
hypertension	localized infection	nervous system
I&O	logrolling	non-contagious disease
impairment	loose teeth	non-verbal
impotence	loss of function	non-verbal communication
incontinence	low sodium diet	NPO
independence	Maslow	nursing assistant's role
indwelling catheter	masturbation	nutrients
infection	MDS	nutrition
infection control	measuring	objective
inflammation	measuring height	observation
influenza	measuring temperature	observations
initial observations	mechanical lift	ombudsman
in-service programs	medical asepsis	oral care
insulin	medical record	oral hygiene
intake	medications	oral temperature
intake and output	memory loss	orientation
integumentary changes	mental health	OSHA
integumentary system	microbe	osteoporosis
isolation	microorganism	output
jaundice	military time	overbed table
knowledge of mouth care	morning care	oxygen
	mouth care	

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pain	pressure ulcer	resident independence
pain management	preventing injury	resident right
palliative care	privacy	resident rights
paralysis	progressive	resident-centered care
Parkinson's	promoting independence	residents
Parkinson's Disease	pronation	resident's chart
partial bath	prostate gland	resident's environment
passive	prosthesis	resident's rights
passive range of motion	prosthetic device	respectful treatment
passive range-of-motion (PROM)	psychological needs	respiration
pathogen	psychosocial wellbeing	respiratory symptoms
patience	pulse	respiratory system
perineal care	quality of life	responding to resident behavior
peripheral vascular disease	radial	response
perseverate	ramps	responsibility
personal care	range of motion	restorative
personal grooming	reality orientation	restorative care
personal items	receptive aphasia	restorative nursing
phone etiquette	rectal	restraint
physical needs	rectal temperature	restraint alternative
physical therapist	rectal thermometer	restraint alternatives
physician's authority	regulation	restraints
policy book	reminiscence therapy	rights
positioning	reminiscing	risk factor
post-mortem care	reporting	role
PPE	reposition	ROM
preferences	resident abuse	safety
pressure area	resident belongings	safety precautions
pressure injury	resident identification	safety techniques

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scale
SDS
seclusion
seizure
self-esteem
semi fowlers
sensory system
sexual harassment
sexual needs
sharps container
shaving
side rails
simple fracture
skin integrity
slander
smoking
social needs
special diets
specimen
spiritual needs
sputum
sputum culture
stages of grief
standard precautions
standards of conduct
sterilization
stethoscope
stress

stroke
subjective
subjective data
substance abuse
suicide
sundowning
supine
survey
systolic
tachycardia
TED hose
telephone etiquette
temperature
terminal illness
terminology
threatening resident
toenails
toileting schedule
transfers
treating residents with respect
tube feeding
tubing
tympanic
types of isolation
unaffected
unconscious
unconscious resident

undressing
urethral
urinary appearance
urinary catheter
urinary catheter bag
urinary elimination
urinary problems
urinary system
urine
UTI
validation therapy
Vancomycin-resistant enterococcus (VRE)
vision change
visual impairment
vital signs
vomitus
walker
wandering resident
weighing
weight
weight calculation
wheelchair safety
white blood cells
withdrawn resident
workplace violence



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Notes:
