

D&S Diversified Technologies LLP

Headmaster LLP

Tennessee Medication Aide Candidate Handbook

EFFECTIVE: August 15, 2022

Version 4

EFFECTIVE AUGUST 15, 2022

UPDATED HANDBOOK TO REFLECT TMU© (TESTMASTER UNIVERSE) UPGRADE.

Tennessee Medication Aide Candidate Handbook

Contact Information

Questions regarding: applications • testing process • test scheduling • eligibility to test

..... **(877) 851-2355**

Questions regarding: obtaining information on official regulations and guidelines for medication assistants • updating your name or address on the Registry

..... **(615) 532-5166**

D&S Diversified Technologies, LLP 333 Oakland Avenue Findlay, OH 45840 Email: tennessee@hdmaster.com Web Site: www.hdmaster.com	<i>Monday through Friday</i> 7:00AM – 7:00PM (CST) 8:00AM – 6:00PM (EST)	Phone #: (877) 851-2355 Fax #: (406) 442-3357
Tennessee State Board of Nursing 665 Mainstream Drive Nashville, TN 37243 Email: nursing.health@tn.gov Web Site: https://www.tn.gov/health/health-program-areas/health-professional-boards/nursing-board.html	<i>Monday through Friday</i> 8:00 AM – 4:30 PM (CST)	Phone #: (615) 532-5166

Table of Contents

INTRODUCTION	1
AMERICANS WITH DISABILITIES ACT (ADA)	1
ADA COMPLIANCE	1
THE TENNESSEE MEDICATION AIDE COMPETENCY EXAM	1
PAYMENT INFORMATION	1
COMPLETE YOUR INITIAL LOG IN	1
<i>Medication Aide Training Program Candidates</i>	<i>1</i>
SCHEDULE AN EXAM	2
<i>Forgot your Password and Recover your Account.....</i>	<i>3</i>
<i>Self-Pay of Testing Fees in TMU@</i>	<i>5</i>
<i>Schedule / Reschedule into a Test Event</i>	<i>7</i>
<i>Test Confirmation Letter.....</i>	<i>8</i>
TIME FRAME FOR TESTING FROM TRAINING PROGRAM COMPLETION	9
EXAM CHECK-IN.....	9
TESTING ATTIRE	9
IDENTIFICATION.....	10
INSTRUCTIONS FOR THE KNOWLEDGE AND SKILL TESTS	11
TESTING POLICIES	11
INCLEMENT WEATHER AND UNFORESEEN CIRCUMSTANCES POLICIES.....	13
SECURITY	14

Tennessee Medication Aide Candidate Handbook

RESCHEDULES	14
REFUND OF TESTING FEES PAID.....	15
<i>Scheduled in a Test Event</i>	15
<i>Not Scheduled in a Test Event</i>	15
NO SHOWS	16
<i>No Show Exceptions</i>	16
TEST RESULTS	16
TEST ATTEMPTS	18
APPLYING FOR A TENNESSEE MEDICATION AIDE CERTIFICATION.....	18
<i>Expediting your Medication Aide Application for Certification w/ the Tennessee Board of Nursing</i> ..	18
RETAKING THE MEDICATION AIDE TEST	19
TEST REVIEW REQUESTS	19
THE KNOWLEDGE TEST	20
KNOWLEDGE TEST CONTENT	20
SAMPLE QUESTIONS	21
THE MANUAL SKILL TEST	22
SKILL TASKS LISTING.....	22
Controlled Substance.....	23
Ear Drops / Oral Liquid Administration	24
Ear Drops / Tablet Administration	25
Eye Drop / Oral Tablet Administration.....	26
Eye Drops / Unit Dose Administration	27
Nasal Spray / Tablet Administration	28
Oral Capsule Administration	29
Oral Liquid / Ointment Administration	30
Topical Ointment / Oral Capsule Medication Administration.....	31
Topical Spray Medication / Unit Dose Administration.....	32
KNOWLEDGE TEST VOCABULARY LIST	34
NOTES:	38

Tennessee Medication Aide Candidate Handbook

This page intentionally left blank.

Tennessee Medication Aide Candidate Handbook

Introduction

The purpose of a Medication Aide competency evaluation program is to ensure that candidates who are seeking to be Medication Aides understand the state standards and can competently and safely perform the job of an entry-level Medication Aide.

This handbook describes the process of taking the Medication Aide competency test and is designed to help prepare candidates for testing. There are two parts to the Medication Aide competency test—a multiple-choice knowledge test and a skill test. Candidates must pass both parts of the test and meet all requirements of the Tennessee Board of Nursing (TBON) to be certified as a Medication Aide in Tennessee.

The Tennessee Board of Nursing has approved D&S Diversified Technologies (D&SDT)-Headmaster, LLP to provide testing and scoring services for Medication Aide testing. For questions not answered in this handbook, please contact D&SDT-Headmaster toll free at (877)851-2355, email at tennessee@hdmaster.com, or go to www.hdmaster.com. The information in this handbook will help you prepare for your examination.

Americans with Disabilities Act (ADA)

ADA Compliance

If you have a qualified disability, you may request special accommodations for examination. Accommodations must be approved by the Tennessee Board of Nursing (TBON) in advance of examination. The pdf-fillable-submittable request for [ADA Accommodation Form 1404](#) is available on D&SDT-Headmaster's main webpage, under the third column, at www.hdmaster.com. This form must be submitted to D&SDT-Headmaster with the required documentation listed on the second page of the ADA application in order to be reviewed for any special accommodation(s).

The Tennessee Medication Aide Competency Exam

Payment Information

Exam Description	Price
Knowledge Test or Retake	\$42.50
Skill Test or Retake	\$95.00

Complete your Initial Log In

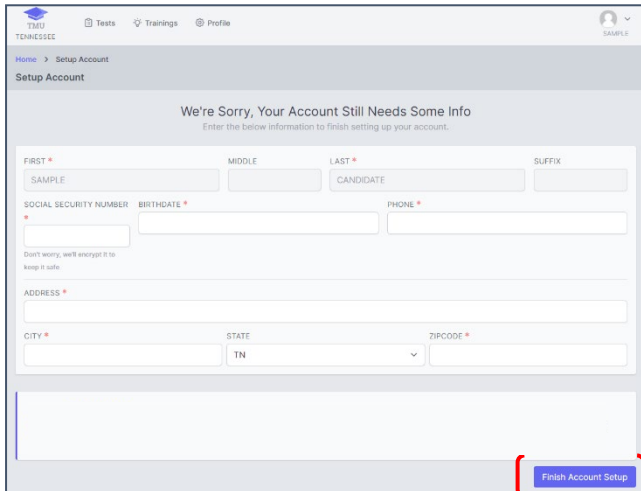
Medication Aide Training Program Candidates

Your initial registration information (name, phone number, Email and training start date) will be entered in D&SDT-Headmaster's TestMaster Universe (TMU©) software. You should receive a verification form during your training to sign after you review the data entered (make sure your first and last names exactly match the first and last names on your government issued ID). You must sign in to TMU© at <https://tn.tmutest.com> using your secure Email or Username and Password and complete your demographic information. If you do not know your Username and/or Password, click on 'Sign In', located in the upper right-hand corner of the screen, and then click on "Forgot Your Password?" You

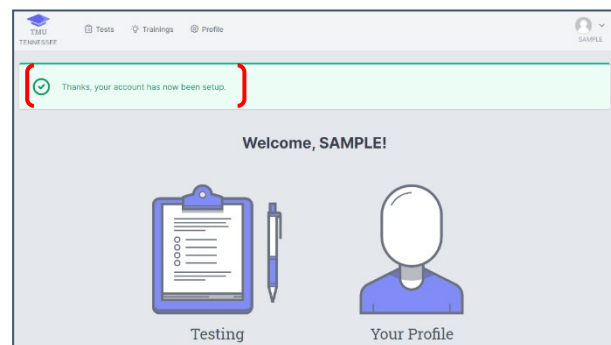
Tennessee Medication Aide Candidate Handbook

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-Headmaster at (877)851-2355.

Screen you will see the first time you sign in to your TMU© record with the demographic information you need to enter to complete your record:



Enter the blank * fields and
then click on-
Finish Account Setup



Schedule an Exam

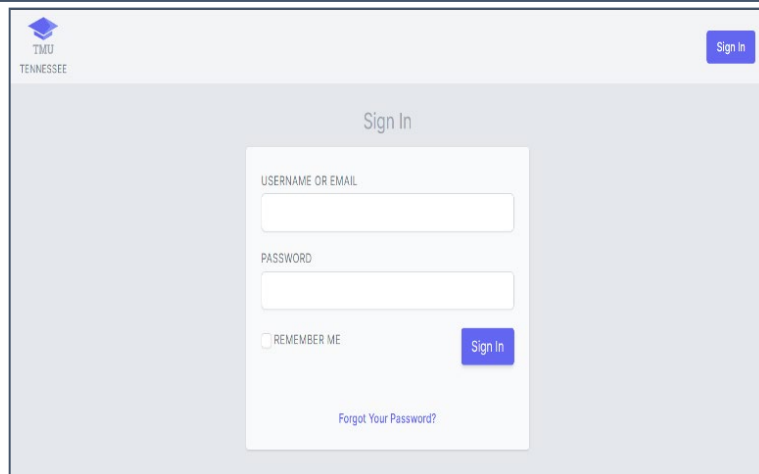
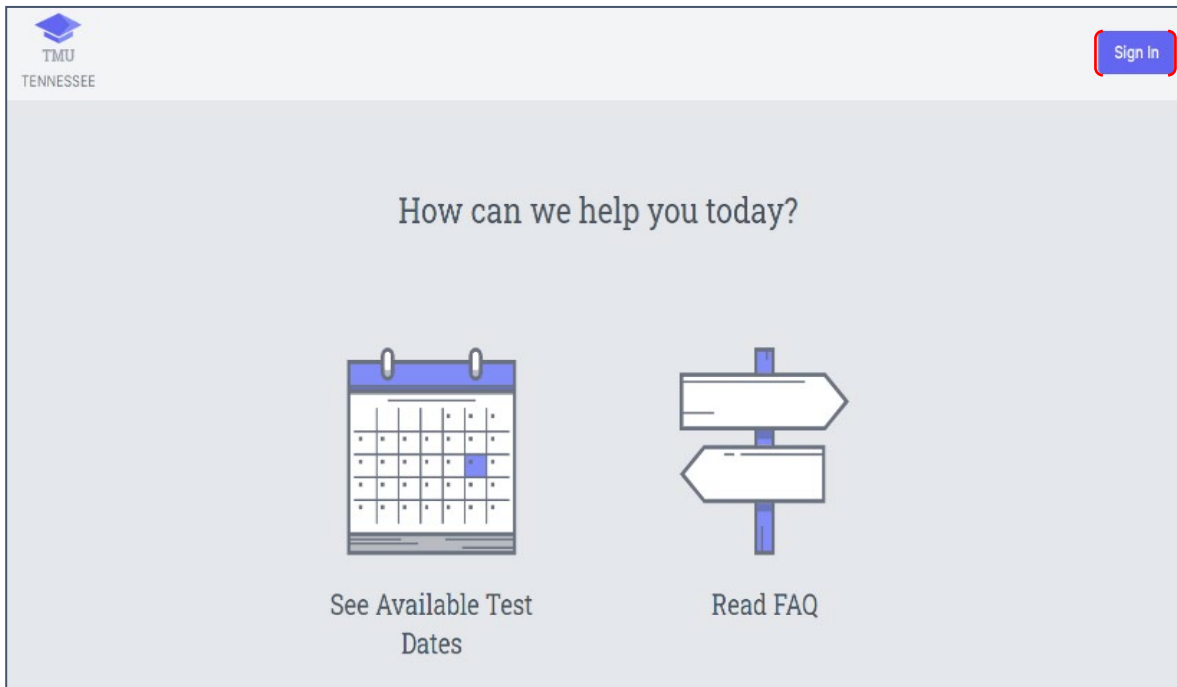
In order to schedule an examination date, candidates must have successfully completed a Tennessee Board of Nursing (TBON) approved, medication aide (MA) training program or have a TBON-approved MA Education Waiver. In addition, all medication aide certification exam candidates must be registered with D&S Diversified Technologies-Headmaster by their training program, unless a waiver is granted by the TBON. Your registration information will be transmitted to the TBON upon passing both portions of the MA-C exam.

Once your completed record is in the D&SDT-Headmaster TestMaster Universe© (TMU©) database, you may schedule your exam date online at the Tennessee TMU© webpage at <https://tn.tmutest.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.

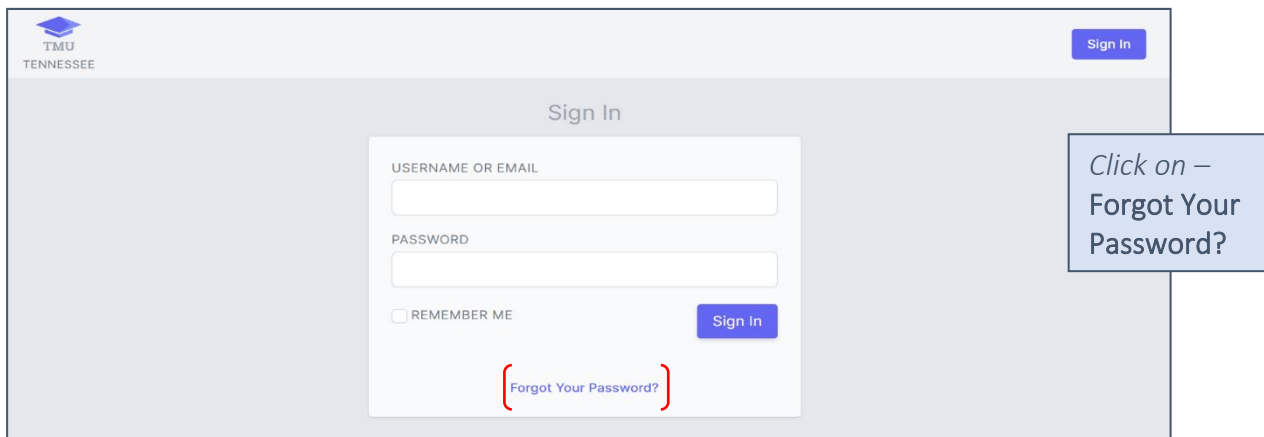
Securely processed Visa or MasterCard credit card or debit card information is required when scheduling online. After paying your testing fees, you will be able to schedule and/or reschedule up to one full business day prior to a scheduled test date of your choice. You will receive your test confirmation notification by email, text or by signing in to your account. You may login with any Internet connected device. You will be scheduled to take your initial knowledge and skill tests on the same day. To schedule or reschedule your test date, sign in to the Tennessee TMU© webpage at <https://tn.tmutest.com> with your Email or Username and Password. If you are unable to schedule/reschedule on-line, please call D&SDT-Headmaster at (877)851-2355 for assistance. D&SDT-Headmaster is open Monday through Friday, 7:00AM – 7:00PM (Central Standard time) / 8:00AM – 8:00PM (Eastern Standard time), excluding holidays.

Tennessee Medication Aide Candidate Handbook

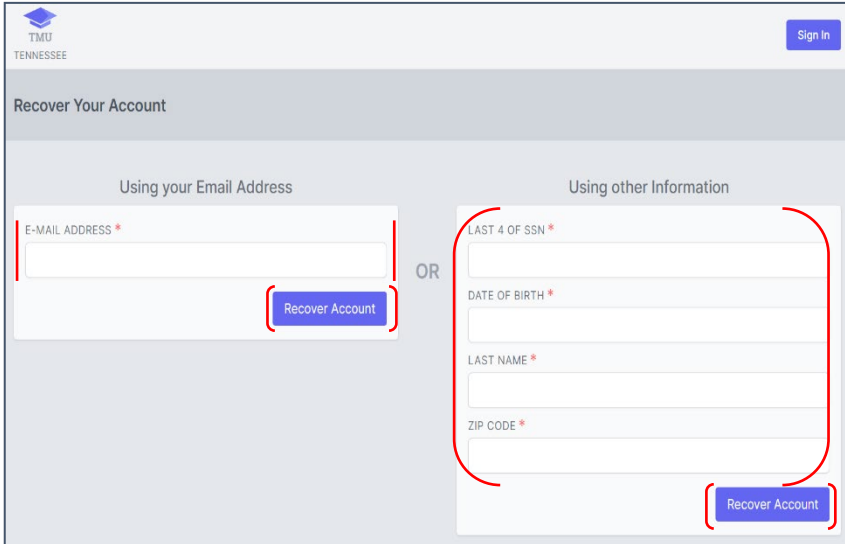
This is the Tennessee TMU© main page:



Forgot your Password and Recover your Account



Tennessee Medication Aide Candidate Handbook



Type in your Email Address

Click on –
Recover Account

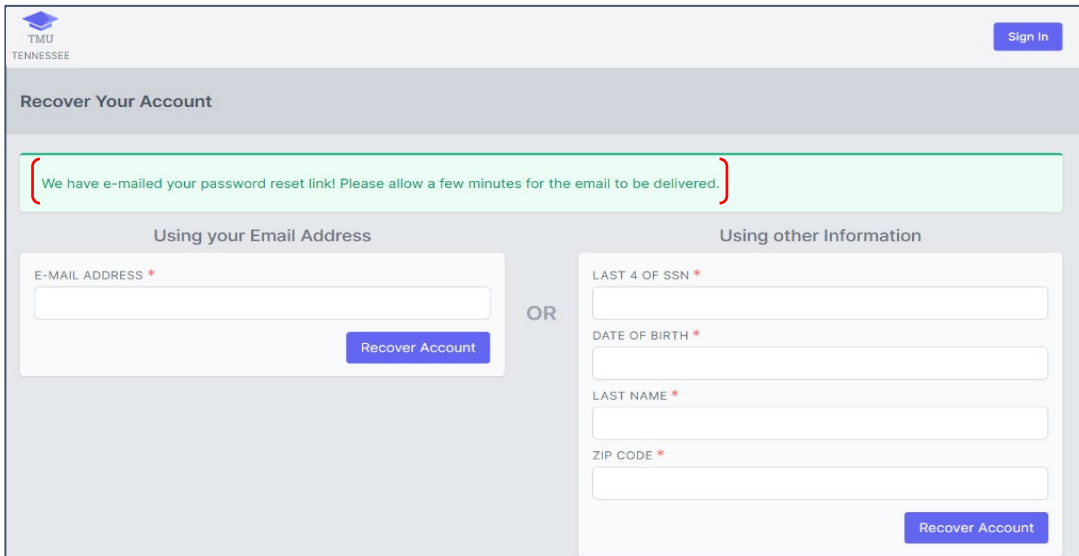
An email with the reset link will be emailed to you.

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

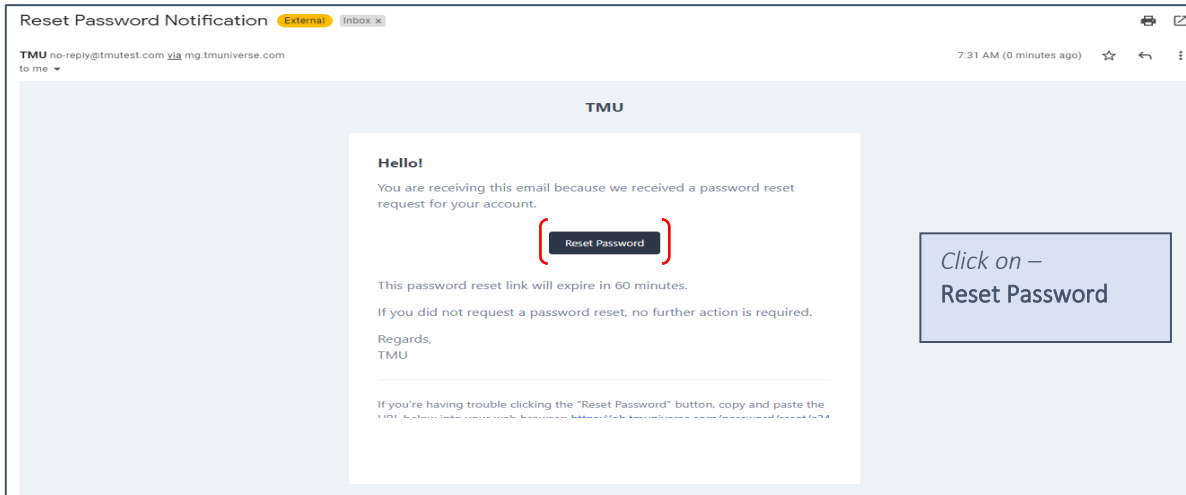
-OR-

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

Click on –
Recover Account



Email you will receive to reset your password:



Tennessee Medication Aide Candidate Handbook

Reset Your Password


E-MAIL ADDRESS

PASSWORD

CONFIRM PASSWORD



Type in your Password and Confirm Password, then click on – Reset Password

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



Tests


Trainings
Billing
Profile


Sample

✔ Logged in as Student Sample Candidate

Welcome, Sample!



Testing



Your Profile

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

Self-Pay of Testing Fees in TMU©

Testing fees will need to be paid before you can schedule a test date. Once your training program has completed your training record with completion hours and date, you will receive an email and text message that you are eligible to 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.

Special circumstances: 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 [Payment Form 1402TM](#), 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.***

Tennessee Medication Aide Candidate Handbook

NOTE: Forms with missing information, payment or signatures will not be processed and will be shredded. If a money order or cashier check was sent with the form, the money order/cashier check will be returned.

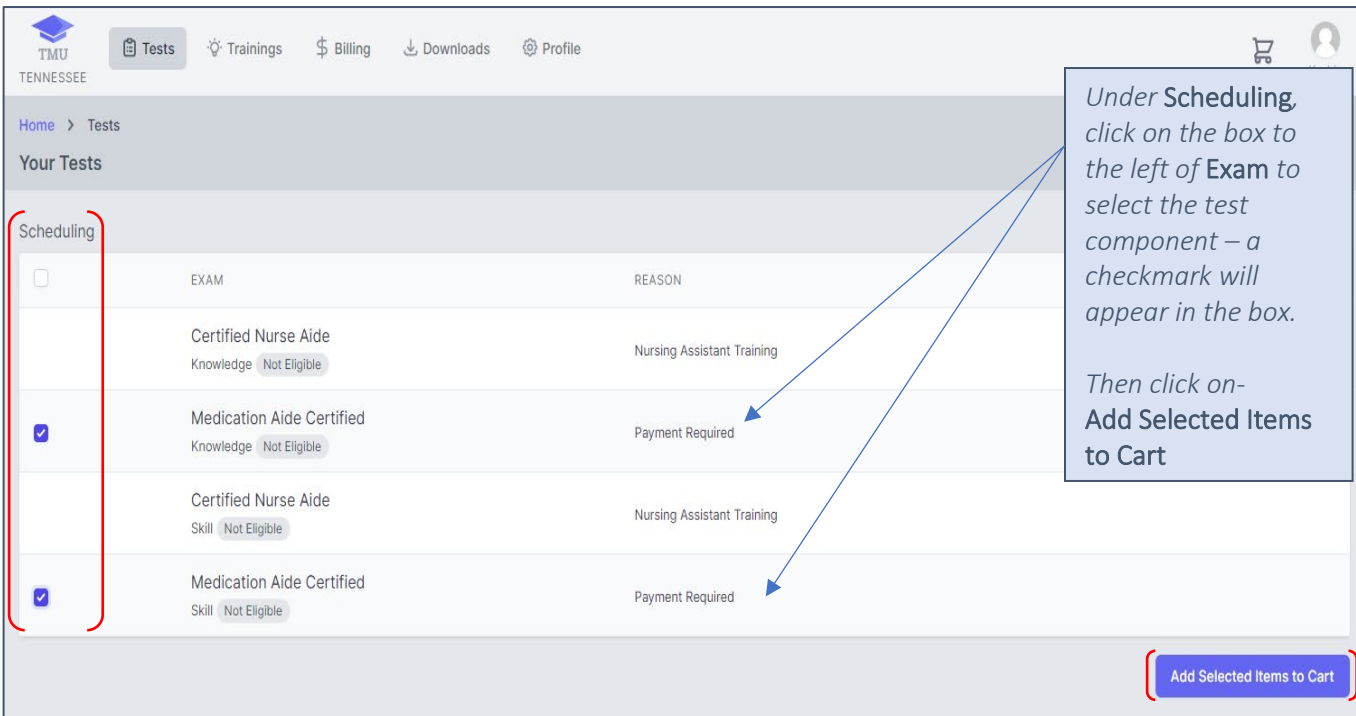
Once we receive your payment form and process your payment, you will be notified via email and text message that you are eligible to schedule into a test event. If you do not receive an email or text message within 5 days of submitting your Payment form, please call D&SDT-Headmaster to check on the status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

All D&SDT-Headmaster forms can be found on the [Tennessee MA-C webpage](#).

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

D&SDT-Headmaster **does not send** postal mail test confirmation letters to candidates.

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.



The screenshot shows the TMU Tennessee website interface. At the top, there are navigation links: Tests, Trainings, Billing, Downloads, and Profile. Below this is a breadcrumb trail: Home > Tests. The main section is titled 'Your Tests'. On the left, there is a 'Scheduling' tab highlighted with a red box. The main table has three columns: 'EXAM', 'REASON', and 'Scheduling'. The 'Scheduling' column contains checkboxes. The first row is for 'Certified Nurse Aide Knowledge' with a 'Not Eligible' status and 'Nursing Assistant Training' reason. The second row is for 'Medication Aide Certified Knowledge' with a 'Not Eligible' status and 'Payment Required' reason. The third row is for 'Certified Nurse Aide Skill' with a 'Not Eligible' status and 'Nursing Assistant Training' reason. The fourth row is for 'Medication Aide Certified Skill' with a 'Not Eligible' status and 'Payment Required' reason. A blue box with text instructions and arrows points to the checkboxes in the 'Scheduling' column and the 'Add Selected Items to Cart' button at the bottom right.

Under Scheduling,
click on the box to the left of Exam to select the test component – a checkmark will appear in the box.
 Then click on-
Add Selected Items to Cart

Tennessee Medication Aide Candidate Handbook

TMU TENNESSEE Tests Trainings Billing Downloads Profile

Home > Cart

Cart

Added Medication Aide Certified Skill to your cart.
Added Medication Aide Certified Knowledge to your cart.

DESCRIPTION	ITEM TYPE	AMOUNT	
Medication Aide Certified for Keshia	Knowledge	42.50	Remove
Medication Aide Certified for Keshia	Skill	95.00	Remove
Total:		\$ 137.50	

[Pay with Credit Card](#)

What You're Paying For

DESCRIPTION	COST
Medication Aide Certified for Keshia	42.50
Medication Aide Certified for Keshia	95.00
Total:	\$ 137.50

Pay with a Card

CARDHOLDER NAME CARD NUMBER

EXP MONTH EXP YEAR SECURITY CODE

CARDHOLDER ADDRESS

CITY STATE ZIP CODE

[Submit Payment](#)

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

You will receive a receipt of the transaction.

Schedule / Reschedule into a Test Event

Follow the instructions in this section to schedule or reschedule a test event. See more information regarding reschedules under the **'Reschedules'** section.

TMU TENNESSEE Tests Trainings Billing Downloads Profile

Home > Tests

Your Tests

Scheduling

EXAM	REASON	
Certified Nurse Aide Knowledge Not Eligible	Nursing Assistant Training	
Medication Aide Certified Knowledge Eligible		Schedule
Certified Nurse Aide Skill Not Eligible	Nursing Assistant Training	
Medication Aide Certified Skill Eligible		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.

Tennessee Medication Aide Candidate Handbook

Home > Tests > Find Event

Find Event MEDICATION AIDE CERTIFIED

TEST DATE	TEST SITE	SCHEDULING FOR
09/20/2022 1:00 PM CDT	CROSSVILLE CNA TEST SITE - 4667 - (TS) CROSSVILLE, TN	K Medication Aide Certified S Medication Aide Certified
09/28/2022 8:30 AM CDT	CROSSVILLE CNA TEST SITE - 4667 - (TS) CROSSVILLE, TN	K Medication Aide Certified S Medication Aide Certified

To select a test site and test date, click on – **Schedule**

tn.tmutest.com says

Schedule into this Event on 09/20/2022 for Medication Aide Certified Knowledge, Medication Aide Certified Skill . Are you sure?

OK

Cancel

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

Home > Tests

Your Tests

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

EXAM	REASON
Certified Nurse Aide Knowledge Not Eligible	Nursing Assistant Training
Medication Aide Certified Knowledge Not Eligible	Already Scheduled
Certified Nurse Aide Skill Not Eligible	Nursing Assistant Training
Medication Aide Certified Skill Not Eligible	Already Scheduled

This screen confirms you are scheduled into a test date to take your skills exam. You will get the same message when scheduled into your knowledge 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.

Please take our satisfaction survey

TEST DATE	EXAM	TEST SITE	STATUS			
09/20/2022 1:00 PM CDT	Medication Aide Certified Knowledge	CROSSVILLE CNA TEST SITE - 4667 - (TS) CROSSVILLE, TN	Scheduled	Test Confirmation Page	Get Map	Reschedule
09/20/2022 1:00 PM CDT	Medication Aide Certified Skill	CROSSVILLE CNA TEST SITE - 4667 - (TS) CROSSVILLE, TN	Scheduled	Test Confirmation Page	Get Map	Reschedule

Test Confirmation Letter


Your test confirmation letter will provide you with important information regarding where you are scheduled to test (date, time and address). It can be accessed at any time.

The body of the test confirmation letter will refer you to the Tennessee MA-C Candidate Handbook, where you will find state specific instructions on what time to arrive by, ID requirements, dress code, etc.



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.

Tennessee Medication Aide Candidate Handbook

It is important you read this letter!



[Tests](#)
[Trainings](#)
[Billing](#)
[Downloads](#)
[Profile](#)

Test Confirmation Letter

Scheduled Test Confirmation - Tennessee Medication Aide Certified

Get Map
Print Page

Test Date: 09/20/2022

Test Time: 1:00 PM CDT

Test Exam: Knowledge - Medication Aide Certified

Test Site:
Practice Test Site (TS)
1234 Practice Street
Memphis, TN 55555

SAMPLE CANDIDATE
123 Sunflower Lane
Memphis, TN 44444

*Click on-
Print
to print your
confirmation letter.*

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

- Testing begins at 1:00 PM CDT. You need to arrive *at least* 20 minutes early to check-in.
- Please refer to the [Tennessee MA-C Candidate Handbook](#) (in your downloads or at www.hdmaster.com, click on TN MA-C) for important information regarding ID requirements, testing attire, what to expect on testing day, etc.

Time Frame for Testing from Training Program Completion

You will be scheduled to take your knowledge and skill tests on the same day. You must schedule a test **within one year of your date of training program completion**. After one year, you must complete another TBON 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 Tennessee TMU© page at <https://tn.tmutest.com>.

If you have any questions regarding your test scheduling, call D&SDT-Headmaster at (877)851-2355, Monday through Friday 7:00AM to 7:00PM Central Standard time/8:00AM to 8:00PM Eastern Standard time, excluding holidays.

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.)

Testing Attire

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

- You must be in full clinical attire including clinical shoes.
 - No opened toed shoes (example; flip-flops or sandals) are allowed.
 - Scrubs and shoes can be any color/design.

Tennessee Medication Aide Candidate Handbook

- No smart watches or fitness monitors are allowed. You may bring a standard watch with a second hand.
- Long hair must be pulled back.

NOTE: You will not be admitted for testing if you are not wearing scrubs attire, the appropriate shoes and long hair pulled back. 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**. Examples of the forms of US government issued, signed, non-expired 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 (*must meet criteria for ID – picture, signature, non-expired expiration date, US-government issued – EXCEPTION: a fingerprint is acceptable in place of a signature*)
- Alien Registration Card (*must meet criteria for ID – picture, signature, non-expired expiration date, US-government issued – EXCEPTION: a fingerprint is acceptable in place of a signature*)
- Tribal Identification Card (*must meet criteria for ID – picture, signature, non-expired expiration date, US-government issued*)
- Work Authorization Card (*must meet criteria for ID – picture, signature, non-expired expiration date, US-government issued*)

NOTE: 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. You will not be admitted for testing and you will be considered a NO SHOW. You will forfeit your testing fees and have to pay for another exam date.

The **FIRST** and **LAST** names listed on the ID 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 Tennessee medication aide TMU© database by your training program. You may call D&SDT-Headmaster at (877)851-2355 to confirm that your name of record matches your US government issued ID, 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 ID, your ID is invalid (see note above) or if your FIRST and LAST printed names on your US government issued photo ID do not match your current name of record. You will be considered a NO SHOW. You will forfeit your testing fees and have to pay for another exam date.

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

Tennessee Medication Aide Candidate Handbook

Note:

- **You will not be admitted for testing if you do not bring proper/valid identification.**
 - Be sure your US government issued identification is not expired and that your ID is signed.
 - Check to be positive that both your FIRST and LAST printed names on your photo ID 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 is 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 version and electronic version) and skill test instruction links on the D&SDT-Headmaster Tennessee MA 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 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.

Testing Policies

The following policies are observed at each test site—

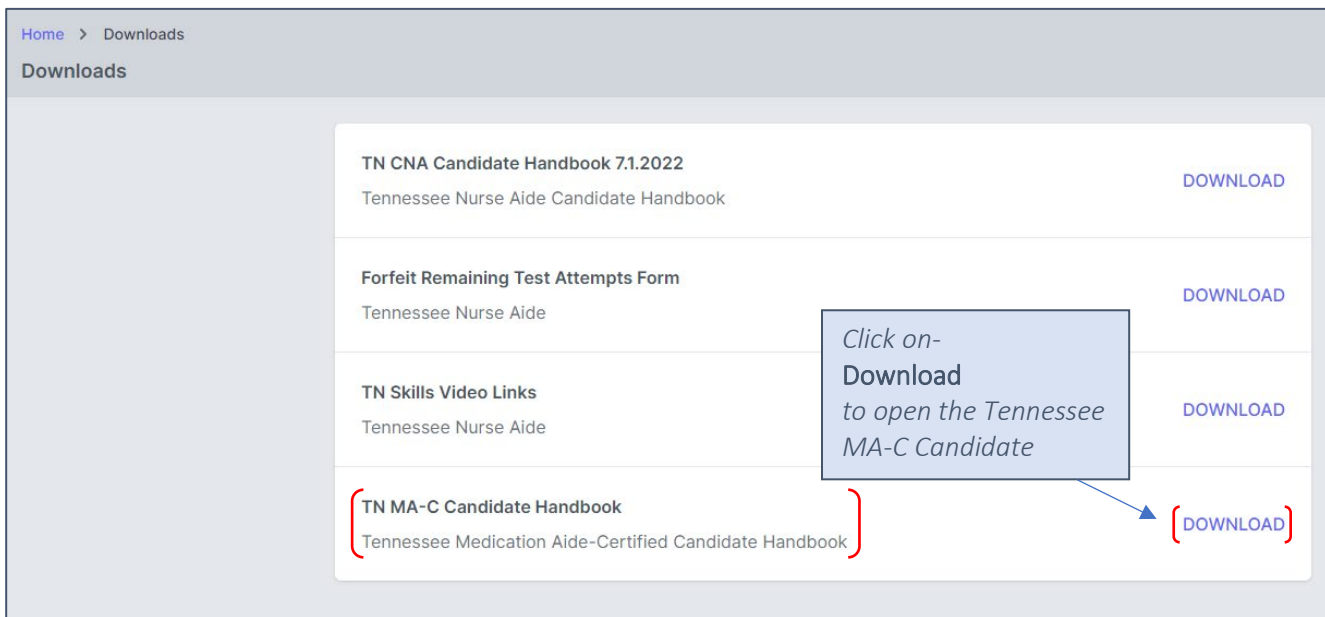
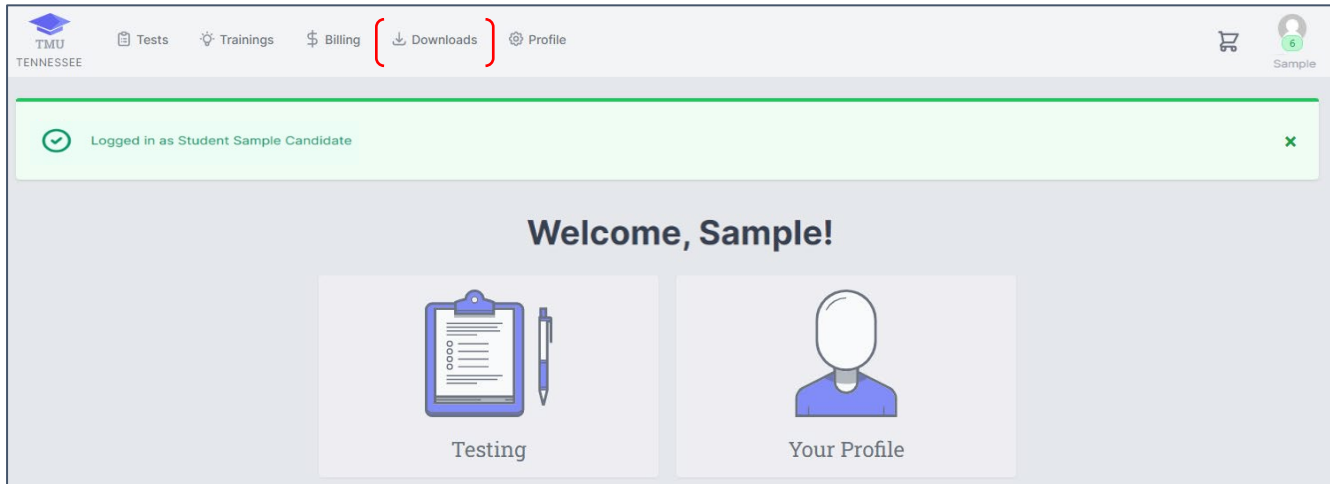
- Make sure you have signed in to your TMU© record at <https://tn.tmutest.com> before your test date to update your password and verify your demographic information. Refer to the **'Complete Your Initial Sign In'** section of this handbook for instructions and information.
- If you have not signed in 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 four (4) 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 you 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 and any exam fees paid *will NOT be refunded*.
- If you do not bring valid and appropriate US government issued, non-expired, signed photo ID, you will not be admitted to the exam and any exam fees paid *will NOT be refunded*.
- If the FIRST and LAST printed names on your ID do not match your current name of record, you will not be admitted to the exam and any exam fees paid *will NOT be refunded*.

Tennessee Medication Aide Candidate Handbook

- If you do not wear full clinical scrubs and the appropriate clinical shoes and conform to all testing policies, you will not be admitted to the exam 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 1402TM (Payment Form) to schedule another exam date.
- **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, large bags, back packs, 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).
 - All electronic devices must be **turned off**.
 - Any smart watches or fitness monitors must be removed from your wrist and turned off.
- 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 test, forfeit all testing fees, will be reported to your training program and the Tennessee Board of Nursing and will not be permitted to test for 6 months or without the approval of the Tennessee Board of Nursing.
- You may, however, use personal devices during your free time in the waiting area.
- You may bring a jacket, snack, drink or study material to have while waiting to test.
- Word-for-word language translation dictionaries are allowed during testing. You must show the foreign translation dictionary to the RN Test Observer/Knowledge Test Proctor before you start your knowledge exam. No documentation or writing can be in the translation dictionary, if there is, it will not be allowed.
 - Electronic translation dictionaries or dictionaries with definitions are not allowed during testing.
- 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 exam will be scored as a failed attempt and you will be reported to your training program and the Tennessee Board of Nursing. You will not be allowed to retest without clearance from the Tennessee Board of Nursing.
- No visitors, guests, pets (including companion animals) or children are allowed.
 - Service animals with an approved ADA accommodation in place are allowed.
- 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 Tennessee Medication Aide Candidate Handbook before your test day for any updates to testing and/or policies.***

Tennessee Medication Aide Candidate Handbook

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



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 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 weather emergency.
- The test site closes.
- The test observer cancels the test event.
- There is an accident due to weather or other cause 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.

Tennessee Medication Aide Candidate Handbook

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*. See more information under No Show Exceptions.

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 and the TBON. You will not be allowed to retest without clearance from the TBON.

Anyone who removes or tries to remove test material or takes notes or information from the test site will be reported to your training program and the TBON 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. You will need to obtain permission from TBON in order to be eligible to test again.

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, etc., or browsing to other sites during your test), 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 the Tennessee Board of Nursing (TBON) and you may need to obtain permission from the TBON in order to be eligible to test again.

Reschedules

All candidates may reschedule for free online at <https://tn.tmutest.com> any time up until one (1) business day before a scheduled test day, excluding Saturdays, Sundays and holidays.

All candidates are entitled to one free D&SDT-Headmaster staff assisted reschedule during the three-attempt testing cycle up until **one (1) business day** prior to a scheduled test day, **excluding** Saturdays, Sundays and holidays.

Additional reschedules are subject to a \$35 fee that must be paid in full prior to a D&SDT-Headmaster staff assisted reschedule.

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://tn.tmutest.com>. (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-Headmaster is open until 7:00PM Central Standard time/8:00PM Eastern Standard time, Monday-Friday excluding holidays) the Wednesday before your scheduled exam.

Tennessee Medication Aide Candidate Handbook

Scheduled test date is on a:	Reschedule the previous:
Monday	The previous Thursday (by 7:00PM Central time/ 8:00PM Eastern time)
Tuesday	The previous Friday (by 7:00PM Central time/ 8:00PM Eastern time)
Wednesday	The previous Monday (by 7:00PM Central time/ 8:00PM Eastern time)
Thursday	The previous Tuesday (by 7:00PM Central time/ 8:00PM Eastern time)
Friday	The previous Wednesday (by 7:00PM Central time/ 8:00PM Eastern time)
Saturday	The previous Thursday (by 7:00PM Central time/ 8:00PM Eastern time)
Sunday	The previous Thursday (by 7:00PM Central time/ 8:00PM Eastern time)

NOTE: Reschedules will not be granted less than one (1) business day (excluding Saturdays, Sundays and holidays) 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 Tennessee medication aide 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 (D&SDT-Headmaster is open until 7:00PM Central Standard/ 8:00PM Eastern Standard time Monday-Friday excluding holidays) the Thursday before your scheduled exam.
- 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-Headmaster. Any requests for refunds made beyond the 30 days of payment of testing fees with D&SDT-Headmaster 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-Headmaster. Any requests for refunds made beyond the 30 days of payment of testing fees with D&SDT-Headmaster 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.

Tennessee Medication Aide Candidate Handbook

No Shows

If you are scheduled for your exam and do not show up without notifying D&SDT-Headmaster one (1) business day preceding your scheduled testing event, **excluding** Saturday, Sunday 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 must submit a new testing fee to schedule yourself into a new test event.

These fees partially offset D&SDT-Headmaster 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-Headmaster must be contacted within one business day via phone call, fax or email and a tow bill, 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.
- **Weather or road condition related issue:** D&SDT-Headmaster 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-Headmaster 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-Headmaster 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.)

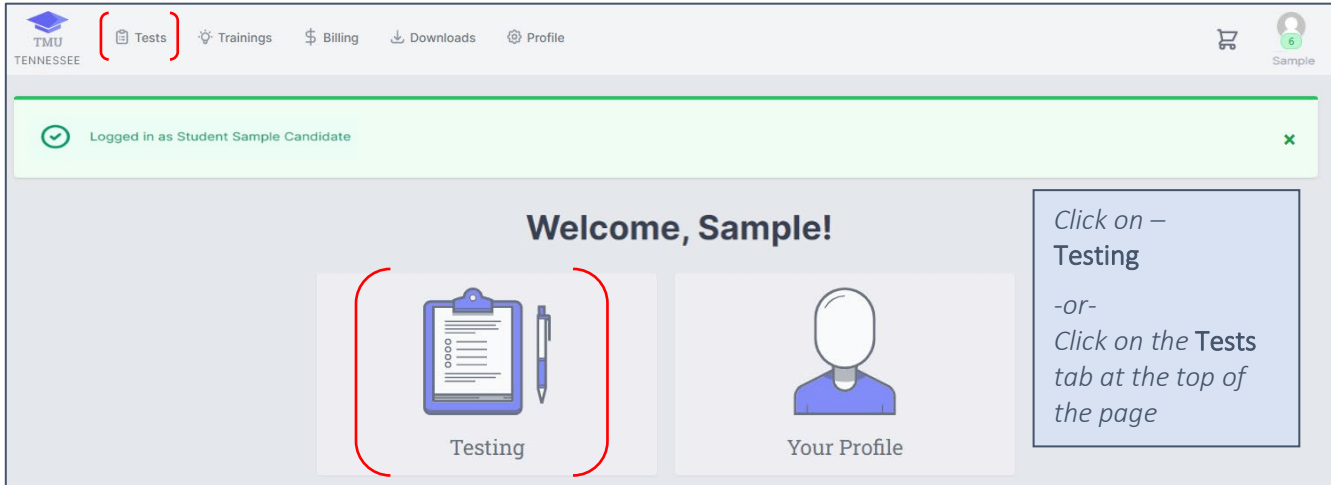
Test Results

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. Official test results are available to you the day tests are scored. Official test results will be available by signing in to your TMU© record (<https://tn.tmutest.com>) after 6:00PM (EST)/7:00 (CST) the business day after your test event.

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

Tennessee Medication Aide Candidate Handbook

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



TMU TENNESSEE

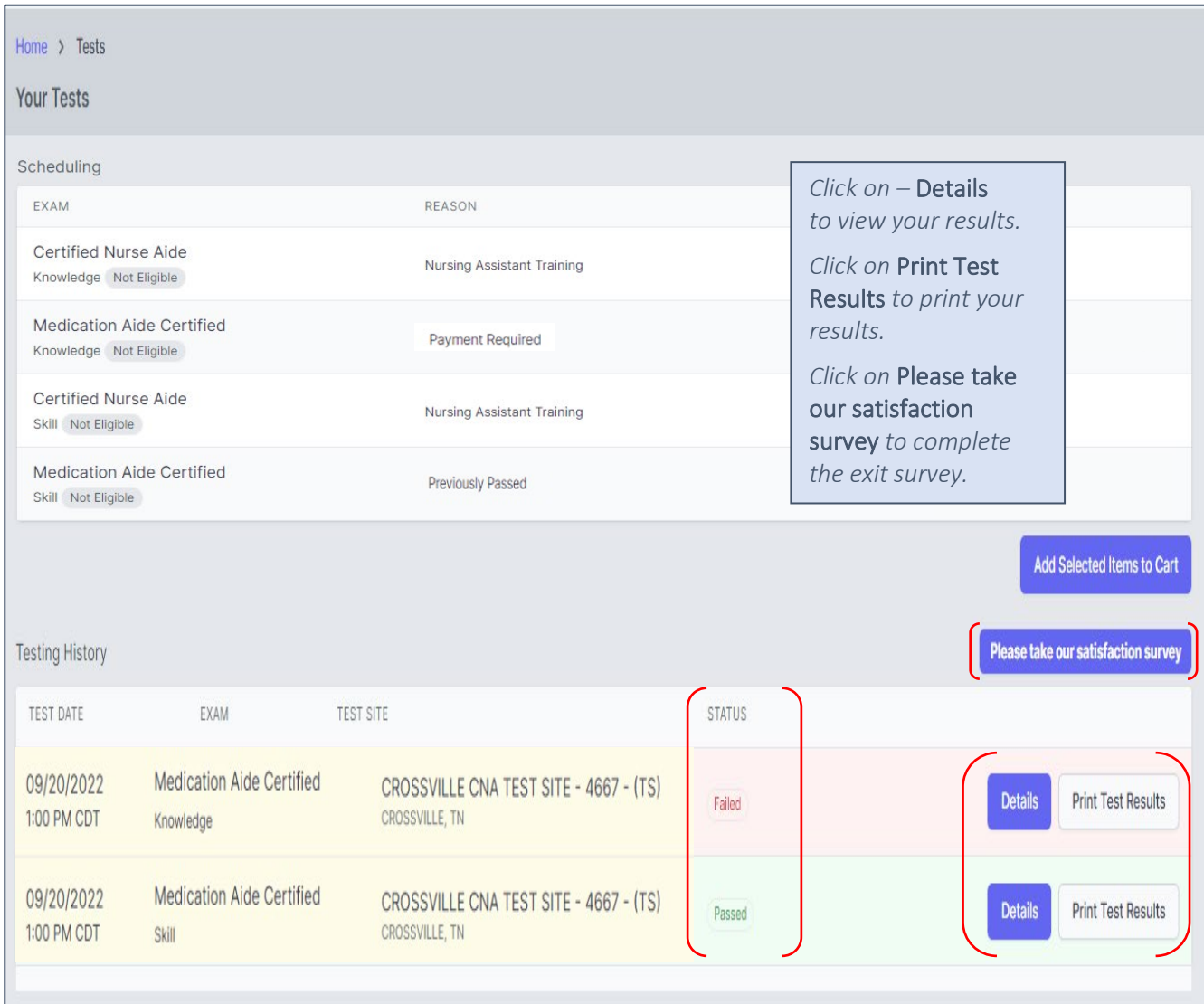
Tests Trainings Billing Downloads Profile

Logged in as Student Sample Candidate

Welcome, Sample!

Testing Your Profile

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



Home > Tests

Your Tests

Scheduling

EXAM	REASON
Certified Nurse Aide Knowledge Not Eligible	Nursing Assistant Training
Medication Aide Certified Knowledge Not Eligible	Payment Required
Certified Nurse Aide Skill Not Eligible	Nursing Assistant Training
Medication Aide Certified Skill Not Eligible	Previously Passed

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.

Add Selected Items to Cart

Testing History

Please take our satisfaction survey

TEST DATE	EXAM	TEST SITE	STATUS	Details	Print Test Results
09/20/2022 1:00 PM CDT	Medication Aide Certified Knowledge	CROSSVILLE CNA TEST SITE - 4667 - (TS) CROSSVILLE, TN	Failed	Details	Print Test Results
09/20/2022 1:00 PM CDT	Medication Aide Certified Skill	CROSSVILLE CNA TEST SITE - 4667 - (TS) CROSSVILLE, TN	Passed	Details	Print Test Results

Tennessee Medication Aide Candidate Handbook

Test Attempts

You have **two (2) attempts** to pass the knowledge and skill test portions of the exam within one (1) year from your date of medication aide training program completion. If you do not complete testing within one year from completion of training, you must complete a new TBON approved training program in order to become eligible to further attempt Tennessee medication aide examinations.

Applying for a Tennessee Medication Aide Certification

After you have successfully passed both the Knowledge Test and Skill Test components of the medication aide exam, your test results will be sent electronically to the Tennessee Board of Nursing by D&SDT-Headmaster. The Tennessee Board of Nursing will officially notify you when you have met all the criteria to be a certified medication aide in Tennessee. One part of those requirements includes passing both the knowledge and skill test components of the TBON approved, D&SDT-Headmaster delivered, medication aide test. If you fail either test component, you must reapply to retake the component that you failed.

Expediting your Medication Aide Application for Certification with the Tennessee Board of Nursing

You may be able to expedite your Medication Aide application for certification with the Tennessee Board of Nursing by following the steps outlined below:

- Before you apply:
 - Complete a medication aide training program.
 - Pass the medication aide certification exam: <https://tn.tmutest.com>
- Request an official transcript that indicates medication assistant training completion date be mailed (no e-scripts) directly to the Tennessee Board of Nursing.
- Complete the Criminal Background Check
<https://www.tn.gov/health/health-professionals/criminal-background-check/cbc-instructions.html>
 - Find the application on-line:
<https://www.tn.gov/content/dam/tn/health/healthprofboards/nursing/applications/Medication%20Aide%20Certification%20Application.pdf>
- Declaration of Citizenship:
 - <https://www.tn.gov/content/dam/tn/health/healthprofboards/PH-41833.pdf>
 - Submit notarized Declaration of Citizenship
 - Include proof of citizenship (e.g., current, unexpired driver's license)
 - Not a US citizen - #7 requires that you circle a category in "a-h" and submit two (2) items of proof (listed on the form)
- If positive criminal history – submit with application:
 - Letter of explanation
 - Certified copies of arresting document (warrant), judgment (disposition), completion of judgment (receipt of payment of fines, letter of completion of probation)
- Do not submit application without payment

Note: Do not practice in the role of a Medication Aide until certified by the Tennessee Board of Nursing.

Tennessee Medication Aide Candidate Handbook

Retaking the Medication Aide Test

In the event that your test results inform you that you failed 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 an 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://tn.tmutest.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 Payment Form 1402TM (found on the Tennessee MA-C webpage at www.hdmaster.com, click on Tennessee MA-C.

- You will need to submit your Payment Form 1402TN to D&SDT-Headmaster 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 7:00AM to 7:00PM CST/8:00AM to 8:00PM EST Monday through Friday, 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 Tennessee MA-C 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-Headmaster at (877)851-2355, during regular business hours, 7:00AM to 7:00PM CST/8:00AM to 8:00PM EST, Monday through Friday, 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-Headmaster staff, you still have a concern with your testing process that affected the outcome of your exam, you may submit a Test Review Request.

Since one qualification for certification as a Medication Aide-Certified in Tennessee 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-Headmaster will pay for your re-test fee and you will not be charged the \$25 test review deposit. D&SDT-Headmaster will review your detailed recollection, your knowledge test markings and any skill task measurements you recorded at the time of your test, in addition to reviewing markings, notations and

Tennessee Medication Aide Candidate Handbook

measurements recorded by the RN Test Observer at the time of your test. D&SDT-Headmaster 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-Headmaster will only discuss test results or test disputes with the candidate or the candidate's training program. D&SDT-Headmaster 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-Headmaster 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 and to the Tennessee Board of Nursing.

The Knowledge Test

You will be required to re-present your ID when you enter the knowledge test room and when you enter the skills lab for your skills exam. Please keep your 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 sixty (60) minutes to complete the 55 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?")

EFFECTIVE JUNE 1, 2022: You must have a score of **75%** or better to pass the knowledge portion of the exam. *(Before June 1, 2022, score was 85% or better to pass the knowledge portion.)*

Electronic testing using TMU© internet connected computers is utilized at all but a couple of sites in Tennessee. 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. *The Knowledge Test Proctor will provide you a code at the test event to start your test.*

All test materials 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 the Tennessee Board of Nursing.

Knowledge Test Content

The Knowledge Test consists of 55 multiple-choice questions. Questions are selected from subject areas based on the TBON approved Tennessee medication aide test plan. The subject areas and number of items from each area are as follows:

-Continued on next page-



Tennessee Medication Aide Candidate Handbook

Subject Area	# of Questions
Affects of Medication on Body Systems	9
Allowable Routes	5
Body Systems – A&P	3
Documentation	5
Error Reporting	3
Medication Administration	9
Regulation of Controlled Substances	4
Role and Responsibility	7
Six Rights of Medication Administration	5
State Regulations	2
Terminology	3

Sample Questions

Candidates may also purchase complete medication aide practice tests that are randomly generated. 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 at www.hdmaster.com.

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

1. An order for Colace qd would require that you to administer this medication to a resident
 - a. once a week
 - b. every day
 - c. on an empty stomach
 - d. when the resident complains of constipation
2. If a resident refuses to take the medication you bring to him you should
 - a. make a mental note and plan to come back and try again later
 - b. try to get the resident to take his medication anyway
 - c. leave the medication on the resident's bedside stand and instruct him to take it later
 - d. document the refusal and report it to the nurse
3. The following medication is not allowed to be administered by a medication aide
 - a. a regularly scheduled oral hypertensive agent
 - b. an antibiotic cream applied to the skin
 - c. a laxative to be administered by rectal suppository
 - d. a schedule III controlled substance timed for every night

ANSWERS: 1-B 2-D 3-C

Tennessee Medication Aide Candidate Handbook

The Manual Skill Test

- The purpose of the Skill Test is to evaluate your performance when demonstrating Tennessee approved medication 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.
- Two (2) medication administration tasks will be randomly selected from the list of skill tasks for you to perform as your skill test.
 - One of the tasks will be a controlled substance administration task.
- Each of your randomly selected 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.
- After hearing a scenario, you will open and use the MAR to determine what medications to obtain from the locked medication box or locked controlled substance file box. You will administer the medications obtained to a live resident actor.
- You will be allowed a maximum of **twenty-five (25) minutes** to complete the two medication administration tasks. After 10 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.
- **EFFECTIVE JUNE 1, 2022:** You must correctly perform all of the **key** steps (in bold font) and **75%** of all non-key steps on all medication administrations assigned in order to pass the Skill Test. *(Before June 1, 2022, the percentage was 85%.)*
- If you believe you made a mistake while performing a task, say so.
 - You will need to demonstrate the step or steps on the task you believe you performed incorrectly for the correction to be noted for the step.
- You may repeat or correct **any step** or **steps** on any task you believe you have performed incorrectly at **any time** during your allotted twenty-five (25) minutes or until you tell the RN Test Observer you are finished with the Skill Test.

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 medication assistant candidate to successfully demonstrate minimum proficiency of the skill task for the RN Test Observer. You will be

Tennessee Medication Aide Candidate Handbook

scored only on the steps listed. If you fail a single task, you will have to take another skill test with two tasks on it, one of which will be a controlled substance task. The skill 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 medication administration tasks and record what they see you do. D&SDT-Headmaster scoring teams will officially score and double check your test.

Please note: The skill task steps included in this handbook are offered as guidelines to help prepare candidates for the Tennessee medication aide skill test and the steps included herein are not intended to be used to provide complete care that would be all inclusive of best care practiced in an actual work setting.

CONTROLLED SUBSTANCE

- 1) Candidate washes hands. (May verbalize for testing purposes.)
- 2) Candidate locates the correct individual in the MAR from the scenario that was read.
- 3) **Check #1: Verbally verifies the MAR contains the correct resident, drug, dose, time and route (five rights).**
- 4) Unlocks the controlled substance medication file box.
- 5) **Candidate obtains the correct medication from the controlled substance medication box.**
- 6) **Check #2: Matches the drug label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 7) Opens container or pops medication from bubble pack.
- 8) **Pours the correct number of tablets.**
- 9) Does not contaminate the medication.
- 10) **Check #3: Matches the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 11) Returns drug to the controlled substance medication box.
- 12) Locks controlled substance medication box.
- 13) Secures medication box keys on person.
- 14) Opens count book to correct page.
- 15) Documentation Count Book: Candidate records the appropriate date format (month/day/year) on the correct page in the count book.
- 16) Documentation Count Book: Candidate records the right time on the correct page in the count book.
- 17) Documentation Count Book: Candidate records the right route on the correct page in the count book.
- 18) Documentation Count Book: Candidate records the right number of tablets on hand on the correct page in the count book.
- 19) Documentation Count Book: Candidate records the right number of tablets used on the correct page in the count book.
- 20) Documentation Count Book: Candidate records the right number of tablets remaining on the correct page in the count book.
- 21) Documentation Count Book: Candidate signs name on correct page in the count book.
- 22) Closes count book.
- 23) Greets resident.
- 24) Introduces self as Medication Aide.

Tennessee Medication Aide Candidate Handbook

- 25) Verifies right resident by comparing to the MAR with appropriate method of identification, i.e.; picture, wrist band, or facility appropriate method of identification.
- 26) Explains procedure.
- 27) Gives resident a glass of water.
- 28) Assists the resident to take the medication one capsule/tablet at a time.
- 29) Verifies medication has been swallowed.
- 30) Documentation Med Sheet: Candidate initials the correct medication sheet under the right date after administering the medication.**
- 31) Documentation Med Sheet: Candidate initials the correct medication sheet across from the right time after administering the medication.**
- 32) Documentation Med Sheet: Candidate initials the correct medication sheet across from the right medication after administering the medication.**
- 33) Initials and signs MAR in the signature area. (Sixth right)**
- 34) Closes MAR.
- 35) Maintains interpersonal communications throughout administration.
- 36) Places call light within reach, or verbalizes verification of call light for wrist/necklace call devices.
- 37) Candidate washes hands. (May verbalize for testing purposes.)

EAR DROPS / ORAL LIQUID ADMINISTRATION

- 1) Candidate washes hands. (May verbalize for testing purposes.)
- 2) Opens MAR. Finds resident for the scenario that was read.
- 3) For the oral liquid (1st) medication, verbally verifies the MAR contains the correct resident, drug, dose, time and route (five rights).**
- 4) Unlocks medication box.
- 5) For the oral liquid (1st) medication, obtains correct drug from the correct resident's drawer in the medication box matching the label to the MAR verbally identifying all five rights (resident, drug, dose, time and route).**
- 6) Sets medication cup on level surface.
- 7) Pours correct amount of medication.**
- 8) Checks for correct amount of medication at eye level.
- 9) Returns unused medication to the medication box.
- 10) Does not contaminate the medication.
- 11) For the ear drop (2nd) medication, verbally verifies the MAR contains the correct resident, drug, dose, time and route (five rights).**
- 12) For the ear drop (2nd) medication, obtains correct drug from the correct resident's drawer in the medication box matching the label to the MAR verbally identifying all five rights (resident, drug, dose, time and route).**
- 13) For the ear drop medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 14) Greets resident.
- 15) Introduces self as Medication Aide.
- 16) Verifies right resident by comparing to the MAR with appropriate method of identification i.e.; picture, wrist band, or facility appropriate method of identification.**
- 17) Explains procedure.
- 18) Assists resident to take oral medication.

Tennessee Medication Aide Candidate Handbook

- 19) Lowers head of the bed.
- 20) Head is turned toward right with left ear upward.
- 21) Holds external ear flap and pulls up and back.
- 22) Instill two drops of medication into the ear.**
- 23) Dropper tip does not touch inside of ear canal.
- 24) Tells resident to not move his/her head for a few minutes.
- 25) Replaces all unused medications back in the medication box.
- 26) Locks medication box.
- 27) Secures medication box keys on person.
- 28) Documents administration correctly on the MAR (resident, drug, dose, time and route).**
[Sixth right]
- 29) Initials and signs MAR in the signature area. [Sixth right]**
- 30) Closes MAR.
- 31) Maintains interpersonal communications during administration.
- 32) Places call light within reach, or verbalizes verification of call light for wrist/necklace call devices.
- 33) Candidate washes hands. (May verbalize for testing purposes.)

EAR DROPS / TABLET ADMINISTRATION

- 1) Candidate washes hands. (May verbalize for testing purposes.)
- 2) Opens MAR. Finds resident for the scenario that was read.
- 3) For the tablet (1st) medication, verbally verifies the MAR contains the correct resident, drug, dose, time and route (five rights).**
- 4) Unlocks medication box.
- 5) For the tablet (1st) medication, obtains correct drug from the correct resident's drawer in the medication box matching the label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 6) Opens tablet container or pops medication from bubble pack.
- 7) Puts correct number of tablets into the medication cup.**
- 8) For the tablet (1st) medication, matches the drug obtained and prescription. Label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 9) Returns first drug to the correct resident's drawer in the medication box.
- 10) Doesn't contaminate the medication.
- 11) For the ear (2nd) medication, verbally verifies the MAR contains the correct resident, drug, dose, time and route (five rights).**
- 12) For the ear (2nd) medication, obtains correct drug from the correct resident's drawer in the medication box matching the label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 13) For the ear (2nd) medication, matches the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 14) Greets resident.
- 15) Introduces self as Medication Aide.
- 16) Verifies right resident by comparing to the MAR with appropriate method of identification i.e.; picture, wrist band, or facility appropriate method of identification.**
- 17) Explains procedure.
- 18) Gives resident a glass of water.

Tennessee Medication Aide Candidate Handbook

- 19) Assists the resident to take the tablet medication one capsule at a time.
- 20) Observes resident swallow the tablet(s).
- 21) Lowers head of the bed.
- 22) Shakes ear medication before use.
- 23) Head is turned toward right with left ear upward.
- 24) Holds external ear flap and pulls up and back.
- 25) Instill two drops of medication into the left ear.**
- 26) Dropper tip does not touch inside of ear canal.
- 27) Tells resident to not move his/her head for a few minutes.
- 28) Places all unused medications back in the medication box.
- 29) Locks medication box.
- 30) Secures medication box keys on person.
- 31) Documents administration correctly on the MAR (resident, drug, dose, time and route).**
[Sixth right]
- 32) Initials and signs MAR in the signature area. [Sixth right]**
- 33) Closes MAR.
- 34) Maintains interpersonal communications during administration.
- 35) Places call light within reach, or verbalizes verification of call light for wrist/necklace call devices.
- 36) Candidate washes hands. (May verbalize for testing purposes.)

EYE DROP / ORAL TABLET ADMINISTRATION

- 1) Candidate washes hands. (May verbalize for testing purposes.)
- 2) Opens MAR. Finds resident for the scenario that was read.
- 3) For the tablet (1st) medication, verbally verifies the MAR contains the correct resident, drug, dose, time and route (five rights).**
- 4) Unlocks medication box.
- 5) For the tablet (1st) medication, obtains correct drug from the correct resident's drawer in the medication box matching the label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 6) Opens tablet container or pops medication from bubble pack.
- 7) Puts correct number of tablets into the medication cup.**
- 8) For the tablet (1st) medication, matches the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 9) Returns first drug to the correct resident's drawer in the medication box.
- 10) Doesn't contaminate the medication.
- 11) For the eye (2nd) medication, verbally verifies the MAR contains the correct resident, drug, dose, time and route (five rights).**
- 12) For the eye (2nd) medication, obtains correct drug from the correct resident's drawer in the medication box matching the label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 13) For the eye (2nd) medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 14) Greets resident.
- 15) Introduces self as Medication Aide.

Tennessee Medication Aide Candidate Handbook

- 16) Verifies right resident by comparing to the MAR with appropriate method of identification i.e.; picture, wrist band, or facility appropriate method of identification.**
- 17) Explains procedure.
- 18) Gives resident a glass of water.
- 19) Assists the resident to take the tablet medication one capsule at a time.
- 20) Observes resident swallow the tablet(s).
- 21) Gently tilts resident's head back with chin up.
- 22) Pulls down on lower eye lid of the right eye making a pocket.
- 23) Asks resident to look up toward forehead.
- 24) Drops one drop of medication into the pocket.**
- 25) Dropper tip does not touch eye.
- 26) Uses tissue to remove any excess fluid from around eye.
- 27) Places all unused medications back in the medication box.
- 28) Locks medication box.
- 29) Secures medication box keys on person.
- 30) Documents administration correctly on the MAR (resident, drug, dose, time and route).**
[Sixth right]
- 31) Initials and signs MAR in the signature area. [Sixth right]**
- 32) Closes MAR.
- 33) Maintains interpersonal communications during administration.
- 34) Places call light within reach, or verbalizes verification of call light for wrist/necklace call devices.
- 35) Candidate washes hands. (May verbalize for testing purposes.)

EYE DROPS / UNIT DOSE ADMINISTRATION

- 1) Candidate washes hands. (May verbalize for testing purposes.)
- 2) Opens MAR. Finds resident for the scenario that was read.
- 3) For the unit dose (1st) medication, verbally verifies the MAR contains the correct resident, drug, dose, time and route (five rights).**
- 4) Greets resident.
- 5) Introduces self as Medication Aide.
- 6) Verifies right resident by comparing to the MAR with appropriate method of identification i.e.; picture, wrist band, or facility appropriate method of identification.**
- 7) Explains procedure.
- 8) Listens to apical heart rate for 60 seconds with teaching stethoscope.
- 9) Records heart rate on the MAR.
- 10) Recorded heart rate is within 5 beats of the RN Test Observer's.
- 11) Verbalizes whether or not to proceed with unit dose medication administration based upon heart rate obtained, administers if at an appropriate level.**
- 12) Unlocks medication box.
- 13) If administering, the unit dose (1st) medication, obtains correct drug from the correct resident's drawer in the medication box matching the label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 14) If administering, opens container or pops medication from bubble pack.
- 15) If administering, puts correct number of tablets into the medication cup.**

Tennessee Medication Aide Candidate Handbook

- 16) If administering the unit dose medication, matches the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).
- 17) If administering, returns the unit dose medication to the correct resident's drawer in the medication box.
- 18) If administering, doesn't contaminate the unit dose medication.
- 19) For the eye (2nd) medication, verbally verifies the MAR contains the correct resident, drug, dose, time and route (five rights).
- 20) For the eye (2nd) medication, obtains correct drug from the correct resident's drawer in the medication box matching the label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).
- 21) For the eye (2nd) medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).
- 22) If candidate proceeded with unit dose, gives resident glass of water.
- 23) If candidate proceeded with unit dose, assists resident to take medication one tablet at a time.
- 24) If candidate proceeded with unit dose, observes resident swallow the tablet(s).
- 25) Gently tilts resident's head back with chin up.
- 26) Pulls down on lower eye lid of the right eye making a pocket.
- 27) Asks resident to look up toward forehead.
- 28) **Drops one drop of medication into the pocket.**
- 29) Dropper tip does not touch eye.
- 30) Uses tissue to remove any excess fluid from around eye.
- 31) Places all unused medications back in the medication box.
- 32) Locks medication box.
- 33) Secures medication box keys on person.
- 34) **Documents administration correctly on the MAR (resident, drug, dose, time and route).**
[Sixth right]
- 35) **Initials and signs MAR in the signature area. [Sixth right]**
- 36) Closes MAR.
- 37) Maintains interpersonal communications during administration.
- 38) Places call light within reach, or verbalizes verification of call light for wrist/necklace call devices.
- 39) Candidate washes hands. (May verbalize for testing purposes.)

NASAL SPRAY / TABLET ADMINISTRATION

- 1) Candidate washes hands. (May verbalize for testing purposes.)
- 2) Opens MAR. Finds resident for the scenario that was read.
- 3) **For the tablet (1st) medication, verbally verifies the MAR contains the correct resident, drug, dose, time and route (five rights).**
- 4) Unlocks medication box.
- 5) **For the tablet (1st) medication, obtains correct drug from the correct resident's drawer in the medication box matching the label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 6) Opens tablet container or pops medication from bubble pack.
- 7) **Puts correct number of tablets into the medication cup.**

Tennessee Medication Aide Candidate Handbook

- 8) **For the table (1st) medication, matches the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 9) Returns first drug to the correct resident's drawer in the medication box.
- 10) Does not contaminate the medication
- 11) **For the nasal (2nd) medication, verbally verifies the MAR contains the correct resident, drug, dose, time and route (five rights).**
- 12) **For the nasal (2nd) medication, obtains correct drug from the correct resident's drawer in the medication box matching the label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 13) **For the nasal (2nd) medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 14) Greets resident.
- 15) Introduces self as Medication Aide.
- 16) **Verifies right resident by comparing to the MAR with appropriate method of identification i.e.; picture, wrist band, or facility appropriate method of identification.**
- 17) Explains procedure.
- 18) Gives resident a glass of water.
- 19) Assists the resident to take the tablet medication one capsule at a time.
- 20) Observes resident swallow the tablet(s).
- 21) Ask resident to blow nose.
- 22) Administers one spray in left nostril only.
- 23) Replaces all unused medications back in the medication box.
- 24) Locks medication box.
- 25) Secures medication box keys on person.
- 26) **Documents administration correctly on the MAR (resident, drug, dose, time and route).**
[Sixth right]
- 27) **Initials and signs MAR in the signature area. [Sixth right]**
- 28) Closes MAR.
- 29) Maintains interpersonal communications during administration.
- 30) Places call light within reach, or verbalizes verification of call light for wrist/necklace call devices.
- 31) Candidate washes hands. (May verbalize for testing purposes.)

ORAL CAPSULE ADMINISTRATION

- 1) Candidate washes hands. (May verbalize for testing purposes.)
- 2) Opens MAR. Finds resident for the scenario that was read.
- 3) **For the 1st medication, verbally verifies the MAR contains the correct resident, drug, dose, time and route (five rights).**
- 4) Unlocks medication box.
- 5) **For the 1st medication, obtains correct drug from the correct resident's drawer in the medication box matching the label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 6) Opens first container or pops medication from bubble pack.
- 7) Pours two capsules in medication cup.
- 8) Does not touch the medication.

Tennessee Medication Aide Candidate Handbook

- 9) **For the 1st medication, matches the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 10) Returns first drug to the correct resident's drawer in the medication box.
- 11) **For the 2nd medication, verbally verifies the MAR contains the correct resident, drug, dose, time and route (five rights).**
- 12) **For the 2nd medication, obtains correct drug from the correct resident's drawer in the medication box matching the label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 13) Opens second container or pops medication from bubble pack.
- 14) Pours one capsule into a medication cup.
- 15) Does not touch the medication.
- 16) **For the 2nd medication, matches the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 17) Returns second drug to the correct resident's drawer in the medication box.
- 18) Locks medication box.
- 19) Secures medication box keys on person.
- 20) Greets resident.
- 21) Introduces self as Medication Aide.
- 22) **Verifies right resident by comparing to the MAR with appropriate method of identification i.e.; picture, wrist band, or facility appropriate method of identification.**
- 23) Explains procedure.
- 24) Gives resident a glass of water.
- 25) Assists the resident to take the medication one capsule at a time.
- 26) Verifies medication has been swallowed.
- 27) **Documents administration correctly on the MAR (resident, drug, dose, time and route).**
[Sixth right]
- 28) **Initials and signs MAR in the signature area. [Sixth right]**
- 29) Closes MAR.
- 30) Maintains interpersonal communications throughout administration.
- 31) Places call light within reach, or verbalizes verification of call light for wrist/necklace call devices.
- 32) Candidate washes hands. (May verbalize for testing purposes.)

ORAL LIQUID / OINTMENT ADMINISTRATION

- 1) Candidate washes hands. (May verbalize for testing purposes.)
- 2) Opens MAR. Finds resident for the scenario that was read.
- 3) **For the oral liquid (1st) medication, verbally verifies the MAR contains the correct resident, drug, dose, time and route (five rights).**
- 4) Unlocks medication box.
- 5) **For the oral liquid (1st) medication, obtains correct drug from the correct resident's drawer in the medication box matching the label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 6) Sets medication cup on level surface.
- 7) **Pours correct amount of medication.**
- 8) Checks for correct amount of medication at eye level.
- 9) Returns unused medication to the medication box.

Tennessee Medication Aide Candidate Handbook

- 10) Does not contaminate the medication.
- 11) For the ointment (2nd) medication, verbally verifies the MAR contains the correct resident, drug, dose, time and route (five rights).**
- 12) For the ointment (2nd) medication, obtains correct drug from the correct resident's drawer in the medication box matching the label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 13) For the ointment (2nd) medication, matches the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 14) Greets resident.
- 15) Introduces self as Medication Aide.
- 16) Verifies right resident by comparing to the MAR with appropriate method of identification i.e.; picture, wrist band, or facility appropriate method of identification.**
- 17) Explains procedure.
- 18) Assists resident to take oral medication.
- 19) Inspects right forearm skin area where ointment medication is to be applied.
- 20) Puts on at least one glove.
- 21) Opens ointment.
- 22) Does not contaminate lid.
- 23) Applies ointment with gloved hand to right forearm.
- 24) Spreads ointment to cover area to be treated.
- 25) Replaces ointment lid.
- 26) Remove glove(s) turning inside out.
- 27) Discards glove(s) in appropriate container.
- 28) Places all unused medications back in the medication box.
- 29) Locks medication box.
- 30) Secures medication box keys on person.
- 31) Documents administration correctly on the MAR (resident, drug, dose, time and route). [Sixth right]**
- 32) Initials and signs MAR in the signature area. [Sixth right]**
- 33) Closes MAR.
- 34) Maintains interpersonal communications during administration.
- 35) Places call light within reach, or verbalizes verification of call light for wrist/necklace call devices.
- 36) Candidate washes hands. (May verbalize for testing purposes.)

TOPICAL OINTMENT / ORAL CAPSULE MEDICATION ADMINISTRATION

- 1) Candidate washes hands. (May verbalize for testing purposes.)
- 2) Opens MAR. Finds resident for the scenario that was read.
- 3) For the capsule (1st) medication, verbally verifies the MAR contains the correct resident, drug, dose, time and route (five rights).**
- 4) Unlocks medication box.
- 5) For the capsule (1st) medication, obtains correct drug from the correct resident's drawer in the medication box matching the label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 6) Opens container or pops medication from bubble pack.
- 7) Pours correct amount of medication.**

Tennessee Medication Aide Candidate Handbook

- 8) Does not contaminate the medication.
- 9) Returns unused medication to the medication box.
- 10) For the ointment (2nd) medication, verbally verifies the MAR contains the correct resident, drug, dose, time and route (five rights).**
- 11) For the ointment (2nd) medication, obtains correct drug from the correct resident's drawer in the medication box matching the label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 12) For the ointment (2nd) medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 13) Greets resident.
- 14) Introduces self as Medication Aide.
- 15) Verifies right resident by comparing to the MAR with appropriate method of identification i.e.; picture, wrist band, or facility appropriate method of identification.**
- 16) Explains procedure.
- 17) Gives resident a glass of water.
- 18) Assists the resident to take the capsule medication one capsule at a time.
- 19) Observes resident swallow the capsule(s).
- 20) Inspects right forearm skin area where medication is to be applied.
- 21) Puts on at least one glove.
- 22) Opens ointment.
- 23) Does not contaminate lid.
- 24) Applies ointment with gloved hand to right forearm.
- 25) Spreads ointment to cover area to be treated.
- 26) Replaces ointment lid.
- 27) Removes glove(s) turning inside out.
- 28) Discards glove(s) in appropriate container.
- 29) Places all unused medications back in the medication box.
- 30) Locks medication box.
- 31) Secures medication box keys on person.
- 32) Documents administration correctly on the MAR (resident, drug, dose, time and route).
[Sixth right]**
- 33) Initials and signs MAR in the signature area. [Sixth right]**
- 34) Maintains interpersonal communications during administration.
- 35) Places call light within reach, or verbalizes verification of call light for wrist/necklace call devices.
- 36) Candidate washes hands. (May verbalize for testing purposes.)

TOPICAL SPRAY MEDICATION / UNIT DOSE ADMINISTRATION

- 1) Candidate washes hands. (May verbalize for testing purposes.)
- 2) Opens MAR. Finds resident for the scenario that was read.
- 3) For the unit dose (1st) medication, verbally verifies the MAR contains the correct resident, drug, dose, time and route (five rights).**
- 4) Greets resident.
- 5) Introduces self as Medication Aide.
- 6) Verifies right resident by comparing to the MAR with appropriate method of identification i.e.; picture, wrist band, or facility appropriate method of identification.**

Tennessee Medication Aide Candidate Handbook

- 7) Explains procedure.
- 8) Listens to apical heart rate for 60 seconds with teaching stethoscope.
- 9) Records heart rate on the MAR.
- 10) Recorded heart rate is within 5 beats of the RN Test Observer's.
- 11) Verbalizes whether or not to proceed with unit dose medication administration based upon heart rate obtained, administers if at an appropriate level.**
- 12) Unlocks medication box.
- 13) If administering the unit dose (1st) medication, obtain correct drug from the correct resident's drawer in the medication box matching the label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 14) If administering, opens container or pops medication from bubble pack.
- 15) If administering, puts correct number of tablets into the medication cup.**
- 16) If administering the unit dose medication, matches the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 17) If administering, returns the unit dose medication to the correct resident's drawer in the medication box.
- 18) If administering, does not contaminate the unit dose medication.
- 19) For the spray (2nd) medication, verbally verifies the MAR contains the correct resident, drug, dose, time and route (five rights).**
- 20) For the spray (2nd) medication, obtains correct drug from the correct resident's drawer in the medication box matching the label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 21) For the spray medication, match the drug obtained and prescription label to the MAR, verbally identifying all five rights (resident, drug, dose, time and route).**
- 22) If candidate proceeded with unit dose, gives resident glass of water.
- 23) If candidate proceeded with unit dose, assists resident to take the medication one tablet at a time.
- 24) If candidate proceeded with unit dose, observes resident swallow the tablet(s).
- 25) Puts on at least one glove.
- 26) Inspects right forearm skin area where medication is to be applied.
- 27) Instructs resident to turn face away while spraying.
- 28) One spray on area on right forearm.**
- 29) Removes glove(s) turning inside out.
- 30) Disposes of glove(s) in appropriate container.
- 31) Returns spray bottle to the medication box.
- 32) Locks medication box.
- 33) Secures medication box keys on person.
- 34) Documents administration correctly on the MAR (resident, drug, dose, time and route).**
[Sixth right]
- 35) Initials and signs MAR in the signature area. [Sixth right]**
- 36) Closes MAR.
- 37) Maintains interpersonal communications during administration.
- 38) Places call light within reach, or verbalizes verification of call light for wrist/necklace call devices.
- 39) Candidate washes hands. (May verbalize for testing purposes.)



Tennessee Medication Aide Candidate Handbook

Knowledge Test Vocabulary List

abbreviation

absorption

abuse

ac

accountability

acetaminophen/hydrocodone

administering medication

administration considerations

administration error

administration procedures

administration protocols

adrenal insufficiency

adverse effects

adverse reaction

Advil

affects of medication

aging

Albuterol

allergic reactions

allowable routes

Alzheimer's disease

amber-colored containers

analgesics

anaphylactic reactions

anemia

angina pectoris

antacids

antianginals

antiarrhythmics

antiarthritics

antibiotic

anticholinergic

anticoagulant

anticonvulsants

antiemetic

antihistamines

antihypertensives

anti-infective

anti-lipemics

anti-neoplastics

antiparkinsonian agents

antipruritic

antipsychotic

antitussives

aorta

apical

applying anti-fungal cream

aspiration

aspirin

asthma

astringents

Ativan

authorized medication
administration

bacterial infections

benzodiazepine

benztropine (Cogentin)

benztropine mesylate
(Cogentin)

bid

bipolar disorder

blood pressure

body mechanics

bradycardia

brain

broad spectrum

bronchiole

bulk-forming laxative

Calamine/diphenhydramine

calcium

calcium carbonate

carbidopa/levodopa
(Sinemet)

cardiovascular

carisoprodol

catapres (clonidine)

cecum

central nervous system

certificate renewal

certification process

chain of command

changing condition

chemical

chewable tablets

cholesterol

cirrhosis

Clonidine

codeine

Colace

communication

confidentiality

congestive heart failure

conjugated estrogens
(Premarin)

constipation

Controlled Substance Act

controlled substances

coronary artery disease

correct administration

corticosteroid therapy

corticosteroids

coumadin

crushing medications

current information

Cushing's syndrome

cystitis

Darvocet

decongestant

delegation

Demerol

Depakote

depression

detoxifier

Tennessee Medication Aide Candidate Handbook

diabetes	extrapyramidal symptoms (EPS)	hypertension
digitalis	eye drop administration	hypoglycemia
digoxin	eye drop drainage	hypothyroidism
digoxin (Lanoxin)	eye medications	ibuprofen
Dilantin	facility policy	incontinence
disciplinary action	fat soluble	infections
discoloration	FDA requirement	inflammation
discontinued medication	five rights	inhalant medications
diuretics	found pills	inhalants
diverticulitis	garlic	integumentary system
documentation	gastrointestinal/alimentary system	intended effect
dosage	generic name	international time
drug abuse	ginger	iodine
drug classification	gingko biloba	iron
drug dependence	glaucoma	iron sulfate
Drug Enforcement Agency	glipizide (Glucotrol XL)	jurisdiction
drug interaction	Glucotrol	Lanoxin
drug metabolism	gout	Lasix
drug orders	gtt	lethal dose
drug references	haloperidol	levaquin
drug standards	hand washing	levothyroxine sodium (Synthroid)
Dulcolax	hawthorn	Librium
dyspnea	heart rate	Lipitor
ear drops	herbal medications	liquid medication
edema	histamine	liquid medications
emphysema	hormones	lisinopril
enteric coatings	hs	lithium
epiglottis	hydrochlorothiazide (Hydrodiuril)	lithium carbonate
error correction	Hydrocodone	Lomotil
estradiol (Estrace)	hydrocortisone	lotion
estrogen	hypercalcemia	malabsorption
excretion	hyperglycemia	MAR
expected adverse affects	hyperkalemia	medication administration
expectorants	hypernatremia	medication administration documentation
expiration date		

Tennessee Medication Aide Candidate Handbook

medication administration record	narcotics	pc
medication amount	narrow-spectrum antibiotic	pediculicide
medication aide's role	nasal medication	penicillin
medication calculation	neomycin sulfate	penicillinase
medication categories	nitrofurantoin (Furadantine)	Percocet
medication documentation	nitroglycerin	Percodan
medication effects on body	nose drops	peripheral vascular disease
medication error	NSAIDs	peristalsis
Medication forms	Nurse Practice Act	pernicious anemia
medication frequency	Nursing Drug Reference manual	pharmacy label
medication interaction	observing and reporting	pharynx
medication inventory	OD	phenazopyridine (Pyridium)
medication label	ointment administration	phenergan (diphenhydramine)
medication names	omeprazole (Prilosec)	phenytoin sodium (Dilantin)
medication occurrence	ophthalmic medications	physiological actions
medication order	optic	pituitary
medication package	oral antibiotic	placebo
medication route	oral hypoglycemics	platelets
medication sheet	oral medication administration	pleurisy
medication strength	oral medications	pneumonia
medication use	oral preparations	PO
meningitis	orthopnea	potassium
menopause	osteoarthritis	potassium loss and diuretics
Metamucil	osteoporosis	potassium sparing diuretics
methenamine (Mandelamine)	OTC	prednisone
Milk of Magnesia	otic	prescription label
mineralocorticoid	otic medications	priority of duties
missed dose	over-the-counter	PRN medication
missing pills	OxyContin	PRN medication documentation
monamine oxidase inhibitor	pain medication	PRN order
morphine	pancreatin (Entozyme)	Prolixin (fluphenazine)
MS Contin	pancrelipase (Pancrease)	proper medication administration
muscle relaxants	Parkinson's disease	proper training
myocardial infarction	pathogens	prothrombin
naproxen (Naprosyn)	Paxil	

Tennessee Medication Aide Candidate Handbook

Proventil	scheduled medication lock box	thyroid
Prozac	scheduled narcotic	ticlodipine (Ticlid)
psoriasis	scope of work	tid
psychotropic	scurvy	TID medications
pyelonephritis	sedatives	timed oral medication procedure
pyorrhea	seizures	tinnitus
q2h	sensitivity to medications	topical medication
qam	sensory system	toxic
qd	serotonin reuptake inhibitors	toxic dose
QD administration	side effects	trade name
qid	six rights	transdermal patch
qod	skin disorder	Triamcinolone (aristocort)
quinolones	skin patches	tuberculosis
rebound effect	skin rashes	Tylenol
recognizing toxicity from antibiotics	soluble vitamins	types of orders
recommended daily allowances (RDA)	St. John's wort	uncomfortable resident
rectal suppository	standard precautions	unconscious resident
rectum	state regulations	unit dose packaging
reddened intact area	stimulants	uric acid
refusing medication	storing medications	uricosuric agents
renal/urinary system	stroke	urinary antibacterial
reporting changes	sublingual	vaginal dryness
reporting medication errors	superinfection	vaginal medication
resident requests another pill	suppository	Valium
resident rights	suspension of medications	Vasotec
respiratory system	swallowing medications	violation of professional boundaries
responsibilities	systolic	vitamin A
riboflavin	tablet color	vitamin B12
rifampin	tablet disposal	vitamin C
right resident	tachycardia	vitamin D
role and responsibility	Tegretol	vomiting
routes	tetracyclines	Zantac
scabies	theophylline	zestril
schedule II medication	therapeutic dose	Zoloft
schedule V drug	Thiazide diuretics	

Tennessee Medication Aide Candidate Handbook

Notes:
