



D&S Diversified Technologies LLP

Headmaster LLP

Nevada Nursing Assistant Candidate Handbook

FOR TESTING EFFECTIVE: January 1, 2021 | **CHANGES ARE HIGHLIGHTED GRAY**

Version 21





Nevada Nursing Assistant Candidate Handbook

FOR TESTING EFFECTIVE: January 1, 2021

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Questions about Nursing Assistant certification, renewals or Registry: (602) 771-7800		
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Introduction

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

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

This handbook describes the process of taking the nursing assistant competency examination and is designed to help prepare candidates for testing. There are two parts to the nursing assistant competency examination—a multiple-choice, knowledge test and a skill test. Exam candidates must be registered, complete approved training, pass both parts of the exam and meet all other requirements of the Nevada State Board of Nursing (NSBN) for certification in Nevada.

Nevada has approved D&S Diversified Technologies (D&SDT)-Headmaster, LLP to provide tests and scoring services for nursing assistant testing. For questions not answered in this handbook please contact Headmaster at (800)393-8664 or go to the Nevada webpage-

https://www.hdmaster.com/testing/cnatesting/nevada/NV_CNA_Home.htm. 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 Headmaster in advance of examination. The request for [ADA Accommodation Form 1404NV](#) is available on the Nevada page of the Headmaster website under the Candidate Forms column at www.hdmaster.com. This form must be submitted to Headmaster with the required documentation listed on the second page of the ADA application in order to be reviewed for a special accommodation.

The Nevada Nurse Aide Competency Exam

Payment Information

Exam Description	Price
Knowledge Test or Retake	\$52.50
Oral Knowledge Test or Retake	\$62.50
Skill Test or Retake	\$97.50

Schedule an Exam

In order to schedule an examination date, candidates must have successfully completed a Nevada State Board of Nursing (NSBN) approved nursing assistant (NA) training program or have NSBN approval to test based on your education or background. In addition, all nursing assistant exam candidates must be registered with D&S Diversified Technologies–Headmaster by their training program, unless they have been approved by NSBN. Your registration information will be transmitted to NSBN upon passing both portions of the NA exam.

Nursing Assistant Training Program Candidates

If you have completed an NSBN approved training program, your training program has submitted your demographic and training information into D&SDT-Headmaster's WebETest© database. Your training program instructor will verify the name entered into WebETest© against the identification you will present when you sign in at a test event. Your ID must be a US government issued,

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photo bearing ID. You should receive a verification form during your training to sign, attesting to the fact that the name entered into the WebETest© database exactly matches the name on your ID. If you discover your name on your ID does not match your name as listed in WebETest©, please call Headmaster at (800)393-8664.

Once your instructor or training program enters the date you successfully complete training into WebETest©, you may schedule your exam date online at the [Headmaster Nevada webpage](#) under Candidate Forms by clicking on the [Schedule/Reschedule](#) button and logging in with your secure Test ID and PIN provided to you by your training program.

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 a test date up to 1 full business day prior to a scheduled test date of your choice and receive your test confirmation notification online or on the screen while you are logged into your file. You will be scheduled to take your initial knowledge and skill tests on the same day. To change or reschedule your test date, go to the Nevada webpage and click on [Schedule/Reschedule](#). If you are unable to schedule/reschedule online, or have forgotten your PIN, please call Headmaster at (800)393-8664 for assistance.

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

You may also schedule a test date by submitting the [Scheduling and Payment Form 1402NV-C](#) with payment (money order, cashier's check, facility check, Visa or MasterCard) to Headmaster via email, hdmaster@hdmaster.com, fax (406)442-3357 or USPS mail P.O. Box 6609, Helena, MT 59604.

Complete your Scheduling and Payment Form 1402NV-C, by including your first and second test date choices and complete all required information. No personal checks or cash are accepted. All Headmaster forms can be found on the [Nevada NA page](#) of our website. If you fax your Headmaster forms, a credit card payment is required and a \$5 Priority Fax Service Fee applies. If you submit your 1402NV-C form via email, the \$5 Priority Fax Service Fee will not apply.

When a candidate is scheduled by Headmaster, the candidate is notified via email of their test date and time. If you do not receive your Test Date Confirmation email from Headmaster within 5 business days (if payment is mailed via USPS) or 1 business day (if payment information is faxed or emailed) call Headmaster immediately at (800)393-8664 (during non-business hours leave us a message on the answering machine).

Please note: Forms with missing information, payment or signatures will be returned to the candidate.

Candidates can also view their confirmation notice any time by logging into their WebETest© account on the Nevada webpage at <https://www.dandsdiversifiedtech.com/cgi-bin/CGIRegMaster/login?StateAbbrev=Nv&logtype=Schedule>.

HEADMASTER does not send postal mail test confirmation letters to candidates.

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 NSBN approved training program in order to be eligible to schedule testing again.

Note: If you have failed the exam three times and retrained, you will only take the portion of the exam that you did not pass on your initial training.

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 your test. Regional test seats are open to all candidates. Regional test dates are posted on the Nevada webpage under Three Month [Test Schedule](#). Be sure to read the important notes at the top of the calendar.

If you have any questions regarding your test scheduling, call Headmaster at (800)393-8664, Monday through Friday 8:00AM to 6:00PM Mountain Time.

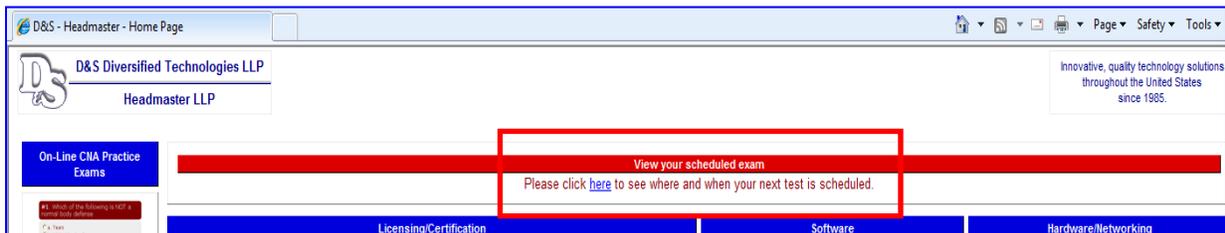
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NSBN Approval to Test

If you are eligible to take the Nevada Nursing Assistant Certification Exam based on your education or nursing school/out-of-state/military/foreign training and have not completed an approved NSBN training program, you must first apply with NSBN for approval to test. NSBN will review your application and determine your eligibility to test upon receipt of your application. Visit the NSBN website at <https://nevadanursingboard.org>; scroll down the page to the section labeled “Initial or Renewal Application for Nevada License/Certificate”. Click on “Nevada State Board of Nursing Nurse Portal” to begin your application with NSBN. Please contact Headmaster once you receive notification that you are approved to test. You may use your secure Test ID and PIN given to you in your notification or during your contact with Headmaster to log in, pay testing fees and schedule an exam date online.

You can also view your [Test Confirmation Notice](#) any time by logging into your WebETest© account with your secure Test ID and PIN and following the steps below:



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

You must be in full clinical attire (scrubs – consisting of: a scrubs top and scrub pants/skirt or scrub dress). No opened toed shoes are allowed. Scrubs and shoes can be any color/design.

You may bring a standard watch with a second hand. No smart watches or fitness monitors are allowed.

Please note: You will not be admitted for testing if you are not wearing scrubs attire and the appropriate shoes. You will be considered a NO SHOW. You will forfeit your testing fees and have to pay for another exam date.

Identification

You must bring a **US GOVERNMENT ISSUED, SIGNED, NON-EXPIRED PHOTO-BEARING FORM OF IDENTIFICATION**. Examples of the forms of US government issued, photo ID's that are acceptable are:

- Driver's License
- State issued Identification Card
- US Passport (Foreign Passports and Passport Cards *are not* acceptable)
- Military Identification
- Alien Registration Card
- Tribal Identification Card
- Work Authorization Card
- Concealed Weapon Permit

Please note: *A driver's license or state-issued ID card that has been voided (has a hole punched in it) is only valid if accompanied by a letter issued by the Department of Motor Vehicles (DMV) advising your new license is being issued to you via USPS mail. If you do not have a letter issued by the Department of Motor Vehicles, the voided ID is invalid and will not be accepted as a valid 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 Nevada nurse aide WebETest© database by your training program. You may call Headmaster at (800)393-8664 to confirm that your name of record matches your US government issued ID, or log in to your record on the [Nevada webpage](#) using your secure ID and PIN to check or change your demographic information.

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.

Although it is not required for test admission, it is recommended that you print out, read and bring your test confirmation notice with you on your test day.

Please 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.

Instructions for the Knowledge and Skill Tests

Test instructions for the knowledge and skill tests will be provided in written and oral 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 and skill test instruction links under the "Candidate Forms" column on the Headmaster [Nevada webpage](#).

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:

- Plan to be at the test site up to five (5) 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) you will not be admitted to the exam and any exam fees paid *will NOT be refunded*.
- If you do not bring a valid and appropriate US government issued, signed, non-expired photo ID, you will not be admitted to the exam and any exam fees paid *will NOT be refunded*.

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- 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*.
- If you do not wear scrubs and the appropriate 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 repay your testing fees online in your own record using your secure ID and PIN or submit a Scheduling and Payment Form 1402NV-C to schedule another exam date.
- Cell phones, smart watches, fitness monitors, electronic recording devices and personal items (such as briefcases, large bags, study materials, extra books, or papers) are not permitted to be on or near you in either testing room. You will be informed by the testing team of the designated area to place your personal items and electronic devices. 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. Anyone caught using any type of electronic recording device during testing will be dismissed from the exam, your test will be scored as a fail, you will forfeit all testing fees paid and will not be permitted to test for six (6) months.
- You may, however, use personal devices during your free time in the waiting area.
- You are encouraged to bring a jacket, snack, drink or study material while waiting to test.
- No translation dictionaries are allowed, either in paper or electronic format.
- You may not remove any notes or other materials from the testing room.
- You are not permitted to eat, drink, smoke (e-cigarettes or vape) during the exam.
- You are not allowed to leave the testing room (knowledge test room or skills lab) once the exam has begun **for any reason**. If you do leave during your test event, you will not be allowed back into the testing room to finish your exam.
- If you are discovered causing a disturbance of any kind, engaging in any kind of misconduct or try to remove any notes or testing materials from the testing room, you will be dismissed from the exam, your test will be scored as a fail, you will forfeit all testing fees paid and you will be reported to your training program and the Nevada State Board of Nursing.
- No visitors, guests, pets (including companion animals) or children are allowed.
- You may not test if you have any type of physical limitation (excluding pre-arranged ADA's) that would prevent you from performing your duties as a nursing assistant. (Examples: casts, arm/leg braces, crutches, etc.) Call Headmaster immediately if you are on doctor's orders. You must fax a doctor's order **within 3 business days** of your scheduled exam day to qualify for a free reschedule.
- **Please review this Nevada Candidate Handbook before your test day for any updates to testing and/or policies.**

Test Security

If you refuse to follow directions, use abusive language or disrupt the examination environment, your test will be stopped and scored as a failure. 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 NSBN. You will not be allowed to re-test for a minimum period of six (6) months.

Anyone who removes or tries to remove test material or takes notes or information from the test site will be reported to NSBN and is subject to prosecution to the full extent of the law. Your test will be scored as a test failure and you will forfeit any testing fees paid. You will not be allowed to re-test for a minimum period of six (6) months. You will need to obtain permission from NSBN 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.), your test will be stopped and scored as a failure. You will be dismissed from the testing room and will forfeit any testing fees paid. You will be reported to NSBN and you may need to obtain permission from NSBN in order to be eligible to test again.

Reschedules

Candidates may reschedule or cancel a test date online any time prior to **one (1) full business day** preceding a scheduled test day, **excluding** Saturdays, Sundays and Holidays.

Example: If you are scheduled to take your exam on a Saturday, Sunday or Monday, you would need to reschedule by close of business (Headmaster is open until 6:00PM Mountain Time) the Thursday before your scheduled exam. The Friday before a

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scheduled test date on a Saturday, Sunday or Monday is considered the business day before your scheduled exam and a reschedule would not be granted on the Friday.

Scheduled test date is on a:	Reschedule by 6:00PM Mountain Time on the previous:
Monday	Thursday
Tuesday	Friday
Wednesday	Monday
Thursday	Tuesday
Friday	Wednesday
Saturday	Thursday
Sunday	Thursday

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

Refund of Testing Fees Paid

Requesting a refund of testing fees paid is different than rescheduling a test date. Requesting a refund means that you are not interested in taking the Nevada nursing assistant certification test 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 in writing at least **one (1) full business day** prior to your scheduled test event (excluding Saturdays, Sundays and Holidays). We accept faxed (406)442-3357 or emailed, hdmaster@hdmaster.com, requests for refunds. No phone calls will be accepted.
 - Example: If you are scheduled to take your exam on a Friday, you would need to submit a written request for a refund of testing fees paid by close of business (Headmaster is open until 6:00PM Mountain Time Monday through Friday) the Thursday before your scheduled exam. The Friday before a scheduled test date on a Saturday, Sunday or Monday is considered the business day before your scheduled exam and a refund would not be granted on the Friday.
- 2) Refund requests made in the required time frame qualify for a full refund of any testing fees paid minus a \$35 refund fee.
- 3) Refund requests must be made within thirty (30) days of payment of testing fees with Headmaster. Any requests for refunds made beyond the 30 days of payment of testing fees to 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 to Headmaster. Any requests for refunds made beyond the 30 days of payment of testing fees to Headmaster will not be issued.
- 2) Refund requests must be made in writing. We accept faxed (406)442-3357 or emailed, hdmaster@hdmaster.com, requests for refund. 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 fee.

No Shows

If you are scheduled for your exam and do not show up without notifying Headmaster at least one (1) full business day prior to your scheduled test event, **excluding** Saturdays, Sunday, and Holidays, OR if you are turned away for lack of proper identification, proper attire, or any other reason deeming you ineligible to test, you will be considered a **NO SHOW**. You will forfeit all fees paid and must repay the testing fee to schedule yourself into a new test event.

These fees partially offset Headmaster costs 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 preceding a scheduled test event, excluding Saturdays,

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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 date.

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:** Headmaster must be contacted within one business day via phone call, fax or email and a tow bill or other appropriate documentation must be submitted within **3 business days** of the exam date. If we do not receive proof within the 3 business day's time frame you will have to pay as though you were a No Show.
- **Medical emergency:** Headmaster must be contacted within one business day via phone call, fax or email and a doctor's note must be submitted within **3 business days** of the missed exam date. If we do not receive proof within the 3 business day's time frame you will have to pay as though you were a No Show.
- **Death in the family:** Headmaster must be contacted within one business day via phone call, fax or email and an obituary for **immediate family only** submitted within **7 business days** from a missed exam date. If we do not receive proof within the 7 business day's time frame, you will have to pay as though you were a No Show. (Immediate family is parents, grand and great-grand parents, siblings, children, spouse or significant other.)

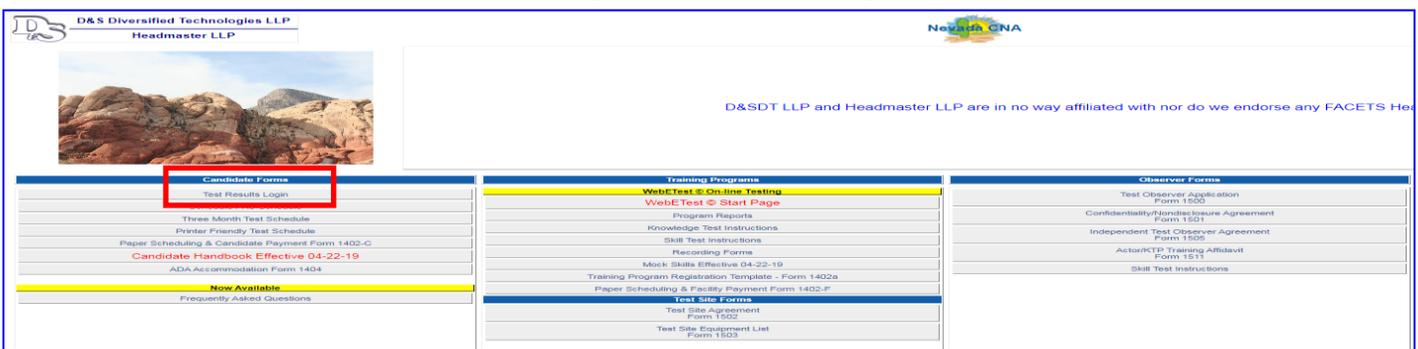
Test Results

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 by scoring teams in Headmaster's Helena, Montana office. Official test results are available to you after 6:00PM Mountain Time the day tests are scored. You will be able to access your test results online at the Nevada webpage under Candidate Forms by clicking on [Test Results Login](#) and entering your Social Security number or Test ID, your test date and your date of birth (see screen shots below).

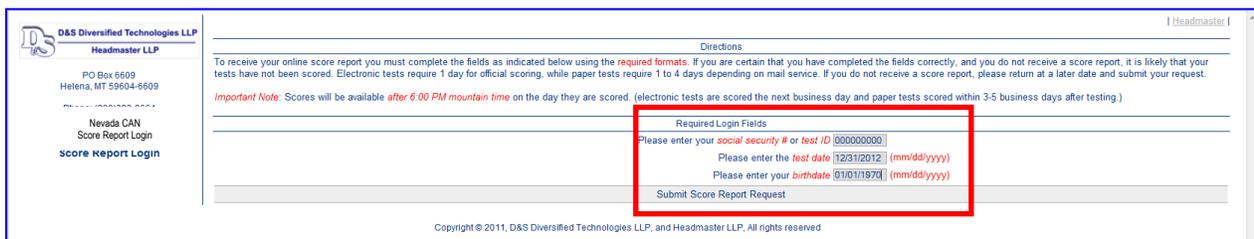
Official test results will be emailed to the email in your record. Your device must have an RTF reader to open emailed test results.

HEADMASTER does not send postal mail test result letters to candidates.

To check your test results online, click [Test Results Login](#) on the Nevada webpage:



The screenshot shows the Nevada CNA website navigation menu. The 'Candidate Forms' section is highlighted with a red box, and 'Test Results Login' is the first item in that section. Other sections include 'Training Programs' and 'Observer Forms'.



The screenshot shows the 'Test Results Login' form. The 'Required Login Fields' section is highlighted with a red box, showing fields for social security number, test date, and birthdate. The form also includes a 'Submit Score Report Request' button and a copyright notice at the bottom.

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Test Attempts

You have **three attempts** to pass the knowledge and skill test portions of the exam within one year from your date of nursing assistant training program completion. If you do not complete testing within one year from completion of training, you must complete a new NSBN approved training program in order to become eligible to further attempt Nevada nursing assistant examinations.

- An attempt means checking in for the competency evaluation exam and signing into your knowledge exam on the computer or receiving the skill test instructions, including the skills that are to be performed, from the RN Test Observer. If a candidate decides to not complete the test after signing into the knowledge exam or receiving the skill test instructions, the attempt will be scored as a failure.

Applying for a Nevada License or Certificate

Headmaster will electronically submit your test results to the Nevada State Board of Nursing. You will receive your Nursing Assistant Certification from NSBN only after you successfully pass both components of the Nevada Nursing Assistant Competency Examination, complete the NSBN application process online and meet all NSBN requirements. Go to the Nevada State Board of Nursing website at <https://nevadanursingboard.org> for information on completing your online application for certification. Click on, “Apply for a Nevada License or Certificate”.

Retaking the Nursing Assistant Test

In the event that that you fail the knowledge and/or skill portion of the examination, and you want to apply for a re-test, you will need to repay for the portion of the exam that you failed before you can schedule an exam date:

You can schedule a test or re-test online with your secure ID and PIN on the Nevada webpage by clicking on the [Schedule/Reschedule](#) button.

You will need to repay the test fee online for the failed portion of the exam before you can schedule a new exam date. Follow the same steps in the ‘Schedule an Exam’ section of this handbook.

If you need assistance, please call Headmaster at (800)393-8664. 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 Scheduling and Payment Form 1402NV-C, check the Test Review Fee of \$25 (cashier’s check, money order, Visa or MasterCard with expiration date) with a detailed explanation of why you feel your dispute is valid via email, fax or mail **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 call Headmaster at (800)393-8664 to discuss the test outcome you are questioning before committing to sending the \$25 test review 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 Headmaster staff, you still have a concern with the testing process that affected the outcome of your exam, you may submit a Test Review Request.

Since one qualification for certification as a nursing assistant in Nevada is demonstration by examination of minimum nursing assistant knowledge and skills, the likely outcome of your review will determine who pays for your re-test. If the result of the review is in your favor, Headmaster will pay for your re-test fee and refund your test review fee. Headmaster will review your detailed recollection, your knowledge test markings and any skill task measurements you recorded at the time of your test, in addition to reviewing markings, notations and measurements recorded by the RN Test Observer at the time of your test. Headmaster will recheck 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, Headmaster will only discuss test results or test disputes with the candidate or the candidate’s training program/instructor. Headmaster will not review test results or disputes with family

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members or anyone else on behalf of the candidate once the candidate is 18 years of age. Headmaster will complete your review request within 10 business days of the receipt of your timely review request and will email or mail the review results to your email address or physical address of record and to the Nevada State Board of Nursing.

The Knowledge/Oral Test

You will be required to represent 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 ninety (90) minutes to complete the 75 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?”). **You must obtain a score of 77% or better to pass the knowledge portion of the exam.**

Electronic testing called WebEtest© using internet connected computers is utilized at all test sites in Nevada. The knowledge test portion of your exam will be displayed on a computer screen for you to read and key in your answers.

An audio (Oral) version of the knowledge test is available. However, you must request an Oral Knowledge Test before you submit your testing fee payment. There is an additional charge for an Oral Knowledge Test. The questions are read to you, in a neutral manner, and can be heard through headphones/ear buds plugged into the computer. When taking an Oral Knowledge Test, the oral control buttons will be displayed on the computer screen enabling you to play, rewind or pause questions as needed.

Per the Nevada State Board of Nursing, translation dictionaries are not allowed during testing.

All test materials must be left in the testing room. Anyone who removes or tries to take materials, notes or information from the testing room is subject to prosecution and will be reported to the Nevada State Board of Nursing.

Knowledge Test Content

The Knowledge Test consists of 75 multiple-choice questions. Questions are selected from subject areas based on the NSBN approved Nevada test plan and include questions from all the required categories as defined in OBRA regulations. The subject areas are as follows:

SUBJECT AREA	NUMBER OF QUESTIONS
Basic Nursing Skills	9
Care Impaired	4
Communication	5
Data Collection	5
Disease Process	6
Infection Control	9
Mental Health	4
Aging Process and Restorative Care	4
Personal Care	7
Resident Rights	6
Role and Responsibility	9
Safety	7

Knowledge Practice Test

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

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

<p>1. Clean linens that touch the floor should be:</p> <p>(A) Picked up quickly and placed back on the clean linen cart</p> <p>(B) Used immediately on the next client bed</p> <p>(C) Considered dirty and placed in the soiled linen hamper</p> <p>(D) Used only in the room with the floor the linen fell on</p> <p>2. A soft, synthetic fleece pad placed beneath the client:</p> <p>(A) Takes pressure off the back</p> <p>(B) Provides warmth for the client</p> <p>(C) Gives the client a sense of security</p> <p>(D) Should only be used with bedridden clients</p> <p>3. A client's psychological needs:</p> <p>(A) Should be given minor consideration</p> <p>(B) Make the client withdrawn and secretive</p> <p>(C) Are nurtured by doing everything for the client</p> <p>(D) Are nurtured when clients are treated like individuals</p>	<p>ANSWERS: 1-C 2-A 3-D</p>
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The Manual Skill Test

- The purpose of the Skill Test is to evaluate your performance when demonstrating Nevada approved nursing assistant 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.
- Each of your randomly selected three (3) or four (4) tasks will have scenarios associated with them. The scenarios will be read to you by the RN Test Observer immediately before you are asked to do each task.
- You will be allowed a maximum of **thirty-five (35) minutes** to complete your three (3) or four (4) tasks. After 20 minutes have elapsed, you will be alerted that 15 minutes remain.
 - Note: If you are on your last task when the thirty-five minutes elapse, you will be given an additional five minutes to complete your last task.
- Listen carefully to all instructions given by the RN Test Observer. You may request to have any of the scenarios repeated **at any time** during your Skill Test up until you run out of time or tell the RN Test Observer that you are finished with your skill task demonstrations.
- You must correctly perform all of the **key** steps (in bold font) and 80% of all non-key steps on each task assigned in order to pass the Skill Test.

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- You may repeat or correct **any step** or **steps** on any task you believe you have performed incorrectly at **any time** during your allotted thirty-five (35) minutes or until you tell the RN Test Observer you are finished with the Skill Test.
 - If you believe you made a mistake while performing a step or steps on a task, tell the RN Test Observer you would like to make a correction. You will need to correctly demonstrate the step or steps on the task you believe you performed incorrectly in order to receive credit for the correction.
- At any time during any skill, you may direct the RN Test Observer to move anywhere needed to assist in providing safety for the resident.
- The skill task steps are not order dependent, unless the words BEFORE or AFTER are used in a step.
- When you finish each task, you must verbally tell the RN Test Observer you are finished and move to the designated “relaxation area.” When the RN Test Observer and actor have set up and are ready for your next skill task demonstration, the RN Test Observer will read the scenario for your next task.
- All steps must actually be demonstrated. Steps that are only verbalized **WILL NOT RECEIVE CREDIT**.

Skill Test Recording Form

The RN Test Observer will provide a recording form similar to the one displayed below if your skill test includes a skill task which requires recording a count or measurement.

NEW RECORDING FORM
EFFECTIVE JANUARY 1ST, 2021

Candidate's Name: _____	
PLEASE PRINT	
TEMPERATURE: _____	PULSE: _____ RESPIRATIONS: _____
PULSE OX %: _____	BLOOD PRESSURE: _____ / _____
URINARY OUTPUT: _____ ml	
TOTAL FLUID INTAKE: _____ ml	FOOD INTAKE: _____ %
Candidate's Signature: _____	

Skill Test Tasks

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

- Bedpan and Output with Hand Washing
- Catheter Care with Hand Washing
- Donning an Isolation Gown and Gloves, Measure and Record Output from a Urinary Drainage Bag with Hand Washing
- Perineal Care of a Female with Hand Washing

Please note: Hand washing is embedded in each of the mandatory tasks and must be demonstrated at the end of each mandatory task.

You will also receive an additional two (2) or three (3) randomly selected task from the Skill Task listing below. These selected tasks will make up your personalized and unique skill test. Each skill test randomly assigned by the WebETest© skill test assignment algorithm will be comparable in overall difficulty. That is why some skill tests will have a differing number of tasks.

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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 nursing assistant candidate to successfully demonstrate minimum proficiency of the skill task for the RN Test Observer. The steps will be performed on a live client actor for most of the tasks (the perineal care and catheter care tasks will be done on a manikin). You will be scored only on the steps listed. You must have a score of 80% on each task without missing any key steps (the **Bolded** steps) to pass the skill component of your competency evaluation. If you fail the Skill Test, one of the tasks on your re-test will be a task you previously failed. There will always be only one of the four mandatory tasks to start each Skill Test. The other tasks included on your Skill Test are randomly chosen so that every Skill Test is comparable in difficulty and average length of time to complete. The RN Test Observer will observe your demonstrations of your skill tasks and record what she/he sees you do. 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 Nevada nursing assistant 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.

Bedpan and Output with Hand Washing

(One of the possible mandatory first tasks)

- 1) Knock on door.
- 2) Greet client by name.
- 3) **Introduce yourself by name and title.**
- 4) Perform hand hygiene.
- 5) Explain the procedure to be performed to the client.
- 6) Provide privacy for client - pull curtain.
- 7) Put on gloves.
- 8) Raise bed to appropriate working height.
- 9) Position client on bedpan correctly using correct body mechanics.
- 10) Raise head of bed to a comfortable level.
- 11) Leave tissue and call light or signaling device within reach of client.
- 12) Leave area until called.
- 13) Wash/assist client to wash hands (uses wet wash cloth or disposable wipe).
- 14) Discard soiled linen in appropriate container or dispose wipe in trash can.
- 15) Lower head of bed.
- 16) Gently remove bedpan. Hold bedpan for RN Test Observer while liquid is poured into the bedpan.
- 17) Measure output using a graduate.
- 18) Lower bed.
- 19) Empty graduate into toilet/commode.
- 20) Rinse equipment and empty rinse water into toilet/commode.
- 21) Dry equipment and return to storage.
- 22) Remove gloves turning inside out and dispose of in appropriate container.
- 23) Maintain respectful, courteous interpersonal interactions at all times.
- 24) Leave call light or signaling device and water within easy reach of the client.
- 25) Record output on the previously signed recording form.
- 26) **Candidate's measurement is within 25 ml's of RN Test Observer's pre-measured amount.**
- 27) Wash hands - turn on water.
- 28) Thoroughly wet hands **BEFORE applying soap.**
- 29) Apply soap to hands.
- 30) Rub hands together for 20 seconds **with soap** using friction.
- 31) Using friction, rub interlaced fingers together **with soap** while pointing downward.

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- 32) Clean under fingernails **with soap**.
- 33) Wash all surfaces of hands and wrists with soap.
- 34) Rinse hands thoroughly under running water with fingers pointed downward.
- 35) Dry hands on clean paper towel(s).
- 36) **Turn off faucet with the last clean dry paper towel. Removed: a second (last) clean dry paper towel, or with a dry section of a previously used paper towel.**
- 37) Discard paper towels to trash container as used.
- 38) **Do not recontaminate hands at any time during the hand washing portion of the task.**

Catheter Care with Hand Washing

(One of the possible mandatory first tasks)

- 1) Knock on door.
- 2) Greet client by name.
- 3) **Introduce yourself by name and title.**
- 4) Perform hand hygiene.
- 5) Explain the procedure to be performed to the client.
- 6) Provide privacy for client – pull curtain.
- 7) Put on gloves.
- 8) Position a bath blanket or a combination of bath blanket and gown to maintain privacy.
- 9) Check to see that urine can flow, unrestricted, into the drainage bag.
- 10) Use soap and water to carefully wash around the catheter tubing where it exits the urinary meatus.
- 11) **Hold catheter where it exits the urethra with one hand.**
- 12) While holding catheter with fingers near urethra, clean at least 3-4 inches down the catheter tube.
- 13) Clean with stroke(s) only away from the urethra.
- 14) Use clean portion of cloth for stroke(s).
- 15) Rinse using stroke(s) only away from the urethra.
- 16) Rinse using clean portion of cloth for stroke(s).
- 17) Pat dry.
- 18) Do not allow the tube to be pulled at any time during the procedure.
- 19) Replace top cover over client.
- 20) Remove bath blanket.
- 21) Leave client in a position of safety and comfort.
- 22) Rinse, dry and return equipment to storage.
- 23) Maintain respectful, courteous interpersonal interactions at all times.
- 24) Leave call light or signaling device and water within easy reach of the client.
- 25) Wash hands - turn on water.
- 26) Thoroughly wet hands **BEFORE applying soap**.
- 27) Apply soap to hands.
- 28) Rub hands together for 20 seconds **with soap** using friction.
- 29) Using friction, rub interlaced fingers together **with soap** while pointing downward.
- 30) Clean under fingernails **with soap**.
- 31) Wash all surfaces of hands and wrists with soap.
- 32) Rinse hands thoroughly under running water with fingers pointed downward.
- 33) Dry hands on clean paper towel(s).
- 34) **Turn off faucet with the last clean dry paper towel. Removed: a second (last) clean dry paper towel, or with a dry section of a previously used paper towel.**
- 35) Discard paper towels to trash container as used.
- 36) **Do not recontaminate hands at any time during the hand washing portion of the task.**

Donning an Isolation Gown and Gloves, Measure and Record Output from a Urinary Drainage Bag with Hand Washing

(One of the possible mandatory first tasks)

- 1) Perform hand hygiene.
- 2) Face the back opening of the gown.
- 3) Unfold the gown.
- 4) Place arms through each sleeve.
- 5) Tie the neck opening.
- 6) Tie the waist in the back or on side.
- 7) Ensure back flap covers clothing as completely as possible.
- 8) Put on gloves.
- 9) Gloves overlap gown sleeves at the wrist.
- 10) Knock on door.
- 11) Greet client by name.
- 12) **Introduce yourself by name and title.**
- 13) Explain urinary output procedure to be performed to client.
- 14) Provide for privacy – pull curtain.
- 15) Leave call light or signaling device and water within easy reach of the client.
- 16) Place a barrier on the floor under the drainage bag.
- 17) Place the graduate on the previously placed barrier.
- 18) Open the drain to allow the urine to flow into the graduate completely emptying the drainage bag.
- 19) **Do not touch the graduate with the tip of the drain tube.**
- 20) Close the drain.
- 21) Wipe the drain with antiseptic wipe.
- 22) Secure drain.
- 23) Place a barrier on a flat surface.
- 24) Place graduate on previously placed barrier on a flat surface.
- 25) With graduate at eye level, measure output.
- 26) Empty graduate into toilet/commode.
- 27) Rinse, dry and return equipment to storage.
- 28) Leave client in a position of safety and comfort.
- 29) Maintain respectful, courteous interpersonal interactions at all times.
- 30) Remove gloves BEFORE removing gown **or** use the alternate method of pulling/popping gown off by pulling on the front of the gown with gloves on.
- 31) Remove gloves turning inside out **or** use the alternate method of pulling/popping gown off by pulling on the front of the gown.
- 32) Dispose of the gloves in trash container **or** peel gloves off keeping them inside out and rolled up inside of the gown.
- 33) Unfasten gown at the neck, if not using alternate method of removal.
- 34) Unfasten gown at the waist, if not using alternate method of removal.
- 35) **Remove gown by folding soiled area to soiled area.**
- 36) Make sure bare hands never touch the soiled surface of the gown **while removing the gown.**
- 37) Dispose of gown in trash container.
- 38) **Do not touch yourself with contaminated gloves during any of the previous steps.**
- 39) Record the output on the previously signed recording form.
- 40) **Candidate's measurement is within 25 ml's of RN Test Observer's pre-measured amount.**
- 41) Wash hands - turn on water.
- 42) Thoroughly wet hands **BEFORE applying soap.**
- 43) Apply soap to hands.
- 44) Rub hands together for 20 seconds **with soap** using friction.
- 45) Using friction, rub interlaced fingers together **with soap** while pointing downward.
- 46) Clean under fingernails **with soap.**
- 47) Wash all surfaces of hands and wrists with soap.

- 48) Rinse hands thoroughly under running water with fingers pointed downward.
- 49) Dry hands on clean paper towel(s).
- 50) ~~Turn off faucet with the last clean dry paper towel. Removed: a second (last) clean dry paper towel, or with a dry section of a previously used paper towel.~~
- 51) Discard paper towels to trash container as used.
- 52) **Do not recontaminate hands at any time during the hand washing portion of the task.**

Perineal Care of a Female with Hand Washing

(One of the possible mandatory first tasks)

1. Knock on door.
2. Greet client by name.
3. **Introduce yourself by name and title.**
4. Perform hand hygiene.
5. Explain procedure to be performed to the client (manikin).
6. Provide privacy for client - pull curtain.
7. Raise the bed to an appropriate working height.
8. Position bath blanket or combination of bath blanket and gown so client remains covered at all times.
9. Fill basin with comfortably warm water.
10. Direct RN Test Observer to stand on opposite side of the bed or use side rails.
11. Put on gloves.
12. Expose perineum only.
13. Separate labia.
14. Use water and soapy wash cloth.
15. **Clean one side of labia from top to bottom.**
16. Use a clean portion of a wash cloth, clean other side of labia from top to bottom.
17. Use a clean portion of a wash cloth, clean the vaginal area from top to bottom.
18. Use a clean portion of a wash cloth, rinse one side of labia from top to bottom.
19. Use a clean portion of a wash cloth, rinse other side of labia from top to bottom.
20. Use a clean portion of a wash cloth, rinse the vaginal area from top to bottom.
21. Pat dry.
22. Cover the exposed area with the bath blanket, gown or combination of both.
23. Assist client to turn onto side away from candidate.
24. Use a clean wash cloth, water and soap to clean rectal area.
25. **Clean from vagina to rectal area.**
26. Use a clean portion of a wash cloth for any cleaning stroke(s).
27. Use a clean portion of a wash cloth, rinse from vagina to rectal area.
28. Use a clean portion of a wash cloth for any rinsing stroke(s).
29. Pat dry.
30. Position client (manikin) on her back.
31. Dispose of soiled linen in an appropriate container.
32. Rinse, dry and return equipment to storage.
33. Remove gloves turning inside out and dispose of in appropriate container.
34. Lower bed.
35. Lower side rail.
36. Maintain respectful, courteous interpersonal interactions at all times.
37. Leave call light or signaling device and water within easy reach of the client.
38. Wash hands - turn on water.
39. Thoroughly wet hands **BEFORE applying soap.**
40. Apply soap to hands.
41. Rub hands together for 20 seconds **with soap** using friction.
42. Using friction, rub interlaced fingers together **with soap** while pointing downward.
43. Clean under fingernails **with soap.**

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44. Wash all surfaces of hands and wrists with soap.
45. Rinse hands thoroughly under running water with fingers pointed downward.
46. Dry hands on clean paper towel(s).
47. Turn off faucet with the last clean dry paper towel. ~~Removed: a second (last) clean dry paper towel, or with a dry section of a previously used paper towel.~~
48. Discard paper towels to trash container as used.
49. **Do not recontaminate hands at any time during the hand washing portion of the task.**

Ambulation with a Gait Belt

1. Knock on door.
2. Greet client by name.
3. Introduce yourself by name and title.
4. Perform hand hygiene.
5. Explain procedure to be performed to the client.
6. Obtain gait belt.
7. **Lock bed brakes to ensure client's safety.**
8. Ensures client's feet are flat on the floor.
9. Bring client to sitting position.
10. Place gait belt around waist to stabilize trunk.
11. Tighten gait belt so that it is snug enough that only 3-4 flat fingers can be slipped between gait belt and client.
12. Check gait belt by slipping fingers between gait belt and client.
13. Assist client to put on non-skid socks.
14. Stand in front of and face the client.
15. Grasp the gait belt on each side of the client with an underhand grip.
16. Ask client if he/she is stable/okay/dizzy.
17. Bring client to standing position, using proper body mechanics.
18. Grasp gait belt with one hand, using under hand grip.
19. Stabilize client with other hand by holding forearm, shoulder or using other appropriate method to stabilize client.
20. Ambulate the client 10 steps and return client to chair.
21. Assist client to sit in the chair in a controlled manner that ensures safety.
22. Remove gait belt.
23. Leave client in position of comfort and safety.
24. Perform hand hygiene.
25. Maintain respectful, courteous interpersonal interactions at all times.
26. Leave call light or signaling device and water within easy reach of the client.

Assisting a Dependent Client with Eating

- 1) Knock on door.
- 2) Greet client by name.
- 3) Introduce yourself by name and title.
- 4) Perform hand hygiene.
- 5) Explain procedure to be performed to the client.
- 6) Read diet card aloud to client.
- 7) Protect clothing from soiling by using clothing protector.
- 8) Wash client's hands BEFORE feeding with wet wash cloth or disposable wipe.
- 9) Discard soiled linen in appropriate container or dispose wipe in trash can.
- 10) Sit to assist with feeding.
- 11) Describe the foods being offered to the client.
- 12) Offer fluid frequently.
- 13) Offer small amounts of food at a reasonable rate allowing client time to chew and swallow.
- 14) Wipe client's hands and face during meal as needed.
- 15) Leave client clean and in a position of comfort.

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- 16) Perform hand hygiene.
- 17) Maintain respectful, courteous interpersonal interactions at all times.
- 18) Leave call light or signaling device and water within easy reach of the client.
- 19) Record intake of total solid food eaten as a percentage on previously signed recording form.
- 20) Candidate's calculation must be within 25 percentage points of the RN Test Observer's.**
- 21) Record fluid intake as ml's consumed on previously signed recording form.
- 22) Candidate's calculation is within 30 ml's of the RN Test Observer's.**

Bed Bath: Partial - Face, Arm, Hand and ~~Underarm~~ Axilla

- 1) Knock on door.
- 2) Greet client by name.
- 3) **Introduce yourself by name and title.**
- 4) Perform hand hygiene.
- 5) Explain procedure to be performed to the client.
- 6) Provide privacy for client - pull curtain.
- 7) Raise bed to appropriate working height.
- 8) Cover client with a bath blanket.
- 9) Remove remaining top bed linen. Fold top linens to bottom of bed or place aside.
- 10) Remove client's gown without exposing client.
- 11) Fill basin with comfortably warm water.
- 12) Wipe eyes gently from inner eye toward outer eye.
- 13) Uses a clean portion of the wash cloth with each wipe.
- 14) Wash client's whole face without soap.
- 15) Dry face.
- 16) Exposes only the arm to be washed.
- 17) Places towel under exposed arm.
- 18) Use soap: wash arm, hand, and ~~underarm~~ axilla.
- 19) Rinse arm, hand, and ~~underarm~~ axilla.
- 20) Dry arm, hand, and ~~underarm~~ axilla.
- 21) Assist client to put on a clean gown.
- 22) Rinse and dry basin and return to storage.
- 23) Dispose of soiled linen in appropriate container.
- 24) Lower bed.
- 25) Perform hand hygiene.
- 26) Maintain respectful, courteous interpersonal interactions at all times.
- 27) Leave call light or signaling device and water within easy reach of the client.

Blood Pressure

- 1) Knock on door.
- 2) Greet client by name.
- 3) **Introduce yourself by name and title.**
- 4) Perform hand hygiene.
- 5) Explain procedure to be performed to client.
- 6) Position client with forearm relaxed and supported in a palm-up position, approximately at the level of the heart.
- 7) Roll client's sleeve up about 5 inches above the elbow.
- 8) Apply the appropriate size cuff around the upper arm just above the elbow.
- 9) Correctly align cuff over brachial artery.
- 10) Clean earpieces of stethoscope appropriately and place in ears.
- 11) Clean diaphragm.
- 12) Locate brachial artery with fingertips.
- 13) Place stethoscope diaphragm over brachial artery.
- 14) Hold stethoscope diaphragm snugly in place.

- 15) Inflate cuff to 160-180mmHg or 30mmHg above where pulse was last heard or felt.
- 16) Inflate the blood pressure cuff no more than two times per arm if using the one step method.
- 17) Slowly release air from cuff to disappearance of pulsations.
- 18) Remove cuff.
- 19) Perform hand hygiene.
- 20) Maintain respectful, courteous interpersonal interactions at all times.
- 21) Leave call light or signaling device and water within easy reach of the client.
- 22) Record blood pressure reading on previously signed recording form.
- 23) Candidate's recorded systolic and diastolic blood pressure is within 6mmHg of the RN Test Observer's.**

Denture Care

- 1) Knock on door.
- 2) Greet client by name.
- 3) Introduce yourself by name and title.**
- 4) Perform hand hygiene.
- 5) Explain procedure to be performed to client.
- 6) Line bottom of sink (towel, wash cloth or paper towels) with a protective lining or fill sink with water to prevent damage to the dentures in case they are dropped.
- 7) Put on gloves.
- 8) Carefully remove dentures from cup.
- 9) Handle dentures carefully to avoid damage.
- 10) Rinse denture cup.
- 11) Never put dentures in/on a contaminated surface.
- 12) Apply denture cleanser to toothbrush.
- 13) Thoroughly brush dentures, including the inner, outer, and chewing surfaces of upper or lower dentures.
- 14) Thoroughly brush dentures, including the denture groove or plate that touches gum surface.
- 15) Rinse dentures using clean cool running water.
- 16) Place dentures in denture cup.
- 17) Add cool clean water to denture cup.
- 18) Rinse and dry equipment and return to storage.
- 19) Discard sink's protective lining in an appropriate container, or drain sink.
- 20) Remove gloves turning inside out and dispose in appropriate container.
- 21) Perform hand hygiene.
- 22) Maintain respectful, courteous interpersonal interactions at all times.
- 23) Leave call light or signaling device and water within easy reach of the client.

Foot Care (One Foot)

- 1) Knock on door.
- 2) Greet client by name.
- 3) Introduce yourself by name and title.**
- 4) Perform hand hygiene.
- 5) Explain procedure to be performed to the client.
- 6) Provide privacy for client - pull curtain.
- 7) Fill foot basin with comfortably warm water.
- 8) Remove non-skid sock from the correct RN Test Observer stated side.**
- 9) Immerse foot in comfortably warm water for 10 to 20 minutes (time is to be verbalized).
- 10) Use water and soapy wash cloth.
- 11) Wash entire foot.
- 12) Wash between toes.
- 13) Rinse entire foot.
- 14) Rinse between toes.
- 15) Dry foot thoroughly, dry between toes thoroughly.

- 16) Offer to cut client's toenails.
- 17) Warm lotion by rubbing it between hands.
- 18) Massage lotion over entire foot, do not get lotion between toes.
- 19) If any excess lotion, wipe with a towel.
- 20) Replace non-skid sock on foot.
- 21) Pour used water in toilet/commode or sink.
- 22) Rinse and dry basin and return equipment to storage.
- 23) Place dirty linen in hamper.
- 24) Leave client in position of safety in proper alignment in the chair.
- 25) Perform hand hygiene.
- 26) Maintain respectful, courteous interpersonal interactions at all times.
- 27) Leave call light or signaling device and water within easy reach of the client.

Making an Occupied Bed

- 1) Knock on door.
- 2) Greet client by name.
- 3) **Introduce yourself by name and title.**
- 4) Perform hand hygiene.
- 5) Gather linen.
- 6) Transport linen away from body.
- 7) Place clean linen on a clean surface. (bedside stand, chair, or overbed table)
- 8) Explain procedure to be performed to client.
- 9) Provide privacy for client - pull curtain.
- 10) Direct RN Test Observer to stand on the opposite side of the bed or use side rails.
- 11) Raise bed to appropriate working height.
- 12) Client is to remain covered at all times with sheet or gown.
- 13) Assist client to roll onto side toward RN Test Observer or side rail.
- 14) Roll or fan fold soiled linen, soiled side inside, to the center of the bed.
- 15) Place clean bottom sheet on mattress along the center of the bed and roll or fan fold against the client's back and unfold remaining half.
- 16) Secure two fitted corners.
- 17) Direct RN Test Observer to opposite side of the bed or use side rails.
- 18) Assist the client to roll over the bottom linen, preventing trauma and avoidable pain to client.
- 19) Remove soiled linen without shaking.
- 20) Avoid placing dirty linen on the overbed table, bedside stand, chair or floor.
- 21) Avoid touching linen to uniform.
- 22) Dispose of soiled linen in hamper.
- 23) Pull through and smooth out the clean bottom linen.
- 24) Secure the other two fitted corners.
- 25) Client's body never touches bare mattress.
- 26) Place clean top linen over covered client.
- 27) Remove used top linen keeping client unexposed at all times.
- 28) Tuck in clean top linen at the foot of bed.
- 29) Make mitered corners at the foot of the bed.
- 30) **Make toe pleat or tent.**
- 31) Apply clean pillowcase with zippers and/or tags to inside.
- 32) Gently lift client's head while replacing the pillow.
- 33) Lower bed.
- 34) Lower side rail.
- 35) Perform hand hygiene.
- 36) Maintain respectful, courteous interpersonal interactions at all times.
- 37) Leave call light or signaling device and water within easy reach of the client.

Mouth Care—Brushing Teeth

- 1) Knock on door.
- 2) Greet client by name.
- 3) **Introduce yourself by name and title.**
- 4) Perform hand hygiene.
- 5) Explain procedure to be performed to the client.
- 6) Provide privacy for client - pull curtain.
- 7) Drape the chest with towel to prevent soiling.
- 8) Put on gloves.
- 9) Apply toothpaste to toothbrush.
- 10) **Brush all inner, outer and chewing surfaces of upper and lower teeth.**
- 11) Clean tongue.
- 12) Assist client in rinsing mouth.
- 13) Wipe client's mouth.
- 14) Remove soiled linen.
- 15) Place soiled linen in hamper.
- 16) Empty, rinse and dry emesis basin.
- 17) Rinse toothbrush.
- 18) Return equipment to storage.
- 19) Remove gloves turning inside out and dispose of in appropriate container.
- 20) Leave client in position of comfort.
- 21) Perform hand hygiene.
- 22) Maintain respectful, courteous interpersonal interactions at all times.
- 23) Leave call light or signaling device and water within easy reach of the client.

Pivot-Transfer a Weight Bearing, Non-Ambulatory Client from Bed to Wheelchair using a Gait Belt

- 1) Knock on door.
- 2) Greet client by name.
- 3) **Introduce yourself by name and title.**
- 4) Perform hand hygiene.
- 5) Explain procedure to be performed to client.
- 6) Obtain a gait belt.
- 7) Position wheelchair at foot or head of bed with wheelchair touching bed.
- 8) **Lock wheelchair brakes to ensure client's safety.**
- 9) **Lock bed brakes to ensure client's safety.**
- 10) Bring client to a sitting position using proper body mechanics.
- 11) Ensure client's feet are flat on the floor.
- 12) Assist client to put on non-skid socks.
- 13) Place gait belt around client's waist to stabilize trunk.
- 14) Tighten gait belt **so that it is snug enough that only 3-4 flat fingers can be slipped between gait belt and client.**
- 15) Grasp the gait belt in underhand grip with both hands to stabilize the client.
- 16) Ask client if he/she is stable/okay/dizzy.
- 17) Bring client to a standing position using proper body mechanics.
- 18) Do not ambulate the client.
- 19) Assist client to pivot and sit in wheelchair in a controlled manner that ensures safety.
- 20) Remove gait belt.
- 21) Leave client in a position of safety and comfort.
- 22) Perform hand hygiene.
- 23) Maintain respectful, courteous interpersonal interactions at all times.
- 24) Place client within easy reach of call light or signaling device and water.

Pivot-Transfer a Weight Bearing, Non-Ambulatory Client from Wheelchair to Bed using a Gait Belt

- 1) Knock on door.
- 2) Greet client by name.
- 3) **Introduce yourself by name and title.**
- 4) Perform hand hygiene.
- 5) Explain procedure to be performed to client.
- 6) Obtain a gait belt.
- 7) Position wheelchair at foot or head of bed with wheelchair touching bed.
- 8) Position (raise) bed to same level as wheelchair seat or lower.
- 9) **Lock wheelchair brakes to ensure client's safety.**
- 10) **Lock bed brakes to ensure client's safety.**
- 11) Place gait belt around client's waist to stabilize trunk.
- 12) Tighten gait belt **so that it is snug enough that only 3-4 flat fingers can be slipped between gait belt and client.**
- 13) Ensure client's feet are flat on the floor.
- 14) Instruct client to place hands on wheelchair arm rests.
- 15) Asks client if he/she is stable/okay/dizzy.
- 16) Grasp the gait belt in underhand grip with both hands.
- 17) Bring client to a standing position using proper body mechanics.
- 18) Do not ambulate client.
- 19) Assist client to pivot and sit on bed in a controlled manner that ensures safety.
- 20) Remove gait belt.
- 21) Remove client's shoes.
- 22) Assist client to lie down in the center of the bed, supporting extremities as necessary.
- 23) Make sure client is comfortable and in good body alignment.
- 24) Perform hand hygiene.
- 25) Maintain respectful, courteous interpersonal interactions at all times.
- 26) Leave call light or signaling device and water within easy reach of the client.

Range of Motion for (ROM) Lower Extremities (Hip and Knee)

- 1) Knock on door.
- 2) Greet client by name.
- 3) **Introduce yourself by name and title.**
- 4) Perform hand hygiene.
- 5) Explain procedure to be performed to the client.
- 6) Provide privacy for client - pull curtain.
- 7) Position bed flat.
- 8) **Position client on back – supine.**
- 9) Position client in good body alignment.
- 10) **Correctly support the joints at the knee and ankle ~~Support joints at all times.~~**
- 11) **Perform task on correct side read by RN Test Observer in the scenario.**
- 12) **Ask if causing any discomfort or pain sometime during ROM procedure.**
- 13) Move the entire leg away from the body. (abduction)
- 14) Move the entire leg toward the body. (adduction)
- 15) Complete abduction and adduction of the hip at least three times.
- 16) Continue to correctly support joints by placing one hand under the client's knee and the other hand under the client's ankle.
- 17) Bend the client's knee and hip toward the client's trunk. (flexion of hip and knee at the same time - may also do separately)
- 18) Straighten the knee and hip. (extension of knee and hip in the same motion - may also do separately)
- 19) Complete flexion and extension of the knee and hip at least three times.
- 20) Do not force any joint beyond the point of free movement.

- 21) Leave client in a comfortable position.
- 22) Perform hand hygiene.
- 23) Maintain respectful, courteous interpersonal interactions at all times.
- 24) Leave call light or signaling device and water within easy reach of the client.

Range of Motion (ROM) Upper Extremities (Shoulder)

- 1) Knock on door.
- 2) Greet client by name.
- 3) **Introduce yourself by name and title.**
- 4) Perform hand hygiene.
- 5) Explain procedure to be performed to the client.
- 6) Provide privacy for client - pull curtain.
- 7) **Position client on back - supine.**
- 8) Position client in good body alignment.
- 9) **Correctly support the joints at the wrist and elbow Support joints at all times.**
- 10) **Perform task on correct side read by RN Test Observer in the scenario.**
- 11) **Ask if causing any discomfort or pain sometime during ROM procedure.**
- 12) Raise the client's arm up and over the client's head. (flexion)
- 13) Bring the client's arm back down to the client's side. (extension)
- 14) Complete flexion and extension of shoulder at least three times.
- 15) Continue same support for abduction and adduction of shoulder joint.
- 16) Move the client's entire arm out away from the body. (abduction)
- 17) Return arm to side of the client's body. (adduction)
- 18) Complete abduction and adduction of the shoulder three times.
- 19) Do not force any joint beyond the point of free movement.
- 20) Leave client in a comfortable position.
- 21) Perform hand hygiene.
- 22) Maintain respectful, courteous interpersonal interactions at all times.
- 23) Leave call light or signaling device a water within easy reach of the client.

Reposition Client on Side in Bed

- 1) Knock on door.
- 2) Greet client by name.
- 3) **Introduce yourself by name and title.**
- 4) Perform hand hygiene.
- 5) Explain procedure to be performed to client.
- 6) Provide privacy for client - pull curtain.
- 7) Position bed flat.
- 8) Raise bed to appropriate working height.
- 9) Ensure that the client's face never becomes obstructed by the pillow.
- 10) Direct RN Test Observer to stand in position opposite working side of bed to ensure safety, or use side rails, or always turns client towards self.
- 11) From the working side of bed - move client's upper body toward self.
- 12) From working side of bed - move client's hips toward self.
- 13) From working side of bed - move client's legs toward self.
- 14) Move to opposite side of bed, if RN Test Observer wasn't directed, or side rails are not used and turn client toward self, otherwise may remain on the working side of the bed and turn client toward the RN Test Observer or raised side rail.
- 15) **Assist/turn client onto the correct side read by RN Test Observer in the scenario.**
- 16) Check to be sure client is not lying on his/her downside arm.
- 17) Maintain client's correct body alignment with head of bed flat.
- 18) Place support devices under the client's head, upper arm, behind back, and between knees and ankles.
- 19) Lower bed.

- 20) Lower side rail.
- 21) Performs hand hygiene.
- 22) Maintain respectful, courteous interpersonal interactions at all times.
- 23) Leave call light or signaling device and water within easy reach of the client.

Undressing and Dressing a Bedridden Client

- 1) Knock on door.
- 2) Greet client by name.
- 3) **Introduce yourself by name and title.**
- 4) Perform hand hygiene.
- 5) Explain the procedure to be performed to the client.
- 6) Provide privacy for client - pull curtain.
- 7) Keep client covered while removing gown.
- 8) **Remove gown from unaffected side first.**
- 9) Place used gown in laundry hamper.
- 10) **When dressing the client in a shirt, always dresses the affected side first.**
- 11) When dressing the client in a shirt/blouse, insert your hand through the sleeve of the shirt/blouse and grasp the hand of the client.
- 12) When dressing the client in sweat pants, assist the client to raise his/her buttocks or rock client side to side and draw the pants over the buttocks and up to the client's waist without exposing client.
- 13) When putting on the client's socks, draw the socks up the client's foot until they are smooth.
- 14) Leave client in correct body alignment.
- 15) Leave the client properly dressed.
- 16) Perform hand hygiene.
- 17) Maintain respectful, courteous interpersonal interactions at all times.
- 18) Leave call light or signaling device and water within easy reach of the client.

Vital Signs - Pulse and Respirations

- 1) Knock on door.
- 2) Greet client by name.
- 3) **Introduce yourself by name and title.**
- 4) Perform hand hygiene.
- 5) Explain procedure to be performed to client.
- 6) Locate the radial pulse by placing tips of fingers on the thumb side of the client's wrist.
- 7) Count pulse for 60 seconds.
 - a. **Advise the RN Test Observer when you start counting and when you stop counting the pulse.**
- 8) Count respirations for 60 seconds.
 - a. **Advise the RN Test Observer when you start counting and when you stop counting the respirations.**
- 9) Perform hand hygiene.
- 10) Maintain respectful, courteous interpersonal interactions at all times.
- 11) Leave call light or signaling device and water within easy reach of the client.
- 12) Record pulse count on the previously signed recording form.
- 13) **Candidate's recorded pulse rate is within 4 beats of the RN Test Observer's recorded rate.**
- 14) Record respirations count on the previously signed recording form.
- 15) **Candidate's recorded respiratory rate is within 2 breaths of the RN Test Observer's recorded rate.**

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****NEW TASK EFFECTIVE JANUARY 1, 2021****

Vital Signs - Temperature, Respirations, Pulse Oximetry and Electronic Blood Pressure

(Temperature is orally using a digital oral thermometer)

- 1) Knock on door.
- 2) Greet client by name.
- 3) Introduce yourself by name and title.
- 4) Perform hand hygiene.
- 5) Explain procedure to be performed to client.
- 6) Correctly place sheath on thermometer and turn on thermometer.
- 7) Gently insert bulb end of thermometer into client's mouth under the tongue.
- 8) Leave thermometer in place for the appropriate length of time.
- 9) Remove thermometer, read and record the temperature reading on the previously signed recording form.
- 10) Candidate's temperature reading and the RN Test Observer's temperature reading must match.**
- 11) Discard sheath appropriately.
- 12) Count respirations for 60 seconds.
 - a. **Advise the RN Test Observer when you start counting and when you stop counting the respirations.**
- 13) Record respirations count on the previously signed recording form.
- 14) Candidate's recorded respiratory rate is within 2 breaths of the RN Test Observer's recorded respiratory rate.**
- 15) Candidate obtains pulse oximeter and clips the pulse oximeter on the top and bottom of the client's finger.
- 16) Candidate turns on the pulse oximeter and leaves the pulse oximeter in place for the appropriate length of time while oxygen level is being read.
- 17) Removes pulse oximeter and reads and records the oxygen reading on the previously signed recording form.
- 18) Candidate's recorded pulse oxygen percentage is within 1 percentage point of the RN Test Observer's recorded pulse oxygen percentage.**
- 19) Candidate obtains the electronic blood pressure monitor and cuff.
- 20) Place the blood pressure cuff on the client's arm with the brachial artery marker in the correct position.**
- 21) Align arrow on the cuff over the brachial artery.
- 22) Turn on the electronic blood pressure monitor and leave blood pressure cuff in place for the appropriate length of time while the blood pressure is being taken.
- 23) Remove blood pressure cuff and read and record the blood pressure reading on the previously signed recording form.
- 24) Candidate's and RN Test Observer's recorded blood pressure readings must match.**
- 25) Perform hand hygiene.
- 26) Maintain respectful and courteous interpersonal interactions at all times.
- 27) Leave call light or signalling device and water within easy reach of the client.

Knowledge Test Vocabulary List

Abandonment
Abdominal thrust
Abduction
Abductor wedge
Abnormal vital signs
Abuse
Accidents
Accountable
Activities

Acute
Adaptive
Adaptive device
Adaptive devices
Adduction
ADL
Admission
Admitting resident
Advance directives

Afebrile
Affected side
Aging process
Agitation
AIDS
Alarm
Alzheimer's
Alzheimer's care
Ambulation

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Anatomy
Anger
Angina pectoris
Anterior
Anxiety
Aphasia
Apical
Appropriate response
Arteries
Arthritis
Aseptic
Aspiration
Assault
Assistive device
Atrophy
Audiologist
Authorized duties
Axillary temperature
Bacteria
Bargaining
Basic needs
Basic nutrition
Bathing
Battery
Bed making
Bedpan
Bedrails
Bedrest
Behavior
Behavioral care plan
Beliefs
Biohazard
Bladder training
Bleeding
Blindness
Blood pressure
Body alignment
Body fluids
Body mechanics
Body systems

Body temperature
Bowel program
Brain stem
Breathing
Breathing rates
Broken equipment
Burnout
Call light
Cancer
Cardiac arrest
Cardiopulmonary resuscitation
Cardiovascular system
Care impaired
Care plan
Care planning
Cataracts
Catheter
Catheter care
CC's in an ounce
Central nervous system
Cerebral vascular accident
Certification renewal
Chain of command
Chain of infection
Charge nurse
Chemical restraint
Chemotherapy
Chest pain
CHF
Choking
Chronic
Circulation
Circulatory system
Clarification
Cleaning
Cleaning spills
Clear liquid diet
Clergy
Cognitively impaired
Cold application

Cold compress
Colostomy
Colostomy care
Combative resident
Comfort care
Communicable
Communication
Competency evaluation
Competency evaluation program
Compressions
Conduct
Confidentiality
Conflict
Conflict resolution
Confused resident
Congestive heart failure
Constipation
Constrict
Contamination
Contracture
Converting measures
COPD
Coronary Artery Disease
Coughing excessively
CPR
Cross contamination
Cultural
Culture
CVA
Cyanosis
Dangling
Data collection
Death and dying
Decubitus ulcer
De-escalation
Defamation
Dehydration
Delegation
Delusions

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Dementia
Denial
Denture care
Dentures
Dependability
Depression
Developmental disability
Diabetes
Diabetic
Dialysis
Diarrhea
Diastolic
Diet
Dietitian
Digestion
Digestive system
Disability
Discharging resident
Disease
Disease process
Disoriented
Disoriented resident
Disposing of contaminated materials
Disrespect
Disrespectful treatment
Dizziness
DNR
Documentation
Domestic abuse
Draw sheet
Dressing
Droplets
Dry skin
Dying
Dysphagia
Dyspnea
Dysuria
Edema
Elastic stockings

Elevate head
Elimination
Emesis
Emesis basin
Emotional abuse
Emotional lability
Emotional needs
Emotional support
Empathy
Emphysema
End of life care
Endocrine system
Enema
Enteral nutrition
Epilepsy
Ethics
Extension
Extremity
Eye glasses
Falls
False imprisonment
Fasting
Fecal impaction
Feces
Feeding
Feeding tubes
Financial abuse
Fire
Fire safety
First aid
Flexed
Flexion
Fluid
Foley catheter
Foot care
Foot drop
Force fluid
Fowler's
Fractures
Fraud

Frayed cord
Free from disease
Gait belt
Gastric feedings
Gastrostomy tube
Genetic disease
Geriatrics
Germ transmission
Gerontology
Gifts
Gloves
Grieving process
Group settings
HAI
Hair care
Hand tremors
Hand washing
Harm
Health-care team
Hearing aid
Hearing impaired
Heart attack
Heart disease
Heart muscle
Heart rates
Heat application
Height
Heimlich maneuver
Hemiplegia
Hip precautions
HIPAA
HIV
Hoarding
Holistic care
Hormones
Hospice
Hydration
Hyperglycemia
Hypertension
Hyperventilation

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Hypoglycemia
I&O
Ice bag
Immobility
Immune system
Impaired
Impairment
Incontinence
Indication
Indwelling catheter
Infection
Infection control
Infection prevention
In-house transfer
Initial observations
Input and output
In-service programs
Insomnia
Insulin
Intake
Intake and output
Integumentary system
Interpersonal skills
Intoxicated resident
Intravenous therapy
Invasion of privacy
Isolation
Jaundice
Job application
Job description
Lactose intolerance
Legal ethics
Lift/draw sheet
Lifting
Linen
Log roll
Log rolling
Loose teeth
Low sodium diet
Manipulative behavior

Maslow
Masturbation
Measuring
Measuring height
Mechanical lift
Medical asepsis
Medical record
Memory loss
Mental health
Mentally impaired
Microorganism
Military time
Mobility
Morning care
Mouth care
Moving
MSDS
Mucous membrane
Multiple sclerosis
Musculoskeletal
Musculoskeletal system
Myocardial infarction
Nail care
Neglect
Negligence
New resident
Non-contagious disease
Non-verbal communication
Nosocomial
NPO
Nursing assistant's role
Nutrition
Objective
Objective data
OBRA
Occupational Safety and Health Administration Standards
Ombudsman
Open bed

Open-ended questions
Oral temperature
Orientation
Osteoporosis
Ostomy bag
Oxygen
Oxygen concentrator
Oxygen use
Pain
Palliative care
Paralysis
Parenteral nutrition
Parkinson's
Partial assistance
Passive
Pathogen
Perineal care
Peristalsis
Personal care
Personal items
Personal protective equipment
Pet therapy
Phantom pain
Phone etiquette
Physical needs
Physician's authority
Pillaging
Plate rim
Podiatrist
Policy book
Polydipsia
Positioning
Post mortem care
Post-surgical care
Postural hypotension
PPE
Precautions
Pressure ulcer
Preventing injury
Prioritizing

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Privacy
Progressive
Pronation
Prone
Prostate gland
Prosthesis
Prosthetic
Psychiatrist
Psychological needs
Psychosocial
Pulmonary disease
Pulse
Pureed diet
Quadrant
Quadriplegia
RACE (acronym)
Radial
Ramps
Range of motion
Reality orientation
Rectal
Refusal
Rehabilitation
Reminiscence therapy
Reminiscing
Reporting
Reposition
Resident abuse
Resident belongings
Resident identification
Resident independence
Resident pictures
Resident rights
Resident trust
Residents
Resident's Bill of Rights
Resident's chart
Resident's environment
Resident's families
Respectful treatment

Respiration
Respiratory disease
Respiratory symptoms
Respiratory system
Responding to resident behavior
Response
Responsibility
Restorative care
Restraint
Restraint alternative
Resuscitation
Rights
Role
Roles and responsibilities
Safety
Safety precautions
Sanitizer
Scale
Seclusion
Security
Seizure
Self-esteem
Semi-Fowlers
Sensory system
Sexual harassment
Sexual needs
Sexuality
Shampoo tray
Sharps container
Shaving
Shingles
Side rails
Sims position
Sitz bath
Skin
Skin integrity
Sleep
Smoking
Social needs

Social worker
Soiled linen
Specimen
Spills
Spiritual needs
Spirometer
Spore forming bacteria
Sputum
Sputum specimen
Standard precautions
Sterilization
Stethoscope
Stress
Stroke
Strong side
Subjective
Subjective data
Substance abuse
Sun downing
Supine
Supplemental feedings
Survey
Systolic
Tachycardia
Task
Telephone etiquette
Temperature
Tendons
Terminal illness
Threatening resident
Thrombus
Tips
Trachea
Tracheostomy
Transfers
Transmission
Transporting
Transporting food
Tub bath
Tube feeding

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Tubing
Tympanic
Types of isolation
Unaffected
Unconscious
Urethral
Urinary catheter bag
Urinary system
Urine
Validation

Varicose veins
Violent behavior
Vision change
Visual impairment
Vital signs
Vomit
Walker
Wandering resident
Warm and cold applications
Warm application

Weak side
Weighing
Weight
Well-being
Wheelchair safety
White blood cells
Withdrawn resident

