



Utah Nursing Assistant State Certification Exam Guide

UNAR State Certification Exam Guide

Introduction

The nursing assistant certification process in the State of Utah requires that you demonstrate minimum competency by passing both a knowledge and skills demonstration exam upon completion of your nursing assistant training.

You have 1 year from the date of completion from your training program to pass both portions of the exam. Students who test soon after completing have a significantly higher pass rate than those who wait more than 3 months.

Skills

The State of Utah requires that each student completing a nursing assistant course learn and demonstrate the ability to perform more than 70 skills. This is documented while enrolled in a training program by completing the UNAR Nursing Assistant Skill Proficiency Performance List (NAPP). Of the 70+ skills learned, 22 have been identified for inclusion in the state skills exam and are included in this guide. Of these 22, you will be expected to perform 5 random skills during the state test. To pass the skill exam you must receive a minimum score of 75% for each skill performed along with 100% of key steps and complete testing within 45 minutes.

Knowledge

The knowledge portion of the exam consists of 75 multiple-choice questions. In order to pass the knowledge test you must receive a minimum score of 75%. This means you must answer a minimum of 57 questions correctly to pass this portion of the exam. The exam questions are selected randomly by the testing software from a large pool of questions that have been approved by a UNAR Test Advisory Panel. The panel consists of nursing assistant instructors from the

State of Utah. Each question has been reviewed for accuracy and appropriateness by the panel.

Testmaster Universe (TMU)

TMU is the software program that is used by UNAR to provide certification testing and maintain registry records. Upon completion of a training program or by means of reciprocity, each individual is assigned their own personal portal and username and password. You will need your username and password when you take your knowledge test.

You will have access to this portal throughout your CNA career, using it to update your contact information and for information related to your certification.

Where to Test

UNAR has testing site partners across the state in Blanding, Cedar City, Kaysville, Hurricane, Lehi, Logan, Moab, Ogden, Price, Richfield, Roosevelt, Salt Lake City, St. George, Tooele and Vernal.

Test Scheduling

Each test site is run independently and sets their own schedule. To view the most current list of our testing sites, visit UNAR's website at utahcna.com and view the *Test Site Information* document. This document will also list each site's testing hours and whether an appointment is required for the knowledge exam or if they welcome walk-ins. Appointments are always required for the skill exam. This document can also be viewed in your TMU personal portal.

To schedule a test with a specific test site you must login to your TMU personal portal and pay for the test. Testing fees are non-refundable. Once you have paid for your test, you will be able

to access all the testing appointments that are available. You can also reschedule any testing appointments through your TMU personal portal. If you schedule an appointment for your

Any changes or cancellations to a testing appointment must be made at least 1 full business day prior to your testing appointment. If you fail to show up to your scheduled appointment, you will forfeit your testing fee.

knowledge test and later decide you would like to test as a walk-in, you must first cancel your testing appointment. If you miss your scheduled appointment, you will lose your testing fee.

ID Requirements

A current, valid, photo ID must be presented at time of testing and must be the original ID. (Photo, fax, or digital copies will not be accepted.) Printed name on ID must match name of tester in TMU. ID must have an expiration date and must be current. The following forms of ID are acceptable:

- Driver's license, learner's permit, or temporary operator card from any state
- ID issued by any branch, department, or agency of the US or State of Utah
- High school, technical school, college, or professional school within the State of Utah (may not have expiration date but must be current school year)
- A tribal ID card
- Passport from any country

What are you allowed to have with you during testing?

Personal items are to be stored according to test site policy. No cellphones are allowed. You may use a calculator, scratch paper and pencil/pen, all

of which are provided by the testing site. A translation dictionary is allowed but must be provided to the testing center in advance for inspection and may not contain definitions or added notes.

All equipment needed for the skills test will be provided by the testing site including blood pressure cuff, stethoscope and a watch.

Dress for Skills Exam

All examinees must wear scrubs, closed toe shoes, have their hair tied back and no dangling jewelry.

Physical Limitations

You will not be allowed to take the skills exam if you have an injury, serious illness or are more than 6 months pregnant without providing the testing site with a health care providers release to work full duty as a CNA.

Accommodations

Accommodations for testing may be requested by completing the *ADA Accommodations Request* form available on UNAR's website, utahcna.com. The completed form and supporting documentation should be submitted to UNAR as directed on the form.

Three Testing Attempts

Students completing a training course have up to 1 year to pass both the knowledge and skill exams and are given up to three attempts at both portions of the exam.

Expired CNA's who meet the necessary criteria to test have only one attempt at both portions of the exam.

MUST READ

The skill steps in this guide are to be used for objective testing purposes only at the state skills exam. They are not to be used to help you learn how to properly perform skills. The steps listed for each skill are not intended to be used to provide complete care that would be considered all-inclusive of best care practiced in an actual care setting. When performing actual resident care, skill steps as detailed in your nursing assistant textbook and/or taught in your nursing assistant training program are to be used as the basis for care you provide residents.

**INDICATES KEY STEPS IN EACH SKILL.*

1 - Handwashing	
<i>Candidate is asked to wash hands with soap and water.</i>	
1	Wets hands thoroughly with warm water
2	Applies soap to hands
3*	Washes hands for at least 20 seconds
4	Rubs hands together lathering all surfaces of hands/fingers
5	Lathers surfaces of wrists
6	Cleans fingernails by rubbing them in palm of other hand
7	Rinses hands/wrists with fingers pointing downward
8	Dries hands/wrists with clean paper towel
9	Turns off faucet with paper towel(s)
10*	Does not touch clean hands to sink or faucet
11	Immediately discards paper towel into trash can without touching other hand

2 - Vital Sign: Blood Pressure	
<i>Candidate is asked to take resident's manual blood pressure. Candidate may use 1-step method or 2-step-pulse obliteration method (as preferred by candidate). A recording form is provided to document blood pressure reading. Resident is sitting at a table. A person portrays role of resident.</i>	
1	Greets resident by name
2	Introduces self by name and title
3	Performs hand hygiene
4	Explains procedure to resident
5	Cleans earpieces of stethoscope with alcohol wipe
6	Cleans diaphragm of stethoscope with alcohol wipe
7	Positions resident's arm in a resting position, on a firm surface with palm facing up
8	Wraps cuff properly around upper arm with bladder over artery
9	Places diaphragm over brachial artery
10	Inflates cuff to 160-180mm/Hg or uses 2-step obliteration method
11	Slowly deflates cuff, watching sphygmomanometer
12	Removes cuff from arm
13	Records blood pressure reading on recording form
14*	Recorded systolic blood pressure is within +/-10 mm/Hg of observer's measurement
15*	Recorded diastolic blood pressure is within +/-10 mm/Hg of observer's measurement
16	Places call light, water and phone within resident reach
17	Performs hand hygiene

3 - Vital Sign: Pulse/Respirations	
<i>Candidate is asked to take resident's pulse and respirations. Obtaining pulse and respirations are to be completed as two separate activities. Candidate may take radial or apical pulse (as preferred by candidate). Candidate may count pulse/respirations for 30 seconds then double number or count for one full minute (as preferred by candidate). A recording form is provided to document readings. Resident is sitting at a table. A person portrays role of resident.</i>	
1	Greets resident by name
2	Introduces self by name and title
3	Performs hand hygiene
4	Explains procedure to resident
5	Locates radial pulse on thumb side of wrist or uses apical method by placing diaphragm of stethoscope on left side of resident's chest
6	Counts pulse rate for 30 seconds then doubles number or counts for 1 full minute
7	Records pulse rate on recording form
8*	Recorded pulse reading is within +/- 4 beats of observer's recorded reading
9	Counts respiratory rate for 30 seconds then doubles number or counts for 1 full minute
10	Records respiratory rate on recording form
11*	Recorded respiratory reading is within +/- 2 breaths of observer's recorded reading
12	Places call light, water and phone within resident reach
13	Performs hand hygiene

4 – Anti-Embolism Stocking (One Leg)	
<i>Candidate is asked to put a knee-high anti-embolism stocking on one leg of resident (leg will be clearly identified by red tape). Resident is sitting in bed. A person or mannequin portrays role of resident.</i>	
1	Greets resident by name
2	Introduces self by name and title
3	Performs hand hygiene
4	Explains procedure to resident
5	Positions resident supine in bed
6	Places stocking over resident's toes, foot and heel
7	Ensures heel of stocking is over heel of foot
8	Pulls or rolls stocking up resident's leg
9*	Leaves stocking smooth, free from wrinkles
10	Places call light, water and phone within resident reach
11	Performs hand hygiene

5 – Ambulate Using Gait Belt	
<i>Candidate is asked to assist resident to stand and ambulate using a gait belt. Resident is to be ambulated from bed to a chair. Resident is lying or sitting in bed. A person portrays the role of resident.</i>	
1	Greets resident by name
2	Introduces self by name and title
3	Performs hand hygiene
4	Explains procedure to resident
5*	Locks bed wheels
6*	Assists resident to put on non-skid footwear
7	Makes sure resident's feet are flat on floor
8	Places gait belt snug but not too tightly around resident's waist (should be able to easily run fingers between belt and resident)
9	Stands in front and faces resident

10	Grasp gait belt securely at both sides of resident
11	Assist resident to stand on count of “three”
12	Positions self slightly behind on resident’s side
13	Ambulates resident while grasping gait belt
14	Assists resident to sit into chair
15	Positions resident in chair with hips against back of seat
16	Removes gait belt
17	Places call light, water and phone within resident reach
18	Performs hand hygiene

6 – Ambulate with Walker Using Gait Belt	
<i>Candidate is asked to assist resident to stand and ambulate from bed to chair. Resident uses a walker while ambulating. Resident is lying or sitting in bed. A person portrays role of resident.</i>	
1	Greets resident by name
2	Introduces self by name and title
3	Performs hand hygiene
4	Explains procedure to resident
5*	Locks bed wheels
6*	Assists resident to put on non-skid footwear
7	Makes sure resident’s feet are flat on floor
8	Places gait belt snug but not too tightly around resident’s waist (should be able to easily run fingers between belt and resident)
9	Stands in front and faces resident
10	Grasps gait belt securely at both sides of resident
11	Assists resident to stand on count of “three”
12	Positions walker in front of resident before or after resident stands

13	Positions self slightly behind on resident’s side
14	Ambulates resident with walker while grasping gait belt
15	Assists resident to sit into chair
16	Positions resident in chair with hips against back of seat
17	Removes gait belt
18	Places call light, water and phone within resident reach
19	Performs hand hygiene

7 – Assist with Bedpan	
<i>Candidate is asked to assist female resident with a standard bedpan. Resident is lying in bed on a waterproof pad that has already been placed. Changing waterproof pad is not tested in this skill. Pericare is not tested in this skill. A mannequin portrays role of resident.</i>	
1	Greets resident by name
2	Introduces self by name and title
3	Performs hand hygiene
4	Explains procedure to resident
5*	Dons gloves
6	Positions resident comfortably on back
7	Rolls resident away from self on count of “three”
8	Positions bedpan correctly
9	Rolls resident onto back/bedpan on count of “three”
10	Raises head of bed to a comfortable level for resident
11	Positions call light within reach of resident
<i>(Resident uses bedpan and calls nursing assistant)</i>	
12	Lowers head of bed
13	Removes bedpan
14*	Removes gloves

15*	Performs hand hygiene immediately after removing gloves and before touching other items
16	Places call light, water and phone within resident reach after removing gloves and performing hand hygiene

**8 – Brief Change with Peri/Anal Care:
Female**

Candidate is asked to change soiled brief for female resident who had a bowel movement. Resident is confined to her bed. Resident is sitting in bed on a waterproof pad that has already been placed. Changing waterproof pad is not tested in this skill. A mannequin portrays role of resident.

1	Greets resident by name
2	Introduces self by name and title
3	Performs hand hygiene
4	Explains procedure to resident
5*	Dons gloves
6	Positions resident comfortably on back
7	Undoes front tabs of soiled brief
8	Rolls soiled brief down between resident's legs
9	Uses disposable wipes
10*	Wipes clean to dirty with each stroke
11	Uses different part of wipe for each stroke
12	Separates labia majora
13	Wipes down center of labia, starting with urinary meatus
14	Wipes down both sides of labia, starting with urinary meatus
15	Wipes vaginal area/upper thighs
16	Discards soiled wipes by tucking into soiled brief or into waste container
17	Rolls resident onto side on count of "three"
18	Wipes anal area with disposable wipes
19	Removes soiled brief
20	Places soiled brief into plastic bag

21	Changes gloves
22	Tucks clean brief under resident
23	Rolls resident onto back on count of "three"
24	Secures clean brief in place
25*	Removes gloves
26*	Performs hand hygiene immediately after removing gloves and before touching other items
27	Places call light, water and phone within resident reach after removing gloves and performing hand hygiene

**9 – Brief Change with Peri/Anal Care:
Male**

Candidate is asked to change soiled brief for a circumcised male resident who had a bowel movement. Resident is confined to his bed. Resident is sitting in bed on a waterproof pad that has already been placed. Changing waterproof pad is not tested in this skill. A mannequin portrays role of resident.

1	Greets resident by name
2	Introduces self by name and title
3	Performs hand hygiene
4	Explains procedure to resident
5*	Dons gloves
6	Positions resident comfortably on back
7	Undoes front tabs of soiled brief
8	Rolls soiled brief down between resident's legs
9	Uses disposable wipes
10*	Wipes clean to dirty with each stroke
11	Uses different part of wipe for each stroke
12	Wipes penis in circular motion from tip to base, start with urinary meatus
13	Wipes scrotum/upper thighs
14	Discards soiled wipes by tucking into soiled brief or into trash

15	Rolls resident onto side on count of “three”
16	Wipes anal area with disposable wipes
17	Removes soiled brief
18	Places soiled brief into plastic bag
19	Changes gloves
20	Tucks clean brief under resident
21	Rolls resident onto back on count of “three”
22	Secures clean brief in place
23*	Removes gloves
24*	Performs hand hygiene immediately after removing gloves and before touching other items
25	Places call light, water and phone within resident reach after removing gloves and performing hand hygiene

10 – Contact Precautions: Gown and Gloves	
<i>Candidate is asked to properly apply and remove gown and gloves. Resident is being treated for a multidrug resistant organism (MDRO) wound infection. Entering resident’s room requires contact precautions.</i>	
1	Performs hand hygiene
2	Unfolds gown
3	Dons Gown
4	Secures neck opening
5	Secures back opening
6*	Dons gloves overlapping gown sleeves
<i>(Resident care task is completed)</i>	
7*	Removes gloves before removing gown
8	Grasps one glove at palm of one hand then pulls off
9	With ungloved hand. Slips two fingers or the thumb underneath cuff of remaining glove at wrist
10	Pulls down and turns glove inside out
11	Disposes of gloves in waste container

12	Unfastens gown at neck
13	Unfastens gown at waist
14	Removes gown by rolling dirty side in
15	Disposes of gown in waste container
16*	Performs hand hygiene

11 – Denture Care	
<i>Candidate is asked to clean resident’s denture. Resident’s denture has already been removed and is in denture cup. After cleaning, denture will be stored in denture cup. Providing mouth care for resident is not tested in this skill. A person or mannequin portrays role of resident.</i>	
1	Greets resident by name
2	Introduces self by name and title
3	Performs hand hygiene
4	Explains procedure to resident
5*	Dons gloves
6	Protects denture from damage by lining bottom of sink with a towel/washcloth
7	Uses warm water to clean/rinse denture
8	Applies denture toothpaste to denture brush
9	Brushes all surfaces of denture
10	Rinses denture
11	Places denture in denture cup
12	Adds water to cover denture in cup
13*	Removes gloves
14*	Performs hand hygiene immediately after removing gloves and before touching other items
15	Places call light, water and phone within resident reach after removing gloves and performing hand hygiene

12 – Dressing Resident: Affected Arm (Upper Body Only)	
<i>Candidate is asked to change gown/clothing for resident who has an affected (weaker) arm. Clothing resident is currently wearing has been soiled. Affected side is clearly identified by red tape. A person or mannequin portrays role of resident.</i>	
1	Greets resident by name
2	Introduces self by name and title
3	Performs hand hygiene
4	Explains procedure to resident
5	Dons gloves
6	Allows resident to choose clothing
7	Undresses resident's unaffected side first
8	Undresses resident's affected side after undressing unaffected side
9	Places soiled clothing in hamper
10	Dresses resident's affected side first
11	Dresses resident's unaffected side after dressing affected side
12	Removes gloves
13	Performs hand hygiene immediately after removing gloves and before touching other items
14	Places call light, water and phone within resident reach after removing gloves and performing hand hygiene

13 – Empty Down Drain Bag and Record Urine Output	
<i>Candidate is asked to empty resident's catheter down drain bag into graduate container. Then measure and record urine output. Output should be recorded in mL. Skills observer will indicate where the "flat, dirty surface" is located. A recording form is provided to document urine output measurement. A mannequin portrays role of resident.</i>	
1	Greets resident by name
2	Introduces self by name and title
3	Performs hand hygiene

4	Explains procedure to resident
5*	Dons gloves
6	Places paper towel on floor under drainage bag
7	Places graduate on paper towel
8	Opens spout on down drain bag so urine will flow into graduate
9	Ensures drainage tube does not touch side of graduate
10	Cleans tip of spout with alcohol wipe
11	Replaces spout into holder on bag
12	Places graduate on a flat, "dirty" surface
13	Reads graduate at eye level
14*	Removes gloves
15*	Performs hand hygiene immediately after removing gloves and before touching other items
16	Records urine output measurement on recording form after removing gloves and performing hand hygiene
17*	Recorded measurement within +/- 25mL of observer's measurement
18	Places call light, water and phone within resident reach after removing gloves and performing hand hygiene

14 – Feeding Resident: While in Bed	
<i>Candidate is asked to feed resident a meal. Resident is unable to fully feed his/her self. Resident can assist with eating by holding small items to take bites. Resident is lying supine in bed. A person or mannequin portrays role of resident.</i>	
1	Greets resident by name
2	Introduces self by name and title
3*	Performs hand hygiene
4	Explains procedure to resident
5*	Positions resident in an upright position (60-90 degree angle)
6	Assists resident to clean hands with disposable wipes

7	Asks resident if they would like a clothing protector
8	Places a clothing protector/towel
9	Tells resident what foods are on plate
10	Allows resident to make choices while eating
11	Offers sips of fluid
12	Removes clothing protector from resident's clothing
13	Places call light, water and phone within resident reach
14	Performs hand hygiene

15 – Indwelling Catheter Care: Female

Candidate is asked to provide indwelling catheter care for female resident. Resident is lying in bed on a waterproof pad that has already been placed. Changing waterproof pad is not tested in this skill. A mannequin portrays role of resident.

1	Greets resident by name
2	Introduces self by name and title
3	Performs hand hygiene
4	Explains procedure to resident
5*	Dons gloves
6	Uses non-alcohol disposable cleansing wipes
7	Uses cleansing wipe to clean area around urinary meatus
8*	Wipes clean to dirty with each stroke
9	Uses different part of wipe for each stroke
10	Holds catheter near meatus
11	Cleans at least 4 inches of catheter beginning at the urinary meatus
12*	Wipes in one direction away from urinary meatus
13	Secures tubing to resident's thigh
14	Places tubing over resident's leg
15	Attaches drainage bag to bed frame
16*	Removes gloves

17*	Performs hand hygiene immediately after removing gloves and before touching other items
18	Places call light, water and phone within resident reach after removing gloves and performing hand hygiene

16 – Indwelling Catheter Care: Male

Candidate is asked to provide indwelling catheter care for male resident. Resident is lying in bed on a waterproof pad that has already been placed. Changing waterproof pad is not tested in this skill. A mannequin portrays role of resident.

1	Greets resident by name
2	Introduces self by name and title
3	Performs hand hygiene
4	Explains procedure to resident
5*	Dons gloves
6	Uses non-alcohol disposable cleansing wipes
7	Uses cleansing wipe to clean area around urinary meatus
8*	Wipes clean to dirty with each stroke
9	Uses different part of wipe for each stroke
10	Holds catheter near meatus
11	Cleans at least 4 inches of catheter beginning at the urinary meatus
12*	Wipes in one direction away from urinary meatus
13	Secures tubing to resident's thigh
14	Places tubing over resident's leg
15	Attaches drainage bag to bed frame
16*	Removes gloves

17*	Performs hand hygiene immediately after removing gloves and before touching other items
18	Places call light, water and phone within resident reach after removing gloves and performing hand hygiene

17 – Position: Log Roll Using Draw Sheet	
<i>Candidate is asked to change position of resident from semi-fowlers to lateral position. Resident has chronic back/neck pain and turning is quite painful for them. Resident prefers to be log rolled when turning to reduce pain. A mannequin portrays role of resident.</i>	
1	Greets resident by name
2	Introduces self by name and title
3	Performs hand hygiene
4	Explains procedure to resident
5*	Positions bed flat
6	Places pillow between resident’s knees
7	Uses 2 people
8	Has one person stand at resident’s head/shoulders
9	Has one person stand at resident’s hips/legs
10	Has both people grasp draw sheet near resident’s body
11	Rolls resident onto side on count of “three”
12	Head/back/legs remain in alignment
13	Flexes resident’s knee on upper side of resident’s body
14	Places pillow(s) underneath leg/knee
15	Places pillow(s) under resident’s upper arm for support
16	Places pillow(s) against resident’s back/torso for support
17	Places call light, water and phone within resident reach
18	Performs hand hygiene

18 – Mouth Care: Conscious, Brushing Teeth	
<i>Candidate is asked to provide mouth care for a conscious resident who is unable to brush own teeth. Resident has his/her natural teeth. Resident is lying supine in bed. A mannequin portrays role of resident.</i>	
1	Greets resident by name
2	Introduces self by name and title
3	Performs hand hygiene
4	Explains procedure to resident
5*	Dons gloves
6*	Positions resident in an upright position (60-90 degree angle)
7	Offers resident clothing protector or towel
8	Applies toothpaste to toothbrush
9	Inserts toothbrush into resident’s mouth
10	Brushes all surfaces of upper teeth
11	Brushes all surfaces of lower teeth
12	Brushes tongue
13	Offers resident water to rinse mouth
14	Provides resident a basin for spitting
15	Cleans/dries around resident’s mouth
16	Offers resident lip moisturizer
17*	Removes gloves
18*	Performs hand hygiene immediately after removing gloves and before touching other items
19	Places call light, water and phone within resident reach after removing gloves and performing hand hygiene

19 – Mouth Care: Unconscious	
<i>Candidate is asked to provide mouth care for unconscious resident. Resident has his/her natural teeth. Resident is lying supine in bed. A mannequin portrays role of resident.</i>	
1	Greets resident by name
2	Introduces self by name and title
3	Performs hand hygiene
4	Explains procedure to resident

5*	Dons gloves
6*	Turns resident's head to side
7	Places a towel under resident's head or cheek/chin
8	Wets sponge in cup of water
9	Removes excess water from sponge by rolling along cup
10	Inserts sponge into resident's mouth
11	Rotates sponge against all surfaces of mouth
12	Cleans/dries around resident's mouth
13	Applies lip moisturizer
14*	Removes gloves
15*	Performs hand hygiene immediately after removing gloves and before touching other items
16	Places call light, water and phone within resident reach after removing gloves and performing hand hygiene

12	Smooths out other side of clean draw sheet
13	Rolls resident onto back on count of "three"
14	Rolls resident onto resident's other side on count of "three"
15	Removes soiled draw sheet
16	Unrolls clean draw sheet
17	Rolls resident onto back onto clean draw sheet on count of "three"
18*	Ensures draw sheet is free from wrinkles
19	Removes gloves
20	Performs hand hygiene immediately after removing gloves and before touching other items
21	Places call light, water and phone within resident reach after removing gloves and performing hand hygiene

20 – Occupied Draw Sheet Change	
<i>Candidate is asked to change resident's draw sheet. Resident is able to roll on either side without difficulty. Resident is confined to bed. Resident is in semi-fowlers position in bed. A mannequin portrays role of resident.</i>	
1	Greets resident by name
2	Introduces self by name and title
3	Performs hand hygiene
4	Explains procedure to resident
5	Dons gloves
6	Places clean draw sheet on a clean surface within reach
7*	Positions bed flat
8	Rolls resident onto side on count of "three"
9	Rolls soiled draw sheet inward toward resident
10	Places clean draw sheet on bed
11	Rolls one half of clean draw sheet towards resident's back

21 – Position: Lateral	
<i>Candidate is asked to reposition resident to a lateral position. Candidate can choose to place resident in either a left lateral or a right lateral position. Resident is in semi-fowlers position in bed. A mannequin portrays role of resident.</i>	
1	Greets resident by name
2	Introduces self by name and title
3	Performs hand hygiene
4	Explains procedure to resident
5*	Positions bed flat
6	Slides hands/arms under resident's head/shoulders, moves resident toward self
7	Slides hands/arms under resident's midsection, moves resident toward self
8	Slides hands/arms under resident's hips/legs, moves resident toward self
9	Turns resident onto a lateral position on the count of "three"
10	Flexes resident's knee on upper side of resident's body

11	Places pillow(s) underneath resident's leg/knee
12	Places pillow(s) under resident's upper arm for support
13	Places pillow(s) against resident's back/torso for support
14	Places call light, water and phone within resident reach
15	Performs hand hygiene

22 – Pivot Transfer: Bed to Wheelchair Using Gait Belt	
<i>Candidate is asked to transfer resident from bed to wheelchair. Candidate is required to use a pivot transfer technique and demonstrate proper use of gait belt. Resident has experienced a stroke and has an affected (weaker) side. Affected (weaker) side will be clearly identified by red tape. Resident can stand and bear weight but cannot walk. Resident is lying or sitting in bed. A person portrays role of resident.</i>	
1	Greets resident by name
2	Introduces self by name and title
3	Performs hand hygiene
4	Explains procedure to resident
5*	Locks bed wheels

6	Positions resident in sitting position
7*	Assists resident to put on non-skid footwear
8	Makes sure resident's feet are flat on floor
9	Places gait belt snug but not too tightly around resident's waist (should be able to easily run fingers between belt and resident)
10	Positions wheelchair close to resident on unaffected (stronger) side
11*	Locks wheelchair brakes
12	Stands in front and faces resident
13	Grasps gait belt securely at both sides of resident
14	Assists resident to stand on count of "three"
15*	Transfers resident to wheelchair by pivoting toward unaffected (stronger) side
16	Assists resident to sit into chair
17	Positions resident in wheelchair with hips against back of seat
18	Removes gait belt
19	Places call light, water and phone within resident reach
20	Performs hand hygiene



Practice Knowledge Test

1. If a nursing assistant finds medications left over on the bedside table, what should happen?
 - a. Ignore it
 - b. Report it to the charge nurse
 - c. Encourage the resident to take it
 - d. Throw them away
2. HS means:
 - a. Hour of sleep
 - b. Hour for supper
 - c. Hours for sitting
 - d. Hours resident slept
3. The person's written statement about the use of life sustaining measures is called:
 - a. Durable Power of Attorney
 - b. DNA Order
 - c. Living Will
 - d. Hospice Care
4. Mrs. Shumway has an order for I&O. You have picked up her breakfast and note she drank a 6 oz. glass of juice, 4 oz. of milk and 8 oz. of coffee. You document:
 - a. 920ml
 - b. 240ml
 - c. 540ml
 - d. 685ml
5. Your elderly patient speaks a different language than you do. It would help you to:
 - a. Use very simple words and directions
 - b. Talk louder
 - c. Avoid any conversation
 - d. Make the patient speak their language
6. If a resident is retaining fluid in the tissue, he is said to have:
 - a. Hypertension
 - b. Distension
 - c. Hypothermia
 - d. Edema
7. Which response violates patient confidentiality?
 - a. Telling funny stories about your patients to your family and friends
 - b. Telling the nurse that your patient is taking extra medication
 - c. Talking about your patient's care to your relief on the next shift
 - d. Exchanging information about Mrs. Green with her physician
8. A microbe that is harmful and causes infection is a:
 - a. Reservoir
 - b. Pathogen
 - c. Microorganism
 - d. Flora
9. While dressing a post CVA resident with one-sided weakness, which arm should be put through the sleeve first?
 - a. Weak arm
 - b. Strong arm
 - c. It doesn't matter
 - d. Both arms at the same time
10. If a resident refuses to eat a certain food because of a religious preference, the CNA should:
 - a. Allow the resident to go hungry
 - b. Ask the family to bring in special foods
 - c. Respect the resident's religion and notify the dietician
 - d. Tell the resident to eat the food, no preference is given

11. Identify the one factor that is common to all communication:
 - a. Words are being used
 - b. There is a transfer of a message
 - c. It occurs in one direction
 - d. The people feel comfortable
12. When nursing assistants find equipment in need of repair, they should:
 - a. Throw it away
 - b. Fix it themselves
 - c. Continue to use the item
 - d. Report it to the appropriate personnel
13. Residents who lie in bed all day are at risk for:
 - a. Pneumonia
 - b. Sensory stimulation
 - c. Myocardial infarction
 - d. Developmental disability
14. Aphasia is the loss of:
 - a. Memory
 - b. Appetite
 - c. Ability to swallow
 - d. Ability to speak
15. You are giving mouth care to an unconscious resident. You must be especially careful to prevent the resident from:
 - a. Eating the toothpaste
 - b. Aspirating any fluid
 - c. Talking during the procedure
 - d. Biting down on the toothbrush
16. An elderly Native American has been diagnosed as dying. Her family wishes to perform a ceremony with candles and incense. The facility should:
 - a. Allow the ceremony with proper safety measures
 - b. Not allow the ceremony because of the fire code
 - c. Transfer her to a private facility for Native Americans
 - d. Teach the family that the ceremony will not help her condition
17. Misuse of Resident's money or property by family, friends or staff is known as:
 - a. Malpractice
 - b. Chemical restraint
 - c. Misappropriation of property
 - d. Abetting & aiding
18. You observe two adult residents sharing the same bed after lunch. You know these residents are capable of exercising their own rights. This means that they:
 - a. Can perform ROM for each other
 - b. Have the right to share the same bed
 - c. Have the right to privacy
 - d. Should be discharged for lewd conduct
19. Mrs. Sparks is an 83-year-old female patient with left sided hemiplegia. This is:
 - a. Paralysis on the left side of the body
 - b. A rash on the left arm
 - c. A left arm contracture
 - d. Left arm and leg itching
20. When caring for a resident with an indwelling Foley catheter it is important to:
 - a. Withhold fluids if the bag is too full
 - b. Tuck the tubing under the patient's leg to keep it off the floor
 - c. Pin the tubing to the resident gown
 - d. Check the bag and tubing for adequate urinary flow
21. The basic foundation of medical asepsis is:
 - a. Hand washing
 - b. Wearing goggles
 - c. Wearing a mask
 - d. Sterile technique

22. Which of the following measurements obtained from Mrs. Shumway should be reported immediately to the charge nurse?
- B/P 190/114
 - Pulse 74
 - Respiration 20
 - Temperature 99F
23. The first aid treatment for bleeding is:
- Lower the arm below heart level
 - Put on a tourniquet
 - Run and get the nurse
 - Apply direct pressure
24. When a seizure occurs:
- Restrain the resident to prevent injury
 - Move objects away which may cause injury
 - Leave resident and immediately get the charge nurse
 - Hold their tongue in place with a tongue depressor
25. A resident with dementia needs:
- Increased activity to stay alert
 - To be isolated from others
 - A structured, safe environment
 - Freedom from rules
26. When you empathize with residents, you are:
- Putting yourself in their place
 - Feeling pity for them
 - Telling them to cheer up
 - Letting them stay in bed
27. Which of the following is an acceptable way for the CNA to cope with feelings of anger and frustration?
- Refuse to care for a frustrating resident
 - Call your best friend and vent
 - Discuss your feelings with several staff members during lunch
 - Talk with your supervisor
28. A good listening approach to use when communicating with residents is:
- Stay at least 6 feet away from the resident
 - Sit beside the resident
 - Give him advice
 - Avoid looking directly in his eyes
29. When giving perineal care to a female patient, always clean:
- Back to front
 - Front to back
 - Side to side
 - In a circular motion
30. The opening of the colostomy to the outside of the body is called the:
- Rectum
 - Insertion site
 - Stoma
 - Ileostomy

Practice Knowledge Test - Answers

1. B – Report it to the charge nurse
2. A – Hour of sleep
3. C – Living Will
4. C – 540ml
5. A – Use very simple words and directions
6. D – Edema
7. A – Telling funny stories about your patients to your family and friends
8. B – Pathogen
9. A – Weak arm
10. C – Respect the resident’s religion and notify the dietician
11. B – There is a transfer of a message
12. D – Report it to the appropriate personnel
13. A – Pneumonia
14. D – Ability to speak
15. B – Aspirating any fluid
16. A – Allow the ceremony with proper safety measures
17. C – Misappropriation of property
18. C – Have the right to privacy
19. A – Paralysis on the left side of the body
20. D – Check the bag and tubing frequently for adequate urinary flow
21. A – Hand washing
22. A – B/P 190/114
23. D – Apply direct pressure
24. B – Move objects away which may cause injury
25. C – A structured, safe environment
26. A – Putting yourself in their place
27. D – Talk with your supervisor
28. B – Sit beside the resident
29. B – Front to back
30. C – Stoma