

California Mock Skills

Effective for testing: February 21, 2022

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

D&S Diversifed Technologies (D&SDT), LLP – Headmaster, LLP

APPLY A KNEE-HIGH ANTI-EMBOLIC (ELASTIC) STOCKING TO ONE LEG

<u> </u>	
Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Raise bed height.	
Provide for resident's privacy.	
Provide for resident's privacy by only exposing one leg.	
Roll, gather or turn stocking down inside out to at least the heel.	
Place foot of stocking over the resident's toes, foot, and heel.	
Roll -or- pull top of stocking over resident's foot, heel and up the leg.	
Check toes for possible pressure from stocking.	
Adjust stocking as needed.	
Leave resident with stocking that is smooth/wrinkle free.	
Lower bed, if it was raised.	
Place call light or signal calling device within easy reach of the	
resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
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ASSIST RESIDENT TO AMBULATE USING A GAIT BELT

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

Assist Resident with the use of a Bedpan, Measure and Record Urine Output with Hand Washing

TONE !	OF THE PUSSIBLE MANDATURY FIRST TASKS	
	Perform hand hygiene.	
	a. Cover all surfaces of hands with hand sanitizer.	
	b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Provide for resident's privacy.	
	Put on gloves.	
	Position resident on bedpan safely and correctly. (Pan not upside	
	down, is centered, etc.)	
	Raise head of bed to comfortable level.	
	Leave tissue within reach of resident.	
	Leave call light or signaling device within reach of resident.	
	Step behind privacy curtain to provide privacy for resident.	
	When the RN Test Observer indicates, candidate returns.	
	Lower the head of the bed, if it was raised.	
	Gently remove the bedpan.	
	Hold the bedpan for the RN Test Observer while an unknown	
	quantity of liquid is poured into bedpan.	
	Place graduate on level flat surface.	
	Pour bedpan contents into graduate.	
	With graduate at eye level, measure output.	
	Empty equipment used into designated toilet/commode.	
	Rinse equipment used and empty rinse water into designated	
	toilet/commode.	
	Return equipment to storage.	
	Wash/assist resident to wash and dry hands with soap and water.	
	Place soiled linen in designated laundry hamper.	
	Remove gloves turning inside out as they are removed and dispose in	
	trash container.	
	Record output in ml's on the previously signed recording form.	
	Candidate's recorded measurement is within 25ml's of RN Test	
	Observer's reading.	
	Place call light or signaling device within easy reach of the resident.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Turn on water.	
	Wet hands and wrists thoroughly.	
	Apply soap to hands.	

Rub hands together using friction with soap.	
Scrub/wash hands together for at least twenty (20) seconds with	
soap.	
Scrub/wash with interlaced fingers pointing downward with soap.	
Wash all surfaces of hands with soap.	
Wash wrists with soap.	
Clean fingernails by rubbing fingertips against palm of the opposite	
hand.	
Rinse fingers, hands and wrists thoroughly under running water with	
fingers pointed downward.	
Starting at the fingertips, dry fingers, hands and wrists on clean paper	
towel(s).	
Discard paper towels to trash container as used.	
Turn off faucet with a clean, dry paper towel and discard paper towel	
to trash container as used.	
Do not re-contaminate hands at any time during the hand	
washing procedure. (Such as touching the sides of the sink during	
the procedure or crumpling up the paper towel used to turn off	
the faucet with both hands before discarding, etc.)	

CATHETER CARE FOR A FEMALE WITH HAND WASHING

ONE	OF THE POSSIBLE MANDATORY FIRST TASKS)	
	Perform hand hygiene.	
	a. Cover all surfaces of hands with hand sanitizer.	
	b. Rub hands together until hands are completely dry.	
	Explain the procedure to the resident.	
	Provide for resident's privacy.	
	Fill basin with comfortably warm water.	
	Put on gloves.	
	Expose area surrounding catheter, only exposing resident between	
	hip and knee.	
	Hold catheter where it exits the urethra with one hand.	
	While holding catheter, clean at least 3-4 inches down the drainage	
	tube.	
	Clean with strokes only away from the urethra.	
	Use a clean portion of the washcloth for each stroke.	
	While holding catheter, rinse at least 3-4 inches down the drainage	
	tube.	
	Rinse using strokes only away from the urethra.	
	Rinse using a clean portion of the washcloth for each stroke.	
	Pat dry.	
	Do not allow the tube to be tugged/pulled at any time during the	
	procedure.	
	Replace top cover over resident.	
	Place soiled linen in designated laundry hamper.	
	Empty equipment.	
	Rinse equipment.	
	Dry equipment.	
	Return equipment to storage.	
	Remove gloves turning inside out as they are removed and dispose in	
	trash container.	
	Place call light or signaling device within easy reach of the resident.	
	Maintain respectful, courteous interpersonal interactions at all times.	
	Turn on water.	
	Wet hands and wrists thoroughly.	
	Apply soap to hands.	
	Rub hands together using friction with soap.	
	Scrub/wash hands together for at least twenty (20) seconds with	
	soap.	
	Scrub/wash with interlace fingers pointing downward with soap.	

Wash all surfaces of hands with soap.	
Wash wrists with soap.	
Clean fingernails by rubbing fingertips against palm of the opposite	
hand.	
Rinse fingers, hands and wrists thoroughly under running water with	
fingers pointed downward.	
Starting at the fingertips, dry fingers, hands and wrists on clean paper	
towel(s).	
Discard paper towels to trash container as used.	
Turn off faucet with a clean, dry paper towel and discard paper towel	
to trash container as used.	
Do not re-contaminate hands at any time during the hand washing	
procedure. (Such as touching the sides of the sink during the	
procedure or crumpling up the paper towel used to turn off the faucet	
with both hands before discarding, etc.)	

DENTURE CARE — CLEANING UPPER OR LOWER DENTURE

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

DONNING PPE (GOWN AND GLOVES), EMPTYING A URINARY DRAINAGE BAG, MEASURE AND RECORD URINE OUTPUT AND REMOVE PPE WITH HAND WASHING

ONE OF THE POSSIBLE MAINDATORY FIRST TASKS	
Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	
Unfold the gown.	
Face the back opening of the gown.	
Place arms through each sleeve.	
Secure the neck opening.	
Secure gown at the waist, making sure that the back flaps cover	
clothing as completely as possible.	
Put on gloves.	
Cuffs of gloves overlap cuffs of gown.	
Explain the procedure to the resident.	
Provide for resident's privacy.	
Place a barrier on the floor under the drainage bag.	
Place the graduate on the previously placed barrier.	
Open the drain to allow the urine to flow into the graduate until bag	
is completely empty.	
Avoid touching the graduate with the tip of the tubing.	
Close the drain.	
Wipe the drain with an alcohol wipe AFTER emptying drainage bag.	
Place graduate on a level flat surface.	
With graduate at eye level, measure output.	
Empty graduate into designated toilet/commode.	
Rinse equipment emptying rinse water into designated	
toilet/commode.	
Return equipment to storage.	
Record the output in ml's on previously signed recording form.	
Candidate's recorded measurement is within 25ml's of the RN Test	
Observer's measurement.	
Place call light or signaling device within easy reach of resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Remove gloves BEFORE removing gown with one gloved hand	
grasping the other glove at the palm to remove.	
Slip fingers from ungloved hand underneath cuff of remaining glove	
at the wrist and remove glove turning inside out as it is removed.	

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	Dispose of gloves in the trash container without contaminating self.	
	Unfasten gown at the waist.	
	Unfasten gown at the neck.	
	Remove gown without touching outside of the gown.	
	While removing gown, hold gown away from body without touching	
	the floor.	
	While removing gown, turns gown inward and keeps it inside out.	
	Dispose of gown in designated container without contaminating self.	
	Turn on water.	
	Wet hands and wrists thoroughly.	
	Apply soap to hands.	
	Rub hands together using friction with soap.	
	Scrub/wash hands together for at least twenty (20) seconds with	
	soap.	
	Scrub/wash with interlace fingers pointing downward with soap.	
	Wash all surfaces of hands with soap.	
	Wash wrists with soap.	
	Clean fingernails by rubbing fingertips against palm of the opposite hand.	
	Rinse fingers, hands and wrists thoroughly under running water with fingers pointed downward.	
	Starting at the fingertips, dry fingers, hands and wrists on clean paper towel(s).	
	Discard paper towels to trash container as used.	
	Turn off faucet with a clean, dry paper towel and discard paper towel	
	to trash container as used.	
	Do not re-contaminate hands at any time during the hand washing	
	procedure. (Such as touching the sides of the sink during the	
	procedure or crumpling up the paper towel used to turn off the faucet	
	with both hands before discarding, etc.)	
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Dressing a Resident with an Affected (weak) Side

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

FEEDING A DEPENDENT RESIDENT

Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Ask resident to state name and verify name matches the name on the diet	
card.	
Position the resident in an upright, sitting position BEFORE feeding. At	
least 75-90 degrees.	
Protect clothing from soiling by using napkin, clothing protector, or towel.	
Provide hand hygiene for the resident BEFORE feeding. (Candidate may use	
a disposable wipe and dispose of in trash can –or- wash resident's hands with	
soap and a wet washcloth –or- they may rub hand sanitizer over all surfaces	
of the resident's hands until dry.)	
Ensure resident's hands are dry BEFORE feeding. (If a wet washcloth with	
soap was used, the candidate will need to dry the resident's hands. If a	
disposable wipe or hand sanitizer was used, must make sure hands are dry.)	
Place soiled linen in designated laundry hamper, or dispose in appropriate container, if used.	
Sit in a chair, facing the resident, while feeding the resident.	
Describe the food and fluid being offered to the resident.	
Offer each fluid frequently.	
Offer small amounts of food at a reasonable rate.	
Allow resident time to chew and swallow.	
Wipe resident's hands and mouth AFTER the feeding demonstration.	
Remove clothing protector and place in designated laundry hamper. If	
napkin, dispose of in trash container.	
Leave resident sitting upright in bed with the head of the bed set up to at	
least 75-90 degrees.	
Record intake as a percentage of total solid food eaten on the previously	
signed recording form.	
Candidate's calculation must be within 25 percentage points of the RN Test Observer's.	
Record estimated intake as the sum total fluid consumed in ml's on the	
previously signed recording form.	
Candidate's calculation must be within 30ml's of the RN Test Observer's.	
Place call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	

FOOT CARE ON ONE FOOT

Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Fill basin with comfortably warm water.	
Remove a sock from the resident's (right/left) foot. (The scenario read	
to you will specify right or left.)	
Immerse resident's foot in warm water.	
a. You may verbalize the 5 to 20 minutes soaking time after you	
begin soaking the foot.	
Use water and a soapy washcloth.	
Wash entire foot.	
Wash between toes.	
Rinse entire foot.	
Rinse between toes.	
Dry foot thoroughly.	
Dry thoroughly between toes.	
Apply lotion to top and bottom of foot.	
Avoid getting lotion between toes.	
If any excess lotion on foot, wipe with a towel/washcloth.	
Replace sock on resident's foot.	
Empty equipment.	
Rinse equipment.	
Dry equipment.	
Return equipment to storage.	
Placed soiled linens in designated laundry hamper.	
Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	
Place call light or signaling device within easy reach of resident.	
Maintain respectful, courteous interpersonal interactions at all times.	

Modified Bed Bath –Face and One Arm, Hand and Underarm

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer. b. Rub hands together until hands are completely dry.	
b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide for resident's privacy.	
Raise bed height.	
Cover resident with a bath blanket.	
Remove remaining top covers. Fold to bottom of bed or place aside.	
Remove resident's gown without exposing resident and place soiled gown in designated laundry hamper.	
Fill basin with comfortably warm water.	
Beginning with eyes, wash eyes WITHOUT SOAP using a clean portion of the washcloth for each stroke, washing inner aspect to outer aspect.	
Wash face WITHOUT SOAP.	
Pat dry face.	
Place towel under arm, exposing one arm.	
Wash arm with soap.	
Wash hand with soap.	
Wash underarm with soap.	
Rinse arm.	
Rinse hand.	
Rinse underarm.	
Pat dry arm.	
Pat dry hand.	
Pat dry underarm.	
Assist resident to put on a clean gown.	
Empty equipment.	
Rinse equipment.	
Dry equipment.	
Return equipment to storage.	
Place soiled linen in designated laundry hamper.	
Lower bed, if it was raised.	
Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	
Place call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	

Mouth Care – Brushing Resident's Teeth

Perform hand hygiene. a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide for resident's privacy.	
Drape resident's chest with a towel to prevent soiling.	
Put on gloves BEFORE cleaning resident's mouth.	
Wet toothbrush and apply a small amount of toothpaste.	
Gently brush the inner surfaces of resident's upper and lower teeth.	
Gently brush the outer surfaces of resident's upper and lower teeth.	
Gently brush the chewing surfaces of resident's upper and lower teeth.	
Gently brush the resident's tongue.	
Assist the resident in rinsing mouth.	
Wipe resident's mouth.	
Remove soiled linen.	
Place soiled linen in the designated laundry hamper.	
Empty container. (Container may be an emesis basin or a disposable cup.)	
Rinse emesis basin, if used, or discard disposable items in trash can.	
Dry emesis basin, if used.	
Rinse toothbrush.	
Return equipment to storage.	
Remove gloves turning inside out as they are removed and dispose in	
trash container.	
Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	
Place call light or signaling device within easy reach of resident.	
Maintain respectful, courteous interpersonal interactions at all times.	

Passive Range of Motion for One Hip and One Knee

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

Passive Range of Motion Shoulder

Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide for resident's privacy.	
Raise bed height.	
Position resident supine (bed flat).	
Correctly support joints at all times by placing one hand under the	
resident's elbow and the other hand under the resident's wrist.	
Gently raise the resident's straightened arm up and over the	
resident's head to ear level.	
a. Flexion	
Gently bring the resident's arm back down to the side of the	
resident's body.	
a. Extension	
Gently complete flexion and extension of the shoulder at least three	
times.	
Continue same support for shoulder joints by placing one hand under	
the resident's elbow and the other hand under the resident's wrist.	
Gently move the resident's entire arm away from the side of the	
resident's body to shoulder level.	
a. Abduction	
Gently return resident's arm to the side of the resident's body.	
a. Adduction	
Gently complete abduction and adduction of the shoulder at least	
three times.	
Do not force any joint beyond the point of free movement.	
Candidate <u>must ask</u> at least once during the ROM exercise if there	
is/was any discomfort/pain.	
Lower bed, if raised.	
Place call light or signaling device within easy reach of resident.	
Maintain respectful, courteous interpersonal interactions at all	
times.	
Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	

PERINEAL CARE FOR A FEMALE WITH HAND WASHING

ONE OF I	THE POSSIBLE MANDATORY FIRST TASKS)	
	Perform hand hygiene.	
	a. Cover all surfaces of hands with hand sanitizer.	
	 b. Rub hands together until hands are completely dry. 	
	Explain the procedure to the resident.	
	Provide for resident's privacy.	
	Fill basin with comfortably warm water.	
	Raise bed height.	
	Put on gloves.	
	Turn resident or raise hips and place a waterproof pad under resident's buttocks.	
	Expose perineal area only.	
	Separate labia. (It is helpful if you verbalize separating labia as you demonstrate separating labia.)	
	Use water and soapy washcloth (no peri-wash or no rinse soap allowed).	
	Clean one side of labia from front to back.	
	Use a clean portion of the washcloth, clean the other side of the labia	
	from front to back.	
	Use a clean portion of the washcloth, clean the vaginal area from	
	front to back.	
	Use a clean washcloth, rinse from one side of the labia from front to back.	
	Use a clean portion of the washcloth, rinse the other side of the labia from front to back.	
	Use a clean portion of the washcloth, rinse the vaginal area from front to back.	
	Pat dry.	
	Assist resident (manikin) to turn onto side away from the candidate toward the center of the bed.	
	a. RN Test Observer may help hold the manikin on her side	
	ONLY after the candidate has turned the manikin.	
	Use a clean washcloth with water and soap (no peri-wash or no rinse soap allowed).	
	Wash from vagina to rectal area.	
	Use a clean portion of the washcloth with any stroke.	
	Use a clean washcloth, rinse rectal area from front to back.	
	Use a clean portion of the washcloth with any stroke.	
	Pat dry.	

Safely remove waterproof pad from under resident's buttocks, if	
placed.	
Position resident (manikin) on her back.	
Place soiled linen in designated laundry hamper.	
Empty equipment.	
Rinse equipment.	
Dry equipment.	
Return equipment to storage.	
Remove gloves turning inside out as they are removed and dispose in trash container.	
Lower bed, if raised.	
Place call light or signaling device within easy reach of resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Turn on water.	
Wet hands and wrists thoroughly.	
Apply soap to hands.	
Rub hands together using friction with soap.	
Scrub/wash hands together for at least twenty (20) seconds with	
soap.	
Scrub/wash with interlace fingers pointing downward with soap.	
Wash all surfaces of hands with soap.	
Wash wrists with soap.	
Clean fingernails by rubbing fingertips against palm of the opposite hand.	
Rinse fingers, hands and wrists thoroughly under running water with fingers pointed downward.	
Starting at the fingertips, dry fingers, hands and wrists on clean paper towel(s).	
Discard paper towels to trash container as used.	
Turn off faucet with a clean, dry paper towel and discard paper towel	
to trash container as used.	
Do not re-contaminate hands at any time during the hand washing	
procedure. (Such as touching the sides of the sink during the procedure	
or crumpling up the paper towel used to turn off the faucet with both	
hands before discarding, etc.)	

POSITIONING RESIDENT IN BED ON SIDE

Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide for resident's privacy.	
Position bed flat.	
Raise bed height.	
Raise side rail, or directs RN Test Observer to stand on side of the	
bed opposite working side of the bed to provide safety.	
From the working side of bed – gently move resident's upper body toward self.	
From the working side of the bed – gently move resident's hips	
toward self.	
From the working side of the bed – gently move resident's legs	
toward self.	
Gently assist/turn resident to slowly roll onto side toward raised side	
rail, or toward RN Test Observer standing at the side of the bed.	
Place or adjust pillow under resident's head for support.	
Reposition resident's arm and shoulder so that the resident is not	
lying on arm.	
Place support device under the resident's upside arm.	
Place support device behind resident's back.	
Place support device between resident's knees.	
Lower bed, if raised.	
Place call light or signaling device within easy reach of resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	

TRANSFER RESIDENT FROM BED TO WHEELCHAIR USING A GAIT BELT

Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide for resident's privacy.	
Obtain a gait belt for the resident.	
Assist resident to put on non-skid shoes/footwear.	
Adjust the bed height to ensure that the resident's feet are flat on the	
floor when the resident is sitting on the edge of the bed.	
Lock bed brakes to ensure resident's safety.	
Lock wheelchair brakes to ensure resident's safety.	
Bring resident to a sitting position.	
Place gait belt around resident's waist to stabilize trunk.	
Tighten gait belt.	
Check gait belt for tightness by slipping fingers between gait belt and	
resident.	
Face the resident.	
Grasp gait belt on both sides with an upward grasp.	
Bring resident to standing position.	
Assist resident to pivot in a controlled manner that ensures safety.	
Lower resident into the wheelchair in a controlled manner that	
ensures safety.	
Remove gait belt.	
Place call light or signaling device within easy reach of the resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	

VITAL SIGNS: TAKING AND RECORDING RESIDENT'S MANUAL BLOOD PRESSURE

Porform hand hygiana	
Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Provide for resident's privacy.	
Position resident with forearm supported in a palm-up position.	
Position resident with forearm approximately at the level of the heart.	
Roll resident's sleeve up about 5 inches above the elbow, if the actor	
is wearing a top with sleeves.	
Apply the appropriate size cuff around the resident's upper arm just	
above the elbow.	
Line cuff arrows up with resident's brachial artery.	
Clean the earpieces of stethoscope.	
Place stethoscope earpieces in ears.	
Clean the diaphragm of the stethoscope.	
Locate the resident's brachial artery with fingertips.	
Place stethoscope diaphragm over brachial artery.	
Hold stethoscope diaphragm snugly in place.	
Inflate the cuff to 160-180 mmHg.	
Slowly release air from cuff to disappearance of pulsations.	
Remove cuff.	
Record blood pressure reading on the previously signed	
recording form.	
Candidate's recorded diastolic blood pressure is within 6mmHg	
of the RN Test Observer's recorded diastolic blood pressure.	
Candidate's recorded systolic blood pressure is within 6mmHg	
of the RN Test Observer's recorded systolic blood pressure.	
Place call light or signaling device within easy reach of resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	
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VITAL SIGNS: COUNT AND RECORD RESIDENT'S RADIAL PULSE AND RESPIRATIONS

Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	
Explain the procedure to the resident.	
Locate the resident's radial pulse by placing fingertips on thumb side	
of the resident's wrist.	
Count resident' radial pulse for one full minute.	
a. Tell the RN Test Observer when you start counting and tell	
her/him when you stop counting.	
Record your radial pulse rate reading on the previously signed	
recording form.	
Candidate's recorded radial pulse rate is within 4 beats of RN Test	
Observer's recorded rate.	
Count resident's respirations for one full minute.	
a. Tell the RN Test Observer when you start counting and tell	
her/him when you stop counting.	
Record your respirations reading on the previously signed recording	
form.	
Candidate's recorded respiratory rate is within 2 breaths of the RN	
Test Observer's recorded rate.	
Place call light or signaling device within easy reach of resident.	
Maintain respectful, courteous interpersonal interactions at all times.	
Perform hand hygiene.	
a. Cover all surfaces of hands with hand sanitizer.	
b. Rub hands together until hands are completely dry.	