

Dear Candidate:

Congratulations on completing your 120 hours of didactic and clinical education required for your nursing assistant certification. You are now ready to take the Manual Skills Test.

The Manual Skills Test consists of seven possible scenarios. You will randomly pick one of those scenarios to be tested on and will only have to pass the one scenario to successfully pass your Manual Skills Test. There are several “testable skill” sets that are within each scenario that you will perform for the Rater. The Rater will evaluate your performance for each step in the skill, i.e. occupied bed making, handwashing, taking vital signs, etc. In order to pass the Manual Skills Test you cannot miss any critical steps. You must also successfully complete at least 80% of the non-critical steps. All of these steps are outlined in your **“Procedure Lists for Testable Skills”** packet.

All candidates taking this test are scored on vital signs, handwashing, charting, random skills that are all included in your **“Procedure Lists for Testable Skills”** packet, and pre and post-care skills. In the Manual Skills Test you can assume that you are performing the skills on one person/manikin and you will not be moving from person to person as you would in a nursing home setting. Please familiarize yourself with all the skills as well as the pre and post-care skills that are included in your packet and listed with each skill.

When you are called into the testing room to take your test, you will be required to show a photo identification. Your photo identification must have full first and last name. You will be shown around the testing room so you can see where equipment and supplies are located. When you are taking your Manual Skills Test, remember that you are required to actually perform the skills and not just verbalize what you would do to perform the skill. Also, the Rater is not allowed to answer any questions about how skills are performed. You need to come prepared to test.

Equipment for the skills will be available. You will be provided a list of the equipment needed for the skills that you will perform. It will be your responsibility to assemble the equipment for ease of use. You will have no more than 5 minutes to assemble your equipment. This time is **NOT** included in the 30 minutes allowed for the test.

Below is a **sample scenario** to give you an idea of what to expect during your manual skills testing:

You are working in a nursing home and will be caring for Mr. Taylor who is an 88-year old gentleman with a right sided weakness. You will need to wash your hands, take his vital signs, give him a partial bath, get him to the commode and back, and apply anti-embolic stockings. When completed, you will chart the cares given.

As was mentioned earlier, be very familiar with the **“Procedure Lists for Testable Skills”**, and you will do well.

Good luck!!!

P.S. Don't forget to bring your photo identification and a pen. Be sure to breathe! 😊

Please refer to the table below for other things to be aware of when taking the test:

“Nursing Assistant General Manual Skills Testing Guidelines”

(This will also be posted at the testing center).

Below are generic guidelines to be aware as you test:

- Remember to communicate with the person you are working with even if it is a manikin. Communication means introducing yourself and explaining the procedures which is part of the skills test.
- Collect and organize your equipment in the way that is most efficient for you.
- Once the test begins, you have a maximum of 30 minutes to complete all the assigned tasks.
- You are required to wash your hands at the beginning of the testing scenario. You will be expected to use hand sanitizer at other times during the test as needed.
- The person’s privacy and safety as well as adherence to infection control procedures must be maintained throughout the entire testing scenario.
- You must physically perform each step. Once you start, if you make an error, stop and say so. You may correct yourself, but you will not be given additional time and will be expected to perform the step you missed.
- For this test, side rails are used only for safety during appropriate procedures. Otherwise, they should be in the low position.
- Please note that this test should demonstrate you caring for a real person and performing the care for that person.

PROCEDURE LISTS FOR TESTABLE SKILLS

The following procedure lists should be used by the instructor to prepare students for the state manual skills test. Only testable skills are included. While recognizing there are numerous, acceptable ways to perform these tasks, each of these individual procedures are used for the manual skills exam to allow a consistent and objective test result. Textbooks should be consulted for untested skills.

Key points to remember:

- **Critical Items are bolded and asterisked (*). You cannot miss any critical items during the skill test.**
- **Decontamination of hands immediately before and after gloving is an important infection control issue.**
- **The person's privacy and safety as well as infection control must be maintained throughout the entire procedure. These are always critical steps.**
- **You can miss a limited number of items that are not critical. You must know the entire procedure!**
- **Testing is done as one scenario. Pre-steps are to be done once at the beginning of the scenario. Post-steps are done one time following completion of the scenario.**
- **You are required to wash your hands as a skill at the beginning of testing. You will be expected to use hand sanitizer at other appropriate times throughout the test.**

Pre-steps:

- a. Knock
- b. Introduce self
- c. **Identify the person***
- d. **Provide privacy***

Handwashing:

1. Must be done before care is started.
2. Turn on water and adjust temperature.
3. Wet hands and wrists with fingertips pointing downward.
4. **Apply soap to hands and wrists, enough to produce a soapy lather.***
5. Rub hands together in a circular motion.
6. Interlace fingers and rub back and forth.
7. Rub back of hands and wrists.
8. **Entire process of scrubbing should take at least 20 seconds.***
9. Clean nails by running them over soap lathered palm of opposite hand.
10. Rinse wrists and hands, keeping them pointed down.
11. Dry hands with clean dry paper towel keeping finger tips pointed up.
12. Discard towel.
13. **Turn off faucet with a new, clean dry paper towel.***
14. Discard towel without contaminating clean hands.

Checking a Radial Pulse:

1. Assemble equipment.
2. **Explain procedure***
3. Place the person in comfortable position with arm well-supported.
4. **Place tips of first two or three fingers (not thumb) over radial artery on thumb side of the person's wrist.***
5. **When pulse is felt, count for 1 minute (or 30 seconds and multiply x 2).***
Pulse must be within 4 beats per minute of the instructor.*

Counting Respirations:

1. Do not indicate to the person that you are counting respirations.
2. **Observe rise and fall of the person's chest and count respirations in one minute (or 30 seconds and multiply x 2).***
3. Note rhythm and characteristics of breathing.
Respirations must be within 2 respirations of the instructor.*

Measuring Blood Pressure

1. Clean ear pieces and diaphragm of stethoscope with alcohol.
2. **Explain procedure***
3. Place person in comfortable position with arm well supported.
4. **Wrap cuff around arm, position 1-2 inches above elbow.***
5. **Center arrow of cuff over brachial artery.***
6. **Place stethoscope in ears and place diaphragm over brachial artery site.***
7. Pump cuff up.
8. **Open valve slowly and release pressure in cuff steadily and gradually.***
(Note: If beat is heard immediately, release all the air and let the arm rest for 30 sec. Then re-pump to 20mmHg higher. Again listen for the first and last beat.)
Readings must be within 6 mmHg of the instructor.*
9. Record your findings.
10. Remove the cuff and make the person comfortable.
11. Clean and put equipment away.

Post-steps:

- a. **Place call light within reach***
- b. **Ensure comfort***
- c. **Lower bed***
- d. **Lower side rails per care plan***
- e. **Wash hands***
- f. **Document***

Undressing and Dressing a Person Who has Limited Use of Limbs:

Note: During testing you will dress a person with limited use of limbs.

1. Pre-steps:
 - e. Knock
 - f. **Wash hands***
 - g. Introduce self
 - h. **Identify the person***
 - i. **Provide privacy***
 - j. **Explain procedure***
2. Provide clothing or assist with selection.
3. Assist person to a supine or sitting position.
4. If in supine position, raise side rails or have two care givers to provide person's safety, and raise bed to a level for best body mechanics.
5. If used, lower side rail on the side you are working on.
6. **If person has affected side, begin undressing on strong side first.***
7. Remove person's upper clothing by pulling off one arm sleeve at a time.
8. Remove person's lower clothing by lowering pants to the knees, then pulling off one pant leg at a time.
9. Place removed clothing properly for laundry or reuse.
10. **If person has affected side, begin dressing with affected side first.***
11. Assist with underclothing as needed.
12. Undo all fasteners of clothing to be put on.
13. Assist person to put on pants:
 - a. Gather one pant leg on affected side. Lift person's leg at ankle and pull pant leg over person's foot and leg up to the knee.
 - b. Repeat for other leg.
 - c. Pull pants up legs as far as possible.
 - d. Have the person lift buttocks or roll to the side to pull pants up to waist.
 - e. Fasten pants as needed.
14. Assist the person to put on top (opening at front):
 - a. Gather sleeve, grasp person's affected arm at wrist and slide sleeve over arm.
 - b. Have the person roll away from you and tuck garment beneath person's back.
 - c. Have the person roll towards you and pull garment out from under them.
 - d. Gather next sleeve and place over the person's other arm.
 - e. Adjust garment and fasten as needed.
15. Assist the person to put on top (pullover):
 - a. **Place the person's hands in sleeves, starting with weak side.***
 - b. Pull garment up arms.
 - c. Carefully pull neck opening over the person's head.
 - d. Pull garment down over trunk, adjust and fasten.
16. Assist the person to put on foot wear:
 - a. Carefully pull stockings onto feet.
 - b. Put on shoes or slippers.
17. Place used clothing in a laundry bag.

18. Post-steps:

- a. **Place call light within reach***
- b. **Ensure comfort***
- c. **Lower bed***
- d. **Lower side rails per care plan***
- e. **Wash hands***
- f. **Document***

Making an Unoccupied Bed (Closed)

1. Pre-steps:
 - a. Knock
 - b. **Wash hands***
2. Assemble linen and place it in a clean, convenient location.
3. Raise bed to a level for best body mechanics.
4. **Do not shake linens at any time throughout the procedure.***
5. Loosen top linens from foot of bed and place spread in laundry bag or in clean location if it will be reused.
6. Remove soiled linen. Place in laundry bag.
7. Unfold clean bottom sheet and place on bed so that sheet's hem stitching is toward mattress.
8. Anchor the sheet over mattress corners on the side nearest you.
9. Place cotton turn/lift sheet and bed protector in the middle of the bed, if used.
10. Unfold clean top sheet and place so that the center is in middle of the bed. Open the sheet but do not tuck it in. The hem stitching should be to the outside and even with the top of the mattress.
11. (Optional) Place the blanket on the bed so that center crease is in the middle, upper hem is 6-8 inches from top of bed and open blanket on your side of bed.
12. Place bedspread on top of the blanket in the same manner, making sure it is even and covers the other linen.
13. Tuck bedspread, blanket, and top sheet together smoothly and tightly at the bottom bed corner near you and make a mitered corner.
14. Go to the other side and pull the bottom sheet over the corners of the bed.
15. If used, pull turn/lift sheet tight and tuck it in.
16. Straighten all top linen from top to bottom and tuck them in at bottom and make a mitered corner.
17. Turn the top linen down about 6-8 inches at the head of the bed to make room for the pillow.
18. **Assure there are no wrinkles.***
19. Change the pillowcase without contaminating it.
20. Place the pillow at head of the bed so that the open end is away from the door and the seam is toward the head of bed.
21. Post-steps:
 - a. **Place call light within reach***
 - b. **Ensure comfort***
 - c. **Lower bed***
 - d. **Lower side rails per care plan***
 - e. **Wash hands***
 - f. **Document***

Making an Occupied Bed

1. Pre-steps:
 - a. Knock
 - b. **Wash hands***
 - c. Introduce self
 - d. **Identify the person***
 - e. **Provide privacy***
 - f. **Explain procedure***
2. Assemble linen and place it in a clean, convenient location.
3. **Raise side rails or have two care givers to provide person's safety.***
4. Raise bed to a level for best body mechanics.
5. Lower head of bed to make bed as flat as the person can tolerate.
6. If used, lower side rail on the side you are working on.
7. **Do not shake linens at any time throughout the procedure.***
8. Loosen top linens from foot of bed and place spread in laundry bag or in clean location if it will be reused.
9. **Provide privacy with top sheet or bath blanket and position the person on his/her side facing away from you and toward raised side rail or second care giver.***
10. Place pillow for comfort.
11. Loosen the bottom linens, roll soiled linens toward the person and tuck under them.
12. Place clean bottom sheet on mattress so that stitching is away from the person, pull nearest corners into place and tuck remaining sheet under person. Smooth any wrinkles.
13. If used, place the cotton turn/lift sheet on the middle portion of the bed, tuck under the person and smooth any wrinkles.
14. **Raise side rail. Go to other side of bed and lower side rail, or trade places with other caregiver.* (Note: In a facility, the other care giver would typically perform the rest of the steps.)**
15. Assist the person to roll toward the opposite side of the bed.
16. Adjust pillow for comfort and provide privacy.
17. Remove bottom linen and place in laundry bag.
18. Pull clean bottom sheet toward you, pull corners into place and smooth any wrinkles.
19. Pull turn/lift sheet toward you and tuck under mattress.
20. Smooth any wrinkles.
21. Position the person in supine position in the middle of the bed and adjust pillow.
22. Unfold clean top sheet without shaking it and place it on top of the used sheet so that the center is in middle of the bed, but do not tuck in.
23. The hem stitching should be to the outside and even with the top of the mattress without covering the person's face.
24. Have the person hold top sheet or tuck it under the person's shoulders.
25. **Remove privacy cover without exposing the person.***
26. Place bedspread evenly on bed and unfold to cover the person, the other linen, and is even on both sides of the bed.
27. Avoid covering the face and pull the top linen up to the shoulder/chin (as the person desires) then fold the excess back down, making a smooth cuff.

28. Tuck top linens together at the bottom of the bed and make a mitered corner.
29. **Raise side rail. Go to other side of bed and lower side rail, or trade places with other caregiver.***
30. Smooth the top linens over the person.
31. Tuck top linens together at the bottom of the bed and make a mitered corner.
32. Assure the linens are loose enough so that the person's feet have room to move.
33. **Assure there are no wrinkles.***
34. Change the pillowcase without shaking or contaminating it.
35. Place the pillow at head of the bed so that the open end is away from the door and the seam is toward the head of bed.
36. Clean and put equipment away. Place remaining used linen in a laundry bag.
37. Post-steps:
 - a. **Place call light within reach***
 - b. **Ensure comfort***
 - c. **Lower bed***
 - d. **Lower side rails per care plan***
 - e. **Wash hands***
 - f. **Document***

Application of Anti-embolic Stocking

Note: During testing you will apply only one stocking on a weak leg.

1. Obtain stocking.
2. Pre-steps:
 - a. Knock
 - b. **Wash hands***
 - c. Introduce self
 - d. **Identify the person***
 - e. **Provide privacy***
 - f. **Explain procedure***
3. Raise bed to a level for best body mechanics.
4. If used, lower side rail on the side you are working on.
5. Have the person lying supine in bed.
6. **Expose only the leg used for placement of the stocking.***
7. Grasp stocking from top and turn inside out to the ankle or bunch with right side out.
8. Slide stocking over toes, foot and heel.
9. Ensure the stocking is seam side out and the heel is positioned correctly.
10. Re-grasp remaining portion of stocking and pull stocking up to knee or thigh, depending on the length of the stocking.
11. Release stocking gently. Do not snap.
12. **Ensure stockings are smooth and wrinkle free.***
13. Post-steps:
 - a. **Place call light within reach***
 - b. **Ensure comfort***
 - c. **Lower bed***
 - d. **Lower side rails per care plan***
 - e. **Wash hands***
 - f. **Document***

Assisting a Person with Eating

1. Pre-steps:
 - a. Knock
 - b. **Wash hands***
 - c. Introduce self
 - d. **Identify the person***
 - e. **Explain procedure***
2. **Before delivery, check tray with dietary card to make sure meal is correct.***
3. Assure the person is in a safe, comfortable sitting position.
4. Assist the person with hand hygiene.
5. Place tray on table in front of the person.
6. Offer napkin or clothing protector per care plan/facility policy, to go across the person's chest.
7. Open containers and prepare food. Avoid touching food with fingers unless gloves are worn.
8. Inform the person about food on tray.
9. Serve food as required/requested by the person.
10. Make eating as pleasant as possible by:
 - a. Checking with the person about food temperature.
 - b. Serving small amounts from tip of spoon.
 - c. Offering straws for fluids.
 - d. Alternating solids and liquids.
 - e. Not rushing.
 - f. Communicating.
11. **Observe the person for signs of choking.***
If choking, respond:*
 - a. **Stop offering food or fluid.***
 - b. **Ask if they are OK.***
 - c. **Encourage hard coughing.***
 - d. **Offer sips of fluid when airway is clear.***
 - e. **Report choking to the nurse.***
12. Encourage food intake but do not force.
13. Be sure the person's mouth is clear of food and face is clean during and after feeding.
14. Remove clothing protector, if used, and assist the person with hand hygiene.
15. **Record intake of fluid and percent of meal eaten.***
16. Clean and put equipment away. Place used linen/towels in a laundry bag.
17. Post-steps:
 - a. **Place call light within reach***
 - b. **Ensure comfort***
 - c. **Lower bed***
 - d. **Lower side rails per care plan***
 - e. **Wash hands***
 - f. **Document***

Body Mechanics

1. Assess weight of load and need for assistive device.
2. **Demonstrate proper body alignment, including:***
 - a. **Wide base of support, feet shoulder width apart.***
 - b. **Back straight – do not bend at the waist.***
3. Position body close to and facing object to be moved.
4. **Bend from hips and knees, keeping back in alignment.***
5. Use large muscles (gluteal, shoulders, upper arms and thighs) to lift the object.
6. Use both hands and arms to lift, move, or carry heavy items.
7. **Carry item close to body.***
8. Do not lift object higher than chest level.
9. **Move feet and turn the whole body when changing direction (NO TWISTING).***
10. Work with smooth movements, no jerky or sudden moves.
11. Set objects on edge of table and push to center.

Cleaning Dentures

Note: During testing you will clean upper denture only.

1. Assemble equipment.
2. Pre-steps:
 - a. Knock
 - b. **Wash hands***
 - c. Introduce self
 - d. **Identify the person***
 - e. **Provide privacy***
 - f. **Explain procedure***
3. Assure the person is in a safe, comfortable sitting position.
4. Spread towel across the person's chest.
5. **Decontaminate hands and put on gloves.***
6. Ask the person to remove his/her dentures. Assist if needed.
7. Place dentures in a safe sanitary container.
8. Transport them to the sink.
9. Line bottom of sink with wash cloth/paper towel.
10. Rinse each denture under cool running water.
11. Use toothpaste or denture cleanser to clean the dentures.
12. **With dentures in your hand, brush all surfaces until they are clean.***
13. **Rinse dentures thoroughly under cool running water.***
14. Place dentures in a clean denture cup, labeled with the person's name and filled with cool water.
15. Cover the cup to transport back to the person.
16. Assist the person with oral hygiene. Provide oral hygiene by:
 - a. Cleaning upper and lower gums using moistened foam-tipped applicator.
 - b. Offering the person a cup of water to rinse mouth.
 - c. Providing emesis basin or disposable cup to use for spitting.
17. Have the person replace the dentures in his/her mouth, if desired. If not, store in person's nightstand or sink countertop. Dentures must be in water or in a denture soaking solution.
18. Leave the area around the person's mouth clean and dry when care is completed.
19. **Remove gloves and decontaminate hands.***
20. Clean and put equipment away. Place used linen/towels in a laundry bag.
21. Post-steps:
 - a. **Place call light within reach***
 - b. **Ensure comfort***
 - c. **Lower bed***
 - d. **Lower side rails per care plan***
 - e. **Wash hands***
 - f. **Document***

Perineal Care-Female

Note: Some facilities may use pre-moistened cloths or special solutions. Use as directed.

1. Assemble equipment.
2. Pre-steps:
 - a. Knock
 - b. **Wash hands***
 - c. Introduce self
 - d. **Identify the person***
 - e. **Provide privacy***
 - f. **Explain procedure***
3. **Raise side rails or have two care givers to provide person's safety.***
4. Raise bed to a level for best body mechanics.
5. If used, lower side rail on the side you are working on.
6. **Decontaminate hands and put on gloves.***
7. Assist the person to a supine position and cover the person with bath blanket/sheet.
8. Pull top linens to foot of bed without exposing the person.
9. Position the person on her back.
10. Place waterproof pad or towel under her buttocks.
11. **Drape the person so as to provide privacy. Uncover just enough of the perineal area to provide care.***
12. May use peri wipes, peri wash or soap and water. If using soap and water fill the wash basin with water, making sure the temperature is comfortable.
13. **Separate labia with thumb and forefinger, with moist soaped washcloth, gently wash down one side of the labia, from front to back (urinary meatus to vagina), change to clean area of wash cloth and wash down other side of the labia.***
14. Repeat until clean in the same manner.
15. Rinse and pat dry in the same manner if using soap and water.
16. Wash pubic and groin area.
17. Rinse and pat dry if using soap and water.
18. Help lower person's legs.
19. **While maintaining privacy turn the person onto her side; facing away from you (toward a raised side rail or the other care giver).***
20. Wash buttocks. Rinse and pat dry if using soap and water.
21. **Clean the rectal area from front to back (vagina to anus). Change to clean area of wash cloth with each stroke.***
22. Rinse and pat dry the rectal area in the same manner, if using soap and water.
23. Remove waterproof pad/towel.
24. **Remove gloves and decontaminate hands.***
25. Place incontinent pad per care plan.
26. Return person to position of comfort.
27. **Replace linens and remove drape while maintaining privacy.***
28. Clean and put equipment away. Place used linen/towels in a laundry bag.

29. Post-steps:

- a. **Place call light within reach***
- b. **Ensure comfort***
- c. **Lower bed***
- d. **Lower side rails per care plan***
- e. **Wash hands***
- f. **Document***

Giving a Backrub

1. Assemble equipment.
2. Pre-steps:
 - a. Knock
 - b. **Wash hands***
 - c. Introduce self
 - d. **Identify the person***
 - e. **Provide privacy***
 - f. **Explain procedure***
3. **Raise side rails or have two care givers to provide person's safety.***
4. Raise bed to a level for best body mechanics.
5. If used, lower side rail on the side you are working on.
6. Position the person in side-lying or prone position, towards raised side rail or the other caregiver.
7. **Expose the back and buttocks, keeping the rest of the body covered.***
8. During the care, observe the person's skin for any redness, rash, sores or cuts. Do not massage over open area. Report any redness, rash, sores or cuts to the nurse.
9. Warm a small amount of lotion in your hands.
10. Begin at the base of the spine; rub up the center of the back to the neck with firm pressure.
11. Using long soothing strokes move around the shoulders and down the sides of the back.
12. Rub down over the buttocks and circle back to starting point.
13. Repeat this motion 4 times.
14. Continue with firm upward and downward strokes rubbing with smaller circular motions over entire back, shoulders, shoulders blades, hips and coccyx.
15. Repeat this motion 4 times.
16. Complete back rub with up and down motions over the entire back.
17. Straighten bed linen.
18. Clean and put equipment away. Place used linen/towels in a laundry bag.
19. Post-steps:
 - a. **Place call light within reach***
 - b. **Ensure comfort***
 - c. **Lower bed***
 - d. **Lower side rails per care plan***
 - e. **Wash hands***
 - f. **Document***

Side-lying Position

1. Assemble equipment.
2. Pre-steps:
 - a. Knock
 - b. **Wash hands***
 - c. Introduce self
 - d. **Identify the person***
 - e. **Provide privacy***
 - f. **Explain procedure***
3. **Raise side rails or have two care givers to provide person's safety.***
4. Raise bed to a level for best body mechanics.
5. If used, lower side rail on the side you are working on.
6. Lower head of bed.
7. Assist the person to move to the edge of the bed closest to you.
8. Turn the person onto side (facing side rail or the other care giver).
9. Place support pillow behind person's back and tuck underneath.
10. Raise side rail. Go to other side of bed and lower side rail, or trade places with other caregiver.
11. Position pillow to support head and neck in level position.
12. **Adjust lower shoulder to prevent direct body pressure upon it.***
13. Straighten lower leg.
14. **Flex upper leg and place in front of lower leg on pillow or pillows to prevent contact with lower leg. Support leg level from hip to foot.***
15. Position lower arm with elbow flexed and palm up, or with elbow straight and arm alongside of body.
16. **Support upper arm with pillow, in front of body.***
17. Post-steps:
 - a. **Place call light within reach***
 - b. **Ensure comfort***
 - c. **Lower bed***
 - d. **Raise side rail on side resident is facing, as per care plan.***
 - e. **Wash hands***
 - f. **Document***

Range of Motion Exercises

Note: During testing you will do Range of Motion on one side only.

1. Pre-steps:
 - a. Knock
 - b. **Wash hands***
 - c. Introduce self
 - d. **Identify the person***
 - e. **Provide privacy***
 - f. **Explain procedure***
2. Raise bed to a level for best body mechanics.
3. **Place person in a supine position in the middle of the bed.***
4. **Assure person is in the middle of the bed to provide for their safety.***
5. **Move each joint slowly, always supporting the part being exercised. Never go beyond the person's joint resistance.***
6. **Cover person to maintain their privacy throughout procedure, exposing only the area being worked on.***
7. Shoulder Flexion and Extension – Holding the person's wrist and elbow, raise the arm straight in front and overhead, then bring arm down to side-repeat 3 times.
8. Shoulder Abduction and Adduction – Holding the person's wrist and elbow, move straight arm away from the side of the body then back to the side-repeat 3 times.
9. Elbow Flexion and Extension – Holding the person's wrist and elbow alongside the body, bend elbow so hand touches shoulder, straighten the arm-repeat 3 times.
10. Forearm Supination and Pronation – With arm alongside body, bend elbow to 90 degrees. Turn forearm so palm faces head of bed, then so palm faces foot of bed-repeat 3 times.
11. Wrist Flexion and Extension –hold the person's wrist and hand, bend the persons hand up and down at the wrist- repeat 3 times.
12. Ulnar and Radial Deviation - bend the person's hand at wrist from side to side-repeat 3 times.
13. Straight Leg Raises – Supporting the lower calf and back of knee, keep knee straight and raise leg off bed, then return to bed-repeat 3 times.
14. Hip Abduction and Adduction – Supporting leg at ankle and knee, with knee pointing up, draw leg out to side, then back to touch other leg—repeat 3 times.
15. Hip/Knee Flexion and Extension – Supporting leg at foot/heel and calf bend knee to chest and then straighten leg back onto bed-repeat 3 times.
16. Ankle Dorsiflexion and Plantar Flexion – Supporting heel, bend foot so that toes point to head then down towards foot of bed-repeat 3 times.
17. Foot Supination and Pronation – Turn sole of foot inward, then sole of foot outward-repeat 3 times.
18. Repeat on other side as directed by care plan.
19. Cover the person with top linens.

20. Post-steps:

- a. **Place call light within reach***
- b. **Ensure comfort***
- c. **Lower bed***
- d. **Lower side rails per care plan***
- e. **Wash hands***
- f. **Document***

Ambulation of a Person Using a Transfer Belt

1. Assemble equipment.
2. Pre-steps:
 - a. Knock
 - b. **Wash hands***
 - c. Introduce self
 - d. **Identify the person***
 - e. **Explain procedure***
3. Know the distance to be walked.
4. Assure bed wheels are locked.
5. Assist the person to a sitting position on the edge of the bed.
6. **Assure the person is wearing non slip footwear and appropriate clothing.***
7. **With person seated, apply gait belt snugly around person's waist.***
8. Position the person's feet shoulder width apart, flat on the floor with slightly bent knees.
9. Have the person prepare to push up by placing their hands on the bed.
10. **Using good body mechanics, grasp gait belt with both hands, equal distance apart, and assist the person to stand.***
11. **Position self slightly behind and to the person's side, holding the belt at the side and back.***
12. Allow the person to begin walking. Ambulate in step with him/her.
13. Cue the person to use good posture, looking ahead and to walk without shuffling.
14. Monitor the person's tolerance.
15. Assist the person to a comfortable position when ambulation is completed.
16. Remove gait belt.
17. Put equipment away.
18. Post-steps:
 - a. **Place call light within reach***
 - b. **Ensure comfort***
 - c. **Lower bed***
 - d. **Lower side rails per care plan***
 - e. **Wash hands***
 - f. **Document***

Assisting a Person with an Affected Side into a Wheelchair/Chair

1. Assemble equipment.
2. Assure wheelchair is in good repair.
3. Pre-steps:
 - a. Knock
 - b. **Wash hands***
 - c. Introduce self
 - d. **Identify the person***
 - e. **Provide privacy***
 - f. **Explain procedure***
4. Place foot pedals in up position and to the side, or remove from wheelchair.
5. Assist the person to a sitting position on the edge of the bed.
6. **Assure the person is wearing non slip footwear and appropriate clothing.***
7. **With the person seated, apply gait belt snugly around the person's waist.***
8. **Position wheelchair/chair near and parallel, or slightly angled, to the bed on person's strongest side.***
9. **Lock the wheelchair brakes.***
10. Position the person's feet shoulder width apart, flat on floor with slightly bent knees.
11. Have the person prepare to push up with their strong hand by placing that hand on the bed.
12. **Using good body mechanics, grasp gait belt with both hands, equal distance apart, and assist the person to stand.***
13. When balanced, adjust your footing and assist the person to pivot (ball of foot remains stationary) until aligned with the wheelchair/ chair.
14. Have the person reach back and grasp the arm of the chair.
15. Assist the person to slowly lower self to a comfortable sitting position.
16. Replace foot pedals on wheel chair if the person requests and unlock wheelchair brakes.
17. Remove gait belt.
18. Post-steps:
 - a. **Place call light within reach***
 - b. **Ensure comfort***
 - c. **Wash hands***
 - d. **Document***

Indwelling Catheter Care - Female

Note: Some facilities may use pre-moistened cloths or special solutions. Use as directed.

1. Assemble equipment.
2. Pre-steps:
 - a. Knock
 - b. **Wash hands***
 - c. Introduce self
 - d. **Identify the person***
 - e. **Provide privacy***
 - f. **Explain procedure***
3. **Raise side rails or have two care givers to provide person's safety.***
4. Raise bed to a level for best body mechanics.
5. If used, lower side rail on the side you are working on.
6. **Decontaminate hands and put on gloves.***
7. Assist the person to a supine position and cover the person with bath blanket/sheet.
8. Pull top linens to foot of bed without exposing the person.
9. Place waterproof pad or towel under her buttocks.
10. **Drape the person so as to provide privacy. Uncover just enough of the perineal area to provide care.***
11. May use peri wipes, peri wash or soap and water. If using soap and water fill the wash basin with water, making sure the temperature is comfortable.
12. **Separate labia with thumb and forefinger, with moist soaped washcloth, gently wash down one side of the labia, from front to back (urinary meatus to vagina), change to clean area of wash cloth and wash down other side of the labia.***
13. Repeat until clean in the same manner.
14. Rinse and pat dry in the same manner if using soap and water.
15. **Anchoring catheter between two fingers, wash from meatus down catheter tubing four inches, with clean part of washcloth. Rinse with clear water in the same manner you washed.***
16. Wash pubic and groin area.
17. Rinse and pat dry if using soap and water.
18. Help lower person's legs.
19. Assure catheter tubing is secured to upper thigh by appropriate means, positioned for drainage and attached to the bed frame.
20. **While maintaining privacy turn the person onto her side; facing away from you (toward a raised side rail or the other care giver).***
21. Wash buttocks. Rinse and pat dry if using soap and water.
22. **Clean the rectal area from front to back (vagina to anus). Change to clean area of wash cloth with each stroke.***
23. Rinse and pat dry the rectal area in the same manner, if using soap and water.
24. Remove waterproof pad/towel.
25. **Remove gloves and decontaminate hands.***
26. Place incontinent pad per care plan.
27. Return person to position of comfort.
28. **Replace linens and remove drape while maintaining privacy.***

29. Clean and put equipment away. Place used linen/towels in a laundry bag.

30. Post-steps:

- a. **Place call light within reach***
- b. **Ensure comfort***
- c. **Lower bed***
- d. **Lower side rails per care plan***
- e. **Wash hands***
- f. **Document***

Giving a Bed Bath

Note: May use disposable wash cloths.

Note: Sequence of washing is not important as long as eyes are cleaned first and perineum is cleaned last.

Note: During testing you will be expected to deliver a partial bath which includes washing face, ears, neck, chest, one arm, hand, and axilla area.

1. Assemble equipment (water should be appropriate temperature).
2. Pre-steps:
 - a. Knock
 - b. **Wash hands***
 - c. Introduce self
 - d. **Identify the person***
 - e. **Provide privacy***
 - f. **Explain procedure***
3. Fill basin with warm water if not bathing with disposable wash cloths. Change water if it becomes cool.
4. **Raise side rails or have two care givers to provide person's safety.***
5. Raise bed to a level for best body mechanics.
6. Adjust the bed to a comfortable position.
7. Lower side rail on the side you are working on.
8. Remove bedspread and place bath blanket over top sheet.
9. **Remove top sheet from under the bath blanket without uncovering the person.***
10. Remove the person's gown.
11. Place a towel over the person's chest.
12. Decontaminate hands. If person or care provider has any open skin areas don gloves according to standard precautions.
13. **Wash the eyes (no soap) from the nose toward the ear, using a different area of the washcloth for each stroke.***
14. Wash and rinse the face, ears, and neck. (Do not use soap on face area unless requested).
15. Pat all areas dry.
16. Leaving the towel on the chest, reach under the towel and fold the bath blanket to the waist.
17. Lifting the towel one part at a time, wash, rinse and pat dry the chest (observe under person's breasts for redness).
18. Wash the abdomen and navel, rinse and pat dry.
19. **Cover the chest and abdomen with bath blanket and remove the towel from the chest without exposing the person.***
20. Place a towel lengthwise under the arm nearest you. Wash, rinse and pat dry the hand, arm, axilla and shoulder.
21. Turn the person on their side, facing away from you and towards the raised side rail or the other care giver.
22. Place a towel on the bed against their back and wash, rinse and pat dry the back and back of the neck.
23. Reposition the person on their back.

24. Place bath towel lengthwise under leg nearest you and wash, rinse and pat dry leg and foot.
25. **Raise the side rail or trade places with other care giver.***
26. Rinse bath basin and refill with clean water.
27. Go to other side of bed and lower side rail, or trade places with other care giver.
28. Repeat steps 19 and 23.
29. Provide perineal care. (See check sheet)
30. **If gloves were used, remove gloves and decontaminate hands.***
31. Assist the person to dress and groom.
32. **Replace linen and remove drape while maintaining privacy.***
33. Clean and put equipment away. Place used linen/towels in a laundry bag.
34. Post-steps:
 - a. **Place call light within reach***
 - b. **Ensure comfort***
 - c. **Lower bed***
 - d. **Lower side rails per care plan***
 - e. **Wash hands***
 - f. **Document***

Helping a Person to the Commode

1. Assemble equipment.
2. Pre-steps:
 - a. Knock
 - b. **Wash hands***
 - c. Introduce self
 - d. **Identify the person***
 - e. **Provide privacy***
 - f. **Explain procedure***
3. Assure bed wheels are locked.
4. Position commode within easy reach.
5. Assist the person to a sitting position on the edge of the bed.
6. **Assure the person is wearing non slip footwear and appropriate clothing.***
7. **With the person seated, apply gait belt snugly around the person's waist.***
8. Position commode near and parallel, or slightly angled, to the bed. Lock wheels of commode.
9. Position the person's feet shoulder width apart, flat on floor with slightly bent knees.
10. Decontaminate hands and put on gloves.
11. Have the person prepare to push up with their hands by placing them on the bed.
12. **Using good body mechanics, grasp gait belt with both hands, equal distance apart, and assist person to stand.***
13. When balanced, adjust your footing and assist the person to pivot (ball of foot remains stationary) until aligned with the commode.
14. Have the person reach back and grasp the arm of the commode.
15. Move clothing out of the way (pull down pants).
16. Have the person lower self slowly to comfortable seated position.
17. Assure warmth with robe or blanket.
18. Place toilet tissue within reach.
19. **Place call light within reach. Ask the person to call when ready or if assistance is needed.***
20. Remove gloves and decontaminate hands.
21. Leave room if the person's condition allows.
22. When person signals, return promptly to assist.
23. **Decontaminate hands and put on gloves.***
24. Assist the person with hand hygiene.
25. **Provide perineal/anal care (clean from urinary meatus to anus).***
26. **Make sure the person is safe, then remove gloves and decontaminate hands.***
27. Reposition clothing.
28. Assist the person to the bed.
29. Remove footwear and transfer belt.
30. **Decontaminate hands and put on gloves.***
31. Cover and remove container from commode.
32. Empty it into the toilet, note contents and measure output per care plan.
33. Clean/disinfect container per policy.
34. Replace container in commode.

35. Clean commode.
36. **Remove gloves and decontaminate hands.***
37. Return commode and other supplies to appropriate area.
38. Post-steps:
 - a. **Place call light within reach***
 - b. **Ensure comfort***
 - c. **Lower bed***
 - d. **Lower side rails per care plan***
 - e. **Wash hands***
 - f. **Document***

Hair Brushing/Combing

1. Pre-steps:
 - a. Knock
 - b. **Wash hands***
 - c. Introduce self
 - d. **Identify the person***
 - e. **Provide privacy***
 - f. **Explain procedure***
2. Assemble the person's brush or comb.
3. Assist the person to sitting or Fowler's position.
4. If hair is tangled, separate small lock of hair and grasp it firmly with one hand to prevent pulling on scalp. Begin brushing or combing from bottom of lock toward scalp as tangles are removed.
5. After tangles are out, or if hair is not tangled, brush or comb from scalp to hair ends.
6. If hair is kinky or curly, a pic style comb may be used to gently comb hair.
7. Arrange hair in style preferred by the person.
8. Clean and put equipment away. Place used linen/towels in a laundry bag.
9. Post-steps:
 - a. **Place call light within reach***
 - b. **Ensure comfort***
 - c. **Lower bed***
 - d. **Lower side rails per care plan***
 - e. **Wash hands***
 - f. **Document***

Charting

1. **Use black/blue ink in all charting.***
2. **Mark vital signs in appropriate space.***
3. **If required mark intake and output in % and cc or ml.***
4. **Initial all skills you performed.***
5. Chart that you informed the nurse if you noticed any areas of concern or change in the person's condition and what those areas were. Be specific.
6. If error occurs, use one line to cross out and then initial the change.
7. **Initial, sign the bottom of the form with your full first name, last name, title (NA), and date.***
8. Use electronic documentation per facility policy.

Idaho Nurse Aide Skill Testing Daily Charting Sheet

Be sure to mark all cares that you have performed. Sign, initial, and date where appropriate.

Client Name: _____

Daily Care	Initials	Comments
Dressing/Undressing		
Linen Change-Bed Making		
Body Mechanics		
Anti-Emboloc Stocking Application		
Meal Feeding Assistance % of meal eaten: _____ cc's of intake: _____		
Oral Care/Denture Care		
Bed Bath		
Indwelling Catheter Care		
Perineal Care		
Backrub		
Positioning in bed		
Range of Motion		
Ambulation		
Toileting		
Transfer		
Groom Hair		
Vital Signs B/P: _____ Pulse: _____ Respirations: _____		

Initials

Nurse's Assistant Signature

Title

Date