

KENTUCKY MEDICAID NURSE AIDE

Testing Procedures Manual and Study Guide

7/1/2023 version rev.

KCTCS

Kentucky Community and Technical College System

Table of Contents

INTRODUCTION 4

NURSE AIDE WEBSITE 4

MEDICAID NURSE AIDE TEST COORDINATORS..... 5

OBRA 6

COMPETENCY EVALUATION 6

REIMBURSEMENTS 7

RECORDS..... 7

POST-TEST SURVEY 8

NURSE AIDE COMPETENCY GRADE APPEAL PROCESS 8

CURRICULUM CROSS-WALKS 8

KENTUCKY MEDICAID NURSE AIDE TEST BLUEPRINT..... 8

TIPS FOR THE WRITTEN TEST 9

TIPS FOR THE SKILLS TEST 10

TEST ADMINISTRATION PROCEDURES 11

NOTIFICATION OF TEST SCORES..... 13

RENEWAL OF REGISTRATION 13

KRS 216.789 PROHIBITION AGAINST EMPLOYING CERTAIN FELONS 14

SKILLS LIST DOCUMENT 15

 Applying an Anti-embolic Stocking 16

 Bed Bath -Full 17

 Bed Making-Occupied..... 19

 Bed Making-Unoccupied/Closed-with fitted sheets 20

 Brief Change 21

 Catheter Care..... 22

 Clearing the Obstructed Airway - Conscious Adult 23

 Denture Care - Cleaning Upper or Lower Denture..... 24

 Donning and Doffing PPE 25

 Dressing Resident w/an Affected (Weak) Side 26

 Feeding a Dependent Resident..... 27

 Giving Nail Care 28

 Giving the Bedpan..... 29

 Hand Hygiene 30

 Measure & Record Output..... 31

 Partial Bed Bath: Face and One Arm Hand and Underarm..... 32

 Passive Range of Motion Exercise for One Shoulder 33

Passive Range of Motion for One Hip 34

Range of Motion Exercises -Elbow..... 35

Range of Motion Exercises- Wrist 36

Perineal Care for a Female 37

Perineal Care for Male 39

Position Resident in Bed on Side / Lateral..... 40

Provide Oral Care to the Unconscious Resident..... 41

Resident Positioning and Alignment- Fowler's..... 42

Resident Positioning and Alignment-Supine..... 43

Shaving the Person's Face with a Safety Razor 44

Transfer Resident from Bed to Wheelchair using a Gait Belt 45

Transfer Resident from Wheelchair to a Bed..... 46

Vital Signs: Count and Record Resident's BP, Radial Pulse and Respirations (P&R)..... 47

INTRODUCTION

This handbook is designed to provide nurse aide test candidates and nurse aide educators with general information about Kentucky's Nurse Aide Testing Program (KNAT). Any questions relating to the information in this handbook may be addressed to your local Medicaid Nurse Aide Coordinator.

There are three approved texts for the nurse aide training program. Each of the following textbooks and workbooks must be used in its most recent edition:

- Mosby's Textbook for Long-Term Care Nursing Assistants
- Hartman Publishing: Nursing Assistance Care: The Basics
- American Health Care Association (AHCA): How to be a Nurse Assistant

The competency evaluation is based on these texts. Each LTC facility-based nurse aide trainee shall acquire an individual copy of an approved text and workbook and shall not be charged for any portion of the costs incurred including books and the competency exam.

Regardless of which textbook is used, the skills will be evaluated as written in this study guide. It is highly recommended that you refer to the study guide throughout your training to ensure you are covering all steps, but especially critical criteria as notated with an asterisk (*).

This study guide is not intended to be viewed as the only correct way to complete a task. However, it is to be used as a guide for test candidates to demonstrate competency of a skill with an emphasis on safety and infection control. Points will be awarded or deducted based on each step of each skill as outlined in this study guide.

NURSE AIDE WEBSITE

The nurse aide website is located at <https://nurseaide.kctcs.edu>. This website contains valuable information for nurse aide students test candidates' instructors and facilities. This web address may be freely distributed.

The website contains but is not limited to such information as:

Nurse Aide Study Guide
Updates from the Publishers to the Textbooks
Medicaid Services Manual
Contact Information for the KNAT Regional Coordinators

Content is updated on a regular basis. Nurse Aide trainers are mandated to provide each student access to the most current version of the study guide at no charge. Test candidates will be tested using skills from the most recent study guide regardless of when training was completed. It is the test candidate's responsibility to check for updates and changes prior to testing.

Test candidates may schedule their assessment at any testing location. Test candidates are not mandated to use any particular testing facility regardless of where they received their training.

MEDICAID NURSE AIDE TEST COORDINATORS

West Kentucky Comm. & Tech College
4810 Alben Barkley Drive
Paducah KY 42002-7408
(270) 534-3888
wkctcnurseaide@kctcs.edu

Madisonville Community College
Health Campus
750 N. Laffoon Street
Madisonville KY 42431
(270) 824-1810
mccnurseaide@kctcs.edu

Owensboro Community & Technical College
4800 New Hartford Road
Owensboro KY 42301-3744
(270) 686-3797
octcnurseaide@kctcs.edu

Southcentral Kentucky Comm. & Tech
College
129 State Avenue
Glasgow KY 42141
(270) 901-1202
skynurseaide@kctcs.edu

Ashland Comm. & Tech College
1400 College Dr
Ashland KY 41101
(606) 326-2464
actcnurseaide@kctcs.edu

Big Sandy Comm. & Tech College
120 S. Riverfill Drive
Pikeville KY 41501
(606) 218-1256
bsctcnurseaide@kctcs.edu

Hazard Comm. & Tech College
101 Vo-Tech Drive
Hazard KY 41701
(606) 487-3382
hctcnurseaide@kctcs.edu

Southeast Kentucky Community & Tech
College Pineville Campus
10350 US HWY 25E
Pineville KY 40977
(606) 248-2159
skctcnurseaide@kctcs.edu

Elizabethtown Comm. & Tech. College
620 College Street Road
Elizabethtown KY 42701
(270) 706-8464
ectcnurseaide@kctcs.edu

Henderson Community College
2660 South Green St.
Henderson KY 42420
(270) 831-9734
henccnurseaide@kctcs.edu

Hopkinsville Community College
720 North Dr.
Hopkinsville KY 42240
(270) 707-3848
hopccnurseaide@kctcs.edu

Jefferson Community & Tech College
109 E. Broadway – HSH Room 450
Louisville KY 40202
(502) 213-3664
jctcnurseaide@kctcs.edu

Gateway Community & Technical College
Edgewood Campus
790 Thomas Moore Parkway
Edgewood KY 41017
(859) 442-1196
gctcnurseaide@kctcs.edu

Maysville Community & Technical College
1755 US Hwy. 68
Maysville KY 41056
(606) 759-7141 ext. 66257
mctcnurseaide@kctcs.edu

Somerset Community College
808 Monticello St.
Somerset KY 42501
(606) 451-6813
sccnurseaide@kctcs.edu

Bluegrass Community & Tech. College District
164 Opportunity Way
Lexington KY 40511-2623
(859) 246-6489
bctcnurseaide@kctcs.edu
*The Bluegrass District covers Lexington
Danville Lawrenceburg and Winchester*

MEDICAID NURSE AIDE TRAINING

OBRA

The nursing home reform provisions of the Omnibus Budget Reconciliation Act (OBRA) (42USC139 6 R) of 1987 established a requirement for a nurse aide training and competency evaluation program for nurse aides who are employed by nursing facilities. The Cabinet for Health and Family Services Department for Medicaid Services is the appointed regulatory authority.

A nurse aide is defined as any individual including a nursing student medication aide and one employed through a nursing pool providing nursing or nursing related services to facility residents who is not a licensed health professional or volunteer. There is a requirement for a registry of all individuals who have satisfactorily completed a nurse aide training and competency evaluation program or a nurse aide competency evaluation. The registry shall be established and shall be maintained by the Kentucky Board of Nursing.

In addition to the names of individuals having satisfactorily completed the nurse aide training and competency evaluation program the registry shall include information addressing any State findings concerning any individual resident abuse or neglect or misappropriation of resident's property and a brief statement (if any) by the aide disputing the findings.

COMPETENCY EVALUATION

The Kentucky Community and Technical College System (KCTCS) has responsibility for the final written or oral examination and the skills demonstration aspect of the competency evaluation.

The test questions are developed based on the state-approved curriculum with input from members of the Nurse Aide Training Advisory Committee. The test is validated by KCTCS to ensure its reflection of the material presented in the training. KCTCS also has responsibility to maintain the integrity of the test and the individual examinations.

The oral examination may be substituted for the written examination for persons with a documented limitation of literacy skills.

The skills-demonstration aspect of the examination must consist of a minimum performance of five (5) skills. These five (5) skills are randomly selected from a pool of evaluation items.

If a student has a disability, an alternate form of the test may be administered. The alternate form of the test must be requested by the nurse test candidate. This request must be submitted on the appropriate form obtained from your regional KNAT coordinator at least 2 weeks prior to the test date.

LATEX ALLERGY: If a student has a latex allergy, non-latex gloves may be requested by the nurse aide test candidate. This request must be submitted to the KNAT coordinator at least 2 weeks prior to the test date.

To satisfactorily complete the evaluation the student must:

1. Make a score of at least 70% on the 75 multiple-choice written examination; and

2. Must successfully demonstrate at least five (5) procedures under the observation of an examiner with 70% accuracy. Some steps on the procedures are considered critical. These steps must be performed with 100% accuracy. An asterisk has denoted these steps.

A test candidate who fails either part of the examination may reschedule to take the exam at the next available test date. If the test candidate fails the written test but passes the performance test, the candidate must repeat the written test only. If the test candidate fails the performance test but passes the written test, the test candidate is required to repeat the performance test including all five skills. An employed individual has only three (3) opportunities to pass the test within the initial four (4) month employment period. An individual not currently employed in long-term care has three (3) opportunities to successfully complete the competency evaluation and be placed on the registry within one year of completion of training. (This includes nursing students also.)

Once a student has passed an approved nurse aide training course their program coordinator will submit them for the competency evaluation test. Any issues with finding a testing session should be directed to the appropriate [KNAT coordinator](#).

REIMBURSEMENTS

Nurse Aides that meet all the following criteria may be entitled to reimbursement of a portion of your expenses to complete a nurse aide training program:

- If not employed by a long-term care facility or received an offer of employment from a long-term care facility on the first day you start a nurse aide training program.
- Have incurred out-of-pocket expenses for a nurse aide training program.
- Become employed or receives an offer of employment from a long-term care facility within twelve (12) months of completing a nurse aide training program.

All questions about reimbursements are to be directed to your Long-Term Care Facility Administration after you become employed or receive an offer of employment. Your facility would be required to submit a MAP-576 to the Kentucky Department for Medicaid Services if you qualify.

RECORDS

Within thirty (30) days of satisfactory completion of the competency evaluation KCTCS shall notify the Kentucky Board of Nursing of the student's successful completion of the competency evaluation test. The Kentucky Board of Nursing will add the student to the Kentucky Nurse Aide Registry.

The student, the nursing facility program administrator, the training instructor and the test coordinator will be notified by KCTCS of the competency evaluation test results.

The Kentucky Board of Nursing shall maintain on the registry the name of each student who has successfully completed the competency evaluation.

Registry toll free – Nurse Aides: 888-530-1919

Online verification:

[State Registered Nurse Aides \(SRNA\) - Kentucky Board of Nursing](#)

Registry (toll) - 502-429-3347

POST-TEST SURVEY

As a nurse aide test candidate your feedback is critical to reviewing and improving the testing experience. Please take a few minutes to complete a short and anonymous survey after you complete your testing session.

NURSE AIDE COMPETENCY GRADE APPEAL PROCESS

A formal process has been established for test takers to appeal their grades on the competency evaluation. When an appeal is filed one of two actions must be proven in order for the grade to be changed. You must prove one of the following:

- Inadequate Consideration – this means there was a proven problem with the evaluation

or

- Breach of Procedure – this means the test center did not follow protocol.

When filing an appeal please make sure to explain in detail why you are contesting your grade.

To review the current process and how to proceed please visit
<https://nurseaide.kctcs.edu/nurse-aide-resources/student-resources.aspx>.

CURRICULUM CROSS-WALKS

Detailed curriculum crosswalks for all three approved textbooks are located at
<https://nurseaide.kctcs.edu/>.

The Kentucky Medicaid Nurse Aide Test consists of seventy-five (75) written multiple-choice test items which are taken from the following task list.

KENTUCKY MEDICAID NURSE AIDE TEST BLUEPRINT

Topic	Number of Questions
Safety	7
Communication	6
Infection Control	6
Client Rights	9
Data Collection	4
Basic Nursing Skills	10
Role / Responsibility	9
Disease Process	9
Mental Health	4
Personal Care	4
Care Impaired	5
Aging Process and Restorative Care	2

TIPS FOR THE WRITTEN TEST

There are a number of skills that may help you improve your ability to take a test. Here are some tips that are strongly recommended:

Get a good night's rest before the test.

Be familiar with the test directions. If anything in the directions is not clear, ask the test administrator to clarify. You will have a few minutes to ask questions before the test begins.

Think through each question. Read each question word for word. Consider all of the answer choices. Do not choose the first answer that seems reasonable. Read and evaluate all choices to find the best answer to the question. Give careful consideration before going on to the next question but do not spend too much time on any one question.

When selecting the best answer to a question do not read too much into the question. The questions are written to be clear and straightforward. They are not intended to be tricky or misleading.

If after considering all answer choices the correct answer is not clear eliminate the choices, you know are incorrect and choose from the remaining answers. You may want to review the questions after you have completed the rest of the test.

Always guess even if you cannot eliminate any of the possible responses. Every question will be scored right or wrong. Your test score is based on the number of questions answered correctly. You do not lose points for incorrect answers so you will not be penalized for guessing.

Facilities and test candidates are encouraged to schedule the test, so they do not work 12 hours prior to the competency evaluation.

SAMPLE WRITTEN TEST ITEMS

Test Item:

1. A specimen collected by having the resident cough up a substance from the lungs and bronchial tubes is called

- A. saliva
- B. mucus
- C. sputum
- D. spit

2. You see bruises on a resident's face. You should notify

- A. a state agency responsible for abuse
- B. the charge nurse
- C. the family
- D. the physician

TIPS FOR THE SKILLS TEST

The skills demonstration aspect of the examination must consist of a minimum performance of five randomly selected skills. Vital signs will always be a skill on the exam and BP and pulse will be performed on a mechanical arm. The student can request to perform BP and pulse on an actual person and the person will be determined by the evaluator. Three of the skills will be performed together such as donning PPE giving a bed bath and washing hands. One additional skill will be required. The order of these skills is at the discretion of the testing site and/or evaluator.

The following skills will be used for test purposes. At least 70% of the steps must be performed correctly in each skill. Some of the steps within a skill are considered critical and must be performed with 100% accuracy. An asterisk (*) identifies the critical steps.

A critical step is defined as a step within a task that relates to the physical safety of the resident or nurse aide or medical asepsis (infection control).

Sequencing of steps will not be considered critical unless it becomes a physical safety or medical asepsis violation as defined above.

The skills test is not designed to teach. The skills test is designed to measure competency. No help will be given during the evaluation session.

All test candidates are expected to complete the skills in a timely manner. At the evaluator's discretion you may be given a 5-minute warning to finish the current skill.

Evaluator interactions are extremely limited. You may ask your evaluator questions, but the evaluator may or may not be able to answer you.

Candidates often stop demonstrating skills to review the steps in their mind, but the evaluators cannot read your mind or intent. You may want to verbalize those steps aloud to ensure the evaluator understands your actions. Make sure you demonstrate each step. The same applies if you are quiet because you are finished. Please let the evaluator verbally know that you are finished with each skill.

For clarification of procedures test candidates are encouraged to refer to the procedure checklist in your workbook.

Promoting Safety and Comfort:

Safety

You raise the bed to give care. Follow these safety measures to prevent the person from falling:

- For a person who uses bed rails – Always raise the far bed rail if you are working alone. Raise both bed rails if you need to leave the bedside for any reason.
- For the person who does not use bed rails – Ask a co-worker to help you. The co-worker stands on the far side of the bed. This protects the person from falling.
- Never leave the person alone when the bed is raised.
- Always lower the bed to an appropriate position when you are finished giving care.

Comfort

The resident should be able to access items on the bedside stand and overbed table. Such items include the water pitcher and cup, tissues, phone, TV and light controls.

Adjust the overbed table so it is within the person's reach. Ask if the person wants other items nearby. Place them on the overbed table too. Always make sure needed items including the signal light are within the person's reach.

You will be expected to perform the skills as you would in a nursing home setting. When water is required, water may be used. All candidates will be required to perform the Hand Hygiene skill. The evaluator will inform you after you have performed hand hygiene for the first time that you should tell him or her when you would perform hand hygiene during your performance of the rest of the skills rather than washing them for each skill. No other steps will give you credit for verbalizing to the evaluator what you would do or for simulating the step unless noted in this study guide next to that step within a skill. To receive credit for all other steps you must demonstrate the step.

The test will consist of five of the skills listed in the Skills List document. Three of the skills will be together in a scenario format with two additional skills being done independent of the scenario.

TEST ADMINISTRATION PROCEDURES

1. Each candidate is to be at the test location and ready to begin the test by the starting time. A candidate arriving late may be considered a “no-show”.
2. Only the candidates who are on the official roster will be allowed to take the written and/or performance test(s).
3. When arriving at the test site candidates shall present to the competency evaluation proctor the following documents that are outlined on the [Homeland Security I-9 form](#) to verify employability in the United States. Employees may present one selection from List A or a combination of one selection from List B and one selection from List C:
 1. Documents that establish both Identity and Employment Authorization; OR
 2. Documents that establish Identity; AND
 3. Documents that establish Employment Authorization
 4. All personal documents shall identify the individual's matching full name to include middle initial.

Please note that a letter from a Social Security Administration field office stating a test candidate applied for a replacement social security card will not be accepted as proof of the candidate's social security number or identity.

Candidate's identity documents including the social security card must be in good condition. Good condition is defined as: A condition that allows the test proctor to establish the candidate's identity and validity of the document. The condition of the documents is to be determined by the test proctor and is at their total discretion.

Candidates that arrive at the test site without the proper ID's will not be allowed to test and will be required to reschedule their assessment and will forfeit all testing fees.

Candidates that present fraudulent identification documents for testing will forfeit all testing fees and may be reported to the proper authorities.

In the case of an official Federal Government shutdown that impacts the issuance of Social Security Cards the following guidelines will be followed:

- If an individual's training is set to expire during the shutdown the training date shall be extended for a period of time not to exceed the # of days the Federal Government ceased to issue Social Security Cards. Nurse Aide training expires one year from the date of completion.

- If an individual is currently employed at a facility and will be removed from direct patient care due to exceeding the 120 day requirement to be listed on the KY Nurse Aide Registry the employing facility may present a photocopy of the individuals Social Security Card. Copies from individual testers will not be accepted. However, verifying identity based on name matching between identity documents is still required.

All others that fall outside the guidelines listed above will be required to follow normal testing procedures outlined in this study guide. No other exceptions will be made.

1. Test-related materials that are needed will be supplied. Candidates are NOT allowed to bring reference materials etc. into the test room or holding room. Candidates cannot use or use any notes or other types of references during the test.
2. No supplied test materials documents or notes of any kind may be removed from the examination room.
3. Any candidate observed giving or receiving assistance of any kind during the test will be dismissed and his/her test results will be declared null and void.
4. Cell phones are required to be off and put away while testing. Any candidate observed using a cell phone in the written test area performance test area holding room or any other designated testing area will be dismissed, and his/her test results will be declared null and void. The candidate will be required to re-schedule and re-pay for their assessment.
5. Test candidates are to always exhibit professional behavior. Any candidate behavior that is deemed disruptive to the testing process will be dismissed and his/her test results will be declared null and void. The candidate will be required to re-schedule and re-pay for their assessment. Disruptive behavior is to be determined by the test proctor at their sole discretion. Electronic translating dictionaries are not allowed for use during testing. Hard copy translating dictionaries will be reviewed. Any dictionaries with hand-written notes will not be allowed for use during testing.
6. The test monitor will orient the candidates as a group prior to testing.
7. At the end of time for each section of the test the candidate will turn in all test materials to the monitor.
8. Payments for nurse aide testing that returned and not honored, the assessment(s) will not be graded. You will have 30 days to pay for the test or it will be voided. You will be required to reschedule your assessment and repay your test fee.
9. This information is current as of the date it is printed. Regional Coordinators and Test administrators will follow the information contained in the current version of the document. The current version is available on the nurse aide website <https://nurseaide.kctcs.edu/nurse-aide-resources/student-resources.aspx>.
10. Testing may take several hours. Please contact your local testing center about the availability of vending and change machines. If vending machines are not available, please feel free to bring your own drinks and snacks.
11. Electronic watches and similar wearable electronic devices are required to be removed prior to testing. Any candidate observed using a wearable electronic device in any designated testing area will be dismissed and their test results will be declared null and void. The candidate will be required to re-schedule and re-pay for their assessment.

NOTIFICATION OF TEST SCORES

Each candidate will receive notification of test scores via email. The Medicaid nurse aide test coordinator, the nursing facility, and the training facility will have access to the candidate's test scores in the testing platform. If the candidate has successfully completed both the written and the performance tests of the Medicaid Nurse Aide Competency Evaluation their name will be available to the Kentucky Nurse Aide Registry at the Kentucky Board of Nursing. If any test retakes are necessary information will be provided to the candidate. No other agency or individual will be provided individual test scores without the expressed written request of the test candidate. Test results should post each evening by 6pm EST. Please check the testing platform, junk and spam folders in your email, and allow 72 business hours before reaching out for results.

RENEWAL OF REGISTRATION

The Kentucky Board of Nursing shall renew a nurse aide's registration at least once every two (2) years. The nurse aide will be notified when their renewal of registration is pending. For that office to locate a nurse aide it is important that whenever the nurse aide has a change of name and/or address the aide should contact that office immediately. The address for the Kentucky Nurse Aide Registry is 312 Whittington Parkway Suite 300-A Louisville KY 40222- 5172.

If for whatever reason you are unable to change your status on the Nurse Aide Registry from expired to current and in good standing your only option is to repeat the 75-hour nurse aide course with an approved provider and successfully complete the NATCEP again.

KRS 216.789 PROHIBITION AGAINST EMPLOYING CERTAIN FELONS

216.789 Prohibition against employing certain felons at long-term care facilities in nursing pools providing staff to nursing facilities or in assisted-living communities -- Preemployment check with Justice Cabinet – Temporary employment.

(1) No long-term care facility as defined by KRS 216.535(1) nursing pool providing staff to a nursing facility or assisted-living community shall knowingly employ a person in a position which involves providing direct services to a resident or client if that person has been convicted of a felony offense related to theft; abuse or sale of illegal drugs; abuse neglect or exploitation of an adult; or a sexual crime.

(2) A nursing facility nursing pool providing staff to a nursing facility or assisted living community may employ persons convicted of or pleading guilty to an offense classified as a misdemeanor if the crime is not related to abuse neglect or exploitation of an adult.

(3) Each long-term care facility as defined by KRS 216.535(1) nursing pool providing staff to a nursing facility or assisted-living community shall request all conviction information from the Justice Cabinet for any applicant for employment pursuant to KRS 216.793.

(4) The long-term care facility nursing pool providing staff to a nursing facility or assisted-living community may temporarily employ an applicant pending the receipt of the conviction information. Effective: July 14 2000

History: Amended 2000 Ky. Acts ch. 141 sec. 17 effective July 14 2000. -- Amended 1998 Ky. Acts ch. 189 sec. 4 effective July 15 1998; and ch. 380 sec. 2 effective July 15 1998. -- Created 1994 Ky. Acts ch. 427 sec. 4 effective July 15 1994.

The Kentucky Community and Technical College System does not discriminate on the basis of race color national origin sex disability age religion or marital status in training activities or employment practices in accordance with Title VI of the Civil Rights Act of 1964 Title IX of the Education Amendments of 1972 Section 504 of the Rehabilitation Act of 1973 Title VII of the Civil Rights Act of 1964 and the Americans with Disabilities Act of 1991.

SKILLS LIST DOCUMENT

Applying an Anti-embolic Stocking

1. Knock before entering the room. Identify and greet resident. Explain procedure. Provide for privacy.
- *2. Performs hand hygiene.**
- *3. Raises bed height. Provides for resident safety.**
4. Provides for resident's privacy by only exposing one leg.
5. Rolls, gathers, or turns stocking down inside out to at least the heel.
6. Places stocking over the resident's toes, foot, and heel.
7. Rolls OR pulls stocking up the leg.
8. Adjusts stocking as needed.
9. Checks toes for possible pressure from stocking.
- *10. Leaves resident with stocking that is smooth/wrinkle free.**
11. Lowers bed, if it was raised.
- *12. Leaves resident in a position of safety and comfort with call light within reach.**
- *13. Performs hand hygiene, report and record.**
14. Maintains respectful, courteous interpersonal interactions at all times.

Bed Bath -Full

***1. Knock before entering the room. Identify and greet resident. Explain procedures.**

Perform hand hygiene, don gloves. Provide for privacy.

2. Fill bath basin 2/3 full of warm water.

***3. Raise the bed for good body mechanics. Provide for resident safety.**

4. Position resident in supine position.

5. Cover the resident with a bath blanket and remove top linens.

6. Place towel across resident's chest. Remove the gown without exposing the resident.

7. Make mitten of washcloth and wet with water; squeeze out excess.

8. Wash eyes first. Start at inner corner and work out. Use different area of mitten for each eye.

9. Wash, rinse, and dry the face.

10. Wash, rinse, and dry the ears and then neck.

11. Expose arm farthest from the side. Place bath towel under arm up to axilla.

12. Place basin of water on bed and immerse resident's hand in water and wash. Remove the basin and dry hand well.

13. Wash, rinse, and dry the shoulders, axillae, and arms.

14. Repeat steps 11, 12, & 13, using nearest arm. (May Verbalize This Step)

15. Place towel across chest and fold bath blanket to waist.

16. Wash, rinse, and dry chest while lifting towel.

17. Fold bath blanket to pubic area; keep chest covered with towel.

18. Wash, rinse, and dry abdomen. Remove the towel and cover with bath blanket.

***19. Change bath water in basin. Provide for resident safety.**

20. Expose the far leg, flex leg and place bath towel lengthwise under the leg up to the buttocks.

21. Place basin on towel and put foot into it. Support leg at knee joint with hand.

22. Wash and rinse leg and foot.

23. Remove basin of water and dry leg, foot, and between toes.

24. Repeat steps #21 -#24 for near leg. (May verbalize this step)

***25. Change bath water in basin. Provide for resident safety.**

26. Assist resident to turn on side with back facing the side.

27. Fold the bath blanket over resident's side to expose back and buttocks, place towel parallel to resident's back.

28. Wash, rinse and dry back and buttocks.

***29. Change the water for perineal care. Provide for resident safety.**

***30. Wash, rinse, and dry the perineum. (May verbalize, perineal care tested on separate skill). Remove and discard gloves. Perform hand hygiene. Provide for resident safety.**

31. Apply lotion and deodorant.

32. Without exposing the resident, dress him/her in a clean gown.

***33. Leave the resident in a position of safety and comfort with call light within reach.**

***34. Perform hand hygiene and report & record.**

35. Maintain respectful, courteous interpersonal interactions at all times.

Bed Making-Occupied

***1. Knock before entering the room. Identify and greet resident. Explain procedures.**

Perform hand hygiene. Provide for privacy.

***2. Raise bed rails. Provide for resident safety.**

3. Wear gloves if linens are soiled. (May verbalize)

4. Loosen the top bedding at foot of bed. Remove spread and/or blanket.

5. Place bath blanket over top sheet. Remove top sheet without exposing resident.

6. Keep pillow under resident's head and turn resident to side of bed not being made.

7. Loosen bottom linen and roll each piece separately to the resident's back.

8. Place bottom fitted sheet lengthwise on the mattress. Face hem stitching downward.

9. Tuck the corner of the fitted sheet over the head and foot of the mattress; tuck the sheet under the mattress from the head to the foot.

10. Place draw sheet on the middle of mattress; roll 1/2 to resident's back and tuck in excess material.

***11. Go to opposite side of bed, providing for resident safety.**

12. Move resident to clean side of bed and then place pillow under resident's head.

13. Pull through all bottom linen. Roll, remove, and discard soiled linen in laundry hamper or bag. Hold soiled linen away from own uniform.

14. Pull clean bottom sheet toward the edge of bed. Tuck the corner of the fitted sheet over the head and foot of the mattress; tuck the sheet under the mattress from the head to the foot.

15. Pull the draw sheet toward the side of bed and remove all wrinkles. Pull the draw sheet tightly towards you, and tuck excess under the mattress.

16. Assist resident to center of bed. Adjust pillows for comfort.

17. Place top sheet over bath blanket with the hem stitching facing upward; ask resident to hold or tuck under resident's shoulders. Remove bath blanket. Replace blanket/spread.

18. Tuck sheet, blanket, and bedspread at foot of bed under mattress and miter corners on each side, make a toe pleat allowing for movement of resident's feet.

19. Change pillowcase and place pillow under resident's head

***20. Leaves resident in a position of comfort and safety with call light within reach.**

***21. Perform hand hygiene and report & record.**

22. Maintains respectful, courteous interpersonal interactions at all times.

Bed Making-Unoccupied/Closed-with fitted sheets

***1. Knock before entering the room. Identify and greet resident. Explain procedure.**

Perform hand hygiene. Provide for privacy.

***2. Raise bed to best level for good body mechanics.**

3. Remove linens from bed, rolling linen away from you so that the surface that touched the resident is inside the roll.
4. Place the bottom sheet on the mattress. Face hem stitching downward.
5. Tuck corner of the fitted sheet over the head and the foot of the mattress. Make sure the sheet is tight and smooth. Tuck the sheet under the mattress from the head to the foot.
6. Place the draw sheet on the middle of the mattress.
7. Open the draw sheet and fanfold to the other side of the bed.
8. Tuck draw sheet and go to other side of the bed.
9. Pull the bottom sheet tightly to smooth out wrinkles. Tuck corner of the fitted sheet over the head and the foot of the mattress. Tuck the sheet under the mattress from the head to the foot.
10. Pull the draw sheet tightly and tuck in the sheet.
11. Place the top sheet on the bed. Unfold it lengthwise. Place the center crease in the middle. Place the sheet evenly with the top of the mattress. Open the sheet and fanfold the extra toward the other side. Face hem stitching upward.
12. Place the bedspread on the bed with the upper hem even with the top of the mattress. Open and fanfold extra to the other side.
13. Make sure the bedspread facing the door is even and covers all the top linens.
14. Tuck in the linens together at the foot of the bed. Make a mitered corner.
15. Go to other side of bed. Straighten all top linen, tucking in top linens. Make a mitered corner.
16. Put pillowcase on pillow and place on bed with open end away from the door.
17. Lower bed if raised.

***18. Perform hand hygiene and report & record.**

Brief Change

***1. Knock before entering the room. Identify and greet resident. Explain procedure.**

Perform hand hygiene. Provide for privacy.

2. Obtain brief and trash bag.

***3. Puts on gloves.**

***4. Raises the bed height. Provide for resident safety.**

5. Turns resident or raises hips and places a waterproof pad under resident's buttocks.

6. Exposes perineal area only.

7. Remove the soiled brief and place in a trash bag.

8. Provides peri care if needed. (May verbalize)

9. Change gloves.

10. Apply a new brief.

11. Ensure the brief is even on both sides of the resident (manikin).

12. Safely removes waterproof pad from under resident's buttocks, if it was placed.

***13. Leave the resident in a position of safety and comfort with call light within reach.**

***14. Performs hand hygiene and report and record.**

15. Maintains respectful, courteous interpersonal interactions at all times.

Catheter Care

***1. Knock before entering the room. Identify and greet resident. Explain procedure.**

Perform hand hygiene. Provide for privacy.

***2. Puts on gloves.**

***3. Raises bed height. Provides for resident safety.**

4. Lifts resident's gown to expose catheter area.

5. Check to see that urine can flow, unrestricted, into the drainage bag. (It would be helpful to verbalize checking while looking for kinks in tubing, etc.)

6. Uses a washcloth with soap and water to carefully wash around the catheter where it exits the urethra.

7. Holds catheter where it exits the urethra with one hand.

8. While holding catheter, clean around urethra and at least 3-4 inches down the catheter.

***9. Clean with strokes only away from the urethra.**

10. Use a clean portion of the washcloth for each stroke.

11. While holding catheter, rinse at least 3-4 inches down the drainage tube.

12. Rinse using strokes only away from the urethra.

13. Rinse using a clean portion of the washcloth for each stroke.

14. Pat dry.

***15. Do not allow the tube to be tugged/pulled at any time during the procedure.**

***16. Remove gloves.**

17. Secure catheter properly. Replace top cover over resident.

***18. Leaves resident in a position of safety and comfort with call light within reach.**

***19. Performs hand hygiene and report and record.**

20. Maintains respectful, courteous interpersonal interactions at all times.

Clearing the Obstructed Airway - Conscious Adult

•

- * 1. Ask the victim if they are choking.
- * 2. Ask the victim if they can cough or speak.
- * 3. Stand behind the victim.
- * 4. Wrap your arms around the victim's waist.
- * 5. Grasp your fist with your other hand.
- * 6. Press your fist and hand into the victim's abdomen with a quick, upward thrust.
- * 7. Repeat the abdominal thrust until the object has been expelled or the victim loses consciousness.

Denture Care - Cleaning Upper or Lower Denture

- *1. Knock before entering the room. Identify and greet resident. Explain procedure.
Perform hand hygiene. Provide for privacy.**
- *2. Put on gloves.**
3. Assist resident with removing dentures, if needed.
- *4. Lines bottom of the sink with a protective lining that would help prevent damage to the dentures. (Towel, washcloth or paper towels.)**
5. Assist resident with mouthcare if needed.
6. Applies denture cleanser (paste) to denture brush (or toothbrush).
7. Handles denture carefully to avoid damage.
8. Rinses denture under cool/luke-warm running water.
9. Thoroughly brushes denture inner surfaces of upper or lower denture.
10. Thoroughly brushes denture outer surfaces of upper or lower denture.
12. Thoroughly brushes denture chewing surfaces of upper or lower denture.
13. Rinses all surfaces of denture under cool/warm running water.
14. Rinses denture cup and lid.
15. Place denture in rinsed cup.
16. Adds cool/luke-warm clean water to denture cup and replace lid on denture cup.
17. Rinses equipment.
18. Returns equipment to storage.
19. Discards sink protective lining in an appropriate container, if used.
- 20. Removes gloves, turning inside out as they are removed and dispose in trash container.**
- *21. Leaves resident in a position of safety and comfort with call light within reach.**
- *22. Performs hand hygiene and report and record.**
23. Maintains respectful, courteous interpersonal interactions at all times.

Donning and Doffing PPE

1. Remove watch and all jewelry, roll up sleeves.
- *2. Perform hand hygiene.**
3. Unfold Gown
4. Face the back opening of the gown.
5. Place arms through each sleeve
6. Secure the neck opening
- *7. Secure gown at the waist, making sure that the back flaps cover clothing as completely as possible.**
- *8. Put on gloves.**
9. Cuffs of gloves overlap cuffs of gown
10. Provide care.
- *11. Remove gloves before removing gown with one glove hand grasping the other glove at the palm to remove.**
- *12. Slip fingers from ungloved hand underneath cuff of remaining glove at the wrist and remove glove turning inside out as it is removed.**
13. Dispose of gloves in the trash container without contaminating self
14. Unfasten gown at neck and waist.
15. Remove gown without touching outside of the gown
16. While removing gown, hold gown away from the body without touching the floor
- *17. While removing gown, turns gown inward and keeps it inside out.**
18. Dispose of gown in designated container without contaminating self.
- *19. Perform hand hygiene.**

Dressing Resident w/an Affected (Weak) Side

***1. Knock before entering the room. Identify and greet resident. Explain procedure.**

Perform hand hygiene. Provide for privacy.

***2. Raises bed height. Provides for resident safety.**

3. Put on gloves.

4. Keeps resident covered while removing gown.

5. Removes gown from unaffected side first.

***6. When dressing the resident in a button-up shirt, always dress from the affected (weak) side first.**

7. Dress the resident in a button -up shirt. Insert hand through the sleeve of the shirt and grasp the hand of the resident.

***8. When dressing the resident in pants, always dress the affected (weak) side leg first.**

9. Assists 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.

10. Puts on the resident's socks. Draws the socks up the resident's foot until they are smooth.

11. Leaves the resident comfortably/properly dressed. (Pants pulled up to the waist front and back and the shirt is completely buttoned.)

***12. Place dirty gown in designated soiled linen container/bag. Removes gloves.**

***13. Leaves resident in a position of comfort and safety with call light within reach of unaffected side.**

***14. Performs hand hygiene and report and record.**

15. Maintains respectful, courteous interpersonal interactions at all times.

Feeding a Dependent Resident

- *1. Knock before entering the room. Identify and greet resident. Explain procedure. Perform hand hygiene. Provide for privacy.**
- 2. Asks resident to state name and verifies name matches the name on the dietary card.
- 3. Verify items on the tray matched the dietary card.
- *4. Positions the resident in an upright, sitting position, BEFORE feeding. At least 75-90 degrees.**
- 5. Protects clothing from soiling by using napkin, clothing protector, or towel.
- *6. Provides hand hygiene for the resident before feeding.**
- 7. Prepare food for eating. Cut food into bite-sized pieces. Season foods as the resident prefers and is allowed per the care plan.
- 8. Sits in a chair, facing the resident, while feeding the resident.
- 9. Describes the foods being offered to the resident.
- 10. Offers small amounts of food at a reasonable rate.
- 11. Offers fluid frequently.
- 12. Allows resident time to chew and swallow.
- 13. Encourage resident to eat as much as possible.
- 14. Wipes resident's hands and mouth as needed during the meal.
- 15. Removes clothing protector and place in designated laundry hamper. If napkin, dispose in trash container.
- 16. Leaves resident sitting upright in bed with the head of the bed set up to at least 75-90 degrees.
- *16. Places call light within easy reach of the resident.**
- 17. Maintains respectful, courteous interpersonal interactions at all times.
- *18. Performs hand hygiene.**
- 19. Document the amount of food and fluid intake.

Giving Nail Care

***1. Knock before entering the room. Identify and greet resident. Explain procedures.**

Perform hand hygiene. Provide for privacy.

2. Position the over-bed table in front of the seated resident. It should be low and close to the resident.
3. Fill the kidney basin with warm water.
4. Place the kidney basin on the over bed table on top of the paper towels.
5. Put the resident's fingers into the basin. Position the arms so that he or she is comfortable.
6. Let the fingernails soak for 5 to 10 minutes (May verbalize without waiting) Re-warm the water as needed.
7. Clean under the fingernails with the orange stick.
8. Remove the kidney basin. Dry fingers thoroughly.
9. Clip fingernails straight across with nail clippers.
10. Shape nails with an emery board or nail file.
11. Push cuticles back with a washcloth or orange stick.
12. Clean and return equipment and supplies to their proper places. Discard disposable supplies.

***13. Place call light within resident's reach.**

***14. Perform hand hygiene and report and record.**

15. Maintains respectful, courteous interpersonal interactions at all times.

Giving the Bedpan

***1. Knock before entering the room. Identify and greet resident. Explain procedure.**

Perform hand hygiene. Provide for privacy.

***2. Put on gloves.**

3. Raise bed height. Provide for resident safety.

4. Position a waterproof pad under the resident.

5. Position resident on bedpan safely and correctly. (Pan not upside down, is centered, etc.)

6. Raise head of bed to comfortable level.

7. Leave tissue within reach of resident.

***8. Leave the resident in a position of comfort and safety.**

***9. Leave call light or signaling device within reach of resident if leaving the room.**

10. Step behind privacy curtain to provide privacy for resident.

11. Return when resident is ready.

***12. Raise bed height. Provide for resident safety.**

13. Lower the head of the bed if it was raised.

14. Gently remove the bedpan and cover.

15. Provide peri-care and hand hygiene for the resident.

***16. Change gloves.**

***17. Leaves resident in a position of safety and comfort.**

18. Rinse equipment used and empty rinse water into designated toilet/commode.

19. Return equipment to storage.

20. Place soiled linen in designated laundry hamper or bag.

21. Remove gloves.

***22. Place call light within easy reach of the resident.**

***23. Performs hand hygiene and report and record.**

24. Maintain respectful, courteous interpersonal interactions at all times.

Hand Hygiene

1. Push watch and sleeves up arm 4-5 inches. Turn on water.
2. Wet hands and wrists thoroughly.
3. Apply soap to hands.
4. Rub hands together using friction with soap.
- *5. Scrub/wash hands together for at least twenty (20) seconds with soap.**
6. Scrub/wash with interlace fingers pointing downward with soap.
7. Wash all surfaces of hands with soap.
8. Wash wrists with soap.
9. Clean fingernails by rubbing fingertips against palms of the opposite hand.
10. Rinse fingers, hands, and wrists thoroughly under running water with fingers pointed downward.
11. Starting at the fingertips, dry fingers, hands, and wrists on clean paper towel(s).
12. Discard paper towels to trash container as use.
13. Turn off faucet with a clean, dry paper towel and discard paper towel to trash container as used.
- *14. 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.)**

Measure & Record Output

- *1. Knock before entering the room. Identify and greet resident. Explain procedure. Perform hand hygiene. Provide for privacy.**
2. Puts on gloves
3. Place graduate on flat, level surface and pour contents of bedpan or foley catheter into graduate.
4. If draining a foley catheter, ensure the drain does not touch the graduate. Close and position clamp when complete.
5. With graduate at eye level, measure output.
6. Rinse equipment used and empty rinse water into the designated toilet/commode.
7. Return all equipment to storage.
8. Remove gloves and discard.
- *9. Record output in mls on recording form, must be within 25 ml of evaluator.**
- *10. Place call light within easy reach of the resident.**
- *11. Performs hand hygiene and report and record.**
12. Maintain respectful, courteous interpersonal interactions at all times.

Partial Bed Bath: Face and One Arm Hand and Underarm

•

***1. Knock before entering the room. Identify and greet resident. Explain procedure.**

Perform hand hygiene. Provide for privacy.

2. Fills basin with comfortably warm water and place on over-bed table.
3. Covers resident with a bath blanket/towel.
4. Raises bed height if performing the partial bed-bath providing for resident's safety.
Positions resident appropriately if assisting.
5. Removes, or assists with removing, remaining top covers. Fold to bottom of bed or place aside.
6. Removes, or assists with removing, resident's gown without exposing resident.
7. Places soiled gown in designated laundry hamper.
8. Beginning with the eyes, wash eyes without soap from inner aspect to outer aspect.
9. Uses a clean portion of the washcloth for each stroke.
10. Washes face. Pats dry face.
11. Places towel under arm, exposing one arm.
12. Washes arm, hand, and underarm with soap.
13. Rinses arm, hand, and underarm.
14. Pats dry arm, hand, and underarm.
15. Assists resident to put on a clean gown.
16. Leaves resident in a safe and comfortable position.
17. Empties, rinses, and dries equipment.
18. Returns equipment to storage.
19. Places soiled linen in designated laundry hamper.

***20. Performs hand hygiene.**

***21. Places call light or signal calling device within easy reach of the resident.**

22. Reports and records.
23. Maintains respectful, courteous interpersonal interactions at all times.

Passive Range of Motion Exercise for One Shoulder

***1. Knock before entering the room. Identify and greet resident. Explain procedure.**

Perform hand hygiene. Provide for privacy.

***2. Raises bed height. Provides for resident safety.**

3. Positions resident supine (bed flat).

4. Correctly support joints at all times by placing one hand under the resident's elbow and the other hand under the resident's wrist.

5. Gently raises the resident's straightened arm up and over the resident's head to ear level. (flexion)

6. Gently brings the resident's arm back down to the side of the resident's body. (extension)

7. Gently moves the resident's entire arm away from the side of the resident's body to shoulder level. (abduction)

8. Gently returns resident's arm to the side of the resident's body. (adduction)

9. Gently bend the elbow and move the forearm down towards the body (elbow should be at the same level as the shoulder) (Internal rotation)

10. Gently move the forearm toward the head (external rotation)

11. Gently complete flexion, extension, abduction, adduction, internal and external rotation of the shoulder at least five times.

12. Do not force any joint beyond the point of free movement

13. Repeat steps for exercising the opposite shoulder. (May verbalize this step.)

14. Candidate must ask at least once during the ROM exercise if there is/was any discomfort/pain.

15. Leaves resident in a position of comfort and safety.

***16. Places call light within easy reach of the resident.**

***17. Performs hand hygiene and reports and records.**

18. Maintains respectful, courteous interpersonal interactions at all times.

Passive Range of Motion for One Hip

***1. Knock before entering the room. Identify and greet resident. Explain procedure.**

Perform hand hygiene.

2. Provides for resident's privacy.

***3. Raises bed height. Provides for resident safety.**

4. Positions resident supine - bed flat. Remove top linens and provide for resident privacy as needed.

5. Correctly support joints at all times by placing one hand under the resident's knee and the other under the resident's ankle.

6. Gently raise the leg (flexion)

7. Gently straighten the leg (extension)

8. Gently move the resident's entire leg away from the body (abduction)

9. Gently return resident's leg toward the body (adduction)

10. Gently turn the leg inward (internal rotation)

11. Gently turn the leg outward (external rotation)

12. Gently complete flexion, extension, abduction, adduction, internal and external rotation of the hip at least five times.

13. Do not force any joint beyond the point of free movement.

14. Repeat steps for exercising the opposite hip. (May verbalize this step.)

15. Candidate must ask, at least once during the PROM exercise if there is/was any discomfort/pain.

***16. Leaves resident in a position of comfort and safety.**

***17. Performs hand hygiene and reports and records.**

***18. Places call light within easy reach of the resident.**

19. Maintains respectful, courteous interpersonal interactions at all times.

Range of Motion Exercises -Elbow

***1. Knock before entering the room. Identify and greet resident. Explain procedure.**

Perform hand hygiene. Provide for privacy.

***2. Raise the bed to the best level for good body mechanics. Provide for resident safety.**

3. Position the resident in a comfortable position.

4. Support the resident's wrist with one hand and the elbow with the other.

5. Flexion: bend the arm so that the same-side shoulder is touched.

6. Extension: straighten the arm.

7. Repeat flexion and extension 5 to 6 times.

8. Repeat steps for exercising the opposite elbow. (May verbalize this step.)

9. Make sure the resident is comfortable.

***10. Leave the resident in a position of comfort and safety.**

***11. Place call light within resident's reach.**

***12. Perform hand hygiene and report and record observations.**

13. Maintains respectful, courteous, interpersonal interactions at all times.

Range of Motion Exercises- Wrist

***1. Knock before entering the room. Identify and greet resident. Explain procedure.**

Perform hand hygiene. Provide for privacy.

***2. Raise the bed rails. Provide for resident safety.**

3. Position the resident in a comfortable position.

4. Support the resident's wrist with both of your hands.

5. Flexion: Bend the hand down.

6. Extension: Straighten the hand.

7. Hyperextension: Bend the hand back.

8. Radial flexion: Turn the hand towards the thumb.

9. Ulnar flexion: Turn the hand toward the little finger.

10. Repeat flexion, extension, hyperextension and radial and ulnar flexion 5 to 6 times.

11. Repeat steps for exercising the opposite wrist. (May verbalize this step)

***12. Leave the resident in a position of comfort and safety.**

***13. Place call light within resident's reach.**

***14. Perform hand hygiene and report and record.**

15. Maintains respectful, courteous interpersonal interactions at all times.

Perineal Care for a Female

***1. Knock before entering the room. Identify and greet resident. Explain procedure.**

Perform hand hygiene. Provide for privacy.

2. Fill basin with comfortably warm water.

***3. Raise bed height. Provide for resident safety.**

4. Put on gloves.

5. Turn resident or raise hips and place a waterproof pad under resident's buttocks.

6. Expose perineal area only.

7. Separate labia. (It is helpful if you verbalize separating labia as you demonstrate separating labia.)

8. Use water and soapy washcloth (no peri-wash or no rinse soap allowed).

9. Clean one side of labia from front to back.

10. Use a clean portion of the washcloth, clean the other side of the labia from front to back.

***11. Use a clean portion of the washcloth, clean the vaginal area from front to back.**

12. Use a clean washcloth, rinse from one side of the labia from front to back.

13. Use a clean portion of the washcloth, rinse the other side of the labia from front to back.

14. Use a clean portion of the washcloth, rinse the vaginal area from front to back.

15. Pat dry.

16. Assist resident (manikin) to turn onto side away from the candidate toward the center of the bed.

17. Use a clean washcloth with water and soap (no peri-wash or no rinse soap allowed).

***18. Wash from vagina to rectal area.**

19. Use a clean portion of the washcloth with each stroke.

20. Use a clean washcloth, rinse rectal area from front to back.

21. Use a clean portion of the washcloth with each stroke.

22. Pat dry.

23. Safely remove waterproof pad from under resident's buttocks, if placed.

***24. Remove gloves and discard.**

***25. Leaves resident in a position of safety and comfort.**

26. Empty, rinse, and dry equipment.

27. Return equipment to storage.

***28. Place call light or signaling device within easy reach of resident.**

***29. Perform hand hygiene and report and record.**

30. Maintain respectful, courteous interpersonal interactions at all times.

Perineal Care for Male

***1. Knock before entering the room. Identify and greet resident. Explain procedure.**

Perform hand hygiene. Provide for privacy.

2. Fill the wash basin with warm water.

***3. Put on disposable gloves.**

***4. Raise bed to the best level for good body mechanics. Provide for resident safety.**

5. Position the resident on his back, drape with a bath blanket and remove top linen.

6. Place a waterproof pad under buttocks.

7. Wet the washcloths. Squeeze out excess water from washcloth. Make a mitted washcloth.

Apply soap.

8. Grasp the penis. Retract the foreskin if the person is uncircumcised.

9. Clean the tip. Use a circular motion. Start at the urethra, and work outward. Repeat as needed.

Use a clean part of the washcloth each time.

10. Rinse the area with another washcloth.

11. Return the foreskin to its natural position.

12. Clean the shaft of the penis. Use firm downward strokes away from the urinary meatus. Rinse the area.

13. Help the person flex his knees and spread his legs. Or help him spread his legs as much as possible with knees straight.

14. Clean the scrotum. Rinse well. Observe for redness and irritation in the skin folds.

15. Pat the penis and scrotum dry.

16. Help him lower his legs, cover him, and turn him onto his side away from you. Fold the bath blanket back between his legs.

17. Wash, rinse, and pat dry the anal area. Wash from the scrotum to the anus with 1 stroke.

Repeat as necessary until clean with a clean area of the washcloth.

18. Remove the waterproof pad and place in a trash bag/receptacle.

***19. Remove and discard gloves.**

20. Cover the resident with top linen and remove bath blanket.

***21. Leave the resident in a position of safety and comfort.**

***22. Place call light within resident's reach.**

***23. Perform hand hygiene and report and record observations.**

24. Maintain respectful, courteous interpersonal interactions at all times.

Position Resident in Bed on Side / Lateral

***1. Knock before entering the room. Identify and greet resident. Explain procedure.**

Perform hand hygiene. Provide for privacy.

***2. Positions bed flat.**

***3. Raises bed height. Provides safety to the resident.**

4. From the working side of bed – gently moves resident's upper body toward self.

5. From the working side of the bed - gently moves resident's hips toward self.

6. From the working side of the bed - gently moves resident's legs toward self.

7. Places or adjusts pillow under resident's head for support.

8. Reposition resident's arm and shoulder so that the resident is not lying on arm.

9. Places support devices under the resident's upside arm. (Pillow, rolled up blanket or towel, etc.)

***10. Places support devices behind the resident's back. (Pillow, rolled up blanket or towel, etc.)**

11. Places support devices between resident's knees. (Pillow, rolled up blanket or towel, etc.)

***12. Leaves the resident in a position of safety and comfort.**

***13. Places call light or signaling device within easy reach of the resident.**

***14. Performs hand hygiene and report and record.**

15. Maintains respectful, courteous interpersonal interactions at all times.

Provide Oral Care to the Unconscious Resident

***1. Knock before entering the room. Identify and greet resident. Explain procedure.**

Perform hand hygiene. Provide for privacy.

***2. Raise the bed. Provide for resident safety.**

3. Turn resident to a side lying position to avoid choking or aspiration.

4. Drape resident's mouth/neck with a towel to prevent soiling.

5. Put on gloves.

6. Place emesis basin under the resident's chin.

7. Use swabs and cleaning solution (water). (May not use toothbrush or toothpaste)

8. Swab the roof of the mouth.

9. Swab the inside of the cheeks.

10. Swab the inner surfaces of resident's upper and lower teeth.

11. Swab the outer surfaces of resident's upper and lower teeth.

12. Swab the chewing surfaces of resident's upper and lower teeth.

13. Swab the resident's gums.

14. Swab the resident's tongue.

15. Wipe resident's mouth.

16. Return resident to position of comfort and safety.

17. Apply moisturizer/lubricant to the resident's lips.

***18. Leave the resident in a position of comfort and safety.**

19. Place soiled linen in the designated laundry container.

20. Discard swab(s) in trash container.

21. Empty, rinse, and dry emesis basin.

22. Return equipment to storage.

***23. Remove gloves turning inside out as they are removed and dispose in trash container.**

Perform hand hygiene.

***24. Place call light within easy reach of resident.**

25. Report and record.

26. Maintain respectful, courteous interpersonal interactions at all times.

Resident Positioning and Alignment- Fowler's

***1. Knock before entering the room. Identify and greet resident. Explain procedure.**

Perform hand hygiene. Provide for privacy.

***2. Raise the head of the bed to a 45-60 degree angle.**

3. Keep the spine straight.

4. Support the head with a pillow.

5. Support the arms with pillows.

***6. Place call light with the resident's reach.**

***7. Perform hand hygiene and report and record.**

8. Maintains respectful, courteous interpersonal interactions at all times.

Resident Positioning and Alignment-Supine

- *1. Knock before entering the room. Identify and greet resident. Explain procedures.
Perform hand hygiene. Provide for privacy.**
- *2. Raise bed to best level for good body mechanics. Provide for resident safety.**
- 3. Place a pillow under the resident's head and shoulders.
- 4. Roll resident into supine position.
- 5. Position arms comfortably at each side.
- *6. Leave resident in a position of comfort and safety.**
- *7. Places call light or signal calling device within easy reach of resident.**
- *8. Perform hand hygiene and report and record.**
- 9. Maintains respectful, courteous interpersonal interactions at all times.

Shaving the Person's Face with a Safety Razor

- *1. Knock before entering the room. Identify and greet resident. Explain procedure.**
Perform hand hygiene. Provide for privacy.
- *2. Raise the bed to the best level for good body mechanics. Provide for resident safety.**
3. Fill the wash basin with warm water.
4. Place wash basin and needed supplies on the over bed table.
- *5. Put on disposable gloves.**
6. Place the resident in Fowlers with the over-bed table in front of the resident. Place a bath towel over the resident's chest and shoulders. Place resident's dentures in mouth if applicable.
7. Wash the resident's face. Do not dry. Wet the washcloth and wring it out.
8. Apply the wet washcloth to resident's face to soften skin/beard for a few minutes.
9. Apply shaving cream.
10. Hold the skin taut with one hand.
11. Shave in the direction of hair growth with long strokes on the larger areas of the face. Use shorter strokes around the chin and lips.
12. Rinse shaving cream off of razor often.
13. Wash off any remaining shaving cream. Pat face dry with towel.
- *14. Verbalize observing for nicks, cuts, bleeding and irritation. Apply direct pressure if observed.**
15. Apply after-shave and lotion unless nicks or cuts observed. Remove towel.
- *16. Remove and discard gloves.**
- *17. Leave the resident in a position of safety and comfort.**
18. Clean and return equipment and supplies to their proper place. Clean the over bed table.
- *19. Dispose of safety razor in the sharps container. (May verbalize)**
- *20. Place call light or signal calling device within easy reach of the resident.**
- *21. Wash hands and report and record.**
22. Maintains respectful, courteous interpersonal interactions at all times.

Transfer Resident from Bed to Wheelchair using a Transfer Belt

***1. Knock before entering the room. Identify and greet resident. Explain procedure.**

Perform hand hygiene. Provide for privacy.

2. Obtains a transfer belt for the resident.

3. Assists resident to put on non-skid shoes/footwear.

***4. Adjusts the bed height to ensure that the resident's feet will be flat on floor when resident is sitting on the edge of the bed.**

***5. Locks bed brakes to ensure resident's safety.**

*6. Locks wheelchair brakes to ensure resident's safety.

7. Brings resident to a sitting position.

8. Places transfer belt around resident's waist to stabilize trunk.

9. Tightens transfer belt.

10. Checks transfer belt for tightness by slipping fingers between transfer belt and resident.

11. Face the resident.

12. Grasp transfer belt on both sides with an upward grasp.

13. Communicate timing of transfer by using a count of 1,2,3 with the resident.

14. Brings resident to standing position.

15. Assists resident to pivot in a controlled manner that ensures safety.

16. Lowers resident into the wheelchair in a controlled manner that ensures safety.

***17. Remove transfer belt.**

***18. Places call light within easy reach of the resident.**

***19. Performs hand hygiene and report and record.**

20. Maintain respectful, courteous interpersonal interactions at all times.

Transfer Resident from Wheelchair to a Bed

- *1. Knock before entering the room. Identify and greet resident. Explain procedure.**
Perform hand hygiene. Provide for privacy.
- *2. Locks wheelchair brakes to ensure resident's safety.**
3. Remove the resident's feet from the footrest. Remove or lift footrests out of the way. Ensure resident has non-skid footwear. Remove the lap blanket.
- *4. Adjusts the bed height to ensure that the resident's feet will be flat on the floor when the resident is sitting on the edge of the bed.**
5. Raise the head of the bed to Fowler's position.
- *6. Locks bed brakes to ensure resident's safety.**
7. Places transfer belt around resident's waist to stabilize the trunk. Tightens transfer belt.
8. Ask the resident to hold onto the armrests and lean forward. Grasp the transfer belt at each side.
9. Position your feet and legs to provide stability for the resident and prevent the resident from falling or sliding.
10. Ask the resident to push down on the armrests on a count of three. Pull the resident into a standing position as you straighten your knees.
11. Brings the resident to a standing position and supports the resident.
12. Turn the resident so they can reach the edge of the mattress. The back of the resident's legs should touch the mattress.
13. Lower resident onto the bed as you bend your hips and knees. The resident assists by leaning forward and bending the elbows and knees.
14. Remove the transfer belt and footwear.
- *15. Leaves the resident in a position of comfort and safety.**
- *16. Places call light within easy reach of the resident.**
- *17. Performs hand hygiene and report and record.**
18. Maintain respectful, courteous interpersonal interactions at all times.

Vital Signs: Count and Record Resident's BP, Radial Pulse and Respirations (P&R)

- *1. Knock before entering the room. Identify and greet resident. Explain procedure.
Perform hand hygiene. Provide for privacy.**
2. Locates the resident's radial pulse by placing tips of fingers on thumb side of the resident's wrist.
3. Counts radial pulse for 30 seconds and multiply by 2.
- *4. Records radial pulse reading within 5 of that obtained by the evaluator.**
5. Counts respirations for 30 seconds and multiply by 2.
- *6. Records respiration reading within 5 of that obtained by the evaluator.**
7. Expose the arm as much as possible.
8. Locate the resident's brachial artery with fingertips.
9. Line cuff arrows up with resident's brachial artery. Apply cuff.
10. Clean the earpieces and diaphragm of the stethoscope.
11. Place the stethoscope diaphragm over the brachial artery.
12. Hold the stethoscope diaphragm snugly in place.
13. Inflate the cuff.
14. Slowly release air from cuff noting the systolic and diastolic reading.
15. Remove the cuff.
- *16. Records B/P reading within 4mm systolic and 4 mm of diastolic of that obtained by the evaluator.**
- *17. Places call light or signal calling device within easy reach of the resident.**
- *18. Performs hand hygiene and report and record.**
19. Maintains respectful, courteous interpersonal interactions at all times.