

Utah Nursing Assistant State Certification Handbook

*3rd Edition V4
April 2026*

UNAR Contact Information

*Utah Nursing Assistant
Registry*

350 Simmons Way #700

Kaysville, UT 84037

*Monday through Thursday
7:30 am – 4:00 pm (MST)*

*Friday
7:30 am – 3:00 pm (MST)*

*UNAR office is open to
walk-ins on Mondays,
Wednesdays, and Thursdays.*

*Closed for all State and most
Federally recognized
Holidays*

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801-547-9947*

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<https://utahcnaregistry.com/>*

Introduction

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

As defined in the OBRA regulations, a Nurse Aide Training and Competency Evaluation Program (NATCEP) provides specific standards for nursing assistant related knowledge and skills. The purpose of a NATCEP is to ensure that candidates who are seeking to be nursing assistants understand these standards and can competently and safely perform the essential job functions of an entry-level nursing assistant.

This handbook describes the process of preparing for and taking the nursing assistant competency evaluation and is designed to help prepare test candidates for testing.



UNAR Mission Statement

To Affect Quality Care by Certifying Quality Nursing Assistants

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UNAR Definitions

Certified Nursing Assistant (CNA)

Any person who completes a NATCEP and passes the state competency evaluation, or is approved for certification through reciprocity, or is approved for a waiver to test as outlined in R435-45.

Competency Evaluation

A written knowledge examination, and a manual skills demonstration examination, administered to verify the knowledge, skills, and abilities essential to carry out the duties of a nurse aide.

Nurse Aide Training and Competency Evaluation Program (NATCEP)

A UNAR approved program that meets all state, federal, and UNAR policy guidelines, and has been approved to provide classroom, laboratory, and in-facility training (clinical) to individuals seeking certification as a nurse aide.

Renewal

The process UNAR conducts every two (2) years to verify that each CNA has worked at least 200 paid hours of nursing or nursing-related services under the direction of a licensed nurse to maintain active certification in the state of Utah.

Student

An individual actively enrolled in a NATCEP.

Test Candidate

An individual who has completed the NATCEP and is preparing for, or actively engaged in taking the competency evaluation exams.

Test Master Universe (TMU©)

Software program used by UNAR to provide certification testing and maintain registry records.

Utah Nursing Assistant Registry (UNAR)

The state agency was created as a result of the OBRA requirement of 1987. As per state and federal guidelines, UNAR:

- Approves and monitors, and withdraws approval of NATCEPs,
- develops, updates and validates the competency evaluation exams,
- certifies nursing assistants who have completed an approved NATCEP or qualifying waiver and passed the state competency evaluation exams,
- renews certifications of qualified CNAs,
- grants reciprocity to qualified individuals certified in other states,
- approves and monitors all UNAR test sites,
- maintains a publicly searchable registry of all CNAs with active certification in the state of Utah,
- maintains an abuse registry for any substantiated allegations of resident neglect, abuse, or misappropriation of property by CNAs employed in a nursing care, Medicare or Medicaid facilities.

Testing Information

Competency Evaluations

The nursing assistant certification process in the state of Utah requires that upon completion of your nursing assistant training, you demonstrate minimum competency by passing both parts of the competency evaluation which consists of a written knowledge exam and a manual skills demonstration exam.

You have one (1) year from the date of completion of your training program to pass both portions of the competency evaluation. Individuals who test soon after completing are more likely to have a higher pass rate than those who wait more than three (3) months.

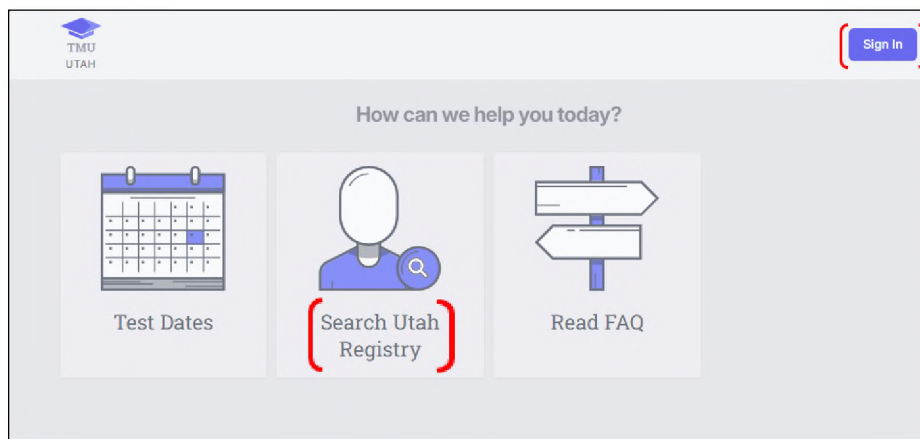
Test candidates have three (3) chances to pass each exam. The test candidate is responsible for paying the current testing fee for any retests that may be needed.

Testmaster Universe (TMU©)

TMU is the software program that is used by UNAR to provide certification testing and maintain registry records. Upon completion of a training program, qualification for a waiver to test as per R435-45, or qualification for reciprocity, a TMU account will be created for you. Your account must be set up using your legal name, phone number, and email. The username and password will be sent to the email you have indicated.

Once you receive your username and password, you will need to log in and set up your TMU account. It is recommended you use an email address that you will be able to access throughout your CNA career. It is your responsibility to keep your address, phone number, and email address up to date and entered accurately so that renewal notifications/alerts can be delivered to you in a timely manner.

***Disclaimer – By setting up a TMU account you are consenting to have your name, city, zip code, and certification history publicly listed on the Utah Nursing Assistant Registry.**



This is the main TMU page.

To log into your account

Click on-

Sign In

Employers can search for you by clicking on -

Search Utah Registry

The first time you log into your TMU account, you will need to complete your demographic information to complete your account.

*Enter required information into the blank * fields and then click on-*

Finish Account Setup

If you have forgotten your username and password, you can recover your account.

If you have forgotten your log in information,

Click on-

Forgot Your Password?

Where to Test

UNAR has independent testing site partners across the state in Blanding, Cedar City, Hurricane, Kaysville, Lehi, Logan, Moab, Ogden, Price, Richfield, Roosevelt, Salt Lake City, St. George, Tooele, and Vernal. Testing Site Information can be found on our website, utahcnaregistry.com. You can also follow the link provided in your TMU account.

Test Scheduling

Each test site is run independently and sets their own schedule. To view the most current list of UNAR approved testing sites, visit UNAR’s website at utahcnaregistry.com and view the [Test Site Information](#) document. This document will also list each site’s testing hours and whether an appointment is required for the written knowledge exam or if they welcome walk-ins. Appointments are always required for the skills exam. This document can also be viewed in your TMU account.

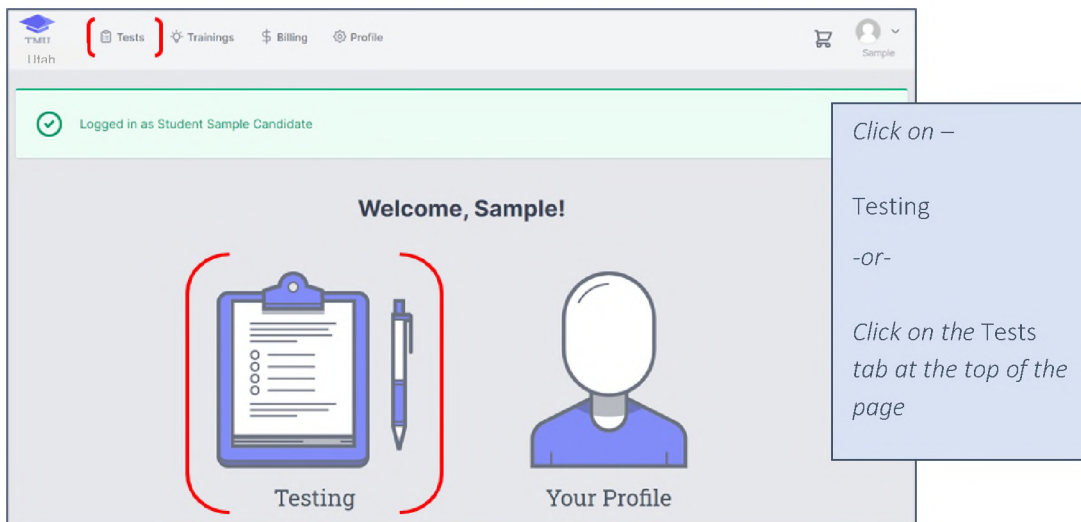
To schedule an exam with a specific test site, you must login to your TMU account and pay for the exam. Visa, MasterCard, Discover, American Express, or debit cards are acceptable forms of payment when scheduling online.

Exam Fees	
INITIAL: Written Knowledge Exam - \$55.00 Skill Exam - \$55.00	\$110.00
RETAKE: Written Knowledge Exam 2 nd & 3 rd Attempt(s)	\$55.00
RETAKE: Skills Exam 2 nd & 3 rd Attempt(s)	\$55.00

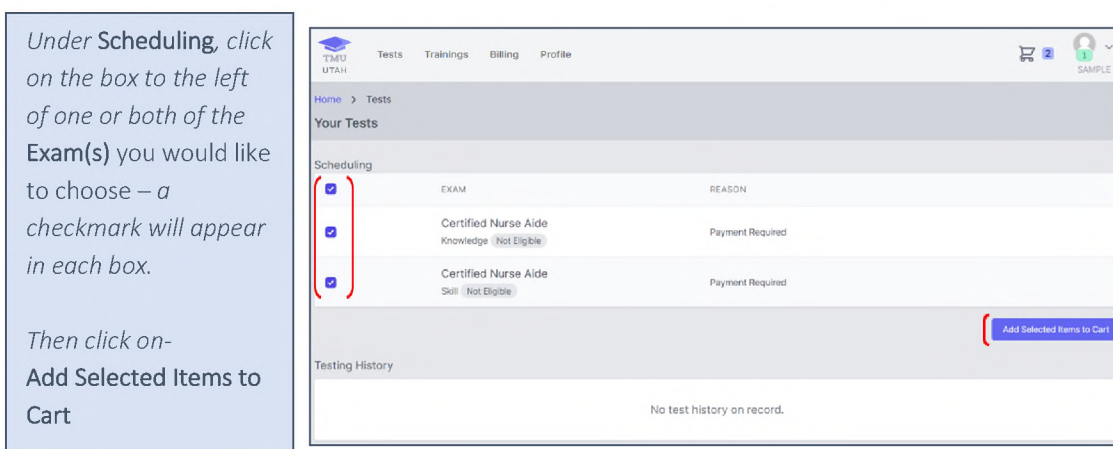
After paying your testing fees, you will be able to schedule an exam date of your choice. You will receive your exam confirmation notification by email, text, or by signing in to your account. You may login with any internet connected device. To schedule or reschedule your exam date, sign into the Utah TMU webpage at: ut.tmutest.com with your Email or Username and Password. If you are unable to schedule/reschedule on-line, please call the UNAR office or selected test site directly for assistance.

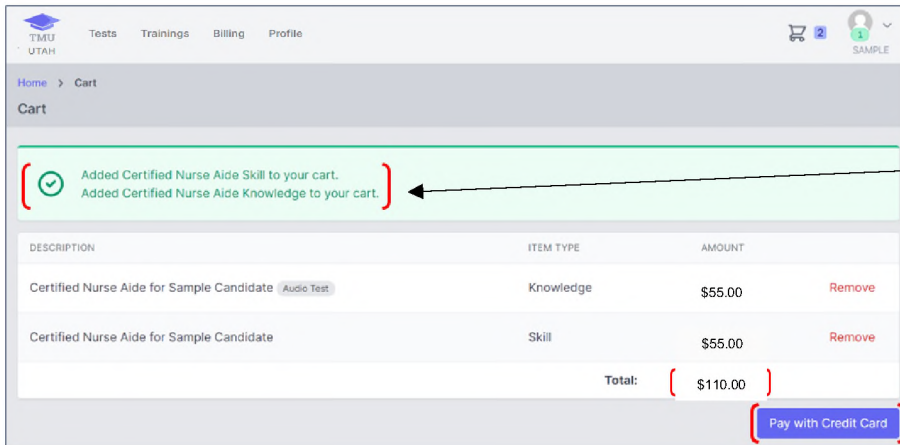
If you schedule an appointment for your written knowledge exam and later decide you would like to take the exam as a walk-in, you must first cancel your existing testing appointment. If you miss your scheduled appointment, you will forfeit your testing fee. (See page 12 and 13 for rescheduling requirements.)

This is the home screen you will see once you have logged into your TMU account:



Before you can schedule your testing appointments, you will need to pay your testing fees:

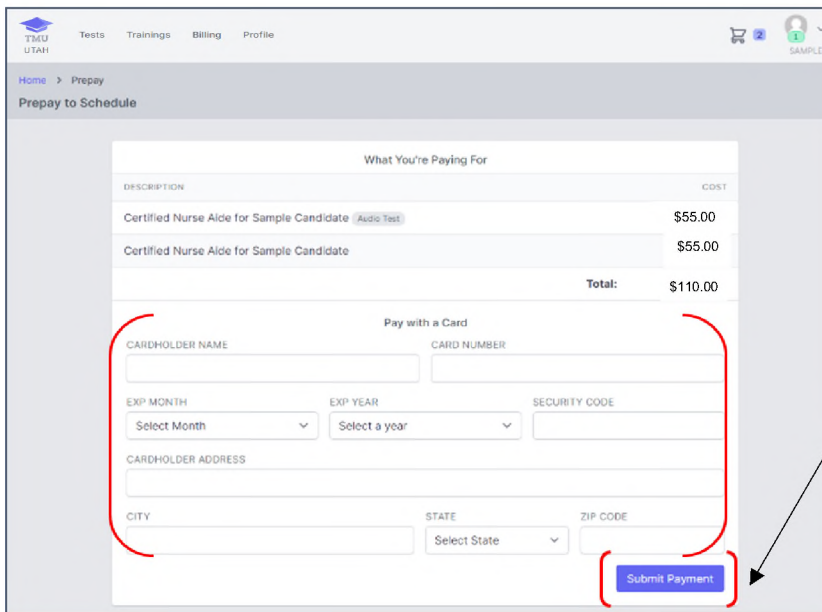




You will get a message that the selected exam(s) have been added to your cart

click on-

Pay with Credit Card

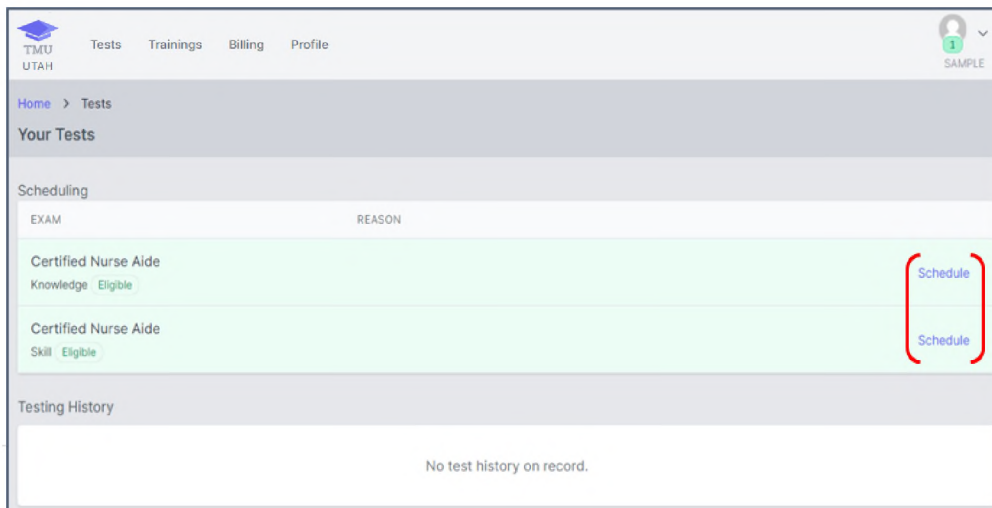


Enter the Credit Card information and then click on-

Submit Payment

You will receive a receipt of the transaction.

To schedule or reschedule a testing appointment:



All eligible test events will appear in this format.

To select a test, click on -

Schedule

next to the corresponding test component, knowledge and/or skills.

To select a test site, test date, and test time click on – Schedule

TEST DATE	TEST SITE	SCHEDULING FOR
07/15/2021 12:00 PM CDT	Practice Test Site (TS) Ogden, UT	K Certified Nurse Aide S Certified Nurse Aide
07/15/2021 12:00 PM CDT	Practice Test Site (TS) Ogden, UT	K Certified Nurse Aide S Certified Nurse Aide

Student CANDIDATE, SAMPLE scheduled into Skill for Certified Nurse Aide.
Student CANDIDATE, SAMPLE scheduled into Knowledge for Certified Nurse Aide.

EXAM	REASON
Certified Nurse Aide Knowledge <small>Not Eligible</small>	Already Scheduled
Certified Nurse Aide Skill <small>Not Eligible</small>	Already Scheduled

TEST DATE	EXAM	TEST SITE	STATUS
07/15/2021 12:00 PM CDT	Certified Nurse Aide Knowledge	Practice Test Site (TS) Memphis, TN	Scheduled
07/15/2021 12:00 PM CDT	Certified Nurse Aide Skill	Practice Test Site (TS) Memphis, TN	Scheduled

This screen confirms you are scheduled into a test date to take your knowledge and skills exams.

Your status shows Scheduled and a note at the top of your screen also shows you are scheduled.

Click on- Test Confirmation Page to see your test confirmation with important reminders for testing.

Canceling or Rescheduling an Exam

All candidates may cancel or reschedule an existing exam appointment in TMU **by 4 pm two (2) business days prior to the scheduled exam day**, excluding Saturdays, Sundays, and holidays.

Example: If you are scheduled to take your exam on a Friday, you would need to reschedule by close of business the Wednesday before your scheduled exam.

Scheduled test date is on a:	Reschedule before 4:00 PM MST
Monday	MST The previous Thursday
Tuesday	The previous Friday
Wednesday	The previous Monday
Thursday	The previous Tuesday
Friday	The previous Wednesday
Saturday	The previous Thursday
Sunday	The previous Thursday

Please note: Rescheduled exams will not be granted less than one (1) full business day prior to a scheduled exam date. **If you fail to show up to your scheduled appointment, you will forfeit your testing fee.**

Your test confirmation letter will provide you with important information regarding where you are scheduled to test (date, time, and address). The body of the test confirmation letter will give you specific instructions on dress code, photo ID, name requirements, and other important testing information.

It is important you read this letter!

No Show Information

If you are late for your scheduled testing appointment, you may be considered a No Show. Should you fail to show up, arrive late, do not have the appropriate ID for either of your testing appointments, or not wear scrubs for your skills exam, you will forfeit your testing fee. You must repay the testing fee before you can schedule a new exam. No Shows do not count as one (1) of your three (3) attempts.

If you would like to see if your No Show can be waived, please contact the testing site where your testing appointment was scheduled. UNAR staff cannot release test candidates from No Shows without authorization from the test site. No Shows can only be challenged within 10 business days from the date the No Show was received.

Please contact the testing site directly in the event of an emergency.

Refund of Testing Fees

Unused testing fees are refundable up to six (6) months after payment is made. After that 6-month period, unused testing fees are non-refundable. Unused testing fees will remain available in your TMU account.

ID Requirements

A current, valid, government-issued photo ID must be presented at time of testing and must be the original ID. (Photo, fax, or digital copies will not be accepted.) The first and last names on the photo ID must be the test candidate's legal names and must match the first and last names of the test candidate in their TMU account. Photo ID must have an expiration date. The following forms of photo ID are acceptable:

- Driver's license, learner's permit, or temporary operator card from any state
- ID issued by any branch, department, or agency of the US or State of Utah

- A tribal ID card
- Passport from any country
- Student ID issued from any high school, technical school, college, or professional school within the state of Utah are acceptable **when used with a second form of ID.**
 - School IDs are acceptable without an expiration date but must be from the current school year
 - School IDs must include a photo
 - A second form of ID with Legal Name must be presented with School ID. Names on both forms of ID must match each other and the TMU account.
 - Acceptable second forms of ID to present with School ID include:
 - An expired Driver’s License, State ID card, or Temporary ID card/with or without photo
 - Expired passport or passport card
 - Original copy of Birth Certificate with signature, stamp, or raised seal
 - Social Security Card

In cases where names do not match or your ID(s) are not proper/valid, you will be considered a No Show. You will forfeit your testing fee and will need to pay for another exam appointment.

Personal Items During Exam(s)

Personal items are to be stored according to test site policy. No cell phones are allowed. You may use a calculator, scratch paper, pencil/pen, or whiteboard and marker, all of which are provided by the testing site. A word-to-word translation dictionary is allowed but must be provided to the test site in advance for inspection and may not contain definitions or added notes. (See the Translation Policy on UNAR’s website, utahcnaregistry.com.)

All equipment needed for the skills exam will be provided by the testing site including blood pressure cuff, stethoscope, and a watch/clock with a second hand.

Dress for Skills Exam

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

ADA Accommodations

As per the Americans with Disabilities Act (ADA), UNAR provides reasonable accommodations for the competency evaluation exams that will enable test candidates with disabilities or limitations that may affect their ability to perform the competency evaluations, to participate in testing while demonstrating the knowledge, skills, and abilities essential to function as a nursing assistant.

Test Candidates with a qualified disability or limitation may request accommodations for testing by completing the *ADA Accommodations Request* form available on UNAR’s website, utahcnaregistry.com. The completed application and supporting documentation should be submitted to UNAR as directed on the application. ADA request forms submitted without supporting documentation will not be accepted. All accommodations must be requested and approved **prior** to scheduling your testing appointments.

Test candidates must be able to reasonably demonstrate the ability to competently and safely perform all required skills that the examination is measuring. You may not test if you have a physical limitation (excluding pre-arranged ADA’s) that would prevent you from safely performing your duties as a nurse aide (examples: cast, crutches, etc.). Please contact UNAR at office@utahcnaregistry.com if you have any questions.

Audio for Written Knowledge Exam

An audio version of the written knowledge exam is available to all students and is not considered an ADA accommodation. Audio may be requested through your TMU account under "Your Profile" information and must be selected *prior* to scheduling your exam. If assistance is needed, contact either your program instructor or UNAR staff at office@utahcnaregistry.com.

Translation Information

The official language for the competency evaluation is English. Test candidates must be able to read, write, communicate, and document in English.

The written knowledge exam does have a Spanish translation feature included with each test question. Test candidates may use the TMU translation feature by selecting "Spanish" for each question.

Word-to-word translation dictionaries are allowed for any language but must be checked by the testing site staff to assure that no definitions are included in the dictionary and that it is not a source of handwritten text or materials that could be used in violation of UNAR Cheating Policy. Use of a word-to-word translation dictionary is at the testing candidate's own discretion. UNAR makes no warranty of any kind, either expressed or implied, as to the accuracy, reliability, or correctness of any translation made from English to any other language by a translation dictionary or TMU translation software.

Third party online translation software or other tools are not allowed. Use by test candidate of any written, audio, or video material, or any other mechanism not specifically authorized during the examination for the purpose of assisting a test candidate in the examination will be considered cheating.

A copy of the Translation Policy can be found on the UNAR website utahcnaregistry.com.

Cheating

Cheating of any kind during the UNAR State Competency Exams will not be tolerated. Substantiated findings of cheating will result in denial or withdrawal of certification, forfeiture of exam cheated on, and denial of any further testing for a minimum of 45 days.

Test Candidates are encouraged to be familiar with the current Cheating Policy which can be found on the UNAR website, utahcnaregistry.com.

Behavioral Misconduct and Unlawful Acts

Behavioral misconduct or unlawful acts by nurse aide students or test candidates are strictly prohibited at any stage of the NATCEP or certification process. Such acts will not be tolerated and may result in dismissal from the NATCEP, denial of testing privileges, and/or the revocation of a newly obtained certification.

Test Candidates are encouraged to be familiar with the current Behavioral Misconduct and Unlawful Acts Policy, available on the UNAR website at utahcnaregistry.com.

Test Results

Test Results

The results of your written knowledge exam will be released in your TMU account on the day you took your exam after 6:00 pm Monday-Friday. If you complete your written knowledge exam after 6:00 pm, your results will become available after 6:00 pm the following business day. If it has been more than three (3) business days and you do not have your results, email the UNAR staff at office@utahcnaregistry.com. Make sure to include your full name, date of birth, date of testing, and testing site. The results of your skill exam will be released in your TMU account on the day you took your exam at 6:00 pm Monday-Friday. If you complete your skill exam after 6:00 pm, your results will become available after 6:00 pm the following business day.

UNAR staff must score each skill exam before the results can be released. Our office closes at 4:00 pm Monday-Thursday and at 3:00 pm on Friday. Our staff will attempt to score all exams before the close of business each day; however, this may affect the day and time your results are released. UNAR staff cannot release testing results over the phone or by email.

If it has been more than three (3) business days and you do not have your results, email the UNAR staff at office@utahcnaregistry.com. Make sure to include your full name, date of birth, date of testing, and testing site.

To view your test results, sign into the Utah TMU webpage at: ut.tmutest.com with your Email or Username and Password.

To review your written knowledge exam and skill exam results:

Click on –
Testing
-or-
Click on the Tests tab at the top of the page

Testing History

TEST DATE	EXAM	TEST SITE	STATUS	
2023 M MDT	Nurse Aide Skill	Testing - UNAR Group Testing High School City, UT	Passed	Details Print Test Results
2021 M MDT	Nurse Aide Knowledge	Testing - UNAR Group Testing High School City, UT	Failed	Details Print Test Results
2021 M MDT	Nurse Aide Knowledge	Testing - UNAR Group Testing High School City, UT	No show	
2020 M MDT	Nurse Aide Skill	Testing - UNAR Group Testing High School City, UT	Passed	Details Print Test Results
2019 M MDT	Nurse Aide Knowledge	Testing - UNAR Group Testing High School City, UT	Passed	Details Print Test Results
11/13/2018 9:30 AM MDT	Nurse Aide Skill	Testing - UNAR Group Testing High School City, UT	Passed	Details Print Test Results

Click on – Details to view your results
-or-
Click on Print Test Results to print your results.

CNA Certificate

Once you have passed both your competency exams, an official Proof of Certification certificate with a wallet card will be mailed to you at the address in your TMU account. Certificates are mailed 7-10 business days after the successful completion of both competency exams.

If your certificate is returned to UNAR as non-deliverable or if there is a change to your address after your certificate has been mailed out, you will need to submit a *Duplicate Certificate Application* and pay the appropriate fee before we will send out another certificate.

You are also able to print an official Certificate Verification Page by visiting our on-line registry at ut.tmutest.com.

CNA Registry

Utah CNA certificate information is viewable by the public while a certificate is active and for 24-months after a certificate expires.

Utah CNA information is viewable on the Abuse Registry for life for substantiated allegations of resident abuse, neglect, or misappropriation of property by the CNA while employed at a Utah Medicare or Medicaid facility.

Renewal Requirements

You must renew your CNA certificate every two (2) years. Federal regulation requires that a nurse aide perform nursing or nursing related services in the previous 24-months for renewal. (42 Chapter IV §483.156)

The Utah Administrative Code requires that a CNA perform nursing or nursing-related services for a minimum of 200 paid hours under the direction of a licensed nurse in the previous 24-months for renewal. (R432-45)

Your Renewal Notice Form must be signed by a licensed nurse, an authorized human resources representative, or an administrator, to verify you have worked 200 paid hours under the direction of a licensed nurse. Return the signed form to the UNAR office before your expiration date. Renewal Notice Forms are available in your TMU account 90 days prior to your expiration date and six (6) months after your expiration date.

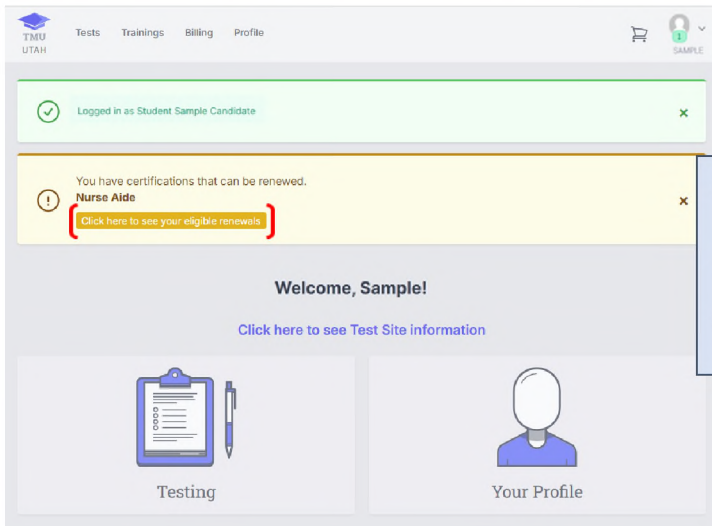
It is important to keep your address, phone number, and email address up to date in your TMU account. Reminder notifications are emailed and sent to your TMU account 90, 60, and 30 days prior to your expiration date. A Renewal Notice Form will be mailed to the address on file 45 days prior to your expiration date. Renewal Notice Forms can be accessed 90 days prior to your expiration date through your TMU account. If you have checked the box in your TMU account that states “Unlisted from Phone and Mailing Lists,” you will not receive these notifications and must keep track of your renewal due date.

If a Renewal Notice Form is received one (1) day to six (6) months late, there will be a required late fee of \$40. If a Renewal Notice Form is six (6) months to 24-months late, you will be required to retest under UNAR’s *Expired Certificate Application*.

Once your Renewal Notice Form has been received, and if you owe a late fee, UNAR staff will email you a secure payment link. Visa, MasterCard, Discover, American Express, or debit cards are acceptable forms of payment when paying any late fee that may be due. UNAR does not accept money orders, cashier checks, personal checks, or cash for payment of late fees. These will be returned to you and will delay the processing of your Renewal Notice Form.

Individuals listed on the Abuse Registry are not eligible for renewal.

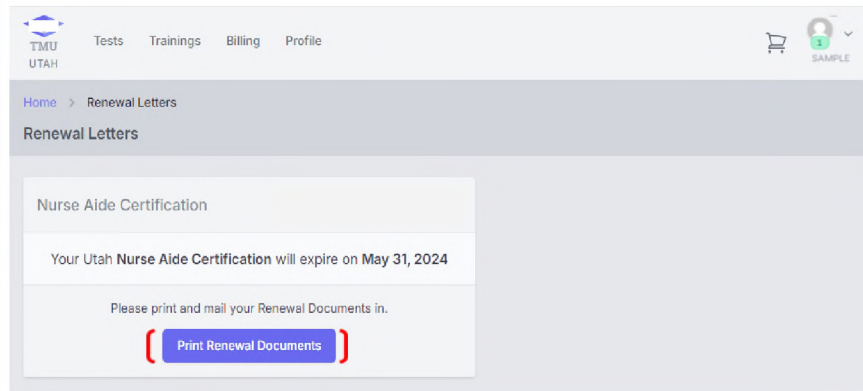
To access your Renewal Form, log into your TMU account.



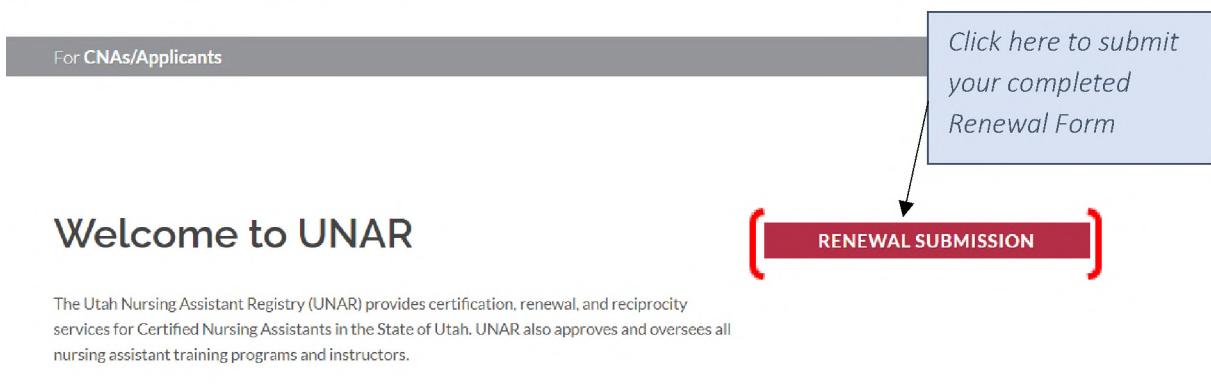
Click on the -
"Click here to see your eligible renewals" tab

Click on the
"Print Renewal Documents" tab

If you need more than 1 Renewal Form to reach the 200 required hours, print off as many Renewal Forms as you need.



Completed renewal forms can be submitted to UNAR on our website, utahcnaregistry.com by clicking on the red "Renewal Submission" button.



Expired Certificates

You may renew your certificate up to six (6) months after your expiration date by meeting all renewal requirements, submitting your completed renewal form to UNAR, and paying any late fees that may be due.

Extensions are not given to your expiration date so that you can complete the 200 paid hours necessary to renew nor will any late fees be waived.

If you are between six (6) and 24 months expired, you can recertify by successfully passing the state written knowledge exam and skills exam. To apply for testing, visit our website, utahcnaregistry.com, scroll down to the Form section, fill out and submit the *Expired Certificate Application*.

If you are more than 24 months expired, you are ineligible to test. You will need to complete another training program and pass the state competency exams. A list of UNAR's *Approved Training Programs* can be found on our website.

Skills Exam Instructions

UNAR requires that each student completing a nursing assistant training program learns, and is able to demonstrate, the ability to competently and safely perform more than 70 skills. This is documented while enrolled in a training program by completing the UNAR Nursing Assistant Skill Proficiency Performance List (NAPP).

Of the 70+ skills learned, 20 have been identified for inclusion in the skills exam by the UNAR Test Advisory Committee. Each skill has been reviewed for accuracy and evidence-based best practice. Of these 20 selected skills, test candidates will be expected to demonstrate five (5) random skills during the evaluation with a skills observer at a UNAR approved test site. To pass the skill exam, test candidates must receive a minimum score of 80% for each skill performed, including 100% of key steps, and complete testing within 45 minutes. One skill will be randomly selected from each of the five (5) categories:


Vital Signs Skills
Vital Sign: Blood Pressure *Key Step
Vital Sign: Pulse/Respiration *Key Step
Oral Care/Feeding Skills
Denture Care
Mouth Care: Conscious, Brushing Teeth
Mouth Care: Unconscious
Feeding Resident: While in Bed
Ambulate/Positioning/Transfer Skills
Pivot Transfer: Bed to Wheelchair Using Gait Belt
Ambulate Using Gait Belt
Ambulate with Walker Using Gait Belt
Position: Lateral
Toileting Skills
Assist with Bedpan/Peri Care: Female
Brief Change with Peri/Anal Care: Female
Brief Change with Peri/Anal Care: Male
Indwelling Catheter Care with Enhanced Barrier Precautions: Female
Indwelling Catheter Care with Enhanced Barrier Precautions: Male
Miscellaneous Skills
Handwashing
Anti-Embolic Stocking (One Leg)
Dressing Resident: Affected Arm
Empty Down Drain Bag and Record Urine Output
Occupied Draw Sheet Change

Day of Skill Exam

- Turn off and secure cell phone, smart watch, and all personal items.
- Five (5) skills will be randomly assigned, one (1) skill from each of the five (5) categories.
- The resident may be a mannequin, or a skills observer.
- Talk to the resident as if you are in a real-life situation. The observer may answer for the resident.
- Skills exams will be conducted in a private area. In the interest of time, there is no need to provide privacy by pulling a curtain, excusing visitors, or providing a bath blanket if skill would normally require you to do so.
- You do not need to lower the bed at the end of each skill. In the interest of time, you may leave the bed at a comfortable working height unless the skill specifically requires you to do otherwise.
- There are no side rail requirements so you may use them according to your preference.
- You may use, move, or throw away, any equipment/supplies as required by task. Do not be concerned about throwing away gloves, etc.
- You will not actually use “messy” supplies such as water or toothpaste *on the mannequin* but will be expected to go through motions as if actually using them.
- Skills observer will demonstrate where supplies and equipment are located and how they work.
- ***Every step must be demonstrated to receive credit. You cannot just verbalize what you would do, you must actually do it.***
- Verbalizing while demonstrating is allowed and may help clarify the actions. Skills observers may ask you to verbalize as you are demonstrating for clarification.
- Hand sanitizer should be used anytime hand hygiene is required.
- You may ask the observer to re-read the scenario if needed.
- Tell the skills observer each time you are finished with a skill so they know you are ready to move on.
- Once the exam begins, there will be a 45-minute time limit on the test. Before the exam has ended, you may correct any mistakes you made by telling the skills observer you would like to **re-demonstrate** the missed steps as directed.
- The skills observer can answer questions from the test candidate at any time during the exam if they pertain to supplies or to clarify scenarios. The skills observer will determine which questions can be answered.
- The role of the skills observer is to document whether or not you complete each step properly. They do not decide whether you pass or fail.
- The skills observer will not offer feedback on exam performance.
- You may not leave the skills exam lab until testing is complete.
- You will receive a text message or email within 1-3 business days notifying you when your results are available to view in TMU.

Each student will receive a recording form during the skill exam and use it to document any skill that requires documentation.

SKILLS EXAM RECORDING FORM	
	Date: _____
P _____ R _____	P _____ R _____
BP _____	BP _____
Output _____ mL	Output _____ mL
Student Name: _____	Observer Name: _____
Student Signature: _____	Observer Signature: _____



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

Vital Signs Skills

1. Vital Sign: Blood Pressure	
<ul style="list-style-type: none"> • <i>Test Candidate is asked to take resident's manual blood pressure.</i> • <i>A recording form is provided to document blood pressure reading.</i> • <i>Resident is sitting at a table.</i> • <i>A person portrays the role of resident.</i> • <i>No more than two (2) attempts per arm is allowed (4 total).</i> • <i>Between each attempt, the cuff must be deflated completely.</i> 	
1	Greets resident by name
2	Introduces self by name
3	Identifies self as a CNA
4	Performs hand hygiene
5	Explains procedure to resident
6	Cleans earpieces of stethoscope with alcohol wipe
7	Cleans diaphragm of stethoscope with alcohol wipe
8	Positions resident's arm in a resting position on a firm surface
9	Wraps cuff around upper arm with bladder over artery
10	Places diaphragm over brachial artery
11	Inflates cuff to 160-180mm/Hg
12	Slowly deflates cuff, watching sphygmomanometer
13	Removes cuff from arm
14	Records blood pressure reading on recording form
15*	Recorded systolic blood pressure is within +/-10 mm/Hg of observer's measurement
16*	Recorded diastolic blood pressure is within +/-10 mm/Hg of observer's measurement
17	Performs hand hygiene

2. Vital Sign: Pulse/Respirations

- *Test Candidate is asked to obtain and record resident's pulse.*
- *Test Candidate may take radial or apical pulse (as preferred by candidate). Test candidate may count radial pulse for 30 seconds then double number or count apical pulse for one (1) full minute.*
- *Test Candidate tells Skill Observer when to start and stop counting.*
- *Test Candidate is asked to obtain and record resident's respirations.*
- *Test Candidate tells Skill Observer when to start and stop counting.*
- *A recording form is provided to document readings.*
- *Resident is sitting at a table.*
- *A person portrays the role of resident.*
- *A calculator is available upon request.*

1	Greets resident by name
2	Introduces self by name
3	Identifies self as a CNA
4	Performs hand hygiene
5	Explains procedure to resident
6	Locates radial pulse on thumb side of wrist or uses apical method by placing diaphragm of stethoscope on left side of resident's chest
7	Counts radial pulse rate for 30 seconds then doubles number or counts apical pulse for one (1) full minute
8	Records pulse rate on recording form
9*	Recorded pulse reading is within +/- four (4) beats of skill observer's recorded reading
10	Counts respiratory rate for 30 seconds then doubles number or counts for one (1) full minute.
11	Records respiratory rate on recording form
12*	Recorded respiratory reading is within +/- two (2) breaths of skill observer's recorded reading
13	Performs hand hygiene

Oral Care/Feeding Skills

3. Denture Care	
	<ul style="list-style-type: none">• <i>Test candidate is asked to clean resident's upper denture.</i>• <i>Resident's upper denture has already been removed and is in denture cup.</i>• <i>After cleaning, denture will be stored in denture cup.</i>• <i>Overbed table is a clean surface.</i>• <i>Providing mouth care for resident is not tested in this skill.</i>• <i>A mannequin portrays role of resident.</i>
1	Greets resident by name
2	Introduces self by name
3	Identifies self as a CNA
4	Performs hand hygiene
5	Explains procedure to resident
6	Dons gloves
7	Protects denture from damage by lining bottom of sink with a washcloth
8	Uses water to rinse denture
9	Applies denture toothpaste to denture brush
10	Brushes all surfaces of denture
11	Rinse denture
12	Rinse cup and lid before placing upper denture in denture cup
13	Places upper denture in denture cup
14	Adds water to cup to cover upper denture
15	Place lid on cup, store on overbed table (clean surface)
16	Removes gloves
17	Performs hand hygiene immediately after removing gloves and before placing call light and water
18	Call light is left within resident's reach
19	Water is left within resident's reach

4. Mouth Care: Conscious, Brushing Teeth

- *Test candidate is asked to provide mouth care for a conscious resident who is unable to brush own teeth.*
- *Resident has their natural teeth.*
- *Resident is in bed.*
- *A mannequin portrays role of resident.*
- *Messy supplies will NOT be used on the mannequin; however, steps must be demonstrated as if actually using them.*

1	Greets resident by name
2	Introduces self by name
3	Identifies self as a CNA
4	Performs hand hygiene
5	Explains procedure to resident
6	Positions resident in an upright position (60-90 degree angle)
7	Dons gloves
8	Offers resident clothing protector or towel
9	Applies toothpaste to toothbrush
10	Inserts toothbrush into resident's mouth
11	Brushes all surfaces of upper teeth
12	Brushes all surfaces of lower teeth
13	Brushes tongue
14	Provides resident water to rinse mouth
15	Provides resident an emesis basin for spitting
16	Cleans/dries around resident's mouth
17	Removes clothing protector or towel
18	Offers resident lip moisturizer
19	Removes gloves
20	Performs hand hygiene immediately after removing gloves and before placing call light and water
21	Call light is left within resident's reach
22	Water is left within resident's reach

5. Mouth Care: Unconscious

- *Test candidate is asked to provide mouth care for unconscious resident.*
- *Resident has their natural teeth.*
- *Resident is in bed.*
- *A mannequin portrays role of resident.*
- *Messy supplies will NOT be used on the mannequin; however, steps must be demonstrated as if actually using them.*

1	Greets resident by name
2	Introduces self by name
3	Identifies self as a CNA
4	Performs hand hygiene
5	Explains procedure to resident
6	Dons gloves
7	Turns resident's head to side
8	Places a towel under resident's head or cheek/chin
9	Wets sponge in cup
10	Removes excess fluid from sponge
11	Inserts sponge into resident's mouth
12	Test candidate does not use toothpaste or toothbrush
13	Rotates sponge against all surfaces of mouth
14	Pat dries around resident's mouth
15	Removes towel
16	Applies lip moisturizer
17	Removes gloves
18	Performs hand hygiene immediately after removing gloves and before placing call light
19	Call light is left within resident's reach

6. Feeding Resident: While in Bed

- *Test candidate is asked to feed resident a meal.*
- *Resident is unable to fully feed themselves.*
- *Resident does not have an affected side.*
- *Resident can assist with eating by holding small items to take bites.*
- *Resident is in bed.*
- *A mannequin portrays role of resident.*
- *Skills observer will answer for the resident.*

1	Greets resident by name
2	Introduces self by name
3	Identifies self as a CNA
4	Performs hand hygiene
5	Explains procedure to resident
6	Verify with resident correct name on meal card
7	Verify with resident correct diet on meal card
8	Verify with resident any allergies listed on meal card
9	Positions resident in an upright position (60-90 degree angle)
10	Assists resident to clean hands with disposable wipes
11	Asks resident if they would like a clothing protector
12	Places a clothing protector/towel
13	Sit at resident's eye level
14	Tells resident what foods are on plate
15	Allows resident to make choices while eating
16	Offers fluid
17	Wipe resident's hands/mouth at end of meal
18	Removes clothing protector from resident's clothing
19	Call light is left within resident's reach
20	Water is left within resident's reach
21	Performs hand hygiene

Ambulate/Positioning/Transfer Skills

7. Pivot Transfer: Bed to Wheelchair Using Gait Belt	
<ul style="list-style-type: none"> • <i>Test candidate is asked to transfer resident from bed to wheelchair.</i> • <i>Test candidate is required to use a pivot transfer technique and demonstrate proper use of gait belt.</i> • <i>Resident has experienced a stroke and has an affected (weaker) side.</i> • <i>Affected (weaker) side will be clearly identified by red tape.</i> • <i>Resident can stand and bear weight but cannot walk.</i> • <i>Resident is lying in bed.</i> • <i>A person portrays role of resident.</i> 	
1	Greets resident by name
2	Introduces self by name
3	Identifies self as a CNA
4	Performs hand hygiene
5	Explains procedure to resident
6	Locks bed wheels
7	Assist resident to sit at side of bed
8	Assists resident to put on non-skid footwear
9	Places gait belt snug around resident's waist, no twists in belt, buckle is threaded correctly (should be able to easily run fingers between belt and resident)
10	Positions wheelchair close to resident on unaffected (stronger) side
11	Locks wheelchair brakes
12	Lower bed until resident's feet are flat on floor
13	Test candidate stands in front of and faces resident
14	Grasps gait belt securely at both sides of resident
15	Assists resident to stand
16	Transfers resident to wheelchair by pivoting toward unaffected (stronger) side
17	Assists resident to sit into chair
18	Positions resident in wheelchair with hips against back of seat
19	Removes gait belt
20	Release wheelchair brakes
21	Call light is left within resident's reach of unaffected side
22	Water is left within resident's reach of unaffected side
23	Performs hand hygiene

8. Ambulate Using Gait Belt

- *Test Candidate is asked to assist resident to stand and ambulate using a gait belt.*
- *Resident is to be ambulated from bed to a chair.*
- *Resident is sitting on the side of the bed.*
- *Resident does not have an affected side.*
- *A person portrays the role of resident.*

1	Greets resident by name
2	Introduces self by name
3	Identifies self as a CNA
4	Performs hand hygiene
5	Explains procedure to resident
6	Locks bed wheels
7	Assists resident to put on non-skid footwear
8	Places gait belt snug around resident's waist, no twists in belt, buckle is threaded correctly (should be able to easily run fingers between belt and resident)
9	Lower bed until resident's feet are flat on floor
10	Test candidate stands in front of and faces resident
11	Grasps gait belt securely at both sides of resident
12	Assist resident to stand
13	Positions self slightly behind on resident's side
14	Ambulates resident while grasping gait belt
15	Assists resident to sit into chair
16	Positions resident in chair with hips against back of seat
17	Removes gait belt
18	Call light is left within resident's reach
19	Water is left within resident's reach
20	Performs hand hygiene

9. Ambulate with Walker Using Gait Belt

- *Test Candidate is asked to assist resident to stand and ambulate from bed to chair using a gait belt and walker.*
- *Resident is sitting on the side of the bed.*
- *Resident does not have an affected side.*
- *A person portrays role of resident.*

1	Greets resident by name
2	Introduces self by name
3	Identifies self as a CNA
4	Performs hand hygiene
5	Explains procedure to resident
6	Locks bed wheels
7	Assists resident to put on non-skid footwear
8	Places gait belt snug around resident's waist, no twists in belt, buckle is threaded correctly (should be able to easily run fingers between belt and resident)
9	Lower bed until resident's feet are flat on floor
10	Test candidate stands in front of and faces resident
11	Grasps gait belt securely at both sides of resident
12	Assist resident to stand
13	Positions walker in front of resident before or after resident stands
14	Positions self slightly behind on resident's side
15	Ambulates resident with walker while grasping gait belt
16	Assists resident to sit into chair
17	Positions resident in chair with hips against back of seat
18	Removes gait belt
19	Call light is left within resident's reach
20	Water is left within resident's reach
21	Performs hand hygiene

10. Position: Lateral

- *Test candidate is asked to reposition resident to a lateral position.*
- *Test candidate can choose to place resident in either a left lateral or a right lateral position.*
- *Resident is in bed.*
- *A mannequin portrays role of resident.*

1	Greets resident by name
2	Introduces self by name
3	Identifies self as a CNA
4	Performs hand hygiene
5	Explains procedure to resident
6	Positions bed flat
7	Slides both hands/arms under resident's head/shoulders, moves resident toward self
8	Slides both hands/arms under resident's midsection, moves resident toward self
9	Slides both hands/arms under resident's hips/legs, moves resident toward self
10	Turns resident onto a lateral position facing away from self
11	Flexes resident's knee on up/top side of resident's body
12	Places pillow(s) between resident's legs/knees
13	Places pillow(s) under resident's top arm for support
14	Places pillow(s) against resident's back/torso for support
15	Call light is left within resident's reach
16	Water is left within resident's reach
17	Performs hand hygiene

Toileting Skills

11. Assist with Bedpan and Peri Care: Female	
<ul style="list-style-type: none"> • <i>Test candidate is asked to assist resident with a standard bedpan who needs to urinate.</i> • <i>Resident is in bed on a waterproof pad that has already been placed.</i> • <i>Changing waterproof pad is not tested in this skill.</i> • <i>Anal care is not tested in this skill.</i> • <i>Privacy with a bath blanket is not tested in this skill so that observer can see steps performed.</i> • <i>Skills observer will indicate where the “flat, dirty surface” is located.</i> • <i>Overbed table is a clean surface.</i> • <i>A mannequin portrays role of resident.</i> 	
1	Greets resident by name
2	Introduces self by name
3	Identifies self as a CNA
4	Performs hand hygiene
5	Explains procedure to resident
6	Dons gloves
7	Lowers head of bed flat
8	Assists resident to roll away from self
9	Positions bedpan centered, with wide side placed against resident’s buttocks
10	Assists resident to roll onto back with bedpan in place
11	Remove gloves
12	Perform hand hygiene immediately after removing gloves and before raising head of bed and positioning call light
13	Raises head of bed
14	Positions call light within reach of resident
<i>(Resident uses bedpan and calls nursing assistant)</i>	
15	Perform hand hygiene
16	Dons gloves
17	Lowers head of bed flat
18	Removes bedpan
19	Place bedpan on a on a dirty surface
20	Separates labia majora
21	Wipes down center of labia and vaginal area, starting with urinary meatus
22	Wipes down both sides of labia, starting with urinary meatus

23	Wipes upper thighs
24	Remove Gloves
25	Performs hand hygiene immediately after removing gloves and before placing call light and water
26	Call light is left within resident's reach
27	Water is left within resident's reach
28	Test candidate discarded soiled wipes in waste container
29	Test candidate wiped clean to dirty for each stroke
30	Test candidate used different part of wipe or new wipe for each stroke

12. Brief Change with Peri/Anal Care: Female

- *Test candidate is asked to change soiled brief for female resident who had a bowel movement.*
- *Resident is confined to her bed.*
- *Resident is in bed on a waterproof pad that has already been placed. Changing waterproof pad is not tested in this skill.*
- *Overbed table is a clean surface.*
- *A mannequin portrays role of resident.*

1	Greets resident by name
2	Introduces self by name
3	Identifies self as a CNA
4	Performs hand hygiene
5	Explains procedure to resident
6	Dons gloves
7	Lowers head of bed flat
8	Undoes front tabs of soiled brief
9	Rolls soiled brief down between resident's legs
10	Separates labia majora
11	Wipes down center of labia and vaginal area, starting with urinary meatus
12	Wipes down both sides of labia, starting with urinary meatus
13	Wipes upper thighs
14	Rolls resident onto side
15	Wipes anal area clean to dirty
16	Removes soiled brief
17	Places soiled brief into plastic bag or waste container
18	Does not place plastic bag with soiled brief on clean surface
19	Removes gloves
20	Perform hand hygiene
21	Dons gloves
22	Tucks clean brief under resident
23	Rolls resident onto back
24	Secures clean brief in place
25	Removes gloves
26	Performs hand hygiene immediately after removing gloves and before placing call light and water

27	Call light is left within resident's reach
28	Water is left within resident's reach
29	Test candidate used disposable cleansing wipes
30	Test candidate discarded soiled wipes by tucking into soiled brief or into waste container
31	Test candidate wiped clean to dirty for each stroke
32	Test candidate used different part of wipe or new wipe for each stroke

13. Brief Change with Peri/Anal Care: Male

- *Test candidate is asked to change soiled brief for a circumcised male resident who had a bowel movement.*
- *Resident is confined to his bed.*
- *Resident is in bed on a waterproof pad that has already been placed. Changing waterproof pad is not tested in this skill.*
- *Overbed table is a clean surface.*
- *A mannequin portrays role of resident.*

1	Greets resident by name
2	Introduces self by name
3	Identifies self as a CNA
4	Performs hand hygiene
5	Explains procedure to resident
6	Dons gloves
7	Lowers head of bed flat
8	Undoes front tabs of soiled brief
9	Rolls soiled brief down between resident's legs
10	Wipes penis from tip to base, starting with urinary meatus
11	Wipes scrotum/upper thighs
12	Rolls resident onto side
13	Wipes anal area clean to dirty
14	Removes soiled brief
15	Places soiled brief into plastic bag or waste container
16	Does not place plastic bag with soiled brief on clean surface
17	Removes gloves
18	Performs hand hygiene
19	Dons gloves
20	Tucks clean brief under resident
21	Rolls resident onto back
22	Secures clean brief in place
23	Removes gloves
24	Performs hand hygiene immediately after removing gloves and before placing call light and water
25	Call light is left within resident's reach
26	Water is left within resident's reach

27	Test candidate used disposable cleansing wipes
28	Test candidate discarded soiled wipes by tucking into soiled brief or into waste container
29	Test candidate wiped clean to dirty for each stroke
30	Test candidate used different part of wipe or new wipe for each stroke

14. Indwelling Catheter Care with Enhanced Barrier Precautions: Female	
<ul style="list-style-type: none"> • <i>Test candidate is asked to provide indwelling catheter care with enhanced barrier precautions for a female resident.</i> • <i>Resident is in bed on a waterproof pad that has already been placed.</i> • <i>Changing waterproof pad is not tested in this skill.</i> • <i>A mannequin portrays role of resident.</i> 	
1	Greets resident by name
2	Introduces self by name
3	Identifies self as a CNA
4	Performs hand hygiene
5	Explains procedure to resident
6	Unfolds and dons gown
7	Securely ties neck opening
8	Securely ties back opening behind back
9	Dons gloves after gown
10	Gloves overlap gown sleeves
11	Uses cleansing wipe to clean area around the resident's urinary meatus
12	Holds catheter near meatus
13	Cleans at least four (4) inches of catheter tubing beginning at the urinary meatus
14	Wipes catheter tubing in one direction away from urinary meatus
15	Secures tubing to resident's thigh
16	Places tubing over resident's leg
17	Attaches drainage bag to bed frame (non-movable part of bed)
18	Removes gloves before removing gown
19	Grasps one glove at palm of one hand then pulls off
20	Slips finger(s) or the thumb of ungloved hand underneath cuff of remaining glove at wrist.
21	Pulls down and turns glove inside out
22	Disposes of gloves in waste container
23	Removes gown and rolls dirty side in
24	Disposes of gown in waste container
25	Performs hand hygiene immediately after removing gown and before placing call light and water
26	Call light is left within resident's reach

27	Water is left within resident's reach
28	Test candidate used disposable cleansing wipes (not alcohol pads)
29	Test candidate discarded soiled wipes into waste container
30	Test candidate wiped clean to dirty for each stroke
31	Test candidate used different part of wipe or new wipe for each stroke

15. Indwelling Catheter Care with Enhanced Barrier Precautions: Male	
<ul style="list-style-type: none"> • <i>Test candidate is asked to provide indwelling catheter care with enhanced barrier precautions for a circumcised male resident.</i> • <i>Resident is in bed on a waterproof pad that has already been placed. Changing waterproof pad is not tested in this skill.</i> • <i>A mannequin portrays role of resident.</i> 	
1	Greets resident by name
2	Introduces self by name
3	Identifies self as a CNA
4	Performs hand hygiene
5	Explains procedure to resident
6	Unfolds and dons gown
7	Securely ties neck opening
8	Securely ties back opening behind back
9	Dons gloves after gown
10	Gloves overlap gown sleeves
11	Uses cleansing wipe to clean area around the resident's urinary meatus
12	Holds catheter near meatus
13	Cleans at least four (4) inches of catheter tubing beginning at the urinary meatus
14	Wipes catheter tubing in one direction away from urinary meatus
15	Secures tubing to resident's thigh
16	Places tubing over resident's leg
17	Attaches drainage bag to bed frame (non-movable part of bed)
18	Removes gloves before removing gown
19	Grasps one glove at palm of one hand then pulls off
20	Slips finger(s) or the thumb of ungloved hand underneath cuff of remaining glove at wrist.
21	Pulls down and turns glove inside out
22	Disposes of gloves in waste container
23	Removes gown by rolling dirty side in
24	Disposes of gown in waste container
25	Performs hand hygiene immediately after removing gown and before placing call light and water
26	Call light is left within resident's reach

27	Water is left within resident's reach
28	Test candidate used disposable cleansing wipes (not alcohol pads)
29	Test candidate discarded soiled wipes into waste container
30	Test candidate wiped clean to dirty for each stroke
31	Test candidate used different part of wipe or new wipe for each stroke

Miscellaneous Skills

16. Handwashing	
<ul style="list-style-type: none"> • <i>Test Candidate is asked to wash hands with soap and water.</i> 	
1	Wets hands thoroughly with water
2	Applies soap to hands
3	Rubs hands together with soap washing all surfaces of hands/fingers
4	Washes wrists with soap
5	Cleans fingernails by rubbing them in palm of other hand
6	Washed hands with soap for at least 20 seconds before rinsing
7	Rinses hands/wrists with fingers pointing downward
8	Dries hands/wrists with clean paper towel(s)
9	Turns off faucet with a paper towel
10	Does not touch clean hands to sink or faucet
11	Immediately discards paper towel into trash can without touching other hand

17. Anti-Embolism Stocking (One Leg)	
<ul style="list-style-type: none"> • <i>Test candidate is asked to put a knee-high anti-embolism stocking on one leg of resident.</i> • <i>Resident is in bed.</i> • <i>A mannequin portrays role of resident.</i> 	
1	Greets resident by name
2	Introduces self by name
3	Identifies self as a CNA
4	Performs hand hygiene
5	Explains procedure to resident
6	Prepare stocking for placement on foot by gathering or folding inside out to heel
7	Places stocking over resident's toes, foot, and heel
8	Ensures heel of stocking is smooth over heel of foot before pulling up the leg
9	Pull stocking up resident's leg
10	Leaves stocking smooth, free from wrinkles
11	Call light is left within resident's reach
12	Water is left within resident's reach
13	Performs hand hygiene

18. Dressing Resident: Affected Arm

- *Test candidate is asked to change gown/clothing for resident who has an affected (weaker) arm.*
- *Affected side is clearly identified by red tape.*
- *A mannequin portrays role of resident.*

1	Greets resident by name
2	Introduces self by name
3	Identifies self as a CNA
4	Performs hand hygiene
5	Explains procedure to resident
6	Allows resident to choose clothing
7	Undresses resident's unaffected side first
8	Undresses resident's affected side second
9	Places used clothing in hamper
10	Dresses resident's affected side first
11	Dresses resident's unaffected side second
12	Call light is left within resident's reach of unaffected side
13	Water is left within resident's reach of unaffected side
14	Performs hand hygiene

19. Empty Down Drain Bag and Record Urine Output

- *Test candidate is asked to empty resident's catheter down drain bag into graduate container and then measure and record urine output.*
- *Output should be recorded in mL.*
- *A recording form is provided to document urine output measurement.*
- *Skills Observer will indicate where the "flat, dirty surface" is located.*
- *A mannequin portrays role of resident.*

1	Greets resident by name
2	Introduces self by name
3	Identifies self as a CNA
4	Performs hand hygiene
5	Explains procedure to resident
6	Dons gloves
7	Places paper towel on floor under drainage bag
8	Places graduate on paper towel
9	Opens spout on down drain bag so urine will flow into graduate
10	Ensures drainage tube does not touch side of graduate
11	Cleans tip of spout with alcohol wipe
12	Close spout and replace into holder on bag
13	Places graduate on a flat, "dirty" surface
14	Removes gloves
15	Performs hand hygiene immediately after removing gloves and before placing call light, water, and recording output
16	Call light is left within resident's reach
17	Water is left within resident's reach
18	Read graduate at eye level
19	Records urine output measurement on recording form
20	Recorded measurement within +/- 25mL of observer's measurement

20. Occupied Draw Sheet Change	
<ul style="list-style-type: none"> • <i>Test candidate is asked to change resident's draw sheet, turning no more than once to each side.</i> • <i>Resident is able to roll on either side without difficulty.</i> • <i>Resident is confined to bed.</i> • <i>A mannequin portrays role of resident.</i> 	
1	Greets resident by name
2	Introduces self by name
3	Identifies self as a CNA
4	Performs hand hygiene
5	Explains procedure to resident
6	Dons gloves
7	Places clean draw sheet on a clean surface within reach
8	Positions bed flat
9	Rolls resident onto side
10	Rolls used draw sheet inward toward resident
11	Places clean draw sheet on bed extending from resident's shoulders to below hips
12	Rolls one half of clean draw sheet towards resident's back
13	Smooths clean draw sheet ensuring free from wrinkles
14	Rolls resident onto back
15	Rolls resident onto resident's other side
16	Removes used draw sheet
17	Unrolls clean draw sheet
18	Smooths second side of draw sheet ensuring free from wrinkles
19	Rolls resident onto back on clean draw sheet
20	Removes gloves
21	Performs hand hygiene immediately after removing gloves and before placing call light and water
22	Call light is left within resident's reach
23	Water is left within resident's reach

Written Knowledge Exam

The written knowledge exam consists of 75 multiple-choice questions. To pass the written knowledge exam test candidates must receive a minimum score of 75%. This means test candidates must answer a minimum

of 57 questions correctly to pass this portion of the competency evaluation. Test candidates have up to two (2) hours to complete the exam.

You will need your username and password when you take your written knowledge exam.

The written knowledge exam questions are selected randomly by the testing software from a large pool of questions that have been approved by the UNAR Test Advisory Committee. Each question has been reviewed for accuracy and is based on evidence-based practice.

SUBJECT AREAS	DISTRIBUTION OF EXAM QUESTIONS
Intro to Healthcare and Residents Rights <ul style="list-style-type: none"> • Certification Information • Healthcare & Resident’s Rights • Communication 	13
Basic Nursing Skills <ul style="list-style-type: none"> • Positioning & Ambulation • Basic Human Needs • Vital Signs • Nutrition • End of Life Care 	13
Personal Care <ul style="list-style-type: none"> • Resident Environment • Hygiene & Grooming 	13
Infection Prevention and Control	8
Safety	8
Mental Health/Illness & Cognitive Impairment	9
Body Systems	7
Rehabilitation & Restorative Care	4
Total number of questions	75

Written Knowledge Exam Vocabulary List

A

Abandonment
Abdominal Thrust
Abduction
Abduction Pillow / Wedge
Ability
Abuse
Abuse Registry
Acquired Immunodeficiency Syndrome (AIDS)
Active Range of Motion (AROM)
Activities of Daily Living (ADLs)
Acute Care
Adaptive / Assistive Devices
Adduction
Adult Protective Services (APS)
Advance Directive
Affected
Ageism
Agitation
Airborne Precautions
Alignment
Alveoli
Alzheimer's Disease
AM Care
Ambulate
Amputation
Amputee
Anaphylaxis
Anemia
Angina
Antiembolism Stocking
Anti-microbial
Anxiety
Aphasia
Apical
Apnea
Artery
Arthritis
Asepsis
Aspiration
Aspiration Precautions
Assault

Assisted Living

Asthma
Atrophy
Autism
Axillary

B

Bacteria
Base of Support
Battery
Bed Cradle
Bed Protector / Linen Protector
Bedpan
Bedside Commode
Belief
Belonging
Benign Prostatic Hypertrophy (BPH)
Bias
Biohazard / Biohazardous
Bipolar Disorder
Bladder
Bladder Retraining
Bland
Blindness
Blood Clot
Blood Glucose
Blood Pressure (BP)
Bloodborne Pathogens (BBP)
Body Language
Body Mechanics
Bone
Bony Prominences
Bowel Movement (BM)
Bowel Obstruction
Bowel Retraining
Brachial Artery
Brain
Brief
Bronchi
Bronchitis
Burns

C

Call Light
Cancer
Cane
Capillary
Carbohydrates
Cardiac
Cardiopulmonary Resuscitation (CPR)
Care Plan
Cataract
Catastrophic Reaction
Center for Disease Control (CDC)
Centigrade / Celsius (°C)
Central Nervous System (CNS)
Cerebral Palsy
Cerebrovascular Accident (CVA, Stroke)
Certification
Certified Nursing Assistant (CNA)
Chain of Infection
Cheyne-Stokes
Choking
Chronic
Chronic Obstructive Pulmonary Disease (COPD)
Circumcised
Clean
Clean Catch / Midstream
Clear Liquid (Cl Liq)
Clergy
Cliché
Client
Closed Bed
Clostridioides Difficile (formerly Clostridium Difficile) (C-Diff)
Cognition
Cognitive Impairment
Cold Pack
Collection Device (Hat)
Colostomy
Communicable
Communication
Concentrator
Condom Catheter
Confidentiality
Confusion
Congestive Heart Failure (CHF)

Conscious
Constipation
Contact Precautions
Contamination
Contracture
Coronary Artery Disease (CAD)
COVID-19
Cross Contamination
Crutches
Cultural Diversity
Culturally Sensitive Care
Culture
Customs
Cyanosis
Cyanotic

D

Dangle
Deafness
Decubitus
De-escalation
Defamation
Defecation
Dehydration
Delegation
Delirium
Delusion
Dementia
Denture
Department of Health (DOH)
Depression
Dermis
Diabetes Type 1 (T1DM)
Diabetes Type 2 (T2DM)
Diabetic Diet
Dialysis
Diaphragm
Diarrhea
Diastolic
Diet Card / Meal Card
Dietician
Digital Thermometer
Dignity
Dirty
Disability

Disabled
Disinfect
Disinfectant
Disposable
Diversity
Do Not Resuscitate (DNR)
Documentation
Doff
Don
Down Drain Bag
Down Syndrome
Drape
Draw / Lift / Transfer Sheet
Droplet Precautions
Dysphagia
Dysphasia
Dyspnea
Dysuria

E

Ear Canal
Edema
Electronic Thermometer
Elimination
Embolism
Emesis
Emesis Basin
Empathy
Emphysema
Enhanced Barrier Precautions
Enema
Epidermis
Epiglottis
Epilepsy
Epistaxis
Ethics
Ethnicity
Exhale / Exhalation / Expiration
Expectorate
Expire
Exploitation
Exposure Control Plan
Exposure Incident
Extension

F

Face Mask
Fahrenheit (°F)
Fainting (syncope)
Faith
False Imprisonment
Fan Fold
Fat
Fecal Impaction
Feces
Female External Catheter
Fiber
First Aid
Flatus
Flexion
Flow Meter
Fluid Balance
Fluid Restriction
Foot Drop
Foreskin
Fowler's
Fracture
Fracture Pan
Fraud
Full Liquid
Full Weight Bearing (FWB)

G

Gait
Gait / Transfer Belt
Gastroesophageal Reflux (GERD)
Gastronomy Tube
Gender
Gender Identity
Gender Pronouns
Geriatrics
Gland
Glaucoma
Glucometer
Gluten Free
Graduate
Grooming

H

Hallucination
Hand Hygiene
Health Care Team
Health Insurance Portability and Accountability Act (HIPAA)
Healthcare-Associated Infection (HAI)
Hearing Impaired
Heart Rate (HR)
Height (Ht)
Hemiplegia
Hemorrhoid
Hepatitis
High Protein
High-Fowler's
Hip Fracture
Hip Replacement
Holistic Care
Home Health
Hormones
Hospice
Hospital
HS / PM Care
Human Immunodeficiency Virus (HIV)
Humidifier
Hygiene
Hyperglycemia
Hypertension (HTN)
Hypoglycemia
Hypotension

I

Ileostomy
Immune System
Immunity (specific/nonspecific)
Incident Report
Incontinence
Incontinence Pad
Indwelling Catheter
Infection
Infection Prevention and Control (IPC)
Inflammation
Influenza

Inhale / Inhalation / Inspiration
Insulin
Intake
Integumentary
Intellectual Disability
Interdisciplinary
Intravenous (IV)
Inventory / Belonging List
Irregular
Isolation

J

Job Description
Joint

K

Kidney Stone
Knee Replacement
Knowledge Exam

L

Labia
Larynx
Lateral
Leg Bag
Liability
Lice
Licensed Practical Nurse (LPN)
Life Support Systems
Ligament
Living Will
Logroll
Long Term Care (LTC)
Low Cholesterol
Low Fat
Low Protein
Low Sodium

M

Malpractice
Mandated Reporter
Mania
Maslow's Hierarchy of Needs
Mechanical Lift

Mechanical Soft
Medicaid
Medical Abbreviations
Medical Doctor (MD)
Medical Record
Medical Terminology
Medicare
Mental Health
Mental Illness
Message
Metabolism
Microorganism
Milliliter (mL)
Misappropriation of Property
Misconduct
Mitered Corner
Mobility
Modified Calorie
Mottling
Mucous Membrane
Multidrug-Resistant Organisms (MDROs)
Multiple Sclerosis
Muscle
Myocardial Infarction (MI, Heart Attack)
MyPlate

N

Nares
Nasal Cannula
Nasogastric Tube
Nausea
Neglect
Nerve
Nocturia
Non-pathogen
Non-rebreather Mask
Non-skid Soles
Non-verbal Communication
Non-weight Bearing (NWB)
Normal Flora
Nursing Assistant Performance List (NAPP)
Nursing Team

O

Objective
Obsessive Compulsive Disorder (OCD)
Occult Blood
Occupational Safety and Health Administration (OSHA)
Occupational Therapist (OT)
Occupational Therapy
Occupied Bed
OLST (Order for Life Sustaining Treatment)
Ombudsman / ombuds
Omnibus Budget Reconciliation Act (OBRA)
Open Bed
Oral
Orthostatic
Orthotic
Osteoarthritis
Osteoporosis
Ostomy
Ostomy Bag
Ounces (oz)
Outpatient Care
Output
Oxygen (O₂)

P

Pacemaker
Pacing
Pain
Palliative Care
Pancreas
Paraplegia
Parkinson's Disease
Partial Weight Bearing (PWB)
Passive Range of Motion (PROM)
Pathogen
Patient
Patient Rights
Pediatric
Penis
Perineal Care
Perineum
Peripheral Vascular Disease (PVD)
Perseveration
Personal Dignity
Personal Protective Equipment (PPE)

Person-Directed Care
Pertussis
Phantom Pain
Phobia
Physical
Physical Therapist (PT)
Physical Therapy
Pivot
Pneumonia
Poisoning
POLST (Physician Order for Life Sustaining Treatment)
Polyuria
Postmortem Care
Post-Traumatic Stress Disorder (PTSD)
Power of Attorney
Prediabetes
Pressure Injury / Ulcer / Sore
Professionalism
Prone
Prosthesis
Protected Health Information (PHI)
Protein
Psychosocial
Pulse
Pulse Oximeter
Pureed

Q

Quadriplegia

R

Race
Radial Artery
Range of Motion (ROM)
Rash
Receiver
Rectal
Rectum
Redirection
Reflux
Registered Nurse (RN)
Rehabilitation
Religion

Renal Failure
Renewal
Reporting
Resident
Resident Rights
Respiration
Respiratory Rate (RR)
Respiratory Therapist (RT)
Restoration
Restorative Care
Restraint Alternatives
Restraints
Reverse Isolation
Rheumatoid Arthritis
Rigor Mortis
Rotation

S

Safety
Safety Data Sheet (SDS)
Sample / Specimen
Scabies
Scale
Schizophrenia
Scope of Practice
Scope of Responsibility
Scrotum
Security
Seizure
Self Esteem
Self-care Deficit
Semi-Fowler's
Sender
Sex
Sexual Harassment
Sexuality / Sexual Orientation
Sexually Transmitted Infection (STI)
Shearing
Shingles
Shock
Shortness of Breath (SOB)
Side Rails
Sign
Sim's
Sitz Bath

Skilled Nursing Facility (SNF)
Skills Exam
Social Worker (SW)
Soft
Speech Therapist / Speech-Language Pathologist (SLP)
Speech Therapy
Sphygmomanometer
Spinal Cord
Spinal Cord Injury
Spiritual
Spiritual Needs
Standard Precautions
Sterile
Stethoscope
Stoma
Stool
Straight Catheter
Stress
Subcutaneous Tissue
Subjective
Substance Abuse
Suicide
Sundowning
Supine
Supportive Devices
Suprapubic Catheter
Sympathy
Symptom
Systolic

T

Temporal
Tendon
Terminal Illness
Terminally Ill
Thermometer
Thyroid
Toe Pleat
Total Parenteral Nutrition (TPN)
Trachea
Transmission-based Precautions
Trapeze

Traumatic Brain Injury (TBI)
Triggers
Tuberculosis (TB)
Tumor
Tympanic

U

24 hr. Urine Collection
Ulcer
Unaffected
Uncircumcised
Unconscious
Ureterostomy
Urinal
Urinalysis
Urinary Incontinence
Urinary Meatus
Urinary Retention
Urinary Tract Infection (UTI)
Urination
Utah Nursing Assistant Registry (UNAR)

V

Vagina
Validation Therapy
Values
Vegetarian
Vein
Verbal Communication
Vertigo
Virus
Visual Impairment
Voiding
Vomit

W

Walker
Wandering
Weight (Wt)
Weight Bearing
Wheelchair
Willful Infliction of Harm

Abbreviations

AKA -above knee amputation
Amb – ambulate
ASAP – as soon as possible
BID – twice a day
BKA – below knee amputation
BRP – bathroom privileges
c̄ - with
cl liq – clear liquid
c/o – complains of
Dx – diagnosis
FBS – fasting blood sugar
FWB – full weight bearing
HOB – head of bed
HS – hour of sleep
I&O – intake and output

LLE – left lower extremity
LUE – left upper extremity
NKA – no known allergies
NPO – nothing by mouth
NWB – non-weight bearing
OOB – out of bed
PO – by mouth
PPE – personal protective equipment
PRN – as needed
PWB – partial weight bearing
q – every
RLE – right lower extremity
RUE – right upper extremity
s̄ - *without*
TID – three times a day

Acronyms

F.A.S.T.

Face Drooping
Arm Weakness
Speech Difficulty
Time

PASS

Pull
Aim
Squeeze
Sweep

RACE

Rescue/Remove
Activate/Alarm
Confine/Contain
Extinguish/Evacuate

Practice Knowledge Exam

1. If a nursing assistant finds medications left over on the bedside table, what should happen?
 - a. Ignore it
 - b. Report it to the charge nurse
 - c. Encourage the resident to take it
 - d. Throw them away
2. HS means:
 - a. Hour of sleep
 - b. Hour for supper
 - c. Hours for sitting
 - d. Hours resident slept
3. The person's written statement about the use of life sustaining measures is called:
 - a. Durable Power of Attorney
 - b. DNA Order
 - c. Living Will
 - d. Hospice Care
4. Mrs. Shumway has an order for I&O. You have picked up her breakfast and note she drank a 6 oz. glass of juice, 4 oz. of milk and 8 oz. of coffee. You document:
 - a. 920ml
 - b. 240ml
 - c. 540ml

- d. 685ml
5. Your elderly patient speaks a different language than you do. It would help you to:
 - a. Use very simple words and directions
 - b. Talk louder
 - c. Avoid any conversation
 - d. Make the patient speak their language
 6. If a resident is retaining fluid in the tissue, he is said to have:
 - a. Hypertension
 - b. Distension
 - c. Hypothermia
 - d. Edema
 7. Which response violates patient confidentiality?
 - a. Telling funny stories about your patients to your family and friends
 - b. Telling the nurse that your patient is taking extra medication
 - c. Talking about your patient's care to your relief on the next shift
 - d. Exchanging information about Mrs. Green with her physician
 8. A microbe that is harmful and causes infection is a:
 - a. Reservoir
 - b. Pathogen
 - c. Microorganism
 - d. Flora
 9. While dressing a post CVA resident with one-sided weakness, which arm should be put through the sleeve first?
 - a. Weak arm
 - b. Strong arm
 - c. It doesn't matter
 - d. Both arms at the same time
 10. If a resident refuses to eat a certain food because of a religious preference, the CNA should:
 - a. Allow the resident to go hungry
 - b. Ask the family to bring in special foods
 - c. Respect the resident's religion and notify the dietician
 - d. Tell the resident to eat the food, no preference is given
 11. Identify the one factor that is common to all communication:
 - a. Words are being used
 - b. There is a transfer of a message
 - c. It occurs in one direction
 - d. The people feel comfortable
 12. When nursing assistants find equipment in need of repair, they should:
 - a. Throw it away
 - b. Fix the broken item themselves
 - c. Continue to use it anyway
 - d. Report it to the appropriate personnel
 13. Residents who lie in bed all day are at risk for:
 - a. Pneumonia
 - b. Seizures
 - c. Myocardial infarction
 - d. Emphysema
 14. Aphasia is the loss of:
 - a. Memory
 - b. Appetite
 - c. Ability to swallow
 - d. Ability to speak
 15. You are giving mouth care to an unconscious resident. You must be especially careful to prevent the resident from:
 - a. Eating the toothpaste
 - b. Aspirating any fluid
 - c. Talking during the procedure
 - d. Moving during the procedure
 16. An elderly Native American has been diagnosed as dying. Her family wishes to perform a ceremony with candles and incense. The facility should:
 - a. Allow the resident to go hungry
 - b. Ask the family to bring in special foods
 - c. Respect the resident's religion and notify the dietician
 - d. Tell the resident to eat the food, no preference is given

- a. Allow the ceremony with proper safety measures
 - b. Not allow the ceremony because of the fire code
 - c. Transfer her to a private facility for Native Americans
 - d. Teach the family that the ceremony will not help her condition
17. Misuse of a resident's money or property by family, friends or staff is known as:
- a. Malpractice
 - b. Chemical restraint
 - c. Misappropriation of property
 - d. Abetting & aiding
18. You observe two adult residents sharing the same bed after lunch. You know these residents are capable of exercising their own rights. This means that they:
- a. Should be separated immediately
 - b. Are confused and lost
 - c. Have the right to privacy
 - d. Should be discharged for lewd conduct
19. Mrs. Sparks is an 83-year-old female patient with left sided hemiplegia. This is:
- a. Paralysis on the left side of the body
 - b. A rash on the left side of the body
 - c. A left arm contracture
 - d. Left arm and leg itching
20. When caring for a resident with an indwelling Foley catheter it is important to:
- a. Withhold fluids if the bag is too full
 - b. Tuck the tubing under the resident's leg to keep it off the floor
 - c. Pin the tubing to the resident gown
 - d. Check the bag and tubing for adequate urinary flow
21. The basic foundation of medical asepsis is:
- a. Handwashing
 - b. Wearing goggles
 - c. Wearing a mask
 - d. Sterile technique
22. Which of the following measurements obtained from Mrs. Shumway should be reported immediately to the charge nurse?
- a. B/P 190/114
 - b. Pulse 74
 - c. Respiration 20
 - d. Temperature 99°F
23. The first aid treatment for bleeding is:
- a. Lower the arm below heart level
 - b. Put on a tourniquet
 - c. Run and get the nurse
 - d. Apply direct pressure
24. When a seizure occurs:
- a. Restrain the resident to prevent injury
 - b. Move objects away which may cause injury
 - c. Leave resident and immediately get the charge nurse
 - d. Hold their tongue in place with a tongue depressor
25. A resident with dementia needs:
- a. Increased activity to stay alert
 - b. To be isolated from others
 - c. A structured, safe environment
 - d. Freedom from rules
26. Which of the following is an acceptable way for the CNA to cope with feelings of anger and frustration?
- a. Refuse to care for a frustrating resident
 - b. Call your best friend and vent
 - c. Discuss your feelings with several staff members during lunch

- d. Talk with your supervisor
27. A good listening approach to use when communicating with residents is:
28. When giving perineal care to a female patient, always clean:
- a. Back to front
 - b. Front to back
 - c. Side to side
 - d. In a circular motion
29. The opening of the colostomy to the outside of the body is called the:
- a. Rectum
 - b. Insertion site
 - c. Stoma
 - d. Ileostomy
30. Clean linens that touch the floor should be:
- a. Picked up quickly and placed back on the clean linen cart
 - b. Stay at least 6 feet away from the resident
 - c. Sit beside the resident
 - d. Give him advice
 - e. Avoid looking directly in his eyes
31. Moving a resident's limb away from their body during ROM is called:
- a. Adduction
 - b. Apnea
 - c. Anaphylaxis
 - d. Abduction
32. Standard precautions should be used:
- a. With every resident
 - b. Only when a resident is sick
 - c. While ambulating a resident
 - d. To prevent falls
33. A radial pulse is located by palpating the artery found in the:
- a. Neck
 - b. Wrist
 - c. Ankle
 - d. Groin
34. When a resident with dementia repeats the same question, you should:
- a. Ignore them
 - b. Gently remind them you already told them the answer
 - c. Repeat the same answer you gave previously
 - d. Tell them if they can't remember, it is not important
35. When you empathize with residents, you are:
- a. Putting yourself in their place
 - b. Feeling pity for them
 - c. Telling them to cheer up

- d. Letting them stay in bed

Practice Knowledge Exam - Answers

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

Thank You!

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