HOW TO PERFORM THE TWENTY-FOUR (24) SKILLS

These guidelines are not intended to replace your teacher’s instructions, textbook, or your school’s curriculum. You will demonstrate four (4) skills - Handwashing and one (1) skill at Testing Stations A, B, and C.

ENTIRE LIST OF TWENTY-FOUR (24) SKILLS

You will randomly choose one (1) Skill Card when arriving at each of the three (3) Testing Stations.

1: Handwashing (at a real sink, using soap and water)
2: Put on and Remove Gown and Gloves
3: Position the Resident in a Fowler’s Position
4: Position the Resident in a Side-Lying (Lateral) Position
5: Prepare to Stand the Resident Using a Gait Belt: see page 15
6: Make an Occupied Bed
7: Brush the Resident’s Dentures
8: Mouth Care for an Unconscious Resident
9: Give the Resident a Partial Bed Bath (Upper Body) - Face-Neck-Chest-Abdomen-Arms-Hands
10: Give the Resident a Partial Bed Bath (Lower Body) - Hips-Legs-Feet
11: Give the Resident a Back Rub/Massage
12: Give the Resident Perineal Care (Female Resident)
13: Shave the Resident
14: Clean and Trim the Resident’s Fingernails
15: Dress the Resident with a Paralyzed/Weak Arm
16: Serve the Meal Tray and Feed the Paralyzed Resident
17: Read and Record the Height of a Resident Using an Upright Scale: see page 22
18: Read and Record the Weight of a Resident Using an Upright Scale: see page 23
19: Assist the Resident with the Bedpan
20: Count and Record the Resident’s Radial Pulse: suspended due to COVID-19
21: Count and Record the Resident’s Respiration: suspended due to COVID-19
22: Take and Record the Resident’s Blood Pressure: not tested
23: Perform Passive Range of Motion (Upper Body) - Shoulders-Elbows-Wrists-Fingers
24: Perform Passive Range of Motion (Lower Body) - Hips-Knees-Ankles-Toes
25: Assist the Resident in Walking Using a Gait Belt: suspended due to COVID-19 (see new Skill #5)

Skill Testing Station – “Handwashing”
(Skill #) 1 - Each student will demonstrate Handwashing (at a real sink, using soap and water).

Skill Testing Station A – “Personal Care”
(Skill #) 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, and 19

Skill Testing Station B – “Vital Signs, Measurements, or Isolation”
(Skill #) 2, 17, 18, 20, 21, and 22

Skill Testing Station C – “Positioning, Transferring, Restorative Care, or Bedmaking”
(Skill #) 3, 4, 5, 6, 23, 24, and 25
Skill #1: Handwashing (at a real sink, using soap and water)

1. Remove watch, or push it up on your forearm, roll up sleeves.
2. Turn on water; adjust temperature.
3. Wet hands and wrists. Apply soap.
4. Keep hands lower than elbows. Rub hands together to make a bubbly lather.
5. Wash hands, fingers, and wrists for at least 15 seconds (not under water).
6. Do not touch sink.
7. Re-wet hands/wrists and re-apply soap as needed.
8. Rinse hands and wrists (avoid splashing); keep hands lower than elbows.
9. Let hands drip; reach for paper towels.
10. Dry hands and wrists thoroughly (from fingertips to wrist). Discard towels.
11. Use a new clean paper towel to turn off the faucet; do not use bare hands.

Skill #2: Put on and Remove Gown and Gloves

1. Perform hand hygiene before entering room.
2. Choose appropriately sized gown (disposable) and gloves.
3. Examine gown and gloves for any damage.
4. Put on the gown before entering room.
5. Overlap gown to fully cover uniform in the back.
6. Tie gown (securely): at the neck first, then the waist (OK to secure waist at front, back, or side).
7. Put on gloves.
8. Pull gloves up (over) the gown cuff. (OK to make thumb-hole in gown cuff)
9. Knock, enter, and proceed with “opening procedure”.
10. Perform some form of resident care.
11. Perform “closing procedure”.
12. Remove all PPE before leaving room.
13. Remove all PPE without contaminating yourself.
14. Dispose of all PPE (in the isolation hamper inside resident’s room).
15. Dispose of all PPE without contaminating yourself.
16. Do not touch resident or room contents after PPE removed.
17. Perform hand hygiene; exit room.
18. Report and record.

PPE - personal protective equipment
Skill #3: Position the Resident in a Fowler’s Position

1. Perform “opening procedure” (includes hand hygiene).
2. Verbally acknowledge resident’s complaint of "having difficulty breathing".
3. Adjust HOB to appropriate level (between 30-90 degrees) as quickly as possible.
4. Re-check resident’s breathing.
5. Perform comfort measures (pillows, raising FOB to prevent sliding, etc).
6. Perform “closing procedure” (includes hand hygiene).
7. Report and record (resident’s complaint, what you did to help, and the results of your actions).

HOB - head of bed
FOB - foot of bed

Skill #4: Position the Resident in a Side-Lying (Lateral) Position

1. Perform “opening procedure” (includes hand hygiene).
2. Use good body mechanics: raise level of bed, bend knees, spread feet apart.
3. Safely move the supine resident to the side (edge) of bed in 3-segments.
4. Prepare arms/arm: Cross resident’s arms over chest or place correct arm in “stop-sign” position.
5. Cross ankles or bend the knee of the upper (top) leg.
6. Be sure side rail is up on the side resident is turned towards.
7. Place one hand on shoulder, the other on hip, and “log-roll” turn resident onto side.
8. Move the body safely, gently, naturally as a unit, avoiding force/pressure to spine, limbs and joints.
9. Support resident’s back by tucking a pillow, folded lengthwise, behind back.
10. Support resident’s top arm with a pillow in front of chest; use hand roll if needed.
11. Place resident’s top leg slightly forward, with knee bent; put pillow underneath top leg for support.
12. Be sure that the top leg/foot does not rest on (or rub) the lower leg/foot.
13. Stand at FOB to see if resident’s body is properly aligned and make adjustments as needed.
14. Resident should not be lying on his/her arm or shoulder. (see line 4.)
15. Adjust pillow to cradle/support resident’s head/face comfortably.
16. Perform “closing procedure” (includes hand hygiene).

FOB - foot of bed
Skill #5: Prepare to Stand the Resident Using a Gait (Safety) Belt

1. Perform “opening procedure” (includes hand hygiene).
2. Gather belt and place chair *close enough to side of bed before resident sits up/dangles.
3. Apply belt and make all belt adjustments while resident seated on bed or lying in bed.
4. Raise HOB fully to assist resident to a sitting position.
5. Lower side rail nearest to chair.
6. To Dangle: place one arm behind resident's back and the other arm under the thighs.
7. Encourage resident to assist in turning to a dangling position, verifying feet flat on the floor.
8. Assist resident with robe and non-skid shoes (never leave bedside while resident dangling).
9. Securely fasten belt snugly around resident's waist. Ask resident if dizzy prior to transfer.
10. Place your knee, (furthest from chair), between resident’s knees.
11. Maintain a secure, underhand (palms-up) grasp to hold belt, using 2 hands at all times.
12. May instruct resident to assist (to stand) by having resident press hands on mattress.
13. On the count of "three", assist resident to stand up, maintaining palms-up grasp on belt.
14. If belt loosens upon standing, assist resident to sit on the bed for all belt adjustments.
15. Assist resident to turn/pivot while moving feet along with resident, until right in front of chair.
16. Lower resident into chair, then release your 2-handed grasp. Leave gait belt on.
17. Provide a lap blanket.
18. Perform “closing procedure” (includes hand hygiene).

HOB - head of bed

*This Skill was developed, utilizing content from the following two suspended skills:

Skill #5 – Transfer the Resident from Bed to Chair Using a Gait (Safety) Belt
Skill #25 – Assist the Resident in Walking Using a Gait (Safety) Belt

The original (pre-Covid-19) skill steps remain in place in this Exam Information and Study Guide, to preserve its integrity, for future reference once the National Emergency has been lifted. Only the above, shaded steps are relevant to the modified scenario below.

The modified scenario on Skill Card #5 references the following:
The alert, elderly, weight-bearing resident (manikin) will already be sitting in a chair. The nurse assistant will need to use the gait belt, as if preparing to stand the resident.

Candidates will not actually move or lift the manikin!
Skill #6: Make an Occupied Bed

1. Perform "opening procedure" (includes hand hygiene).
2. Remove and fold any reusable linen (blanket/spread) and place over a clean chair.
3. Ensure clean linen is on a barrier.
4. Ensure side rail is up (at all times) on side resident is rolled towards.
5. For resident’s comfort, leave pillow under head and top sheet in place.
6. Wear gloves while handling soiled linens.
7. With resident on side, loosen and roll dirty bottom sheet toward resident and tuck against back.
8. Secure ⅔ of clean (fitted) bottom sheet on the baremattress.
9. Roll clean (fitted) bottom sheet towards resident; tuck and flatten it under old (fitted) bottom sheet.
10. Raise the side rail; go to the opposite side of bed; lower the side rail.
11. Gently and safely roll resident over the linen.
12. Remove dirty (fitted) bottom sheet; place in linen bag (on FOB or on chair with barrier).
13. Pull clean (fitted) bottom sheet towards you and secure onto mattress with minimal wrinkles.
14. Center resident on back and check for comfort; raise side rail; go to FOB and check alignment.
15. Cover resident with clean top sheet. Resident can hold it as you remove the old top sheet.
16. Miter corners of top sheet at FOB.
17. Make a toe pleat.
18. Wear gloves (as necessary) to dispose of linens. Remove gloves and wash hands.
19. Perform “closing procedure” (includes hand hygiene).

FOB - foot of bed
Skill #7: Brush the Resident’s Dentures

1. Perform “opening procedure” \textit{(includes hand hygiene)}.  
2. **Apply gloves.** Remove gloves, sanitize hands, and re-glove as needed.  
3. Take dirty dentures (already in denture cup) and supplies to sink area.  
4. Line bottom of sink with a washcloth or small towel. Turn on cool water without splash.  
5. **Carefully handle** and place dirty dentures in emesis basin. Clean denture cup and fill will cool water.  
6. Apply toothpaste (or denture cleanser) to toothbrush (or denture brush).  
7. **Use denture-brush (or toothbrush) and water to clean all surfaces upper and lower plates over sink.**  
8. **Handle dentures carefully by holding/brushing one plate at a time.**  
9. Rinse dentures under cool, running water.  
10. \textit{Carefully place dentures back in denture cup} (filled with clean, cool water).  
11. Offer mouthwash solution, sponge-tipped swabs, and emesis basin for oral hygiene.  
12. Clean and store equipment. Dispose of linens and trash appropriately.  
13. Remove gloves and wash hands.  
14. Perform “closing procedure” \textit{(includes hand hygiene)}.  

Skill #8: Mouth Care for the Unconscious Resident

1. Perform “opening procedure” \textit{(includes hand hygiene)}.  
2. **Apply gloves.** Remove gloves, sanitize hands, and re-glove as needed.  
3. **Gently position resident’s head towards you.** Entire body may be turned to side.  
4. Place a towel or waterproof barrier under head and over chest.  
5. Place emesis basin under the chin, at side of resident’s face, if resident is fully on their side.  
6. Open packages of sponge-tipped swabs and/or lemon glycerin swabs.  
7. \textit{Prepare a small cup of water or mouthwash/water solution to dip sponge-tipped swabs.}  
8. Gently open mouth and separate teeth with a padded tongue blade.  
9. **Clean entire mouth (roof, tongue, cheeks, teeth, gums, lips) - use moistened sponge-tipped swabs and/or glycerin swabs**  
10. **Do not use toothpaste at any time.**  
11. **Do not pour liquids in resident’s mouth at anytime.**  
12. Dry resident’s face. Remove basin, towels, and waterproof barriers.  
13. Apply lip lubricant.  
15. Remove gloves and wash hands.  
16. Perform “closing procedure” \textit{(includes hand hygiene)}.  


1. Perform “opening procedure” (includes hand hygiene).
2. **Apply gloves.** Remove gloves, sanitize hands, and re-glove as needed.
3. Resident is already draped; **leave bath blanket in place prior to starting bath.**
4. Keep linens dry by placing a towel/waterproof barrier under limbs while washing.
5. **Gently wash entire**** upper body (with soap and water) and rinse.
6. **Pat-dry entire**** upper body, starting with face**.
7. **Only uncover one area at a time to ensure warmth, dignity, and privacy.**
8. **Leave resident draped** and comfortable when bath is completed.
10. Remove gloves and wash hands.
11. Perform “closing procedure” (includes hand hygiene).

* may omit soap for face (as desired by resident)
** including underneath neck and arms, as well as axillary areas

Skill #10: Give the Resident a Partial Bed-Bath (Lower Body): Hips-Legs-Feet

1. Perform “opening procedure” (includes hand hygiene).
2. **Apply gloves.** Remove gloves, sanitize hands, and re-glove as needed.
3. Resident is already draped; **leave bath blanket in place prior to starting bath.**
4. Keep linens dry by placing a towel/waterproof barrier under limbs while washing.
5. **Gently wash entire** lower body (with soap and water) and rinse.
6. **Pat-dry entire** lower body, starting with hips.
7. **Only uncover one area at a time to ensure warmth, dignity, and privacy.**
8. **Leave resident draped** and comfortable when bath is completed.
10. Remove gloves and wash hands.
11. Perform “closing procedure” (includes hand hygiene).

*Including underneath legs, heels and bottom of feet
Skill #11: Give the Resident a Back Rub (Massage)

1. Perform “opening procedure” (includes hand hygiene).
2. Apply gloves (if necessary).
3. Maintain resident’s position (Resident is already in a comfortable side-lying position).
4. Keep resident draped for warmth and privacy with a bath blanket.
5. Place towel on bed (behind back) to protect linens.
6. Only uncover back/partial buttocks area to ensure warmth, dignity, and privacy.
7. Use lotion/lubricant; apply to palms and rub hands together to “warm” lotion.
8. Rub/massage resident’s entire back (shoulders to coccyx), using circular and/or long strokes.
9. Start at the coccyx and work your way up to the shoulders (shoulders down to coccyx is also OK)
10. Continue gently massaging back for 3-5 minutes.
11. Assist resident into position of choice after the massage.
12. Cover resident with sheet (bed linens) and remove bath blanket.
13. Clean and store equipment. Dispose of linens and trash appropriately.
14. Remove gloves (if worn) and wash hands.
15. Perform “closing procedure” (includes hand hygiene).

Skill #12: Give the Resident Perineal Care (Female Resident)

1. Perform “opening procedure” (includes hand hygiene).
2. Apply gloves. (OK to remove gloves, sanitize hands, and re-glove as needed).
3. Assist resident to position legs (knees bent and legs apart). Resident will already be supine.
4. Place a linen protector under resident’s buttocks.
5. Keep resident warm and completely draped with a bath blanket.
6. Only uncover perineal area/buttocks area to ensure warmth, dignity, and privacy.
7. Wash genital area (using soap and water/peri-wash) from front to back.
8. Rinse genital area (with water) from front to back.
9. Pat dry genital area from front to back.
10. Assist the resident into a side-lying position.
11. Wash rectal area (using soap and water/peri-wash) from front to back.
12. Rinse rectal area (using water) from front to back.
13. Pat dry rectal area from front to back.
14. Use a different part of the washcloth/mit for each wipe/stroke.
15. Remove gloves, wash, re-glove to assist resident into position of choice.
16. Cover resident with sheet (bed linens) and remove bath blanket.
17. Wear gloves to clean and store equipment. Dispose of linens and trash appropriately.
18. Remove gloves and wash hands.
19. Perform “closing procedure” (includes hand hygiene).
Skill #13: Shave the Resident

1. Perform “opening procedure” (includes hand hygiene).
2. Place barrier for supplies to maintain clean set-up.
3. Place clothing protector to resident’s chest area prior to shave.
4. Assess skin for abrasions, moles, and/or direction of hair growth.
5. Check razor for rust, chips, or breaks.
6. Soften beard with warm, moist cloth before applying shaving cream.
7. Apply shaving cream/lubricant to resident’s face.
8. Apply gloves before shaving. (OK to remove gloves, sanitize hands, and re-glove as needed).
9. Hold skin taut to prevent nicks.
10. Shave face using downward strokes, in direction of hair growth.
11. Rinse razor often during procedure to remove hair/excess shaving cream.
12. Wipe/rinse resident’s face of remaining lather after the shave.
13. Dry resident’s face.
14. Offer resident a mirror.
15. Offer resident choice of aftershave or shaving lotion.
16. Remove towel from resident; clean equipment and return to proper area.
17. Dispose of razor in sharps container.
18. Dispose of linens and trash appropriately.
19. Remove gloves and wash hands.
20. Perform “closing procedure” (includes hand hygiene).

Skill #14: Clean and Trim the Resident’s Fingernails

1. Perform “opening procedure” (includes hand hygiene).
2. Apply gloves. (OK to remove gloves, sanitize hands, and re-glove as needed).
3. Place towel under resident’s hands for comfort and hygiene.
4. Soak resident’s fingernails in a basin of warm water prior to trimming. Use soap to clean them.
5. Push back cuticles gently with a washcloth and/or orange stick padded with cotton.
6. Use orange stick to clean under dirty fingernails.
7. Change water and rinse resident’s hands.
8. Dry resident’s hands thoroughly.
9. Use clippers to trim fingernails straight across.
10. Use nail file/ emery board to smooth rough and sharp edges after trimming.
11. Offer lotion and gently massage resident’s hands.
12. Dispose of linens and trash appropriately.
13. Return clippers to facility designated dirty area (or to resident’s personal grooming kit).
14. Remove gloves and wash hands.
15. Perform “closing procedure” (includes hand hygiene).
Skill #15: Dress the Resident with a Paralyzed / Weak Arm

1. Perform “opening procedure” (includes hand hygiene).
2. Allow resident choice of clothing/gown.
3. Pull the curtain and/or shut the door to maintain resident’s privacy.
4. Keep resident covered (with very minimal exposure) with a bath blanket until fully dressed.
5. Dress the resident’s paralyzed/weak arm* first, with the entire arm completely through the sleeve before dressing the other arm.
6. Move resident’s arms gently and naturally without force.
7. Encourage resident to assist with non-paralyzed arm as able.
8. Dispose of linens and trash appropriately.
9. Perform “closing procedure” (includes hand hygiene).

*RN will place hand-roll in hand of paralyzed arm.

Skill #16: Serve the Meal Tray and Feed the Paralyzed Resident

1. Perform “opening procedure” (includes hand hygiene).
2. Validate/check for the correct resident by reading name printed on ID band before selecting tray.
3. Offer resident a washcloth for hands before meal.
4. Clean overbed table before serving the meal.
5. Select correct meal tray from meal cart by checking the diet card located on tray.
6. Check dietary card and verbalize (say aloud) resident’s name, diet, and allergies.
7. Verify that the food items on tray match diet (lift the plate cover “lid” to see the food).
8. Drape resident with a towel/clothing protector prior to feeding.
9. Open containers on meal tray.
10. Cut meat and all food items into bite-sized pieces.
11. Offer correct condiments; remove any items that the resident is NOT allowed to have.
12. Check temperature of hot liquids/food items.
13. Allow the resident time to chew food; feed resident slowly, without rushing.
14. Offer liquids between swallows.
15. Offer the resident choices during meal; encourage use of unaffected hand.
16. Offer the resident a washcloth for hands after meal.
17. Clean overbed table after meal.
18. Dispose of linens and trash appropriately.
19. Remove tray and note % of meal eaten and cc’s or ml’s of fluids taken.
20. Perform “closing procedure” (includes hand hygiene).
#17: Read and Record the Height of a Resident Using an Upright Scale

1. Perform “opening procedure” (includes hand hygiene).
2. Place chair at side of scale.
3. Gather paper towel (to place on scale platform).
4. Assist resident to put on non-skid shoes.
5. Drape resident with a robe.
6. Keep one hand behind/near resident while walking to the scale.
7. Place paper towel on scale platform.
8. Assist the resident to sit on the chair to remove shoes.
9. Assist the resident to step on the scale from the side, facing away from scale.
10. Raise height bar safely.
11. Lower height bar until it touches top of resident’s head and is level with resident’s head.
12. Read resident’s height at correct location.
13. Read resident’s height correctly.
14. Record resident’s height correctly, choosing correct words, abbreviations, or symbols (chose ONE on recording grid)*: FEET-( feet, ft, or ’ ) INCHES-( inches, in, or “ ) CENTIMETERS-( centimeters or cm )
15. Assist resident to step safely off of the scale.
16. Assist resident to sit on the chair and put non-skid shoes back on.
17. Remove paper towel from scale platform and discard; gloves may be worn.
18. Assist resident back to room, keeping one hand behind/near resident while walking.
19. Perform “closing procedure” (includes hand hygiene).

Note: Some testing sites have scales with multiple measurement functions.
Be familiar with multiple ways to record height:
feet/inches [ft/in] or inches [in] or centimeters [cm]

*Recording grid (documentation sheet) will be provided by RN.

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Only the above, non-shaded steps are relevant to the modified scenario below.

The modified scenario on Skill Card #17 references the following:
The RN (Skill Evaluator) will pre-set a random height for the candidate to read and record.
Skill #18: Read and Record the Weight of a Resident Using an Upright Scale

1. Perform “opening procedure” (includes hand hygiene).
2. Place chair at the side of the scale.
3. Gather paper towel (to place on scale platform).
4. Assist resident to put on non-skid shoes.
5. Drape resident with a robe.
6. Keep one hand behind/near resident while walking to the scale.
7. Place paper towel on scale platform.
8. Assist the resident to sit on the chair to remove shoes/robe.
9. “Zero” (balance) scale prior to the resident standing on scale platform.
10. Assist the resident to stand on scale platform.
11. Measure the resident’s weight correctly by sliding weights to appropriate areas until scale indicator balances. Begin with "large weight" clicked in place, then adjust “smaller weight”.
12. Adjust both weights, as needed, until indicator balances.
13. Read resident’s weight correctly.
14. Record the resident’s weight correctly using correct words or abbreviations (chose ONE on recording grid)*: POUNDS-(lb)  KILOGRAMS-(kg)
15. Assist the resident to step safely off the scale.
16. Assist resident to sit on the chair and put non-skid shoes/robe back on.
17. Remove paper towel from scale platform and discard; gloves may be worn.
18. Assist resident back to room, keeping one hand behind/near resident while walking.
19. Perform “closing procedure” (includes hand hygiene).

Note: Some testing sites have scales with dual measurement functions.

Be familiar with both ways to record weight:
pounds [lb] or kilograms [kg]

*Recording grid (documentation sheet) will be provided by RN.

The original (pre-Covid-19) skill steps remain in place in this Exam Information and Study Guide, to preserve its integrity, for future reference once the National Emergency has been lifted.

Only the above, non-shaded steps are relevant to the modified scenario below.

The modified scenario on Skill Card #18 references the following:
The RN (Skill Evaluator) will pre-set a random weight for the candidate to read and record.
Skill #19: Assist the Resident with a Bedpan (Standard or Fracture)

1. Perform “opening procedure” (includes hand hygiene).
2. Apply gloves. (OK to remove gloves, sanitize hands, and re-glove as needed).
3. Assist resident to lift hips, slide linen protector and bedpan under buttocks.
4. Place the resident on the bedpan correctly with resident’s buttocks well-centered over the opening of the bedpan. (Note the direction of the bedpan)
5. Drape the resident with a bath blanket/sheet while on the bedpan.
6. Remove gloves and sanitize hands.
7. Raise HOB for resident’s comfort during bowel movement.
8. Leave call light within resident’s reach, before leaving room—to allow privacy.
9. Return to room when resident signals or after no more than 5 minutes.
10. Lower HOB for resident’s comfort during bedpan removal.
11. Wash hands and apply gloves.
12. Turn resident to the side and remove the bedpan. Cover it and properly place it out of the way (on FOB or on chair with barrier).
13. While resident is on the side, wipe the resident from front to back.
14. Place soiled toilet paper into a prepared (cuffed) plastic trash bag.
15. Remove linen protector and discard in the trash bag.
16. Discard gloves and sanitize hands; raise side rail and lower entire bed.
17. Reapply gloves -- take bedpan to the bathroom.
18. Observe any abnormalities in bowel movement (for reporting and recording).
19. Empty bedpan into toilet while wearing gloves.
20. Clean and rinse bedpan, while wearing gloves, then store bedpan in proper area.
21. Dispose of linens and trash appropriately.
22. Remove gloves and wash hands.
23. Perform “closing procedure” (includes hand hygiene).

HOB - head of bed
FOB - foot of bed

Skill #20: Count and Record the Resident’s Radial Pulse

1. Perform “opening procedure” (includes hand hygiene).
2. Place resident’s hand in a comfortable resting position prior to counting pulse.
3. Place your fingertips correctly on the radial artery (thumb side of wrist).
4. Count the resident’s radial pulse using a second-hand watch or clock for one (1) minute.
5. Record the resident’s radial pulse within (plus or minus) 5 beats of Evaluator’s recording.
6. Perform “closing procedure” (includes hand hygiene).
Skill #21: Count and Record the Resident's Respirations

1. Perform “opening procedure” (includes hand hygiene).
2. Avoid telling resident that respirations are being counted; you can say “taking vital signs” while pretending to take resident’s pulse.
3. Count resident’s respirations using a second-hand watch or clock for one (1) minute.
4. Record resident’s respirations within (plus or minus) 2 breaths of the Evaluator’s recording. Perform “closing procedure” (includes hand hygiene).

Skill #22: Take and Record the Resident’s Blood Pressure: not tested

1. Perform “opening procedure”.
2. Place resident’s arm, with the palm up, in a comfortable resting position.
3. Clean the stethoscope’s diaphragm/bell and earpieces with alcohol before use.
4. Feel for the resident’s brachial artery on the inner aspect of the resident’s arm.
5. Wrap the blood pressure cuff snugly around the resident’s arm, approximately 1-2 inches above the antecubital area.
6. Correctly place the stethoscope earpieces in your ears.
7. Safely and correctly place the diaphragm of the stethoscope over the brachial artery.
8. Inflate the cuff.
9. Let the air out smoothly, at a safe rate (2-4 mm Hg per second), and listen for the first sound (the systolic reading).
10. Continue steady deflation as you listen for the last sound -- becomes quiet/almost silent (the diastolic reading).
11. Remember the readings to be able to record them.
12. Quickly let all air out of the cuff (completely deflate).
13. Record the blood pressure reading correctly within (plus or minus) 8 mmHg of the Evaluator’s recording (systolic and/or diastolic).
14. Remove the blood pressure cuff from resident’s arm.
15. Perform “closing procedure”.
Skill #23: Perform Passive Range of Motion (Upper Body): Shoulders-Elbows-Wrists-Fingers

1. Perform “opening procedure” (includes hand hygiene).
2. Adjust bed to a safe and comfortable working height.
3. Lower side rail on the side you will be working on.
4. Ask, at some point during procedure, if resident having any pain.
5. Safely and gently exercise the resident’s shoulder, elbow, wrist, and fingers, supporting and moving each joint gently and naturally (without force to limbs or joints).
6. Exercise each joint in at least TWO patterns.
   - Examples of Patterns: Flexion, Extension, Abduction, Adduction, and Rotation
7. Each pattern must be demonstrated at least THREE times (for each joint).
8. Ask frequently during the exercises if the resident is having any pain.
9. Repeat exercises on the other arm.
10. Perform “closing procedure” (includes hand hygiene).

Skill #24: Perform Passive Range of Motion (Lower Body): Hips-Knees-Ankles-Toes

1. Perform “opening procedure” (includes hand hygiene).
2. Adjust bed to a safe and comfortable working height.
3. Lower side rail on the side you will be working on.
4. Ask, at some point during procedure, if resident having any pain.
5. Safely and gently exercise the resident’s hip, knee, ankle, and toes, supporting and moving each joint gently and naturally (without force to limbs or joints).
6. Exercise each joint in at least TWO patterns.
   - Examples of Patterns: Flexion, Extension, Abduction, Adduction, and Rotation
7. Each pattern must be demonstrated at least THREE times (for each joint).
8. Ask frequently during the exercises if the resident is having any pain.
9. Repeat exercises on the other leg.
10. Perform “closing procedure” (includes hand hygiene).
Skill #25: Assist the Resident in Walking Using a Gait (Safety) Belt

1. Perform “opening procedure” (includes hand hygiene).
2. Gather belt; resident already wearing non-skid shoes and robe.
3. **Apply belt and make all belt adjustments while resident seated on bed.**
4. **Securely fasten belt snugly around resident’s waist.** Ask resident if dizzy prior to standing.
5. Place your knee between resident’s knees.
6. **Maintain a secure, underhand (palms-up) grasp to hold belt, using 2 hands to stand resident.**
7. May instruct resident to assist (to stand) by having resident press hands on mattress.
8. On the count of “three”, **assist resident to stand up, maintaining palms-up grasp on belt.**
9. If belt loosens upon standing, assist resident to sit on the bed for all belt adjustments.
10. Maintain palms-up grasp (one hand grasping belt is OK)* while walking the resident.
11. Remain slightly behind and to the side of the resident while walking.
12. Ask resident if he/she is dizzy, tired, in pain, or short of breath while walking.
13. Return resident back to the room.
14. **Lower resident onto bed, then release your 2-handed grasp.** Leave gait belt on.
15. Perform “closing procedure” (includes hand hygiene).

*1 hand on belt as other hand supporting resident.