



# Candidate Information Bulletin

## State of Florida

### Certified Nursing Assistant Examination

#### At a glance

The Florida Department of Health (DOH) has contracted with Prometric to develop and administer its Certified Nursing Assistant (CNA) Exam.

This bulletin describes the procedures for becoming a Florida CNA and getting listed on the CNA Registry. Follow these main steps if you are interested in becoming a CNA in Florida.



#### To become a certified nursing assistant in Florida

- 1 Complete all three pages of the Florida Certified Nursing Assistant Application—Page 14.  
The application form is also available online at [www.prometric.com/NurseAide/FL](http://www.prometric.com/NurseAide/FL).  
Complete the Florida Board of Nursing background screening—Page 5.
- 2 Prepare for your exam, using the content outlines in this bulletin—Page 12.
- 3 Take your exams at your scheduled exam location. Be sure to bring the necessary identification with you to the test center—Page 5.
- 4 Once you have passed both parts of the CNA exam and completed all necessary paperwork, the Florida Board of Nursing will send you your certificate and you will be placed on the Florida CNA Registry—Page 11.



#### To get answers not provided in this bulletin

Direct all questions and requests for information about the exam process to:

##### Prometric

1260 Energy Lane, St. Paul, MN 55108

Phone: 888.277.3500

Fax: 800.813.6670

[www.prometric.com/NurseAide/FL](http://www.prometric.com/NurseAide/FL)

Direct certification regulations questions to:

##### Florida Department of Health

CNA Registry/Board of Nursing

4052 Bald Cypress Way, BIN # C13

Tallahassee, FL 32399-3263

Call Center Phone: 850.488.0595

CNA Registry Website:

[www.flhealthsource.com](http://www.flhealthsource.com)

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## Certification route options

The state of Florida has five certification training routes for establishing eligibility to become a CNA. Please read the following certification routes carefully to determine the one that is most appropriate for your situation.



**Note** Test results are only valid for two years. If you do not pass both parts of the exam within a two-year period of taking your first exam part, you will be required to take both parts again. Results more than two years old are invalid.

### E 1—Completed a State-approved Nursing Assistant Training Program

Select this certification route if you finished your state-approved training and you have never been a nursing assistant in any other state. You must put your training completion date and training program code on application form.

### E 2—Enrolled in a State-approved Nursing Assistant Training Program

Select this certification route if you are taking a state-approved training program and have never been a nursing assistant in any other state. You must put the day you will complete training and training program code on the application form.

### E 3—Challenger

Select this certification route if you have never been trained as a nursing assistant in Florida or any other state and have no nursing assistant experience, and believe that you can pass the exam without training. If you fail one portion of the test three times within a two-year period, you will have to do a state-approved training program that is at least 120 hours long. You will then need to take both the written and clinical tests again.



**Note** While a state-approved training program is not required before testing, it is strongly recommended. Individuals must be at least 18-years-old, or have a high school diploma or equal to “challenge” the exam without completion of an approved training program.

### E 4—Other Nursing Training

Select this certification route if you have:

- Some training or experience in nursing but have not completed a training program; or
- Tested using route 1 or passed one of the tests, but have not passed the other test in two years.

### E 5—Lapsed Nursing Assistant

Select this certification route if you were a certified nursing assistant in Florida or any other state and your certification has lapsed.

## Scheduling your tests

The Florida Certified Nursing Assistant (CNA) Exam consists of two separate tests: The Clinical Skills Test and the Written (Knowledge) Test. You may take the two tests in any order. You are not required to pass one test before taking the other. But first-time testers must register for both tests.

### Completing the application form

Before you can test, you must submit:

- 1 The Florida Certified Nursing Assistant Application form on Page 14 (or online at [www.prometric.com/NurseAide/FL](http://www.prometric.com/NurseAide/FL)). Complete the form clearly and accurately. Incomplete, illegible and/or unsigned applications will be returned, which will delay the processing of your application.

- 2 The appropriate fee(s).
- 3 Be deemed eligible to test by the FL DOH after submitting to an FBI fingerprint background check.



**Note** Your application and test fees are only good for one year. If you are not deemed eligible to test and/or do not schedule an appointment within one year of submitting your application, the application will expire and you will be required to submit a new application, fees, and fingerprints in order to be deemed eligible to test.

### **Application Received Letter**

FLDOH will deem candidates eligible to test after they have received a complete FBI fingerprint background check. You will get a letter telling you that Prometric has received your application and instructing you on what steps you will need to take to become eligible to test. The eligibility process may take up to 90 days to complete.

Each letter is only good for one fingerprint scanning session. If you do not pass your test(s), you will need to reapply to Prometric in order to receive another Application Received Letter and have your fingerprints scanned again. Using the same letter more than once or having fingerprints scanned before you receive your letter will result in an invalid background screening and you will be required to pay fees again.

### **Admission to Test Letter**

After Prometric receives approval from FLDOH to schedule you to test, Prometric will send you an admission letter. This letter gives the date, time and location of your exam. Please bring your letter with you to the test center as it provides important information. Prometric is **not** responsible for lost, misdirected or delayed mail.

In order to get your admission letter as fast as possible, please provide your email address on the registration form. Prometric will then send your admission letter to that email address. If you do not have an email address, your admission letter will be sent by mail, which will take longer to arrive.

### **Regional test sites**

Prometric gives the Certified Nursing Assistant exams in test sites throughout the state. A list of current regional test sites is available online at [www.prometric.com/NurseAide/FL](http://www.prometric.com/NurseAide/FL). On the application form, you will need to write the name of the city where you would like to take your test. Prometric will try to schedule your test in your preferred city but if no space is available at that site, you will be scheduled at the next closest site.

Your admission letter will include directions to the test site. You could also get directions online at [www.mapquest.com](http://www.mapquest.com) or [www.maponus.com](http://www.maponus.com).

### **Fee information**

If a nursing home employs you within 12 months of getting your certification, the facility is required to pay for your training and testing fees under federal law. Contact the District Medicaid Office in your area if you have any questions regarding this law.

Payment may be made by including a MasterCard or Visa number, money order, company check or cashier's check. **Personal checks, purchase orders, vouchers and cash are not accepted.** Fees must be included with the application form.

**Fees** are as follows:

Service	Standard Fee	With Audio*
Clinical Skills and Written Tests (both in English)	\$93	\$97
Clinical Skills Test (English) and Written Test (Spanish)	\$93	\$97
Written Test (English)	\$36	\$40
Written Test (Spanish)	\$36	\$40
Clinical Skills Test (English)	\$57	N/A
Rescheduling Fee (see Page 4)	\$25	
FBI Screening (see Page 5) (must be sent with each application)	\$43.25	
Processing Fee (must be sent with each application)	\$25	

\*The written test is available as an audio test. See Page 7 for more information.

Each attempt at testing requires the processing fee and background fee to be included with the testing fee. From the chart above, a first-time tester will see he or she would have to pay a total of \$161.25 in order to take Florida’s Certified Nursing Assistant (CNA) Exam. Candidates retesting for an English written test would pay \$104.25 and for a clinical only retest \$125.25.

There is an additional fee that the fingerprint vendor will charge you for processing your scanned fingerprints.



**Important** Print your name on money orders, certified checks or company checks. Application forms received without proper payment will be returned. **Testing fees are nonrefundable and nontransferable.**

**Special test considerations**

**ADA accommodation.** If you need testing accommodations under the Americans with Disabilities Act (ADA), please call Prometric at 888.277.3500. Reasonable testing accommodations are provided to allow candidates with documented disabilities recognized under the ADA an opportunity to demonstrate their skills and knowledge.

Candidates should submit professional documentation of the disability with their application to help us determine the necessary testing arrangements. Thirty days’ advance notice is required for all testing arrangements. There is no additional charge for these accommodations.

**ESL accommodation.** If English is your second language, a language barrier is not considered a disability. However, you can take the Written Test in Spanish if you mark this option on the application form.

***Rescheduling and retesting***

To reschedule, you must contact Prometric. If you are testing at an in-facility test site, the facility must reschedule for you.

Rescheduling fees are as follows:

- **\$25 fee** to reschedule **up to six full working days** before your test.
- **A full exam fee** if you reschedule **less than six full working days** before your test, or if you are denied admission into a test site for not providing valid ID on the day of your test.

**If absent or late.** If you miss your test or are late and are not allowed to test, you will lose your fees and must pay a new fee to test. If you miss your test due to illness or emergency, call Prometric. The rescheduling fee may be waived with proof of your illness or emergency.

**Emergency closing.** Severe weather or an emergency could require cancellation of scheduled exams. If this occurs, Prometric will attempt to contact you by phone. You may also call 888.277.3500 to see if a site is closed. If the site is closed, your exams will be rescheduled without a rescheduling fee.

## Background screening

All new CNA applicants must complete a state-mandated background screening. This screening is in addition to any screening your school may have done.

All candidates will be required to have fingerprinting completed by the Federal Bureau of Investigation (FBI) before being made eligible to test. An FBI fingerprint background check is required each time a candidate registers for an exam.



**Important** You **must have** a copy of your Application Received Letter from Prometric in order to make a fingerprint scan appointment. **Do not** have your fingerprints scanned before receiving one of these letters from Prometric. Paper fingerprint cards **will not** be accepted.

The Florida Board of Nursing must approve the results of the background screening before you can be tested to get your certification and be placed on the CNA Registry. The Board may request more information about any criminal offenses listed on the background screening results. If the Board denies your testing, you will receive an official *Notice of Intent to Deny* and have the right of appeal. If your testing is denied, you will not receive a refund of exam or background fees.

A list of offenses that may disqualify you from being hired can be found in Chapter 435, Florida Statutes. More information and a list of Frequently Asked Questions concerning background screening is located online at [www.doh.state.fl.us/mqa/cna/cna-faqs.htm](http://www.doh.state.fl.us/mqa/cna/cna-faqs.htm).

## Criminal history questions

**IMPORTANT NOTICE:** Effective July 1, 2009, Section 456.0635 of the Florida Statutes says that health care boards and/or the department shall refuse to issue a license, certificate or registration and shall refuse to admit a candidate for examination if the applicant has been:

1. Convicted or plead guilty or nolo contendere to a felony violation regardless of adjudication of: chapters **409, 817, or 893**, Florida Statutes; or **21 U.S.C. ss. 801-970** or **42 U.S.C. ss 1395-1396**, unless the sentence and any probation or pleas ended more than 15 years prior to the application.
2. Terminated for cause from Florida Medicaid Program (unless the applicant has been in good standing for the most recent five years).
3. Terminated for cause by any other State Medicaid Program or the Medicare Program (unless the termination was at least 20 years prior to the date of the application and the applicant has been in good standing with the program for the most recent five years).

## Taking your exam

You should arrive at least **30 minutes before** your scheduled exam appointment. This allows time for you to sign in and for staff to verify your identification.

### What to bring to the exam

**Admission letter.** You must present the original letter sent to you by Prometric.

**Identification required.** You must present **two** valid pieces of identification before you may test and one piece **must**:

- Be a current (not expired) government-issued (e.g., driver’s license, state-issued identification card or military identification card);
- Contain **both** a current photo and your signature (this must be legible); and
- Have a name that **exactly** matches the name on your ID and Admission Letter.

Examples of acceptable second forms of identification include credit cards and Social Security cards. All forms of identification must have been signed before the day of test. **The second form of identification must also have your signature on it.**

**ID that is cracked, torn or may have been tampered with will not be accepted and you may not be admitted to test.**



**Important** If you do not provide correct identification at the time of the exam, it is considered a missed appointment. You will be required to pay the entire exam fee in order to be scheduled for another exam.

**What to wear.** If you are taking the Clinical Skills Test, you are required to wear flat, nonskid, closed-toed shoes. It is suggested that a uniform or scrubs be worn on the day of testing. You should also have a watch with a secondhand.

**Written test overview**

The Written test is administered using Prometric’s user-friendly, Microsoft Windows®-based, computerized testing system. You do not need computer experience to use this system. You will use a computer mouse to select answers. A Nurse Aide Demo Test is available at [www.prometric.com/NurseAide/FL](http://www.prometric.com/NurseAide/FL) to practice using the computer functions.

The Written test consists of 60 multiple-choice questions that evaluate your nursing assistant knowledge and skills. You will have 90 minutes to take the test. The content outline shown on Page 12 is the basis for the Written test. The outline lists all topics covered in the exam and the approximate number of questions asked about each topic.

**Question formats**

Three different multiple-choice formats are used on the Written test. Each format is shown in the following examples. An asterisk (\*) indicates the correct answer in each sample question.

**Format 1—Direct question**

A nurse aide finds clean linen lying on the floor near the linen cart. What should the nurse aide do?

1. Place the linen back on the cart and cover the cart.
2. Place the linen in a resident’s room for immediate use.
- \* 3. Discard the linen in the soiled linen hamper.
4. Leave the linen on the floor for housekeeping staff to remove.

**Format 2—Incomplete sentence**

While the nurse aide tries to dress a resident who is confused, the resident keeps trying to grab a hairbrush. The nurse aide should

1. put the hairbrush out of sight.
- \* 2. give the resident the hairbrush to hold.
3. try to dress the resident more quickly.
4. restrain the resident’s hand.

**Format 3—Which of the following**

A nurse aide finds a resident crying in her room. Which of the following is the best response by the nurse aide?

1. "It's okay. We all have bad days."
2. "This is the best place to have a good cry."
3. "I will tell the social worker that you are upset."
- \* 4. "Will it help to tell me why you are crying?"

**Practice Test**

A 50-question practice exam is available online at [www.prometric.com/NurseAide/FL](http://www.prometric.com/NurseAide/FL). The practice exam is intended to help you become familiar with the exam format. How well you do on this practice exam does not predict your results on your actual exam.

**Audio Test**

The Written Test can be taken in an audio form. During an audio test, you will hear the questions read to you while reading and answering questions on the computer. You may replay questions as many times as needed. If you would like to take the audio test, you should select this option on the application form. This request **cannot** be made on the day of testing.

**Clinical Skills test overview**

The Clinical Skills test is a timed test. You will be scored on five skills. While performing three assigned skills, you will also be scored on two additional skills - Handwashing and Indirect Care. Indirect Care is care related to resident rights, communication with the resident, resident safety and comfort, and infection control. You will have 35 minutes to complete the skills you are asked to perform.

To pass the Clinical Skills test, you must pass all five skills. To pass a skill, you are not required to perform the skill perfectly, but you are required to demonstrate competency of the skill. Each skill has a list of checkpoints. The Nurse Aide Evaluator (NAE) will watch you perform the skill and compare your performance to the checkpoints for the skill. A Clinical Skills Checklist is available online at [www.prometric.com/NurseAide/FL](http://www.prometric.com/NurseAide/FL).

The rules for the Clinical Skills test allow you to make corrections while performing a skill. You must tell the NAE that you are making a correction during the skill. Once you have completed a skill and have indicated to the NAE that you are done with the skill, you may not go back to correct a previous skill. There are times when a safety issue will be addressed by the NAE. If a safety issue has occurred, you will not be able to make a correction.

The NAE who administers the Clinical Skills test is not permitted to teach, coach, or discuss your results or performance with you.

**Resident actor**

In Florida, candidates are required to play the role of the resident for other candidates who are taking the Clinical Skills Test. You may be asked to play the role of the resident for more than one candidate.

## TEST SITE REGULATIONS

The skills that may be performed on you when playing the role of the resident include:

Skills to be performed	
Assisting you to walk	Measuring your pulse and breathing
Brushing your teeth	Measuring your weight
Changing bed linens while you are in bed	Moving you from the bed into a wheelchair
Cleaning and shaping your nails	Moving your arm or leg through simple exercises
Combing your hair	Placing you on a bedpan (clothes on)
Feeding you a small snack	Turning you on your side in bed
Measuring your blood pressure	Washing and applying lotion to one foot

When you are playing the role of the resident, you must be able to participate in the skills identified above. If you are unable to participate in any of the skills, please speak with the nurse administering the test before the test begins.

### Stopping the testing of a skill

During the Clinical Skills test, the NAE can stop the testing of a skill if the resident actor/volunteer is in danger.

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## **Test site regulations**

The following regulations will be observed at each test site. If you do not follow these rules, it will result in the disqualification of your exam. All candidate misconduct will be reported to the Board of Nursing. Prometric reserves the right to audiotape and videotape any examination session.

### References

- No reference materials, papers or study materials are allowed at the test center. If you are found with these or any other aids, you will not be allowed to continue the test and your answers will not be scored.

### Personal items

Prometric is not responsible for personal items brought to the test center. It is recommended that personal items not be brought into the test site. Note the following:

- Electronic equipment is **not** permitted in the testing area. This includes **cell phones**, PDAs, pagers, cameras, tape recorders, etc. All of these items will be collected by the Nurse Aide Evaluator (NAE).
- Other personal items—purses, briefcases, etc.—are not permitted in the testing area. **Note:** It is recommended that purses not be brought to the test center. Access to purses will not be allowed during testing.

### Restroom Breaks

- If you leave the testing room while an exam is taking place, you must sign out/in on the roster and you will lose exam time.
- You will not have access to any personal items during this break.
- You are not allowed to use any electronic devices or phones during breaks.

### Visitors

- No guests, visitors, children or family members are allowed at the test center.

**Misconduct or disruptive behavior**

- If you engage in any disruptive or offensive behaviors, you will be dismissed from the examination. If dismissed, your test results will be invalid and the details of the misconduct will be reported to the Board of Nursing. Examples are: giving or receiving help, **cell phones ringing in the test center**, resident actors talking, prompting or moving when not directed to do so, taking part in an act of impersonation, removing test materials or notes from the testing room, using rude or offensive language and behavior that delays or interrupts testing.

**Weapons**

- Weapons are not allowed at the test center.



**Important** Every time you enter the test room, you will be asked to turn your pockets inside out to confirm that you have no prohibited items. The test center administrator will collect any materials that violate the rules.

**If questions arise.** Test site employees are not allowed to answer any questions about the exam content. If you do not understand a question on the test, you should answer the question to the best of your ability.

**Copyrighted questions.** All test questions are the property of Prometric Inc. and are protected by copyright. Federal law provides severe civil and criminal penalties for the unauthorized reproduction, distribution, or exhibition of copyrighted materials.

***Your exam results***

After you pass both parts of your exam and give Prometric your valid Social Security number, your scores will be sent to the Board of Nursing. Once the Board of Nursing has received your score information, your Certificate will be mailed to you. Your official results will also be listed on the CNA Registry.

- It takes approximately one week from the day you test for your scores to be sent from Prometric to the Board of Nursing.
- It takes two to four weeks for the Board of Nursing to issue and mail out your certificate.



**Note** Scores are confidential and will be revealed only to you and the state. **Scores are not given out over the phone.** Your official results will be given to you at the test site on the day of testing. If you lose your official results and want a copy, you must contact Prometric and pay a \$15 duplicate score report fee.

**Written Test**

Since your test is given on computer, you will get a score report when the test is done. The score report will list either pass or fail. **Test site employees cannot discuss your results with you.**

**Clinical Skills Test**

Your score report will be given to you at the test site shortly after the completion of your test. You must pass all five skills to pass the Clinical Skills test. **The nurse giving the Clinical Skills test is not allowed to discuss your results with you.**

**Unsuccessful candidates**

If you fail a test, you will be given an official score report at the test site on the day of testing. Results will be reported to the Florida Board of Nursing.

If you want to retake a test you failed, you must wait at least 30 days before you can test again. You will also need to complete and submit another application form, FBI background check fees and processing fees.



**Note** If you do not pass both your Written and Clinical Skills tests within three attempts and two years, you will be unable to test again until you have completed a minimum of 120 hours of training in an approved training program. If you do not pass both parts of your exam within two years of taking your first exam part, your results become invalid. You will need to retake both the Written and Clinical Skills tests, regardless of past scores.

**Written test review**

If you do not pass the Written test, you can register for an optional review of it. To request a Written test review, you must contact Prometric in writing within 21 days of taking your test. The review must be completed within 60 days of taking your test. The fee for a Written test review is \$50.

Your review request should include your name, address, Social security number and the \$50 review fee payable by MasterCard or Visa, money order, company check or cashier’s check. **Personal checks and cash are not accepted.**

You will be scheduled for the review at the same location where you took the test unless you specify otherwise, or there is an earlier appointment available at another test site in the same area.

During a Written Test review, you will be given a printout of the test showing the questions missed and the incorrect answers given. You will have one hour to review the test to determine what the correct answers should have been. You are not provided with the correct answers. You are not permitted to leave the room with any notes. All security requirements that apply during the test apply to the review session as well. You must wait 30 days following the review session to schedule a retake test.

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**Appeals process**

Our goal is to provide a quality exam and a pleasant testing experience for every candidate. If you are dissatisfied with either and believe we can correct the problem, we would like to hear from you. We provide an opportunity for general comments at the end of your exam. Your comments will be reviewed by our personnel, but you will not receive a direct response.

If you are requesting a response about exam content, registration, scheduling or test administration (testing site procedures, equipment, personnel, etc.), please submit an appeal in writing within 60 days of your test date. Your appeal letter must provide your name and Social Security number, the exam title, the date you tested and the details of your concern, including all relevant facts. Be sure to include your signature and return address. Mail your appeal letter to:

**Prometric**  
**ATTN: Appeals Committee**  
1260 Energy Lane  
St. Paul, MN 55108

The Appeals Committee will review your concern and send you a written response with acknowledgement of receipt within 10 business days.



**Important** Faxed or emailed appeals will not be accepted because an original signature is required.

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***Certified  
Nursing  
Assistant  
Registry***

Certified Nursing Assistants (CNAs) are regulated through the Board of Nursing in the state Department of Health. They are regulated by Chapter 464, Part 2, Florida Statute and may be disciplined by the Board of Nursing.

**Registry process**

After you pass both parts of your exam and the Board of Nursing has approved your application, you will be added to the Florida Registry as a CNA. The process to be added to the registry after Board approval takes from three to five weeks. The Registry is available to CNAs and the public for verification of certification at [www.doh.state.fl.us/mqa/cna](http://www.doh.state.fl.us/mqa/cna).

**Address and name changes.** You must update the Registry with any address change or any change in name. There is no charge for updating this information with the Registry. There is a \$25 fee to receive a new certificate showing your name change.

**Certificate renewal**

Certificates issued by the Florida Board of Nursing include expiration dates. To keep your certificate current (active), you will need to renew your certificate before the expiration date. The Florida Board of Nursing handles renewals.

To renew, you will have to pay a fee and complete a form documenting that you have worked for pay during your certification period performing nursing-related services. Certificates that are not renewed before they expire will be considered delinquent. You may not work with a delinquent certificate.

## Examination Content Outlines

The Competency Examination consists of two tests, a Written (Knowledge) Test and a performance-based Clinical Skills Test.

### Written (Knowledge) Test Content Outline 60 questions—90 minute time limit

The areas of nursing assistant knowledge covered in the test are:

- I. Role of the Nursing Assistant [9 questions, 18%]**
  - A. Personal Responsibilities
    - 1. Reporting requirements
    - 2. Promoting personal health and safety
    - 3. Protecting resident rights
    - 4. Organizing work
    - 5. Workplace standards including ethical and unethical behaviors
  - B. Nursing Assistant as a Member of the Health Care Team
    - 1. Job responsibilities of the nursing assistant, including duties and limitations
    - 2. Understanding roles of multi-disciplinary team members
    - 3. Principles of teamwork (e.g., collaboration, cooperation, sharing information)
    - 4. Resident care conferences
    - 5. Resident plan of care
    - 6. Responsibility to provide care according to plan of care
  - C. Interpersonal Relations and Communication Skills
    - 1. Principles of communication
    - 2. Types of communication
    - 3. Factors affecting communication
    - 4. Supportive communication techniques
- II. Promotion of Safety [8 questions, 16%]**
  - A. Potential hazards in the resident environment
  - B. Common injuries and related risk factors
  - C. Providing a safe and comfortable environment
    - 1. Comfort needs of the resident
    - 2. Accident prevention including fall prevention protocols
    - 3. Use of restraints and restraint alternatives
  - D. Fire prevention and safety
  - E. Infection control
    - 1. Maintaining a clean environment
    - 2. Factors that contribute to spread of disease causing organisms
    - 3. Practices that decrease the risk of exposure to disease causing organisms
    - 4. Signs and symptoms of infections
  - F. Emergencies
    - 1. Responses to emergency and disaster situations
    - 2. Providing for immediate life-safety of residents
    - 3. Evacuation procedures
- III. Promotion of Function and Health of Residents [12 questions, 24%]**
  - A. Personal care skills
    - 1. Feeding
    - 2. Bathing
    - 3. Perineal care
    - 4. Foot/nail care
    - 5. Mouth care
    - 6. Skin care
    - 7. Toileting
    - 8. Grooming
    - 9. Dressing/undressing
  - B. Health maintenance and restoration
    - 1. Circulation and skin integrity
    - 2. Nutrition
    - 3. Hydration
    - 4. Elimination (bowel and bladder)
    - 5. Mobility
    - 6. Promoting self-care and independence
  - C. Age-related changes
    - 1. Cognitive
    - 2. Emotional
    - 3. Physical
  - D. Psychosocial needs
    - 1. Basic human needs including support of diversity
    - 2. Responses to change (e.g., role changes, living situation, finances, health and body image, aging)
    - 3. Affects of institutionalization (e.g., socialization, dependency, loss of privacy)
    - 4. Promoting resident sense of well-being including emotional support strategies
- IV. Basic Nursing Care Provided by the Nursing Assistant [13 questions, 26%]**
  - A. Routine, chronic, non-life threatening situations
    - 1. Observing, reporting and responding (physical status)
    - 2. Observing, reporting and responding (behavioral changes)
  - B. Acute Emergency Situations: observing, reporting and responding
    - 1. Chest pain
    - 2. Respiratory distress
    - 3. Choking/aspiration
    - 4. Seizures
    - 5. Difficulty swallowing
    - 6. Diabetic situations
    - 7. Changes in level of consciousness
    - 8. Cardiac arrest
    - 9. Falls
    - 10. Bleeding
    - 11. Burns
    - 12. Vomiting
    - 13. Changes in mobility, speech or other potential signs of stroke
    - 14. Sudden onset of confusion or agitation

**V. Specific Care Provided for Residents with Changes in Health [8 questions, 16 %]**

- A. Physical problems
  - 1. Common physical impairments and related care (e.g., sensory changes and changes in mobility, skin, elimination, nutrition)
  - 2. Impact of impairments on resident safety, care and comfort
  - 3. Providing for safety, care and comfort of residents with physical impairments
- B. Psychological problems
  - 1. Common psychological impairments and related care (e.g., confusion, anxiety, combativeness, fear, agitation, pain)
  - 2. Impact of impairments of resident safety, care, comfort and ability to communicate needs
  - 3. Providing for safety, care and comfort of residents with psychological impairments
- C. Care of the dying resident
  - 1. Grief process
  - 2. Responding to the emotional needs of the resident, other residents, family and caregivers in the grief process
  - 3. Factors influencing responses to grief such as spiritual beliefs, culture and past experience
  - 4. Physical changes and needs as death approaches
  - 5. Post-mortem care procedures

**Clinical Skills**

The following is a list of the clinical skills that you may be asked to perform during the Clinical Skills test. A checklist for these skills may be found online at [www.prometric.com/NurseAide/FL](http://www.prometric.com/NurseAide/FL).

**Handwashing Note:** Your handwashing technique is evaluated at the beginning of the test. This skill is not prompted, which means you will not be told to wash your hands. Nursing assistants are expected to know to wash their hands before and after physical contact (touching) with the resident.

**I. Clinical Skill List**

- A. Ambulation
- B. Bedpan
- C. Catheter Care
- D. Change an Occupied Bed
- E. Change of Position
- F. Dressing
- G. Feeding
- H. Foot care
- I. Hair and Nail Care
- J. Measure and Record Blood Pressure
- K. Measure and Record Contents of a Urinary Drainage Bag
- L. Measure and Record Pulse and Respirations
- M. Measure and Record Weight
- N. Mouth Care – Brush Teeth
- O. Mouth Care - Dentures
- P. Partial Bed Bath
- Q. Perineal Care - Female
- R. Range of Motion – Lower Extremity
- S. Range of Motion – Upper Extremity
- T. Transfer

**Print or type clearly and neatly. Incomplete or illegible forms will not be processed.**

**Candidate Information**



**Note:** Before you enter your name below, check the government issued identification that you will use for admission to testing. If the name you use below does not **EXACTLY** match the name on the identification you provide on the day of testing, you will not be allowed to test.

<b>Social Security Number</b> (Required for Certification):		
Last Name	First Name	Middle Initial
Street Address (including Apt. number or P.O. Box*, if applicable)		
City	State	ZIP Code
*If using a PO box as your mailing address, you must supply your physical address of legal residence as well.		
Daytime Phone Number (including area code) ( )	Cell Phone Number (optional). Including area code ( )	
Email Address	Date of Birth (Month, Day, Year) / /	
Do you have a High School diploma or equivalent? <input type="checkbox"/> No <input type="checkbox"/> Yes		Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male
Race <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Native American <input type="checkbox"/> Asian <input type="checkbox"/> Mexican American <input type="checkbox"/> Other Hispanic <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other _____		
Have you taken the CNA Written or Clinical Skills test before? <input type="checkbox"/> No <input type="checkbox"/> Yes. If yes, when was the last time you took the test: _____ - _____ - _____		

**Certification Option/Eligibility**

<input checked="" type="checkbox"/>	<b>Certification Training Route</b>
<input type="checkbox"/>	<b>E1</b> - Completed a State-approved Nursing Assistant Training Program. (Complete Training Info section below)
<input type="checkbox"/>	<b>E2</b> - Enrolled in a State-approved Nursing Assistant Training Program. (Complete Training Info section below)
<input type="checkbox"/>	<b>E3</b> - Challenger. You have never trained as a nursing assistant and have no nursing assistant experience.
<input type="checkbox"/>	<b>E4</b> - Other Nursing Training.
<input type="checkbox"/>	<b>E5</b> - Lapsed Nursing Assistant.

**Training Information**

(This section must be completed if the applicant has selected Training Route E1 or E2.)

Name of School or Facility	
Address of School or Facility	
<b>(MANDATORY). Your exams will be scheduled after your training is completed.</b> Training Completion Date: ___/___/___	<b>(MANDATORY)</b> Training Program Code: _____

**Disciplinary History (Mandatory)**

<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been denied or is there now any proceeding to deny your application for any healthcare certification to practice in Florida or any other state, jurisdiction or country?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever had disciplinary action taken against your certification to practice any healthcare-related profession by the licensing authority in Florida or in any other state, jurisdiction or country?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever surrendered a certification to practice any healthcare-related profession in Florida or in any other state, jurisdiction or country while any such disciplinary charges were pending against you?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have any disciplinary actions pending against your certification?

## Criminal History (Mandatory)

<input type="checkbox"/> Yes*  <input type="checkbox"/> No	Have you EVER been convicted of, or entered a plea of guilty, nolo contendere, or no contest to, a crime in any jurisdiction other than a minor traffic offense? You must include all misdemeanors, felonies, and juvenile offenses, even if adjudication was withheld. Driving under the influence (DUI) or driving while impaired (DWI) is not a minor traffic offense for purposes of this question.  *If you answered YES, please be prepared to create a typed or printed letter with arrest dates, city, state, charges and final dispositions and be prepared to send it to the Board Office upon request. (Do not send this information with your application for examination.)
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## Additional Criminal History Questions (Mandatory)

Applicants **MUST** answer these questions pursuant to Section 456.0635(2), Florida Statutes. Answering yes to any of these questions will result in your inability to take the Nurse Aide exam. Test fees **will not** be refunded. If you are not sure how you should answer these questions, you should check with the Florida Department of Health before submitting your application.

<input type="checkbox"/> Yes <input type="checkbox"/> No	1a. Have you been convicted of, or entered a plea of guilty or nolo contendere to, regardless of adjudication, a felony under Chapter 409, Chapter 817, or Chapter 893, Florida Statutes; or 21 U.S.C. ss. 801-970 or 42 U.S.C. ss. 1395-1396? (If "No", do not answer 1b.)
<input type="checkbox"/> Yes <input type="checkbox"/> No	1b. Has it been more than 15 years prior to the date of this application since the sentence and completion of any subsequent period of probation for such conviction?
<input type="checkbox"/> Yes <input type="checkbox"/> No	2a. Have you ever been terminated for cause from the Florida Medicaid Program pursuant to Section 409.913, Florida Statutes? (If "No", do not answer 2b.)
<input type="checkbox"/> Yes <input type="checkbox"/> No	2b. If you have been terminated but reinstated, have you been in good standing with the Florida Medicaid Program for the most recent five years?
<input type="checkbox"/> Yes <input type="checkbox"/> No	3a. Have you ever been terminated for cause, pursuant to the appeals procedures established by the state or federal government, from any other state Medicaid program or the Federal Medicare program? (If "No", do not answer 3b and 3c.)
<input type="checkbox"/> Yes <input type="checkbox"/> No	3b. Have you been in good standing with a state Medicaid program or the federal Medicare program for the most recent five years?
<input type="checkbox"/> Yes <input type="checkbox"/> No	3c. Did the termination occur at least 20 years prior to the date of this application?

## Test Site Information

Please check one of the following options for testing.

<input type="checkbox"/>	<b>Testing at your Facility:</b> My employer or training program is scheduling my exams and I will take the exams at their facility. I will give this application form to the facility coordinator (do not send it to Prometric).	
<input type="checkbox"/>	<b>Regional Test Site:</b> I am applying to test at a Regional Test Site. My preferred test site is listed below. However, I understand that I will be assigned to the first available testing appointment in my area. I can find a current list of Test Sites online at <a href="http://www.prometric.com/NurseAide/FL">www.prometric.com/NurseAide/FL</a> .	My Preferred Test Site City is:

## Testing/Retesting Fees

	Exam (Check all that apply)	Fee	Total
<input checked="" type="checkbox"/>	Clinical Skills and Written (both in English)	\$93	\$
	Clinical Skills and Written Audio (both in English)	\$97	\$
	Written (English)	\$36	\$
	Written Audio (English)	\$40	\$
	Clinical Skills (English)	\$57	\$
	Clinical Skills (English) and Written (Spanish)	\$93	\$
	Clinical Skills (English) and Written Audio (Spanish)	\$97	\$
	Written (Spanish)	\$36	\$
	Written Audio (Spanish)	\$40	\$
	<b>Additional Fees</b>	<b>Fee</b>	
<input checked="" type="checkbox"/>	FBI Screening (must be paid each time applying to test)	\$43.25	<b>\$43.25</b>
<input checked="" type="checkbox"/>	Processing Fee (must be sent with each application)	\$25.00	<b>\$25.00</b>
		<b>Total Fee</b>	<b>\$</b>

Fingerprinting Note: ALL Candidates must have electronic fingerprint scanning completed after submitting this application.

Fees may be paid by cashier's check, company check, money order, MasterCard or Visa. Make checks payable to Prometric. **Personal checks and cash are not accepted. Fees are not refundable or transferrable.** To pay by **credit card**, complete the information below:

Card Type (Check One) <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa	Card Number	Expiration Date
Name of Cardholder (Print)		Signature of Cardholder

### **Applicant's Affidavit and Candidate Release Statement**

- I understand that I am responsible for making sure all of the information provided in this application is completely true and correct.
- I understand that if information given is not true, my registration status as a nurse aide may be at risk.
- I understand that if I pass both parts of the Florida Nurse Aide Examination, I will be placed on the Registry.
- I understand that I may be asked to play the part of the resident for another candidate on exam day. I do not have any physical, medical or other condition that would be affected in any way by my participation in the exam. I agree that I am responsible for my own personal safety both while taking the exam and acting as a resident. I hereby release Prometric, the FLDOH, and their agents and assigns from any responsibility or liability for any claim or damage that may result from my participation in the examination.

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Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Note: Social Security Number information is exempt from public records disclosure and not mandatory for testing.

**If testing at a Facility:** Provide this completed form, along with all necessary documents to your training coordinator (do not send it to Prometric).

**If testing at a Regional Test Site:** Submit this completed form, along with all necessary documents and fees to:

**By Mail:** Prometric, Attn: Florida Nursing Assistant Testing Program, 1260 Energy Lane, St. Paul, MN 55108.

**By Fax (if paying by credit card):** 800.813.6670.

### **Completion Checklist**

<input type="checkbox"/> Yes <input type="checkbox"/> No	Did you list a certification Route?
<input type="checkbox"/> Yes <input type="checkbox"/> No	If you selected route 1 or 2 did you include your training completion date and program code?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Did you answer all of the criminal conviction and disciplinary history questions?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Did you provide your test site information?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you selected your test fees and background fees?
<input type="checkbox"/> Yes <input type="checkbox"/> No	Did you include your fees with your application? (unless fees are already on file)
<input type="checkbox"/> Yes <input type="checkbox"/> No	Did you put your Social Security Number on the application? Your SSN is required for certification.