



PSI Services LLC
<https://test-takers.psiexams.com/njdh>



NURSE AIDE EXAMINATION CANDIDATE INFORMATION BULLETIN

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Please refer to our website to check for the most updated information at <https://test-takers.psiexams.com/njdh>

EXAMINATIONS BY PSI SERVICES LLC

This Candidate Information Bulletin provides you with information pertaining to obtaining certification as a nurse aide in the State of New Jersey.

The New Jersey Department of Health has contracted with PSI Services LLC (PSI) to conduct the examination testing. PSI provides examinations through a network of computer examination sites in New Jersey.

For information on official regulations and guidelines; NA/PCA certification and recertification process; and/or Criminal History Background Checks, please contact:

New Jersey Department of Health
PO Box 360
Trenton, NJ 08625-0360
(866) 561-5914 ** Fax: (609) 633-9087
<http://www.nj.gov/health/>

WAIVER ELIGIBILITY

You are eligible to apply for a waiver of the nurse aide training course and to take an examination for certification as a nurse aide in New Jersey if you qualify under one of the following exceptions. Please note: If you were initially certified in New Jersey and your certification has expired, please refer to Expired with Education or Expired without Education. Waivers are valid for only one year after issue date and provide one chance to take and pass the skills examination and one chance to take and pass the written examination. If you do not use the waiver before it expires or if you fail any portion of the exam, you **MUST** complete a ninety (90) hour state-approved nurse aide training program.

Please be aware that the Department cannot guarantee that an individual will be eligible for a waiver under one of the following exceptions. Department staff may request additional information necessary to process the waiver.

Student/Graduate Nurse

- **Student Nurse** - An individual who has successfully completed a course in the *Fundamentals of Nursing* within one year prior to application to take the examination.
- **Graduate Nurse** - An individual who has graduated from an accredited school of nursing and is waiting to take the state nursing boards *OR* an individual who has graduated from a foreign school of nursing and is currently licensed as a registered professional nurse (RN) (*not* a midwife) in that country.

Reciprocity

An individual who is currently certified as a nurse aide in another state and is listed on that state's nurse aide registry and is not listed on any state's nurse aide abuse registry, and has not had his/her certificate revoked in any state.

The individual applying for reciprocity must comply with the criminal history record background check. The applicant must also:

1. Have completed within the preceding 24 months the amount of continuing education hours required by regulation for a nurse aide; or
2. The applicant must have the equivalent of at least two years of full time employment in the other state or territory as a nurse aide and the most recent date of such employment is within the 24-month period immediately preceding the date of the application. The Department of Health shall require an individual applying for a certification to be entered on the registry on the basis of work experience pursuant to this paragraph to complete the clinical skills competency examination and the written and oral competency examination, required by the Department pursuant to regulation, to verify the individual meets New Jersey's training and competency requirements.

Military Nurse Aide

A person who has had training and experience as a nurse aide in a military service that is equivalent to that of a nurse aide.

Expired with Education

A nurse aide who was initially certified in New Jersey less than five (5) years ago and whose certificate has expired. Must now successfully complete the skills evaluation and the written or oral examination. If the skills or the written (or oral) exam is failed, the candidate must retrain and retest under eligibility Expired Nurse Aide without Education.

Expired Nurse Aide Without Education

A nurse aide who was initially certified in New Jersey more than five (5) years ago and whose certificate has expired. Must now successfully complete the Nurse Aide in Long-Term Care Facilities Training and Competency Evaluation Program (course, skills, and written or oral exam).

New Nurse Aide

An individual who has never been certified as a nurse aide (NA) in New Jersey and has successfully completed the ninety (90) hour state-approved nurse aide in long-term care facilities training course.

COMPLETING THE APPLICATION

After successful completion of the training program, you must complete an online examination application through D&SDT-HEADMASTER.

All nurse aide candidates must be registered with D&SDT-HEADMASTER by their training program or alternate registration route in the TestMaster Universe (TMU©) software at nj.tmutest.com.

For Skills Payments D&SDT-HEADMASTER only take Visa or MasterCard (and Facility Check/PO's from training programs/entities).

You have two (2) years from the date you complete the training program to take and pass both the Skills and Written/Oral examinations. **However, once you start the examination process (Skills), you will have one (1) year from your first examination attempt to pass both examinations.** If you are not able to pass all necessary examinations, you will be required to re-start the entire process.

EXAMINATIONS

Certification consists of passing two parts of the examination: the Skills Evaluation and the Written (or Oral) Examination. **You must take the Skills Evaluation first.** Once you have successfully completed the Skills Evaluation, you are eligible to take the Written (or Oral) Examination.

The first time you test, you must include payment to D&SDT-HEADMASTER for the **Skills Evaluation ONLY.**

The payment for the Written or Spanish (Oral) Examination is to be made at the time of scheduling one of these exams. Payment should be made by credit card or prepaid voucher.

SKILLS EVALUATION

At the Skills Evaluation you will be asked to perform randomly selected nurse aide skills. A Nurse Aide Evaluator will rate you on your performance of these skills. You must pass all skills to pass the Skills Evaluation and to be eligible to take the Written (or Oral) Examination. The Skills Evaluation part of the examination will take place at a long-term care facility or at another approved Skills Evaluation site. See full description on page 7 of this Candidate Information Bulletin.

Please note: if you have a waiver from the state whereby you only need to take the Written Examination, you will have **only** one attempt to pass. If you do not pass on the first attempt, you will need to complete the state-approved training program.

WRITTEN (OR ORAL) EXAMINATION

Taking the PSI examination by computer is simple. You do not need any computer experience or typing skills. You will use fewer keys than you use on a touch-tone telephone. All response keys are colored and have prominent characters. You may also use the mouse. You will receive your results immediately after the examination is finished.

The Written Examination for nurse aides contains multiple-choice questions written in English.

For the nurse aide examination, an oral version in *English or Spanish* may be taken in place of the Written Examination if you have difficulty reading English.

During the Oral Examination you are provided with earphones. You will listen to each question, repeated two (2) times, after which you will select an answer from the choices given on the computer screen.

Please note: if you have a waiver from the state whereby you only need to take the Written Examination, you will have **only** one attempt to pass. If you do not pass on the first attempt, you will need to complete the state-approved training program.

CRIMINAL BACKGROUND INVESTIGATION (CBI)

All applicants for certification as a nurse aide in New Jersey **MUST** complete a CBI application and a fingerprint appointment. Failure to complete these two requirements will

result in disqualification from certification.

CAUTION: Filing a false CBI application results in disqualification from certification for a period of at least two years.

All applicants will be afforded a reasonable amount of time to challenge the accuracy of any criminal history reported to the Department before any final action is taken. Applicants have the right to review the criminal history documents as part of the challenge process. The Department will provide a written summary of any criminal history information to the applicant before taking any action. Also, the Department is prohibited by law from sharing criminal history information with any party other than the applicant, and fingerprint results cannot be shared with your employer or other licensing boards.

This is a summary of your rights under Federal law. If you would like more information, a document is available to explain your rights. Please call us at 866-561-5914 or email us at CIU@doh.nj.gov.”

If you are enrolled in a New Jersey Nurse Aide Training Program, you will obtain the required CBI application and fingerprint appointment forms from your instructor. If you are an applicant for reciprocity, you will receive the required forms as part of your reciprocity application packet. If you are an applicant for admission through a waiver process, you will receive the required forms from the Department of Health after your request for a waiver is received. **Follow all instructions carefully.** Failure to follow the instructions on both the CBI Application and on the Fingerprint Appointment Form may delay both processes and result in the denial of your certification.

IDENTIFICATION REQUIREMENT

Identification must be presented at the time of printing. Identification presented **MUST** be one (1) document that is current (not expired). A combination of documents will not be accepted. The single document must include the following criteria; Photo, Name, Address (home/employer), Date of Birth and is issued by a Federal, State, County or Municipal entity for Identification purposes. Examples of acceptable ID are:

- 1) Valid U.S. State Photo Driver's License/ Non Driver's License
- 2) U.S. Passport
- 3) USCIS Permanent Resident ID Card (issued after 5/10/2010)
- 4) USCIS Employment Authorization Card (issued after 10/31/2010)

WRITTEN EXAMINATION SCHEDULING PROCEDURES

You must take the Skills Evaluation first. Once you have successfully passed the Skills Evaluation, you are eligible to take the Written (or Oral) Examination. You will receive email notification of the Skills Evaluation score within 24-48 hours from your test date. If you fail the Skills Evaluation examination, you must retake and pass before scheduling for the Written (or Oral) examination.

- If you fail the Skills Evaluation three (3) times, you **MUST** retrain at a state-approved training program before retaking the Skills Evaluation. You will then have one (1) year from that date to successfully complete the Skills Evaluation.
- If you fail the Written (or Oral) Examination three (3) times, you **MUST** retrain at a state-approved training program before retaking the Written (or Oral) Examination. If you are re-taking an examination you will pay at the time of scheduling.

Payment of Skills fees may be made by credit card (Visa, MasterCard, American Express or Discover).. **NO PSI VOUCHERS will be accepted by D&S for skills payments.**

Payment of Written Exam fees may be made by credit card (Visa, MasterCard, American Express or Discover and PSI issued VOUCHERS)

EXAMINATION/RECIPROCITY FEES	
Examination	Fee
Skills Evaluation (paid directly to D&S)	\$27.00
Skills Evaluation Only (Re-take Exam) (paid directly to D&S)	\$27.00
Written Exam Only (Re-take Exam)	\$57.00
English Oral Exam Only (Re-take Exam)	\$68.00
Spanish Oral Exam Only (Re-take Exam)	\$68.00
Reciprocity Fee	\$36.00
NOTE: THESE FEES ARE NOT TRANSFERABLE OR REFUNDABLE IF THE APPLICATION IS DENIED.	

SCHEDULING AN APPOINTMENT TO TAKE THE EXAMINATION

Once you have passed the skills evaluation, you are responsible for contacting PSI to schedule an appointment to take the written (or oral) examination. PSI will make every effort to schedule the examination at a site and time that is most convenient for you. You may schedule an examination via the Internet 24 hours a day at <https://test-takers.psiexams.com/njdh>.

To schedule with a PSI registrar, call 855-898-0718 Monday through Friday between 7:30 am and 10:00 pm, and Saturday-Sunday between 9:00 am and 5:30 pm, Eastern Time. If space is available in the examination site of your choice, you may schedule an examination 1 day prior to the examination date of your choice, up to 7:00 p.m. ET. Please be prepared to offer alternate examination appointment choices

CANCELING AN EXAMINATION APPOINTMENT

You may cancel and reschedule an examination appointment without forfeiting your fee **if your cancellation notice is received 2 days prior to the scheduled examination date.** For example, for a Monday appointment, the cancellation notice would need to be received on the previous Saturday. You may call PSI at (855) 898-0718 or use the website. You will not forfeit the exam attempt in this case.

Note: A voice mail message is not an acceptable form of cancellation. Please use the PSI Website or call PSI to speak directly to a Customer Service Representative.

MISSED APPOINTMENT OR LATE CANCELLATION

If you miss your appointment, you will not be able to take the examination as scheduled, further you will forfeit your examination fee, if you:

- Do not cancel your appointment 2 days before the scheduled examination date;
- Do not appear for your examination appointment;
- Arrive after examination start time;
- Do not present proper identification when you arrive for the examination.
- You will not forfeit the exam attempt in this case.

RETAKING A FAILED EXAMINATION

It is not possible to make a new examination appointment on the same day you have taken an examination; this is due to processing and reporting scores. A candidate who tests unsuccessfully on a Wednesday can call the next day, Thursday, and retest as soon as Friday, depending upon space availability. You may schedule online at <https://test-takers.psiexams.com/njdh>.

SPECIAL EXAMINATION ARRANGEMENTS

All PSI examination centers are equipped to provide access in accordance with the Americans with Disabilities Act (ADA) of 1990, and exam accommodations will be made in meeting a candidate's needs. A candidate with a disability or a candidate who would otherwise have difficulty taking the examination should request for alternative arrangements by [Clicking Here](#).

https://psi-cdexp.zendesk.com/hc/en-us/requests/new?ticket_form_id=360000150872

Candidates granted accommodation in accordance with the ADA, MUST schedule their examination by telephone and speak directly with a PSI accommodations team member.

EXAMINATION SITE CLOSING FOR AN EMERGENCY

In the event that severe weather or another emergency forces the closure of an examination site on a scheduled examination date, your examination will be rescheduled. PSI personnel will attempt to contact you in this situation. However, you may check the status of your examination schedule by calling (855) 898-0718. Every effort will be made to reschedule your examination at a convenient time as soon as possible. You may also check our website at <https://test-takers.psiexams.com/njdh>.

EXAMINATION SITE LOCATIONS

The following directions are generated from the most current mapping services available. However, new road construction and highway modifications may result in some discrepancies. If you are not familiar with the specific area of the testing site, please consult a reliable map prior to your test date.

BRICK

260 CHAMBERS BRIDGE ROAD, UNIT #1A
BRICK, NJ 08723
HAMILTON SQUARE AREA
IBIS PLAZA SOUTH
3525 QUAKERBRIDGE ROAD, SUITE 1000
HAMILTON TOWNSHIP, NJ 08619

MARLTON

901 LINCOLN DR W, SUITE 130
MARLTON, NJ 08053

NORTH BRUNSWICK

1440 HOW LANE, SUITE 2E
NORTH BRUNSWICK TOWNSHIP, NJ 08902

NEW PROVIDENCE

MURRAY HILL OFFICE CENTER
571 CENTRAL AVENUE, SUITE 117
NEW PROVIDENCE, NJ 07094

LINWOOD

222 NEW ROAD, SUITE 301
LINWOOD, NJ 08221

ROCHELLE PARK

365 W. PASSAIC ST, STE 180
ROCHELLE PARK, NJ 07662

PARSIPPANY

7 ENTIN ROAD, SUITE D
PARSIPPANY, NJ 07054

SECAUCUS

110-B MEADOWLANDS PARKWAY, SUITE 204
SECAUCUS, NJ 07094

REPORTING TO THE EXAMINATION SITE

On the day of the examination, you should arrive 30 minutes before your appointment. This extra time is for sign-in, and identification. *If you arrive late, you may not be admitted to the examination site and you will forfeit your examination registration fee.*

REQUIRED IDENTIFICATION

You must provide 2 forms of identification. One must be a VALID form of government issued identification (driver's license, state ID, passport), which bears your signature and has your photograph. The second ID must have your signature and preprinted legal name. All identification provided must match the name the Board has provided to PSI.

PRIMARY IDENTIFICATION (with photo) - Choose One

- State issued driver's license
- State issued identification card
- US Government Issued Passport
- US Government Issued Military Identification Card
- US Government Issued Alien Registration Card
- Canadian Government Issued ID

NOTE:

ID must contain candidate's photo, be valid and unexpired.

SECONDARY IDENTIFICATION - Choose One

- Credit Card (must be signed)
- Social Security Card

IMPORTANT NOTICE FOR ALL CANDIDATES

Due to many complaints from the buildings' tenants, PSI (and the properties which house the PSI test centers) cannot accommodate any individuals other than the person who is being tested.

PSI understands that test candidates are often comforted by having guests accompany them to their exams. It may also be necessary for a guest to drive the candidate to the test center. However, incidents from previous guests have prompted warnings from Property Management. For this reason, PSI has adopted the following policy concerning guests.

"Person(s) accompanying a test candidate may not wait in the test center, inside the building or on the building's property. This applies to guests of any nature, including drivers, children, friends, family, colleagues or instructors."

There are facilities nearby such as shopping malls, stores or restaurants where guests may go while the candidate takes a test. Please take the time to visit those locations instead of waiting in or around the building.

Also of note, many candidates have been arriving hours before their scheduled exam time. This is not necessary. Please plan to arrive no earlier than 30 minutes before the start-time of your exam. This will provide plenty of time for check-in.

Thank you for your understanding and for your cooperation.

SECURITY PROCEDURES

The following security procedures will apply during the examination:

- Candidates may take only approved items into the examination room.
- All personal belongings of candidates, with the exception of close-fitting jackets or sweatshirts, should be placed in the secure storage provided at each site prior to entering the examination room. Personal belongings **include, but are not limited to**, the following items:
 - **Electronic devices of any type**, including cellular / mobile phones, recording devices, electronic watches, cameras, pagers, laptop computers, tablet computers (e.g., iPads), music players (e.g., iPods), smart watches, radios, or electronic games.
 - **Bulky or loose clothing or coats** that could be used to conceal recording devices or notes, including coats, shawls, heavy jackets, or overcoats.
 - **Hats or headgear not worn for religious reasons** or as religious apparel, including hats, baseball caps, or visors.
 - **Other personal items**, including purses, notebooks, reference or reading material, briefcases, backpacks, wallets, pens, pencils, other writing devices, food, drinks, and good luck items.
- Person(s) accompanying an examination candidate may not wait in the examination center, inside the building or

on the building's property. This applies to guests of any nature, including drivers, children, friends, family, colleagues or instructors.

- No smoking, eating, or drinking is allowed in the examination center.
- During the check in process, all candidates will be asked if they possess any prohibited items. Candidates may also be asked to empty their pockets and turn them out for the proctor to ensure they are empty. The proctor may also ask candidates to lift up the ends of their sleeves and the bottoms of their pant legs to ensure that notes or recording devices are not being hidden there.
- Proctors will also carefully inspect eyeglass frames, tie tacks, or any other apparel that could be used to harbor a recording device. Proctors will ask to inspect any such items in candidates' pockets.
- If prohibited items are found during check-in, candidates shall put them in the provided secure storage or return these items to their vehicle. PSI will not be responsible for the security of any personal belongings or prohibited items.
- Any candidate possessing prohibited items in the examination room shall immediately have his or her test results invalidated, and PSI shall notify the examination sponsor of the occurrence.
- Any candidate seen giving or receiving assistance on an examination, found with unauthorized materials, or who violates any security regulations will be asked to surrender all examination materials and to leave the examination center. All such instances will be reported to the examination sponsor.
- Copying or communicating examination content is violation of a candidate's contract with PSI, and federal and state law. Either may result in the disqualification of examination results and may lead to legal action.
- Once candidates have been seated and the examination begins, they may leave the examination room only to use the restroom, and only after obtaining permission from the proctor. Candidate will not receive extra time to complete the examination.

TAKING THE EXAMINATION BY COMPUTER

The examination will be administered via computer. You will be using a mouse and computer keyboard.

TUTORIAL

Before you start your examination, an introductory tutorial to the computer and keyboard is provided on the computer screen. The time you spend on this tutorial, up to 15 minutes, DOES NOT count as part of your examination time. Sample questions are included following the tutorial so that you may practice using the keys, answering questions, and reviewing your answers.

TEST QUESTION SCREEN

One question appears on the screen at a time. During the examination, minutes remaining will be displayed at the top of the screen and updated as you record your answers.

IMPORTANT: After you have entered your responses, you will later be able to return to any question(s) and change your response, provided the examination time has not run out.

EXAMINATION REVIEW

PSI, in cooperation with the NJDOH, will be consistently evaluating the examinations being administered to ensure that the examinations accurately measure competency in the required knowledge areas. While taking the examination, examinees will have the opportunity to provide comments on any questions, by using the comments key on the keyboard. These comments will be analyzed by PSI examination development staff. PSI does not respond to individuals regarding these comments, all substantive comments are reviewed. **This is the only review of examination materials available to candidates.**

WRITTEN SCORE REPORTING

Your Examination result will be given to you immediately following completion of the examination

The following summary describes the score reporting process for the Written Examination:

- **On paper** - an official score report will be printed at the examination site.
 - If you **pass**, you will immediately receive a successful notification.
 - If you **do not pass**, you will receive a diagnostic report indicating your strengths and weaknesses by examination type with the score report.

If you **pass** the Written (or Oral) Examination and have met all NJDOH requirements, including the CBI requirement, you will receive a nurse aide certificate at the test site on the day of your examination.

If you **pass** the Written (or Oral) Examination and have **NOT** completed the CBI process, your photograph will be taken and you can notify PSI upon successful completion of the CBI process.

The certificate is valid for twenty-four (24) months from the date you pass the Written (or Oral) Examination. Please see the re-certification process section in this Candidate Information Bulletin.

DUPLICATE SCORE REPORTS

You may print a score report from your online account.

DESCRIPTION OF EXAMINATIONS

NEW JERSEY CERTIFIED NURSE AIDE WRITTEN (OR ORAL) EXAMINATION

# of Items	Passing Score	Time Allowed
60	75%	90 Minutes

CONTENT OUTLINES

Use the outline as a guide for pre-examination review course material. The outlines list the topics that are on the examination and the number of questions for each topic. Do not schedule your examination until you are familiar with the topics in the outline.

Topic	# of Items
Safety	4
Communication	5
Infection Control	4
Resident Rights	3
Data Collection	4
Basic Nursing Skills	11
Role / Responsibility	5
Disease Process	4
Mental Health	4
Personal Care	6
Care Impaired	5
Aging Process/Restorative Care	5

SKILLS EVALUATION

The purpose of the Skill Test is to evaluate your performance on a subset of the nurse aide care tasks that you learned during your training program. You will find a complete list of skill tasks printed later in this skill test handbook. Hand washing will be one of the tasks you will need to perform. Four (4) additional tasks will be randomly selected from the list for you to perform on your skill test. The steps that are listed in this handbook are the scored steps for each skill. **You must have a score of 80% on each task *without missing any key steps* (the bolded steps) to pass the skill portion of the New Jersey nurse aide certification test.** If you fail a single task you will have to take another skill test with five tasks on it, one of which will be the one you failed. If you fail two or more tasks you will have to take another complete skill test.

What to Expect

- Each of the five scenarios associated with your five assigned tasks will be read to you immediately before you do each task.
- You will be demonstrating your five tasks using your candidate “partner” as your resident. If you or your partner provides inappropriate assistance to each other during your skill test neither of your tests will be scored and you will both have a skill test failure recorded and

will have used one of your three skill test attempts. You both will have to re-apply for another testing slot.

- Listen carefully to all instructions given by the RN Test Evaluator. You may request to have any of the five scenarios repeated anytime during your skill test.
- Be sure you understand all instructions before you begin because you may not ask questions once the skill test begins.
- You must correctly perform all five (5) tasks in order to pass the skill test.
- If you believe you made a mistake while performing a task, say so and then repeat the task or the step on the task that you believe you performed incorrectly during that skill. You may repeat any step or steps you believe you have performed incorrectly but, must be done during that skill. Once the skill test has begun, the RN Test Evaluator may not answer any questions.

Every step must actually be performed and demonstrated during testing to receive credit. The only exception is after completing the first task of hand washing; hand washing may be verbalized at the appropriate time for the remaining four (4) skill tasks.

Skill 1—Hand washing

1. Introduces him/her self to the resident by name.
2. Turns on water.
3. Thoroughly wets hands and wrist.
4. Applies liquid soap to hands.
5. **Washes all surfaces of wrist, hands and fingers with liquid soap.**
6. **Rubs hands together for 20 seconds using friction.**
7. Using friction, rubs fingers together while pointing downward.
8. Cleans under finger nails.
9. Rinses hands thoroughly under running water with fingers pointed downward.
10. Dries hands on clean paper towel(s).
11. Turns off faucet with a **SECOND** (last) clean dry paper towel, or with a dry section of a previously used paper towel.
12. Discards paper towels to trash container as used.
13. Does not re-contaminate hands at any time during the procedure.

Skill 2—Ambulation with a Gait Belt

1. Explain procedure to be performed to the resident and obtain a gait belt.
2. Lock bed brakes to ensure resident’s safety.
3. Lower bed so that the resident’s feet will be flat on floor when sitting on the edge of bed.
4. Brings resident to sitting position and assist resident to put on shoes.
5. Places gait belt around waist and tightens gait belt.
6. Stands in front of and faces the resident, grasping the gait belt on each side of the resident with and unhand grip.
7. Stabilizes the resident for safety
8. Brings resident to standing position, using proper body mechanics. Grasps gait belt with one hand, using under had grip.
9. Stabilizes resident with other hand by holding forearm, shoulder, or using other appropriate method to stabilize resident.
10. Ambulates the resident 10 steps and returns resident to chair. Assist resident to ambulate back to bed and sit in a controlled manner that insures safety.

11. Removes gait belt. Assist resident to lay in bed in a position of comfort and safety.
12. Maintains respectful, courteous interpersonal interactions at all times.
13. Leaves call light, elevates head of bed to 30-45 degrees.
14. Identifies hands should be washed.

Skill 3—Placing Bedpan

1. Explains the procedure.
2. Places bed flat
3. Puts on gloves
4. Provides privacy - pulls curtain.
5. Positions resident on bedpan using correct technique.
6. **Bedpan is in proper orientation under the resident.**
7. Removes gloves turning inside out and disposes of gloves in an appropriate container.
8. Identifies that hands should be washed.
9. Raises head of bed to comfortable level.
10. Candidate leaves hand wipes within resident's reach. Candidate instructs resident to clean hands when finished.
11. Leaves tissue within reach of resident. Leaves call light within reach of resident.
12. Candidate moves to area of the room away from the bed.
13. Candidate returns when RN test Evaluator or resident indicates.
14. Candidate puts on gloves.
15. **Candidate positions resident flat in bed**
16. Candidate gently removes bedpan.
 - a. RN is ready and pours some fluid into bedpan as it is removed.
17. Candidate empties bedpan fluid into toilet. Rinses bedpan. Replaces bedpan to dirty supply area.
18. Removes gloves turning inside out. Discards gloves in an appropriate container.
19. Identifies that hands should be washed.
20. Maintains respectful, courteous interpersonal interactions at all times.
21. Leaves call light or signaling device within reach of the resident. Elevates head of bed to 30-45 degrees

Skill 4—Denture Care

1. Candidate puts on gloves
2. Lines sink (towel, washcloth or paper towels) with a protective lining OR fills sink with water to prevent damage to the dentures in case they are dropped.
3. Carefully removes dentures from cup. Handles dentures carefully to avoid damage.
4. Rinse dentures under tepid running water.
5. Applies toothpaste to tooth brush.
6. Thoroughly brushes the inner, outer and chewing surfaces of upper and/or lower dentures.
7. Rinses dentures using tepid running water. Rinses denture cup and lid.
8. Carefully replaces dentures in rinsed cup. Adds tepid clean water to denture cup.
9. Rinses toothbrush. Places toothbrush in rinsed toothbrush container.
10. Drains sink. Discards protective lining in an appropriate container.
11. Removes gloves properly turning inside out. Disposes of gloves in an appropriate container.
12. Identifies that hands should be washed.

Skill 5—Dressing Resident

1. Explains the procedure to the resident.
2. Provides privacy. (pulls curtain)
3. Candidate asks resident what they would like to wear.

4. Keeps resident covered while removing gown.
5. Removes gown from unaffected side first.
6. Places used gown in laundry hamper.
7. **When dressing the resident in a shirt or blouse, the Candidate inserts their hand through the sleeve of the Shirt or blouse and grasps the hand of the resident, dressing from the weak side first.**
8. Leaves the resident comfortably and properly dressed.
9. Identifies that hands should be washed.
10. Maintains respectful, courteous interpersonal interactions at all times.
11. Leaves call light or signaling device within easy reach of the resident.

Skill 6—Foot Care One Foot

1. Explains procedure
2. Provides for privacy, pulls curtain
3. Fills foot basin with warm water that is comfortable and safe for the resident.
 - a. If bath thermometer is used RN Observer checks that water temperature is between 95 - 110 degrees F
4. Candidate places basin in a comfortable position for the resident. Basin is placed on a protective barrier.
5. Candidate puts on gloves before washing foot. Bare foot is placed into the water.
6. Soap is applied to wash cloth. Candidate lifts foot out of water and washes entire foot.
7. Candidate clearly washes between the resident's toes. Candidate rinses entire foot.
8. Candidate clearly rinses between resident's toes. Dries entire foot thoroughly.
9. Candidate clearly dries between toes. Candidate warms lotion by rubbing it between hands. Candidate massages lotion onto top and bottom of foot. Wipes off any excess lotion with a towel. If no excess lotion mark this step successfully completed
10. Supports foot and ankle throughout the demonstration. Empties basin. Rinses basin.
11. Dries basin. Returns basin to dirty storage area. Places dirty linen in hamper or equivalent.
12. Removes gloves turning inside out. Disposes of gloves in the appropriate container.
13. Maintains respectful, courteous interpersonal interactions at all times.
14. Candidate identifies that hands should be washed.
15. Leaves call light within easy reach of resident.

Skill 7—Applying an Elastic Stocking

1. Explains procedure to resident.
2. Provides for resident's privacy; pulls privacy curtain.
3. Resident is placed in supine position.
4. Provides for resident's privacy by only exposing one leg.
5. Rolls, gathers or turns stocking down inside out at least to the heel. Places stocking over the toes, foot and heel. Rolls or pulls stocking up leg. Checks toes for possible pressure from stocking and adjusts as needed.
6. **Leaves resident with a stocking that is smooth and wrinkle free.**
7. **Leaves resident with a stocking that is properly placed.**
8. Covers exposed leg.
9. Maintains respectful, courteous interpersonal interactions at all times.
10. Leaves call light or signal calling device within easy reach of the resident. Elevates head of bed to 30-45 degrees
11. Identifies that hands should be washed.

Skill 8—Measures and Records Urinary Output (on I/O recording sheet)

1. Candidate puts on clean gloves.
2. Candidate pours urine content from bedpan into measuring container without spilling.
3. Content is measured at eye level on flat surface
4. After measuring empties measuring container fluid into toilet. Rinses measuring container with water
5. Pours measuring container's rinse water into toilet.
6. Rinses bedpan with water. Pours bedpan's rinse water into toilet. Returns equipment to designated dirty area.
7. Removes gloves properly turning inside out. Disposes of gloves in appropriate container. Washes hands.
8. Records reading from measuring container on provided I/O pad in cc/ml. (This must be performed in order to receive credit. Verbalizing will not be accepted.)
9. **Reading must be within plus or minus 25 ml/cc of correct urine amount.**

Skill 9—Feeding a Dependent Resident

1. Explains procedure to the resident.
2. Looks at diet card and verbally identifies that the resident has received the correct tray.
3. **Positions the resident in an upright position, at 45-90 degrees.**
4. Places tray so that it can be seen by the resident. Washes resident's hands with wipes before beginning feeding.
5. Sits down facing the resident while feeding the resident or assumes other posture so candidate is at eye level with the resident.
6. Describes the foods being offered to the resident. Asks which food the resident would like first.
7. Offers fluid frequently. Offers small amounts of food at a reasonable rate.
8. Allows resident time to chew and swallow. Wipes resident's hands and face during meal as needed.
9. Maintains respectful, courteous interpersonal interactions at all times.
10. Leaves call light or signaling device within easy reach of the resident.
11. Identifies that hands should be washed.

Skill 10—Donning and Removing Gown and Gloves

1. Picks up gown and unfolds. Candidate faces the back opening of the gown.
2. Candidate doesn't shake gown during unfolding. Candidate places arms through each sleeve.
3. Candidate secures the neck opening. Candidate secures the waist, making sure that the back flaps completely cover clothing.
4. Candidate puts on gloves. Gloves overlap gown sleeves at the wrist.
 - a. RN tells the candidate to remove the gown and gloves.
5. Removes gloves turning inside out and folding one glove inside the other. Candidate does not touch outside of gloves with bare hand at any time.
6. Dispose of the gloves, without contaminating self, in appropriate container.
7. Unfastens gown at the neck. Unfastens gown at the waist. Removes gown by folding soiled area to soiled area. Disposes of gown in an appropriate container.
8. Identifies that hands should be washed.

Skill 11—Making an Occupied Bed

1. Explains procedure. Provides for privacy pulls curtain.
2. Places clean linen on a clean surface. (Bedside stand, chair, or overbed table)

3. Puts on clean gloves.
4. Lowers head of bed before asking resident to move/turn.
5. Ensures that resident remains covered while linens are changed. Loosens top and bottom bed linens.
6. Raises side rail(s) opposite working side of bed. Asks resident to turn toward raised side rail.
7. Rolls or fan folds soiled linen, soiled side in, to the center of the bed. Places clean bottom sheet on mattress.
8. Secures two corners. Rolls or fan folds clean linen up to resident's back.
9. Asks the resident to roll over the bottom linen. Removes soiled linen without shaking.
10. Avoids touching linen to uniform. Disposes of soiled linen in hamper or equivalent.
11. Removes gloves turning inside out. Disposes of gloves in appropriate container.
12. Pulls through and smooths out the clean bottom linen. Secures the other two corners.
13. Places clean top linen over covered resident. Removes used top linen keeping resident unexposed at all times.
14. Tucks in clean top linen at the foot of bed. Tucks in clean blanket or bedspread at the foot of bed. Provides room for feet to move.
15. Applies clean pillowcase to resident's pillow. Does not contaminate linen and/or clothing.
16. Gently lifts resident's head while replacing the pillow. Returns side rail(s) to lowered position.
17. Maintains respectful, courteous interpersonal interactions at all times.
18. Leaves call light or signal calling device within easy reach of the resident. Elevates head of bed to 30-45 degrees.
19. Identifies that hands should be washed.

Skill 12—Mouth Care

1. Explains procedure to the resident. Provides privacy, pulls privacy curtain.
2. Resident is placed in upright sitting position. (45-90 degrees) And gathers supplies.
3. Candidate puts on clean gloves. Drapes the chest with towel to prevent soiling.
4. Candidate moistens toothbrush. Applies toothpaste to toothbrush.
5. **Brushes the inner and outer surfaces of all upper and lower teeth using gentle motions. Brushes tongue using gentle motions.**
6. Candidate places toothbrush on a clean towel or in a clean container to maintain clean technique throughout demonstration.
7. Holds emesis basin under resident's chin as resident rinses mouth. Wipes/dries resident's mouth/chin.
8. Removes clothing protector. Places used toothbrush in basin. Places basin in designated dirty area.
9. Places soiled linen in hamper or equivalent. Turns gloves inside out as they are removed.
10. Disposes of gloves in the appropriate container.
11. Candidate identifies hands should be washed
12. Maintains respectful, courteous interpersonal interactions at all times.
13. Leaves call light or signaling device within easy reach of the resident.

Skill 13—Nail Care One Hand

1. Explains procedure to the resident.
2. Candidate asks resident to check basin water temperature for safety and comfort OR may use bath thermometer.
3. Candidate places basin in a comfortable position for resident. Candidate soaks resident's nails.

- Candidate puts on clean gloves. Candidate gently cleans under each nail with orange stick.
- Wipes orange stick on towel after cleaning under each nail. Dries fingernails/hand area with towel.
- Lightly files each fingernail as needed. Disposes of orange stick and emery board in the appropriate container.
- Empties basin. Rinses basin. Dries basin. Returns basin to designated dirty area.
- Disposes of dirty linen in the linen hamper. Removes gloves turning inside out. Disposes of gloves in the appropriate container.
- Identifies that hands should be washed.
- Leaves call light or signaling device within easy reach of the resident.

Skill 14—Partial Bed Bath-Face, Arm, Hand and Underarm

- Explains procedure to the resident. Pulls privacy curtain. Removes gown while keeping resident covered.
- Puts on clean gloves. Fills basin with comfortably warm water OR may use a bath thermometer.
- Washes face WITHOUT SOAP. Starts face washing with eyes. Washes eyes from inner aspect to outer aspect.
- Uses a clean portion of wash cloth with each stroke. Completes washing rest of face. Dries face.
- Exposes only one arm. Places towel under arm. Uses soap.
- Washes arm. Washes hand. Washes underarm.
- Rinses arm. Rinses hand. Rinses underarm.
- Dries arm. Dries hand. Dries underarm.
- Assists resident to put on a clean gown.
- Rinses basin. Dries basin. Returns basin to designated dirty area.
- Disposes of soiled linen in appropriate container.
- Removes gloves turning inside out. Disposes of gloves in appropriate container.
- Identifies that hands should be washed
- Maintains respectful, courteous interpersonal interactions at all times.
- Leaves call light or signal calling device within reach of the resident. Elevates head of bed to 30-45 degrees.

Skill 15—Perineal Care for a Female

- Explains procedure to the resident. (Mannequin) Provides privacy - pulls curtain.
- Candidate prepares water and asks resident (mannequin) to check water temperature for safety and comfort OR may use a bath thermometer.
- Candidate applies clean gloves. Places pad under perineal area before beginning peri care.
- Resident is comfortably positioned on back. Keeps resident covered at all times during procedure.
- Exposes perineum only. Applies soap to wet washcloth. Separates labia. Uses water and soapy washcloth.
- Cleans each side of labia from front to back using a clean portion of the wash cloth with each wash stroke.**
- Rinses each side of labia from front to back using a clean portion of the wash cloth with each rinse stroke.**
- Pat dries the area moving from front to back. Covers the exposed area with sheet.
- Assists resident to turn onto side away from the candidate. With a clean portion of wash cloth, cleans the rectal area. Uses water, washcloth and soap. Cleans rectal area from front to back. Uses a clean portion of the wash cloth with each wash stroke.
- Rinses rectal area from front to back. Uses a clean portion of the wash cloth with each rinse stroke. Pat dries rectal area from front to back with towel.

- Positions resident (mannequin) on her back. Replaces top sheet over resident.
- Empties basin. Rinses basin. Dries basin. Returns basin to the designated dirty area.
- Disposes of soiled linen in an appropriate container. Removes gloves turning inside out. Disposes of gloves in appropriate container.
- Identifies that hands should be washed.
- Places call light or signaling device within reach of resident. Elevates head of bed to 30-45 degrees.

Skill 16—Position Resident on Side

- Explains procedure to resident. Pulls curtain, provides privacy.
- Positions bed flat. Raises side rail on side of bed toward which the resident will be turned.
- Assists resident to roll onto side toward raised side rail. Candidate checks to be sure resident's head is supported by a pillow.
- Checks to be sure resident is not lying on his/her downside arm. Places support device under the resident's upper arm. Places support device behind resident's back. Places support device between knees with top knee flexed. Check for knee and ankle support.
- Maintains respectful, courteous interpersonal interactions at all times.
- Leaves call light or signaling device within easy reach of the resident.
- Identifies that hands should be washed.

Skill 17—Range of Motion Knee & Ankle

- Explains procedure to the resident. Provides privacy - pulls curtain. Positions resident supine.
- Correctly supports joints by placing one hand under the knee and the other hand under the ankle.
- Candidate tells resident to let them know if they have any pain or discomfort at any time during exercise.
- Bends the resident's knee toward the resident's trunk and returns to normal position. Flexion and extension of knee. Candidate performs flexion and extension of the knee at least three times.
- Correctly supports under resident's foot and ankle while performing range of motion for the foot and ankle.
- Pushes/pulls foot toward head (dorsiflexion), and pushes/pulls foot down, toes down. Plantar flexion. Candidate performs foot and ankle exercise at least three times.
- Does not force any joint beyond the point of free movement.
- Supports joints and limbs while performing flexion/extension and plantar flexion/dorsiflexion, discontinuing exercise if resident verbalizes that they are in/having pain.**
- Places call light or signaling device within easy reach of the resident. Elevates head of bed to 30-45 degrees.
- Candidate identifies that hands are washed

Skill 18—Range of Motion One Shoulder

- Explains procedure to the resident. Pulls Curtain; provides for resident's privacy.
- Candidate must ask resident if s(he) is experiencing any pain or discomfort during exercise.
- Correctly supports resident's joint by placing one hand under the elbow and the other hand under wrist. Raises the resident's arm up and over the resident's head. (flexion) Brings the resident's arm back down to the

- resident's side. (extension) Completes flexion and extension of shoulder at least three times.
- Moves the resident's entire arm out away from the body. (abduction) Returns arm to side of the resident's body. (adduction) Completes abduction and adduction of the shoulder at least three times.
 - Does not cause discomfort or pain at anytime during ROM.
 - Continually supports the limb, moving joints smoothly and gently throughout the exercise.**
 - Leaves resident in a comfortable position.
 - Candidate identifies hands should be washed.
 - Maintains respectful, courteous interpersonal interactions at all times.
 - Places call light or signaling device within easy reach of the resident. Elevates head of bed to 30-45 degrees.

Skill 19—Transfer from Bed to Wheelchair

- Explains procedure to resident. Provides for resident's privacy.
- Insures resident safety by locking bed wheel brakes.**
- Bed is raised/lowered to a safe level with resident feet flat on floor.
- Positions wheelchair at head or foot of bed. Before assisting resident to stand foot rests are folded up or removed.
- Candidate locks wheelchair brakes.**
- Candidate ensures resident is wearing shoes. Resident is assisted to a seated position on the edge of the bed with feet flat on floor. Applies transfer belt around resident's waist.
- Before candidate assists resident to stand candidate provides instruction and pre-arranged signal to stand
- Assists resident to stand using proper technique. Assists resident to turn and stand in front of wheelchair with back of legs against wheelchair.
- Positions resident safely in wheelchair insuring resident's hips are touching back of wheelchair seat.
- Candidate removes transfer belt. Positions resident's feet carefully on foot rests.
- Candidate leaves call light within reach of resident.
- Identifies that hands should be washed.

Skill 20—Vital Signs -Radial Pulse (on I/O recording sheet)

- Explains procedure to resident. Provides for resident's privacy; pulls curtain.
- Locates the radial pulse by placing tips of fingers on the thumb side of the resident's wrist.
- Counts pulse for 60 seconds.
- Leave call light within easy reach of the resident
- Identifies that hands should be washed.
- Candidate records count on the provided recording sheet. (This must be performed in order to receive credit. Verbalizing will not be accepted.)
- Candidate's recorded pulse rate is no more than plus or minus 4 beats of the correct pulse rate.**
- Maintains respectful, courteous interpersonal interactions at all times.

Skill 21-Vital Signs-Respirations (on I/O recording sheet)

- Explains procedure to resident. Provides for resident's privacy; pulls curtain.
- Candidate counts respirations for 60 seconds.
- Leaves call light within reach of resident.
- Identifies that hands should be washed
- Candidate records count on the provided recording sheet. (This must be performed in order to receive credit. Verbalizing will not be accepted.)

- The candidate's recorded respiratory rate is plus or minus 2 breaths of the correct rate.
- Maintains respectful, courteous interpersonal interactions at all times.

Skill 22—Weighing an Ambulatory Resident (on I/O recording sheet)

- Explains procedure to resident. Candidate ensures that resident has shoes on before walking to scale.
- Candidate balances (zeros) scale.
- Candidate assists resident to step on scale. Candidate ensures that resident is centered on scale.
- Candidate ensures that resident is not holding on to anything that would alter weight reading. (Resident's arms at his/her sides.)
- Candidate adjusts weights until scale is in balance.
- Assists resident to step off the scale. Assists or directs resident back to bed or chair.
- Candidate records weight on provided recording pad. (This must be performed in order to receive credit. Verbalizing will not be accepted.)
- Candidate's recorded weight varies no more than plus or minus 2 lb. from the correct weight.**
- Maintains respectful, courteous interpersonal interactions at all times.
- Leaves call light or signal calling device within easy reach of the resident.
- Identifies hands should be washed

RECERTIFICATION

In order to be eligible for recertification, you must have been employed providing nursing services for pay for at least seven (7) hours within the twenty four (24) months before the expiration date listed on your certificate. The fee for recertification is \$36. You will receive a renewal reminder approximately sixty (60) days in advance of your certification expiration date. Do not wait until the expiration date to recertify. If you do not receive your renewal form approximately 60 days in advance of your certification expiration date, please contact PSI at 877-774-4243, or at NJHRO@psionline.com to request a renewal form. Complete your Renewal Form immediately and make sure that the form is completed and signed by your health care facility employer. Each time you are due to renew your certification as a nurse aide, NJDOH is required to update your criminal history background check (CBI).

Please note that the certification must be renewed prior to the expiration date listed on the card. Otherwise, the certification is immediately expired and no longer valid for employment purposes.

Choose a recertification location from the list provided on the Renewal Form. On the day of Recertification you **MUST** bring to the test site the following:

- \$36 recertification fee (this is the only fee accepted at the test site).
- Two (2) forms of identification. One must be a VALID form of government-issued identification

Examples of acceptable ID are:

- Valid U.S. State Photo Driver's License/Non Driver's License
- U.S. Passport
- USCIS Permanent Resident ID Card (issued after 5/10/2010)

- USCIS Employment Authorization Card (issued after 10/31/2010)
- The second ID must have your signature and preprinted legal name.
- Your Renewal Form (completed and signed by your current or previous employer).

At the recertification location, your photo will be taken and your recertification documents will be reviewed for accuracy and completeness. If your recertification documents are complete, your certification will be updated on the Registry and you will receive a new certificate. A duplicate certificate is \$36.

The Department of Health (referred to as *Department*) is required to update your criminal history background check (CBI) each time you are due to renew your certification as a nurse aide. There is no need to complete a new CBI application. You will receive a notice about updating your criminal history background check from the Department approximately four (4) months before your certification expiration date.

If the Department is able to identify that you have been successfully fingerprinted for a nurse aide certification using the electronic fingerprinting system, the Department will request that the previous image be used to update your criminal history background check. If you are renewing your certification, there is nothing you need to do. You should receive your renewal authorization letter no later than sixty (60) days before your certification is due to expire.

If the Department cannot identify a previous successful fingerprint image for your nurse aide certification, you will receive a form and a notice to make a fingerprint appointment approximately 120 days before your certification expiration date. You **must** make and keep a fingerprint appointment before your certification expiration date. It is advisable to obtain an appointment at least sixty (60) days before your certification is due to expire. **THERE IS NO CHARGE FOR PROCESSING YOUR FINGERPRINT APPOINTMENT FORM.** If you fail to submit a new set of fingerprints, your certification will not be renewed. Attempts to obtain a certification after the expiration date will need to comply with the provisions for persons with expired certifications.

Once the Department determines that there are no new disqualifying convictions they will notify PSI electronically that you can complete the renewal process and will send you written notice that the CBI process is complete. Once you receive that notice you must take your Renewal Form, the \$36 renewal fee, and photo identification to a PSI Test Site to obtain your new certificate. Remember to have your Renewal Form signed by your employer.

EXPIRED CERTIFICATE

If your certification has already expired and your initial certification date is **more than five (5) years** ago, you must successfully complete the following:

- A ninety (90) hour state-approved nurse aide training program,
- The Skills Evaluation, and
- The Written (or Oral) Examination.

If your certification has already expired and your initial certification date is less than five (5) years ago, you may request a waiver, and must successfully complete both the

Skills Evaluation and the Written Examination before the five (5) year anniversary of your initial certification. If you fail either the Skills Examination or the Written (or Oral) Examination, you must retrain before retesting.

REVOKED CERTIFICATE

A certificate issued to a nurse aide in accordance with state rules shall be revoked in the following cases:

- Conviction for resident abuse, resident neglect, resident mistreatment or misappropriation (theft) of resident property.
- Conviction (including a guilty plea, a plea of no contest or nolo contendere, or a finding of guilt by a judge or jury) to a crime or offense which: 1) Is a disqualifying offense pursuant to N.J.S.A 26:2H-83(a); or 2) Relates adversely to the ability to provide resident care pursuant to N.J.A.C. 8:39-43 and 9.3.
- Sale, purchase, or alteration of a certificate; use of fraudulent means to secure a certificate, including filing false information on the application; or forgery, imposture, dishonesty, or cheating on an examination.

PSI SITE RECERTIFICATION SCHEDULE

Recertification will be offered on a walk-in basis at any of the NJ test sites on **Mondays** from 10am-4pm **ONLY**. We will also offer recertification on **Wednesdays** from 10am-4pm at the Brick, Marlton, Hamilton Township, New Brunswick, North Brunswick, and Parsippany sites **ONLY**. **Evening** recertification hours are offered in Parsippany on Thursdays, and in Cherry Hill on Mondays until 7pm.

ABUSE FINDINGS

Upon receipt of a substantiated allegation of resident neglect, resident abuse, and/or misappropriation (theft) of resident property, you will be mailed a **Notice of Informal Conference**. This letter will include a statement that there are substantiated findings of neglect, abuse and/or misappropriation of resident property and will include instructions for you to attend a scheduled conference, in person, at the offices of the NJ Department of Health, as well as the following information.

You have a right to bring witnesses and any written evidence that you want to the informal conference. You may represent yourself, or you may have an attorney represent you at your **own** expense. At the conclusion of the informal conference, a determination will be made as to whether to dismiss the case against you or to proceed to a full court hearing at the NJ Office of Administrative Law. The Department will notify you of that decision in writing within ten (10) days of the conference.

If your case is not dismissed, you will receive a **Notice of Right to Hearing**. If you do not request a hearing within thirty (30) days of the date of the **Notice of Right to Hearing** letter, or if a hearing results in a specific finding of abuse, neglect and/or misappropriation of resident property, as applicable, that finding will be placed next to your name on the New Jersey Nurse Aide Registry. The finding will remain on the New Jersey Nurse Aide Registry permanently, unless the finding was made in error or you are found not guilty in a court of law. You will not be permitted to work again as a nurse aide in **any** licensed New Jersey health care facility. You will be notified in writing of this decision and you will be advised that you

have a right to appeal the finding. This statement will be maintained on the New Jersey Nurse Aide Registry.

CHANGE OF ADDRESS, NAME, AND/OR EMPLOYER

If you have changed your address, name, and/or employer, you must inform the Nurse Aide Registry *and* the NJDOH CBI Unit. To notify the Registry of a change, use the form on the following page.

If you have a change of name, you must mail proof of that change (e.g., marriage certificate, divorce decree, or other legal document), along with the form on the following page. No additional documentation is necessary to make an address change.

To inform NJDOH CBI Unit of an address, name, and/or employer change, please use the toll-free number, (866) 561-5914, if you are calling from out of state. If you are calling from within New Jersey, please call (609) 292-4303.

**NEW JERSEY NURSE AIDE
CHANGE OF ADDRESS, NAME AND/OR EMPLOYER FORM**

SEND TO:
PSI HAMILTON SQUARE AREA
IBIS PLAZA SOUTH
3525 QUAKERBRIDGE ROAD, SUITE 1000
HAMILTON TOWNSHIP, NJ 08619

Use this form to inform the Registry of your change of address, name, and/or employer. Please print or type all information on this form. Be sure to provide all information, or your request cannot be filled.

- **ADDRESS CHANGE** - Complete Sections A & B
- **NAME CHANGE** - Complete Sections A & B: *You must attach a copy of an official document (marriage certificate or other court order) verifying your name change.*
- **EMPLOYER CHANGE** - Complete Sections A, B & C: *You must complete Section C also.*

A. PRINT YOUR NEW ADDRESS, NEW NAME, OR NEW EMPLOYER'S INFORMATION BELOW.

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____
Social Security# _____ Certification # _____

B. PRINT YOUR OLD ADDRESS, OLD NAME, OR OLD EMPLOYER'S INFORMATION BELOW.

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____

C. IF YOU ARE NOTIFYING THE REGISTRY WITH NEW EMPLOYER INFORMATION, YOU MUST ALSO FILL IN THIS SECTION.

Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____

YOUR SIGNATURE: _____ **DATE:** _____