Student:	Program:	Date:
student:	110gram	Date:

	LEARNING OUTCOMES	S	U	SUPPORTIVE DATA
•	associated with influenza/ tuberculosis/ cardiovascular diseases/ other:			Participates in pre-conference discussion of risk factors and comorbidities  Completes assessments of clients
•	NURSING DIAGNOSIS  Identifies nursing diagnosis for clients based on assessment data			Participates in pre/post-conference discussion of potential nursing diagnosis R/T:
•	PLANNING  Utilizes knowledge of evidence-based practice guidelines in developing plan of care  Identifies planned interventions for clients to maintain optimal level of health			Plans interventions for client based on assessment data based on evidence-based guidelines
•	IMPLEMENTATION  With minimal supervision, implements caring deliberate nursing interventions in a safe, efficient, and cost-effective manner  Provides evidence-based education to clients to promote optimal health and wellness  Independently performs technical skills previously learned in a safe, efficient, and accountable and effective manner			Provides appropriate education for clients R/T (list below):  • • • • • Skills performed: •
•	EVALUATION  Evaluates effectiveness of educational interventions provided client  PROFESSIONAL ROLE  Assumes responsibility for professional growth, lifelong learning and self-development			Completes self-reflection of clinic performance  Prepared for clinic (reviewed objectives, reference links)
	merong rearring and sent-development			Reports on-time, in uniform, with name tag  Demonstrates core values of IPE (respect, teamwork, communication and ethics) in group interactions

## PRIOR to the clinic activities please review/ complete the following:

Student Self-Assessment of learning needs:

	Strengths:	Limitations:			
	Opportunities for learning:	Barriers to learning:			
l					
;	Student's Learning goal for Clinic experience:				
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AFTER the clinical activities please complete:					
;	Student Reflection on your personal learning goal. Did you achieve your goal(s)?				
NMWC	Faculty comments:				
NMWC	Faculty signature:	Date:			
Student	Signature:	Date:			