**Date:**

**Muscogee Creek Nation- Sapulpa**

1. *Chart below on the patients that you assisted in care with today at the clinic.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Reason for Visit** | **Assessment****Performed** | **Treatment****Provided** | **Discharge Instructions** |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| 4. |  |  |  |  |
| 5. |  |  |  |  |
| 6. |  |  |  |  |
| 7. |  |  |  |  |
| 8. |  |  |  |  |
| 9. |  |  |  |  |
| 10. |  |  |  |  |

1. *List any medications prescribed during your clinical today.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Medication Name**Brand & Any Generics | **Prescription** | **What It’s For** | **Side Effects** | **Pertinent Labs** |
| 1. |  |  |  |  |  |
| 2. |  |  |  |  |  |
| 3. |  |  |  |  |  |
| 4. |  |  |  |  |  |
| 5. |  |  |  |  |  |

1. *List any medications/injections given at the clinic today by yourself or a staff member.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Medication Name**Brand & Any Generics | **Prescription** | **Side Effects** | **Pertinent Labs** |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| 4. |  |  |  |  |
| 5. |  |  |  |  |

1. *List any lab tests ordered, what it is for, and the normal range.*

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Test Ordered** | **What It’s For** | **Normal Range** |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |
| 5. |  |  |  |

1. *State & explain one procedure that you observed today.*

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|  |

1. *State & explain one thing that you learned today.*

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|  |

DL 3/21/16