



Student Clinical Assignment Sheet

Course name and number: _____ Date/Time: _____

Clinical Instructor name: _____ Instructor contact info: _____

Aultman College Phone #: (330) 363-6347

Leaving unit:

Tentative lunch time if applicable (must take 30 min. lunch of greater than 6 hours on floor): _____

Post-conference time: _____

Student level: ASN _____ Semester: 2, 3, 4, 5 BSN _____ Semester: 2, 3, 4, 5, 6, 7, 8

Clinical Concept/Focus for clinical day: _____

Student Activities: (cross out what is not applicable) Answer call lights, Feeding, Baths/ADLs, Dressing changes, Vital signs, Blood glucose checks, Physical assessments, Medications (PO, IV), other duties as assigned _____

Student first name	Room #/pt initials	Additional Assignments/Notes:
Alternative Clinical Experience:	Student name:	Location: