

<p>Highlights:</p> <ol style="list-style-type: none"> <li>1. drew blood from IV line</li> <li>2. emphasized nephro stomy</li> <li>3. <del>uro stomy bag</del></li> </ol> <p>Areas to improve:</p> <ol style="list-style-type: none"> <li>1. time management</li> <li>2. basic skills to detail</li> <li>3. attention to detail</li> </ol> <p>Skills observed &amp; performed:</p> <ol style="list-style-type: none"> <li>1. draw blood from IV line</li> <li>2. med admin</li> <li>3. attempt @ COVID swabs</li> </ol>	<p>Date/Initial</p> <p>=Student</p> <p>=Preceptor</p> <p>01/03/2022</p> <p>Date:</p> <p><u>                    </u></p> <p>Student</p> <p><u>                    </u></p> <p>Preceptor</p>	<p>Highlights:</p> <ol style="list-style-type: none"> <li>1.</li> <li>2.</li> <li>3.</li> </ol> <p>Areas to improve:</p> <ol style="list-style-type: none"> <li>1.</li> <li>2.</li> <li>3.</li> </ol> <p>Skills observed &amp; performed:</p> <ol style="list-style-type: none"> <li>1.</li> <li>2.</li> <li>3.</li> </ol>	<p>Date/Initial</p> <p>=Student</p> <p>=Preceptor</p> <p>Date:</p> <p>_____</p> <p>Student</p> <p>_____</p> <p>Preceptor</p>
<p>Highlights:</p> <ol style="list-style-type: none"> <li>1. COVID-swabs</li> <li>2. Bed bath <del>to do</del></li> <li>3. TPCN x3</li> </ol> <p>Areas to improve:</p> <ol style="list-style-type: none"> <li>1. time management</li> <li>2. focus/attention to</li> <li>3. med knowledge details</li> </ol> <p>Skills observed &amp; performed:</p> <ol style="list-style-type: none"> <li>1. oral care</li> <li>2. pen care</li> <li>3. wrote an order</li> </ol>	<p>Date/Initial</p> <p>=Student</p> <p>=Preceptor</p> <p>01/04/2022</p> <p>Date:</p> <p><u>                    </u></p> <p>Student</p> <p><u>                    </u></p> <p>Preceptor</p>	<p>Highlights:</p> <ol style="list-style-type: none"> <li>1.</li> <li>2.</li> <li>3.</li> </ol> <p>Areas to improve:</p> <ol style="list-style-type: none"> <li>1.</li> <li>2.</li> <li>3.</li> </ol> <p>Skills observed &amp; performed:</p> <ol style="list-style-type: none"> <li>1.</li> <li>2.</li> <li>3.</li> </ol>	<p>Date/Initial</p> <p>=Student</p> <p>=Preceptor</p> <p>Date:</p> <p>_____</p> <p>Student</p> <p>_____</p> <p>Preceptor</p>
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