

## **IM 3 Medication Presentation Group Assessment Form**

Please use this sheet of paper to assess your assigned group. You do not need to put your name on this sheet. Please state your group topic. If a member of your group did not participate despite fervent efforts to include them, please reflect the information below. If two or more members of a group state an individual did not participate, 10% will be deducted from the Medication Presentation.

**Group Topic: Steroids**

**Did your group work well together?**

**Yes we all collaborated and everyone worked well**

**Did your entire assigned group participate?**

**Yes everyone worked together well and it was an awesome experience**

**Was this a good learning experience?**

**Yes**