

## **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:**

Warfarin (Coumadin) & Clopidogrel (Plavix)

### **Did your group work well together?**

Yes, we all met together when we needed to so we could work on our project.

### **Did your entire assigned group participate?**

Yes, we all participated and agreed on what each person would work on for this project.

### **Was this a good learning experience?**

Yes, it definitely was. We learned a lot and had fun working on this project all together.