

Florida International University Department of Physical Therapy

Clinical Internship Visit Record (To be filled out by Faculty Supervisor)

Student Name:	Internship # and Visit Date:
Facility Name & <u>Type of setting:</u> <u>CI's Name:</u> Year CI Graduated from entry-level PT: Years as a CI: Special Certifications(OCS, PCS, GCS,etc)	Patient Diagnoses:
Faculty Liaison:	<input type="radio"/> Visit <input type="radio"/> Phone Call <input type="radio"/> Follow Up Visit/Call
DISCUSSION WITH CI – Circle rating and/or provide comments	DISCUSSION WITH STUDENT Circle rating and/or provide comments
Affective Skills: (professionalism, initiation, time management, confidence, motivation, dedication, collegiality, etc.) <input type="radio"/> Needs Improvement <input type="radio"/> Where Expected <input type="radio"/> Above	Overall Impression of Internship Site: Would you recommend this site to other students? Any special learning opportunities or experiences?
Communication: (with pts/family, staff, in meetings, delegation to PTAs and support staff, and with clinical instructor) <input type="radio"/> Needs Improvement <input type="radio"/> Where Expected <input type="radio"/> Above	Your Strengths: (for this setting) FIU Strengths in preparing you for this internship:
Documentation: (content, style, accuracy, timeliness) <input type="radio"/> Needs Improvement <input type="radio"/> Where Expected <input type="radio"/> Above	Areas Needing Improvement: (for this setting) FIU areas of needing improvement in preparing you for this internship:
Level of Independence with Evaluation <input type="radio"/> Needs assist <input type="radio"/> Supervision <input type="radio"/> Independent	Patient Management Skills <input type="radio"/> Needs assist <input type="radio"/> Supervision <input type="radio"/> Independent

DISCUSSION WITH CI	DISCUSSION WITH STUDENT
<p>Level of Independence with Treatment Planning, Delivery & Progression: <input type="radio"/> Needs assist <input type="radio"/> Supervision <input type="radio"/> Independent</p> <p>Delegation/Supervision Skills (of PTA's & Support Staff):</p>	<p>Relationship with CI: IS feedback timely and appropriate <input type="radio"/> Needs Improvement <input type="radio"/> Good</p> <p>CI availability: In acute care, CI must provide "line of site supervision"</p>
<p>Caseload (based on facilities expectations) <input type="radio"/> Below expectations <input type="radio"/> Where expected <input type="radio"/> Above</p>	<p>Caseload: <input type="radio"/> Need more pts <input type="radio"/> Adequate <input type="radio"/> Too many pts</p>
<p>Feedback: Does student- Accurately self-assessment: <input type="radio"/> Yes <input type="radio"/> No Utilize constructive feedback: <input type="radio"/> Yes <input type="radio"/> No Will complete grading criteria in CPI: <input type="radio"/> Yes <input type="radio"/> No</p> <p>Based on CI's recommendation, is student Passing the Clinical Internship?</p>	<p>Areas identified by CI, at midterm, as needing improvement?</p>
<p>Goals for remainder of affiliation <u>(At least 2 objective goals)</u></p>	<p>CPI Concerns:</p>
<p>Academic Preparation (FIU's strengths & areas on needing improvement): <input type="radio"/> Below <input type="radio"/> Where expected <input type="radio"/> Above</p>	<p>Completed/Will complete this affiliation: _____ Inservice _____ Project</p> <p>Title: _____</p>
<p>Student Compared to others at this level: <input type="radio"/> Below Expected <input type="radio"/> Where Expected <input type="radio"/> Above</p> <p>Is a follow Up Call/Visit Necessary?</p>	<p>Other Comments/Concerns:</p>