Clinical Time Summary
School Year
2008-2009

This document should be placed in the "class file."

High School Name - Allied Health Science II – Teacher Name, RN

Initial beside option completed

Option # 1 40 hours LTC		
Option # 2 30 hrs LTC + 10 hrs assisted living		
Option # 3 30 hrs LTC + 10 hrs integrated skills practice (see Chap. 5 for details)		
Option # 3 30 hrs LTC + 10 hrs student-geriatric interaction (see Chap. 5 for details)		
Type of Clinical Experience	**Place**	**# of Hours** Do not include travel time.
Long Term Care or Long Term Type Care Required for **ALL** options		
Assisted Living Required for option #2		
Integrated Skills Required for option #3		
Student-Geriatric Activity Required for option #4		
	Total Clinical Hours➔	
Describe the integrated skills practice for option #3 or the student-geriatric activity in option #4 in the space below:		