

# EXTERN WEEKLY PROGRESS

**Orientee Name:**      **Clinical week #** \_\_\_\_ **of** \_\_\_\_

**Strengths** (please check all that apply/see comments below):

- |   |   |
|---|---|
| <input type="radio"/> Provides safe patient care  | <input type="radio"/> Demonstrates accurate and timely documentation              |
| <input type="radio"/> Self-directed in obtaining answers to questions                   | <input type="radio"/> Demonstrates time management                                |
| <input type="radio"/> Demonstrates attentiveness to patient questions and family        | <input type="radio"/> Demonstrates basic knowledge of med/surg nursing principles |
| <input type="radio"/> Anticipates patient's needs                                       | <input type="radio"/> Participates in multidisciplinary rounds                    |
| <input type="radio"/> Participates in patient care (as opposed to observing or reading) | <input type="radio"/> Other, please List:   |
| <input type="radio"/> Collaborates with healthcare team                                 |   |

**Improvement Opportunities** (please check all that apply/see comments below):

- |   |   |
|---|---|
| <input type="radio"/> None specifically, needs more experience    | <input type="radio"/> Continues to have difficulty completing tasks |
| <input type="radio"/> Completes accurate and timely documentation | <input type="radio"/> Participate in MD / Nursing rounds            |
| <input type="radio"/> Identify and utilize appropriate resources  | <input type="radio"/> Other, please list:                           |
| <input type="radio"/> Proficiency with basic nursing skills       |   |

**Status of Daily Care:**

- Independent skills – See OCAE skills checklist (list any additional):
  
- Skills needing more experience and/or assistance:
  
- Focus Area/Learning Goals for next shift (See Weekly Orientation Progress form for weekly goals)
  - 1.
  - 2.