INSTRUCTIONS FOR FILLING OUT
UNDERGRADUATE CLINICAL PRACTICUM REPORTS

(Students are responsible for completing these correctly and turning in per Clinical Timeline)

1. SEMESTER: write the semester and the year. Example: Spring 2007.
2. NAME: write your name in this space
3. COURSE: Circle course in which you are currently enrolled.
4. NAME: client initials may be used <u>or</u> õgroup one,ö etc.
5. DATE: record actual date you worked with (observed, etc.) the client.
6. TYPE OF PROBLEM: record disorder/problem the client exhibits or is tested for. Example: Language. If the client has language and artic problems, divide the time per problem on separate lines. **NOTE**: Only use language, artic, voice, fluency, dysphagia, or aural rehab (audiology) in this column. <u>DO NOT</u> write Aphasia, Foreign Accent, Phonology, Dysarthria, Oral Motor, etc.
7. AGE: this column should have õCö for child or õAö for adults. Actual age of client is not necessary.
8. GROUP: if you have more than one client at the time of therapy. Record time in minutes. Example: 75 minutes (not necessary to put the word minutes, see example)
9. DIAGNOSTIC: this column is to record the times when evaluating and testing the client. Record time in minutes. Example: 120 minutes (not necessary to put the word minutes, see example)
10. OTHER: this column is for parent/client conferences, hearing screenings, and observations. Record time in minutes.
11. LOCATION: the location that therapy, etc. is taking place. USE A SEPARATE SHEET FOR EACH LOCIATION AND A SEPARATE SHEET FOR EACH SUPERVISOR EVEN IF THE SUPERVISORS ARE AT THE SAME LOCATION.
12. SUPERVISOR INITIALS: the supervisor MUST initial all the filled in rows in order to verify the information recorded in that row.
13. Cross out any unused rows of documentation.
14. THERAPY: place the total number of minutes per problem and per adult or child in the appropriate places. Use a <u>pencil</u> for these totals for easier error correction.
15. TOTAL MINUTES: list total number of minutes on the page. Use a <u>pencil</u> for these totals for easier error correction (not necessary to put the word minutes, see example).
16. TOTAL HOURS: list total number of hours on this page, divide total minutes by 60. Example: 615 minutes ÷ 60 = 10.25 hours (not necessary to put the word hours, see example). Use a <u>pencil</u> for these totals for easier error correction.
17. SUPERVISORøS SIGNATURE: This is to be obtained either when sheet is full or before turn in date per Clinical Timeline. Sheet <u>will not</u> be accepted if signature is obtained 30 or more days after treatment date.
18. CCC: list supervisorøs certification area: Example: SLP, SLP/A, or A.
19. ASHA #: ASHA number of supervisor is required for the hours to be tabulated.
20. DATE: list the date the supervisor signed the form (date must agree with the last session documented).

In order to make it easier to track your hours, please put only <u>one location</u> per page and <u>one supervisor</u> per page.

IT IS <u>YOUR</u> RESPONSIBILITY TO MAKE SURE YOUR PAPERWORK IS CORRECT, NEAT, AND COMPLETED PROMPTLY AND PROPERLY.

Ethics Statement:
All acts of dishonesty in any work constitute academic misconduct. This includes, but is not limited to: cheating, plagiarism/stealing, fabrication of information, misrepresentation and abetting any of the above.

Academic misconduct represents unethical behavior unbecoming to the teaching and CSD profession and is against the principles outlined in the American Speech-Language-Hearing Associationøs *Code of Ethics* document. There is no tolerance of such behavior. Academic misconduct may result in a failing grade for the course.