**Learning Objectives of the Clinical Clerkship in This Department**

**(To be filled out by the student after discussing with the supervising physician)**

**During the orientation at the beginning of the clinical clerkship, present your own learning objectives to your clinical clerkship supervisor. Discuss them with him/her, and write down the objectives that both you and your supervisor agreed on in the space below. (Although there is no upper limit for the number of objectives you may list, we advise you to consider their feasibility.)**

**\*To supervising physician**

**Please use this sheet when you and the student discuss and set learning objectives for this clinical clerkship. We hope that, by using this sheet, you and the student will be able to set objectives that meet the expectations of both of you.**

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**CLINICAL CLERKSHIP JOURNAL: Week \_\_\_\_\_ (from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_)**

MM DD YY MM DD YY

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| \_\_\_\_/\_\_\_\_（Mon）Contents of Clinical Training (patient case; procedure, lab test, treatment, operation, etc.)  Month / Day |
| \_\_\_\_/\_\_\_\_（Tue）Contents of Clinical Training (patient case; procedure, lab test, treatment, operation, etc.)  Month / Day |
| \_\_\_\_/\_\_\_\_（Wed）Contents of Clinical Training (patient case; procedure, lab test, treatment, operation, etc.)  Month / Day |
| \_\_\_\_/\_\_\_\_（Thu）Contents of Clinical Training (patient case; procedure, lab test, treatment, operation, etc.)  Month / Day |
| \_\_\_\_/\_\_\_\_（Fri）Contents of Clinical Training (patient case; procedure, lab test, treatment, operation, etc.)  Month / Day |

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| Reflection on this week:  What you accomplished; what you thought was good  Issues and points to reflect on and to be improved; how you feel about them now upon reflection |

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| Learning tasks for this weekend; next week’s goals and the main things to do: |

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| Contents of the feedback received from the supervising physician: |