## Widener University School of Nursing

## **Learning Prescription** Student: \_\_\_\_\_ Clinical Instructor: \_\_\_\_\_ Date: \_\_\_\_\_ Course: NURS\_\_\_\_\_ Clinical remediation Skill remediation PROBLEMS IDENTIFIED PROPOSED SOLUTIONS CLINICAL/THEORETICAL LIMITIATIONS STRATEGIES FOR IMPROVEMENT PROFESSIONAL WEAKNESS/LEARNING STRATEGIES FOR IMPROVEMENT **DEFICITS** Issue: Plan/Outcome: \*\* \_\_\_\_ Student MAY attend clinical until remediation is complete \*\* \_\_\_\_Student MAY NOT attend clinical until remediation is complete

Student should contact Director CSCT 610-499-4215 or <a href="deferry@widener.edu">deferry@widener.edu</a> to schedule appointment for remediation and to complete remediation plan. Student must present prescription when scheduling appointment. CLINICAL COMMUNICATION/WARNING MUST BE SUBMITTED BY CLINICAL FACULTY WITHIN 48 HOURS. DEF/3/2009, updated 9/09, 5/17