

Checklist of Procedures and Skills Level 3

Name: _____

All items must be witnessed and evaluated by the supervisor signing off. These are to be done on patients during regular clinic treatment sessions. Supervisor is to sign-off only if item was demonstrated safely and competently without assistance. CNT must be demonstrated for competency. In the case of written items and case presentations, must fulfill elements of requirement and will be rubric graded. See clinical manual for details.

Competency – Demonstrated in Clinic	Date	Supervisor (print name)	Supervisor Signature	Comments
Write patient referral to another practitioner				
Write patient progress to referring practitioner				
Written patient self-care individualized plan (dietary, exercise, mind-body, etc.).				
Written and presented case presentations (presented in advanced clinic theater and/or clinic)				
Body-Work Tuina or Medical Qigong				

Complete 2 rotations from level 3 as available: Solo practice seeing 3 patients in 3 hours. Dual room practice seeing 4-5 patients in 3 hours. Specialized clinic (pediatrics, sports injury, etc.) Specialized style (Tung, Japanese, neoclassical pulse, etc.) Integration rotations at Austin Recovery Center, Austin Pain Associates, etc. (excluding community clinics, Cureville, festivals, etc.)				