

INTERNSHIP NOTEBOOK



VOCATIONAL SCHOOL OF HEALTH SERVICES

ORTHOPEDIC PROSTHETICS AND ORTHOTICS PROGRAM INTERNSHIP NOTEBOOK

	Ph	oto	

Student Name Surname: Student ID Number:

Class:

VOCATIONAL SCHOOL OF HEALTH SERVICES ORTHOPEDIC PROSTHETICS AND ORTHOTICS PROGRAM

Student Name Surname	:
Department/Program	:
Class	:
Student ID Number	:
Name and Address of the Institution	:
Department of the Institution	ŧ
Start Date	:
End Date	:

VOCATIONAL SCHOOL OF HEALTH SERVICES ORTHOPEDIC PROSTHETICS AND ORTHOTICS PROGRAM

INTERNSHIP LEARNING OBJECTIVES

- 1. Put into practice the theoretical knowledge they have received during their education.
- 2. Develop the skills acquired in laboratory and workshop studies.
- 3. Recognize prosthetic and orthotic materials and know their properties.
- 4. Reinforce the ability to take measurements from the patient and process the obtained measurement model.
- 5. Have the ability to make biomechanical adjustments for prosthesis or orthosis.
- 6. Provide good communication with patients and their relatives.
- 7. Have knowledge about patient rights and ethics.
- 8. Learn responsibilities in workplaces, working in cooperation, employee-employer relations.
- 9. Learn work safety systems.
- 10. Follow current technological developments

Number	Subject of Work / De	partment of Work	Date
	lignature (Intern)	Signature	(Intern Supervisor)

<sup>This page will be duplicated during internship applications and ordered by date.
All pages must be signatured by Intern Supervisor.</sup>

Number	Subject of Work / De	partment of Work	Date
	lignature (Intern)	Signature	(Intern Supervisor)

<sup>This page will be duplicated during internship applications and ordered by date.
All pages must be signatured by Intern Supervisor.</sup>

Number	Subject of Work / De	partment of Work	Date
	Signature (Intern)	Signature	(Intern Supervisor)

<sup>This page will be duplicated during internship applications and ordered by date.
All pages must be signatured by Intern Supervisor.</sup>

Number	Subject of Work / De	partment of Work	Date
	v		
	Signature (Intern)	Signature	(Intern Supervisor)

<sup>This page will be duplicated during internship applications and ordered by date.
All pages must be signatured by Intern Supervisor.</sup>

Number	Subject of Work / De	partment of Work	Date
	lignature (Intern)	Signature	(Intern Supervisor)

<sup>This page will be duplicated during internship applications and ordered by date.
All pages must be signatured by Intern Supervisor.</sup>

Number	Subject of Work / De	partment of Work	Date
	lignature (Intern)	Signature	(Intern Supervisor)

<sup>This page will be duplicated during internship applications and ordered by date.
All pages must be signatured by Intern Supervisor.</sup>

Number	Subject of Work / De	partment of Work	Date
	lignature (Intern)	Signature	(Intern Supervisor)

<sup>This page will be duplicated during internship applications and ordered by date.
All pages must be signatured by Intern Supervisor.</sup>

Number	Subject of Work / De	partment of Work	Date
	Signature (Intern)	Signature	(Intern Supervisor)

<sup>This page will be duplicated during internship applications and ordered by date.
All pages must be signatured by Intern Supervisor.</sup>

Number	Subject of Work / De	partment of Work	Date
	v		
	Signature (Intern)	Signature	(Intern Supervisor)

<sup>This page will be duplicated during internship applications and ordered by date.
All pages must be signatured by Intern Supervisor.</sup>

Number	Subject of Work / De	partment of Work	Date
	lignature (Intern)	Signature	(Intern Supervisor)

<sup>This page will be duplicated during internship applications and ordered by date.
All pages must be signatured by Intern Supervisor.</sup>

Number	Subject of Work / Department of Work		Date
	L		
	Signature (Intern)	Signature ((Intern Supervisor)

[•] This page will be duplicated during internship applications and ordered by date.

[•] All pages must be signatured by Intern Supervisor.

Number	Subject of Work / Department of Work		Date
	Signature (Intern)	Signature	(Intern Supervisor)

[•] This page will be duplicated during internship applications and ordered by date.

[•] All pages must be signatured by Intern Supervisor.

Number	Subject of Work / Department of Work		Date
	Signature (Intern)	Signature	(Intern Supervisor)

[•] This page will be duplicated during internship applications and ordered by date.

[•] All pages must be signatured by Intern Supervisor.

Number	Subject of Work / Department of Work		Date
	Signature (Intern)	Signature	(Intern Supervisor)

[•] This page will be duplicated during internship applications and ordered by date.

[•] All pages must be signatured by Intern Supervisor.

Number	Subject of Work / Department of Work		Date
	Signature (Intern)	Signature	(Intern Supervisor)
			, ,

[•] This page will be duplicated during internship applications and ordered by date.

[•] All pages must be signatured by Intern Supervisor.

Number	Subject of Work / Department of Work		Date
	L		
	Signature (Intern)	Signature ((Intern Supervisor)

[•] This page will be duplicated during internship applications and ordered by date.

[•] All pages must be signatured by Intern Supervisor.

Number	Subject of Work / Department of Work		Date
	Signature (Intern)	Signature	(Intern Supervisor)

[•] This page will be duplicated during internship applications and ordered by date.

[•] All pages must be signatured by Intern Supervisor.

Number	Subject of Work / Department of Work		Date
	Signature (Intern)	Signature	(Intern Supervisor)

[•] This page will be duplicated during internship applications and ordered by date.

[•] All pages must be signatured by Intern Supervisor.

Number	Subject of Work / Department of Work		Date
	Signature (Intern)	Signature	(Intern Supervisor)

[•] This page will be duplicated during internship applications and ordered by date.

[•] All pages must be signatured by Intern Supervisor.

Number	Subject of Work / Department of Work		Date
	Signature (Intern)	Signature	(Intern Supervisor)
			, ,

[•] This page will be duplicated during internship applications and ordered by date.

[•] All pages must be signatured by Intern Supervisor.

Number	Subject of Work / Department of Work		Date
	L		
	Signature (Intern)	Signature ((Intern Supervisor)

[•] This page will be duplicated during internship applications and ordered by date.

[•] All pages must be signatured by Intern Supervisor.

Number	Subject of Work / Department of Work		Date
	Signature (Intern)	Signature	(Intern Supervisor)

[•] This page will be duplicated during internship applications and ordered by date.

[•] All pages must be signatured by Intern Supervisor.

Number	Subject of Work / De	partment of Work	Date
	Signature (Intern)	Signature	(Intern Supervisor)

[•] This page will be duplicated during internship applications and ordered by date.

[•] All pages must be signatured by Intern Supervisor.

Number	Subject of Work / De	partment of Work	Date
	Signature (Intern)	Signature	(Intern Supervisor)

[•] This page will be duplicated during internship applications and ordered by date.

[•] All pages must be signatured by Intern Supervisor.

Number	Subject of Work / Department of Work		Date
	L		
	Signature (Intern)	Signature	(Intern Supervisor)

[•] This page will be duplicated during internship applications and ordered by date.

[•] All pages must be signatured by Intern Supervisor.

Number	Subject of Work / De	partment of Work	Date
	L		
	Signature (Intern)	Signature ((Intern Supervisor)

[•] This page will be duplicated during internship applications and ordered by date.

[•] All pages must be signatured by Intern Supervisor.

Number	Subject of Work / De	partment of Work	Date
	Signature (Intern)	Signature	(Intern Supervisor)

[•] This page will be duplicated during internship applications and ordered by date.

[•] All pages must be signatured by Intern Supervisor.

Number	Subject of Work / De	partment of Work	Date
	Signature (Intern)	Signature	(Intern Supervisor)

[•] This page will be duplicated during internship applications and ordered by date.

[•] All pages must be signatured by Intern Supervisor.