Name: _____

SHADOWING ROTATION SUMMARY

INSTRUCTIONS. For this summary, answer the questions below for each shadowing rotation you completed. In addition, select your 1st and 2nd project options for the remainder of the clinical immersion experience.

1. **SHADOWING ROTATION #1.**
   3.1.   Who did you meet and shadow?

   3.2.   When did it take place and for how long?

   3.3.   Where did it take place?

   3.4.   What happened and what did you learn?

   3.5.   How did it relate (or not) to your project selections and expectations?

2. **SHADOWING ROTATION #1.**
   3.1.   Who did you meet and shadow?

   3.2.   When did it take place and for how long?

   3.3.   Where did it take place?

   3.4.   What happened and what did you learn?

   3.5.   How did it relate (or not) to your project selections and expectations?

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   3.5.   How did it relate (or not) to your project selections and expectations?

Name: _____

4. **PROJECT OPTIONS.** Select your 1st and 2nd options only.

___Universal Personal Transfer.   ___Dental Wear Simulator.

___Infant Stimulus for Apnea.   ___Neuroheadset Analyzer.

___Endotracheal Tube Microparticle Delivery.   ___Face and Eye Recognition.

___Skin Simulator.   ___Stress Detector.

___Negative Pressure Ventilation.   ___Optical Identification.