

**INTERNSHIP REPORT** (will be completed by the student)

**1.week**

<b>Days</b>	<b>Received patients (name-surname, diagnosis and age)</b>	<b>Assessment of the patients</b>	<b>Treatment methods applied</b>
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

**Observations of the first week of your internship:**

**2. week**

<b>Days</b>	<b>Received patients (name-surname, diagnosis and age)</b>	<b>Assessment of the patients</b>	<b>Treatment methods applied</b>
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

**Observations of the second week of your internship:**

**3. week**

<b>Days</b>	<b>Received patients (name-surname, diagnosis and age)</b>	<b>Assessment of the patients</b>	<b>Treatment methods applied</b>
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

**Observations of the third week of your internship:**