

## Appendix D: Nursing Student Clinical Assignment

The Johns Hopkins Hospital  
Department of Nursing

School: \_\_\_\_\_ Instructor/Contact information\*: \_\_\_\_\_

Date/s: \_\_\_\_\_ Time on unit: \_\_\_\_\_ to \_\_\_\_\_

✓ Check all that students will be responsible for. Please ensure to cosign documentation prior to leaving the shift.

Rm/ Patient Initials	Student	Nurse	Meds	Vital Signs	Assessment	Documentation in Epic	Nursing Cares	Linens	Comments:

\*Clinical Instructor: please provide best contact number (phone/email, or both) for nursing follow up if necessary.

JHH Unit Nurse: please ensure to keep copy of Student assignment with Nursing assignment to be securely stored per hospital policy.