### Nursing Student Assignments

**Name of Nursing School**

Day / Date: ___________________  Unit: ___________________  Hours on Unit: ______ -- _______

Instructor’s Name: ______________________________  Instructor’s Contact #: __________________

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<tr>
<th>Student Name</th>
<th>Room</th>
<th>Patient Initials</th>
<th>Nurse</th>
<th>PO/SQ/IM Meds</th>
<th>IV Meds</th>
<th>Assess</th>
<th>Full Care</th>
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Please post alongside staff assignments for each scheduled rotation.