



APPENDIX A

OVCA FORM 148: Clinical Teaching Plan Review Checklist

LEGEND

- (/) Completely evident or present;
- (Ebl) Evident but incomplete
- (EbNI) Evident but may not be following required format / placement or sequence / not updated and needs improvement
- (NI) Not indicated if required or available
- (NE) Not evident- Missing or absent
- (NA) Not applicable -not required by the subject or course
- (EE) Erroneous entry (maybe a typographical error)
- (NC) Not clear

ITEM / AREA		FINDINGS
HEADER		
Institutional logo/Name		
Name of College/Department		
FOOTER		
Institution's address		
College/Department logo		
DOCUMENT TITLE		
College / Program		
School year		
CLINICAL DESCRIPTION		
STUDENTS (year level)		
Placement		
Time allotment		
Number of days		
Number of students		
ENTRY COMPETENCY		
AREAS OF EXPOSURE		
GRADING SYSTEM		
GENERAL OBJECTIVES / LEARNING OUTCOMES		
ACTIVITIES OF STUDENTS		
SIGNATORIES		

Philippine Copyright, 2021

By DE LA SALLE MEDICAL AND HEALTH SCIENCES INSTITUTE, DR. J.O.C

All Rights Reserved

No part of this form maybe reproduced, stored in a retrieval system, or transmitted, in any form or any means, electronic, mechanical, photocopying, recording, or otherwise, without prior written permission from the Institute.