

STUDENT CONFIDENTIALITY AGREEMENT



CONFIDENTIALITY POLICY

Patient confidentiality is very important. As a student you should refrain from asking your supervisor questions about patients in front of other patients or other people. No information about patients should leave this clinic! This includes written or verbal information. If a patient asks:

- a question about another patient, the patient should be politely informed that you are unable to discuss other patients.
- for information to take home with him or her, please inform your supervisor.

An inability to maintain patient confidentiality will result in immediate dismissal.

My signature below indicates that I have read, understood, and agree to abide by this BODYWORKS' policy.

Your Name (Please print) Signature Date

OBSERVATION GUIDELINES

You are free to observe procedures in the clinic. Before entering into treatment rooms, ask the PT/PTA if it is appropriate for you to observe. Please be considerate of the fact that not all patients may wish to discuss their problems with you. Speak with your supervisor before asking patients about their conditions to determine if your question is appropriate. If you would like to sit in on an evaluation, please have your supervisor set up a time with one of the therapists.

My signature below indicates that I have read, understood, and agree to abide by these guidelines.

Your Name (Please print) Signature Date

STUDENT GOALS

Please list your goals below and be prepared to discuss them with your supervisor.

1. _____
2. _____
3. _____
4. _____
5. _____