

H. Clinical Calendar – 2-Week Block

✓ Attended or ✗ Not attended, and indicate travel time in the appropriate box. If ✗ Not Attended, provide reason: A (absent) / FD (Flex Day) / PA (Preceptor Absent) / NPA (No Preceptor Available). **PA and NPA must be initialed by the preceptor.**

| WK | | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday | |
|---|-----------|---|---------|---|----------|------------------------------------|----------|--------|---------------------------------------|
| 1 | Morning | Podcasts: Orientation, Advanced Care Planning Podcast: Vaccine Hesitancy Addressed | | Submit <i>proposed</i> Clinical Calendar (during this week) to famclerk@ucalgary.ca | | | | | |
| | Afternoon | ✓ or ✗ | | | | | | | |
| | Evening | | | | | | | | # clinic days <input type="text"/> |
| WK | | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday | |
| 2 | Morning | | | | | | | | |
| | Afternoon | | | Submit <i>final</i> signed Clinical Calendar to famclerk@ucalgary.ca by 11:59 pm | | | | | |
| | Evening | | | Submit Logbook to famclerk@ucalgary.ca By 11:59 pm (if end of 6-weeks) | | Summative Exam (if end of 6-weeks) | | | # clinic days <input type="text"/> |
| TOTAL CLINIC DAYS | | | | | | | | | <input type="text"/> |
| Preceptor signature: _____ Student Name: _____ Signature: _____ | | | | | | | | | |

Please indicate time with Allied Health Professionals and specify type (pharmacist, RN, NP, etc.). Consider using this document to schedule midterm and final ITER review meetings with your preceptor. Include any travel time (write this in the appropriate box). Travel morning of the exam if within 2.5 hours of Calgary, or travel the afternoon before if further away (or longer as needed for special travel requirements).

I. Clinical Calendar – 4-Week Block

✓ Attended or ✗ Not attended and indicate travel time in the appropriate box. If ✗ Not Attended, provide reason: A (absent) / FD (Flex Day) / PA (Preceptor Absent) NPA (No Preceptor Available). **PA and NPA must be initialed by the preceptor.**

| WK | | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday | |
|----|-----------|---|--|---|--|---------------------------------------|----------|-------------------|---------------|
| 1 | Morning | Podcasts: Orientation, Advanced Care Planning | Start PCCP (during this week) Email topic to famclerk@ucalgary.ca | Submit <i>proposed</i> Clinical Calendar to famclerk@ucalgary.ca (during this week) | | | | | |
| | Afternoon | ✓ or ✗ | | | Vaccine Hesitancy Addressed 12:15-1 pm | | | | # clinic days |
| | Evening | | | | | | | | |
| WK | | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday | |
| 2 | Morning | | | | | | | | |
| | Afternoon | | | | Multimorbidity 12:15-1 pm | Formative Exam Before 3:59 pm | | | # clinic days |
| | Evening | | | | | | | | |
| WK | | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday | |
| 3 | Morning | | | | Submit PCCP and evaluation to famclerk@ucalgary.ca | | | | |
| | Afternoon | | | | 1:00-2:30 pm - PCCP 2:45-4:45 pm - Planetary Health | | | | # clinic days |
| | Evening | | | | | | | | |
| WK | | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday | |
| 4 | Morning | | | Submit <i>final</i> Clinical Calendar to famclerk@ucalgary.ca by 11:59 pm | | | | | |
| | Afternoon | | | | | Summative Exam (if end of 6-weeks) | | | # clinic days |
| | Evening | | | Submit Logbook to famclerk@ucalgary.ca By 11:59 pm (if end of 6-weeks) | | | | | |
| | | | | | | | | TOTAL CLINIC DAYS | |

Preceptor signature: _____ Student Name: _____ Signature: _____

Please indicate time with Allied Health Professionals and specify type (pharmacist, RN, NP, etc.). Consider using this document to schedule midterm and final ITER review meetings with your preceptor. Include any travel time (write this in the appropriate box). Travel morning of the exam if within 2.5 hours of Calgary, or travel the afternoon before if further away (or longer as needed for special travel requirements).