



# **DEPARTMENT OF PHYSIOTHERAPY**

## **LOG BOOK**

### **CLINICAL ORIENTATION (CO<sub>r</sub>)**

**NAME:**

**ENROLLMENT NUMBER:**

**YEAR:**

**PROGRAM:**

| Sl.No. | Learning Activities | Date | Institution/Hospital | Key Observations | Faculty<br>In-charge<br>Signature | Remarks |
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| Sl.No. | Learning Activities | Date | Institution/Hospital | Key Observations | Faculty In-charge<br>Signature | Remarks |
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