

Learner 2 Completed Writing Task

## MEDICAL INTAKE FORM

Fill in the form and return to the receptionist. Please print clearly

### A. PERSONAL INFORMATION (11pts)

Patient's Name: <i>Juanita Gomez</i>	Today's Date: <i>Wed. Nov 4, 2015</i>
Address: <i>Marvin Way, 1615 NE</i>	Home phone number: <i>No</i>
Alberta Health Number: <i>55555 - 5555</i>	Cell phone number: <i>403 572633</i>
Date of Birth: <i>07.28.1975</i>	Age: <i>40</i> Sex: <i>F</i>
Job/Occupation: <i>student</i>	Marital Status:
<b>B. What is the reason for your visit today?</b> (1 pt)	<i>I have very <u>big</u> peane.</i>

### C. PERSONAL HEALTH (4pts)

What medical conditions do you have?	<i>No</i>
What allergies do you have?	<i><u>pencilen</u></i>
List all medications you take	<i>aspirin</i>
List all surgeries you have had	<i><u>S</u>-section, <u>back</u> surgery</i>

CLB 3 STOP HERE.

CLB 4 – PLEASE ANSWER THE FOLLOWING QUESTIONS.

### D. FAMILY HISTORY (4 pts)

	If living:		If deceased (not living)	
	Age	any Medical Conditions	Age when died	any Medical Conditions
Mother				
Father				

**Writing Task Assessment Tool**

Name	Juanita	CLB Level	3
<p><b>CLB 3-4 Writing Assessment Task:</b> Fill out an intake form at a walk-in medical clinic. Please fill out the medical form given to you by your instructor. Remember to follow what you have learned in class about filling in forms clearly, neatly and legibly. CLB 3 learners will fill out Parts A, B and C. CLB 4 Learners will fill out Part A, B, C, and D.</p>			
<b>Competencies:</b> Getting Things Done		<b>Meets</b>	<b>Not Yet</b>
<b>CRITERIA CLB 3 &amp; 4:</b>			
Includes information in ALL parts and the information is in the correct place CLB 3 = 12/16 <i>14/16</i> CLB 4 = 16/20		✓	
Printing is neat and clear		✓	
Addresses, phone numbers, punctuation uses correct conventions in Personal Information section CLB 3: 2-3 errors CLB 4: 1-2 errors		✓	
Spells common words correctly CLB 3: up to 3 errors <i>Two common words are spelled incorrectly in Part B</i> CLB 4: up to 2 errors		✓	
Keep Doing: <i>You filled in NO when there is no information (Home phone number)</i>		Please Look At: <i>Part A – C: Please correct circled errors and show me.</i>  <i>Remember to check each box before you hand in your form.</i>	

**Task Success for CLB 3 and 4: Meets task expectations on all items**      **YES**      **NOT YET**