**School Program Progress Note**

**Name:** @NAME@

**Date of Birth:** @DOB@

**Medical Record Number:** @MRN@

**Age:** @AGE@

**Grade:** {Grade:9003}

**Patient Status:** {OUTPATIENT/INPATIENT:14923}

**Patient Area:** {School Program Patient Unit:28725}

**Services Provided By:** {School Program Service Providers:28788}

**Session Location:** {School Program Session Location:28789}

**Learning Goal(s):**

\*\*\*

**Services Provided:** {School Program Instructional Session Services:28790}

**Subject Area(s) Addressed:**

Reading/English Language Arts

Mathematics

Science

Social Studies

Robotics / Engineering

**Description of Session:** {School Program Service Providers:28788} engaged patient in developmentally appropriate learning activities to target/practice {School Program Instructional Focus:31558}. During today's session, @FNAME@ \*\*\*. Patient {School Program Behavior:28838}. {School Program Caregivers:28795} present during session.

**Patient Participation:** {School Program Engagement Levels:28792}

**Family/Caregiver Education:** Patient learning goals and academic progress reviewed with \*\*\* after session.

**Plan:** @FNAME@ will continue to participate in the hospital school program for 30-90 mins/day for 3-5x/week.

**Amount of time spent:** {Time spent:80016195}

*Time spent includes preparation of instructional materials.*

@ME@

Special Education Teacher / School Liaison

@TD@ @NOW@