

Appendix 2

(school and department names)							
Professional Nursing Make-up Internship Certificate							
Name		Sex		Birth date	MM/DD/YYYY	National ID No.	
Subject	Details						Duration
<input type="checkbox"/> Essential nursing	1. Training includes professional communication skills, basic nursing hands-on sessions, application of nursing procedures to patients, record keeping. 2. Learning reports must be clearly completed (including hands-on sessions). Unfinished training in essential nursing must be completed in medical and surgical nursing.						___ hours
<input type="checkbox"/> Medical & surgical nursing	1. Internship in medical and surgical nursing is crucial for advanced training programs and is therefore more demanding. 2. At least 120 hours should be spent on medical and surgical nursing each. 3. Training includes familiarization with the working environment and nursing procedures, enhanced training in caring for patients and performing assessments.						___ hours (___ hours for medical and ___ for surgical)
<input type="checkbox"/> Obstetric nursing	The course focuses on pregnancy, childbirth, postpartum, and newborn care. Training for high risk pregnancy, infertility, and female healthcare may be arranged by the school based on needs.						___ hours
<input type="checkbox"/> Pediatric nursing	1. The primary focus is on children and adolescent caring. Secondary focus is on health promotion for this age group. Practical training in caring children with acute and serious illness may be arranged according to needs. 2. Training includes communication skills with children, children health assessment, ward management, common techniques and medications in the pediatric department, family-centered primary care, nursing assessment, and hospital discharge process.						___ hours
<input type="checkbox"/> Community nursing	The course includes: 1. community group assessment and planning 2. family and individual level: home visits and case management 3. group instruction						___ hours
<input type="checkbox"/> Psychiatric	The course should include nursing for acute and rehabilitation periods. School may arrange the practical training to meet actual needs.						___ hours

nursing		
<input type="checkbox"/> Overall internship		___ hours

This is to certify that the applicant has met the requirements for the length of internship period totaling \_\_\_ hours and has passed all internship subjects.

President: (signature or seal)

(school seal)

Department (Division) Chair: (signature or seal)

Date: \_\_\_/\_\_\_/\_\_\_ (MM/DD/YYYY)

Note:

1. "Internship" herein refers to a hands-on learning experience caring for patients and does not include demonstrations, job shadowing, or visits to relevant institutions.
2. This certificate must be issued by the school based on actual facts. The school shall be responsible for all information stated above.
3. This certificate is only for the use of applicants who graduate after June 1, 2013 for their registration for Senior Professional and Technical Examination for Registered Professional Nurses.