Proposed Sample PSYCHIATRY Resident Individual Plan

NAME

Block	**11 blocks**	**1.**	**2.**	**3.**	**4.**	**5.**	**6.**	**7.**	**8.**	**9.**	**10.**	**11.**
1st Year Resident												
	Rotation Site											
	Med Clinic 1/2 day/wk except when on wards											

Block	**12 blocks**	**1.**	**2.**	**3.**	**4.**	**5.**	**6.**	**7.**	**8.**	**9.**	**10.**	**11.**	**12.**
2nd Year Resident													
	Rotation Site												
3rd Year Resident													
	Rotation Site	**OutPt** Ψ	**OutPt** Ψ	**OutPt** Ψ	**OutPt** Ψ	**OutPt** Ψ	**OutPt** Ψ	**OutPt** Ψ	**OutPt** Ψ	**OutPt** Ψ	**OutPt** Ψ	**OutPt** Ψ	**OutPt** Ψ
4 Year Resident													
	Rotation Site Am												
	Pm												
	Psych Clinic 1/2 day/wk												