

Name _____ CMASA _____

Period 1st December 20____ to 30th November 20____

Reflection / Learning outcomes

Reflection Category	Tick (if you agree)
Improved understanding on techniques and therapies	
Assisted my clinical practice and reinforce work ethics	
Activities relating to Professional Issues and Regulations	
Activities relating to herbs endorsement, pain management, treatment assessment	
Stay informed for industry changes and	
Other outcomes (Please specify details)	