SURGICAL PROCEDURES FOR CLINICAL EXAMINATION

MUST be listed in chronological order

American Osteopathic Board of Otolaryngology-Head and Neck Surgery

PERFORMED BY: _____ FROM _____ TO _____

NAME OF FACILITY _____ CITY _____ STATE _____

LIST #	DATE	HOSPITAL CASE #	PATIENT INITIALS	OPERATIVE PROCEDURE	RESULTS AND/OR COMPLICATIONS

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