

AOBS 2-STEP PLR ORAL EXAMINATION CASE SUBMISSION SIGN-OFF

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2	Sign and return this form with the two (2) sets	of case t	materials com	nleted cenarately
4.	sign and return this form with the two (2) sets	or case i	matchais com	ipicica separately.

1. Review this form and check mark the boxes as you complete each step.

I have complied with the requirements found in the following steps:
☐ Candidate's name appears on the cover of each case.
☐ A case summary appears at the beginning of each case
☐ All patient identifiers (i.e., name, address, social security number, etc.) have been totally
redacted throughout each case.
☐ Include all items in each case folder
☐ Include pre-op evaluation elements
☐ Note all operative elements
☐ Note all post-operative/hospitalization elements
☐ I have signed and included the completed Business Associate Agreement.
I ACKNOWLEDGE THAT THE AMERICAN OSTEOPATHIC BOARD OF SURGERY REQUESTS THAT THE CASES AND MEDICAL RECORDS THAT ARE SUBMITTED FOR REVIEW FOR MY 2-STEP PLR ORAL EXAMINATION CASE REVIEW REFLECT TRUE AND ACCURATE INFORMATION.
Following completion of all steps, sign and date this form. Return it with your case submissions and Business Associate Agreement in the candidate application portal <u>HERE</u> .
Signature:
Print name: