## **NEUROSURGICAL RESIDENCY TRAINING**

List all rotations individually. There must be no chronological gaps. List the number of months of training in the appropriate column for each rotation.

Name \_\_\_\_\_John R. Smith, MD\_\_\_\_\_\_\_

Institution/Hospital			Core Clinical Neurosurgery	Senior Most Resident	Clinical Neurological	Elective Training (research, neuroradiology, etc.)
UNIVERSITY OF OKLAHOMA	MM/YY - MM/YY	PGY	Training # of Months	Year # of Months	Training # of Months	# of Months Subject
Health Science Center	7/93 – 8/93	2				2 radiology
Health Science Center	9/93 – 12/93	2	4			
Health Science Center	1/94 – 3/94	2			3	
Oklahoma Children's Hospital	4/94 — 6/94	2				3 pediatrics
Health Science Center	7/94 — 9/94	3				3 pathology
Mercy Hospital	10/94 – 12/94	3	3			
Health Science Center	1/95 – 2/95	3	2			
M.D. Anderson, Houston TX	3/95	3				1 neuro-oncology
Cleveland Clinic Foundation	4/95 – 6/95	3				3 spine fellowship
University of Oklahoma	7/95 – 3/96	4				9 research
Health Science Center	4/96 – 6/97	4	3			
Oklahoma VA Hospital	7/97 – 6/98	5	12			
Health Science Center	7/98 – 6/99	6		12		
Total Months:	60		24	12	3	21