BOARD CERTIFIED ORTHOPEDIC SURGEONS

Michael J. Greller, MD, FAAOS
Fellowship Trained in Sports Medicine

Alan S. Nasar, MD, FAAOS
Fellowship Trained in Joint Replacement Surgery

Gerardo Goldberger, DO

Gregg S. Berkowitz, MD, FAAOS

James F. Cozzarelli, MD, FAAOS

Grigory Goldberg, MD
Fellowship Trained in Spine Surgery

Stacey Gallacher, MD
Fellowship Trained in Trauma, Shoulder & Elbow

FOOT AND ANKLE

Alison DeWaters, DPM
Reconstructive Foot and Ankle Surgeon

PAIN MANAGEMENT

Ali Valimahomed, MD, FAAPMR
Fellowship Trained in Pain Medicine

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Minimally Invasive Surgery
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Trauma & Fracture Care
Nerve Testing
Sports Medicine

AOSMI
ADVANCED ORTHOPEDICS AND SPORTS MEDICINE INSTITUTE
A center of excellence for bone and joint care

PATIENT MEDICATION LIST

DATE: _____

LAST NAME:_____ FIRST NAME:_____

List ***all medications*** currently being taken and explain what each medication is for (including over-the-counter medications, vitamins, cartilage supplements and birth control pills) or attach a medication list.

If the medication was prescribed by a physician, please indicate the reason you are Taking medication and specify the physician who prescribed it.

Medication	Dosage

Please hand in any test results, x-rays, other diagnostic CD's, or other documents for today's visit when you check in.

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