Response ID:1027 Data

<ol> <li>Section 1: About You (Note: only Fellow members of AAPM&amp;R may serve as the lead au should complete the application. Non-Fellow members may serve as co-authors)</li> </ol>	thor and
1. Name	
First Name : Chaitanya	
Middle Name (initial): R	
Last Name : Konda Credential : DO	
2. Email:	
chaitkonda@gmail.com	
3. Institution:	
UT Southwestern	
4. Are you a member of AAPM&R?	
Yes	
5. AAPM&R Membership Status or Category:	
Fellow (Board Certified)	
2. Clinical Topics: You may apply for a maximum of 5 topics	
6. First Topic: For Which Section Do You Want To Apply?	
Pain/Neuromuscular Medicine Rehabilitation	
7. First Topic: Which topic in the section you just selected do you want to write/refresh?	
Thoracic Outlet Syndrome	
8. Do you want to apply for a second topic?	
Yes	
9. Second Topic: For Which Section Do You Want To Apply?	
Pain/Neuromuscular Medicine Rehabilitation	
10. Second Topic: Which topic in the section you just selected do you want to write/refresh?	
SI Joint Pain	
11. Do you want to apply for a third topic?	
Yes	
12. Third Topic: For Which Section Do You Want To Apply?	

13. Third Topic: Which topic in the section you just selected do you want to write/refresh?

Facet mediate	d pain/Lumbar Zyga	pophyseal Joint Arthropathy	
14. Do you wan	t to apply for a fou	rth topic?	
-		on Do You Want To Apply?	
Musculoskelet	al Medicine		
•	c: Which topic in the Mononeuropathy	he section you just selected do you wa	nt to write/refresh?
<b>17. Do you wa</b> n Yes	it to apply for a fiftl	n (and final) topic?	
•	For Which Section scular Medicine Ref	Do You Want To Apply?	
19. Fifth Topic: Trigeminal Ne	-	section you just selected do you want	to write/refresh?
<b>20. Do you hav</b> Yes	e previous writing	experience?	
I have done a	previous Knowledge	·	d multiple papers to AJPM&R on peripheral nerve guided interventions to AJPM&R as well.
22. Please desc	cribe the extent of y	ourexpertise on the topic(s) you have	selected:
<b>23. Will you ha</b> v	ve Co-Authors?		
24. Co-Author o	contact information	):	
	Full Name	Email	
Co-Author 1	Mia Robb Stahler	Mia.RobbStahler@utsouthwestern.edu	
Co-Author 2	Casey Salandra	Casey.salandra@utsouthwestern.edu	
Co-Author 3			
Co-Author 4			
3. Disclosure	and Copyright		
<b>25. I have a rel</b> e	evant Financial Rel	ationship to disclose:	

**Disclosure Information:** 

	Company/Institution	Type of Relationship
1		
2	2.	
3	3.	
4	1.	
5	5.	