

Response ID:1033 Data

1. Section 1: About You (Note: only Fellow members of AAPM&R may serve as the lead author and should complete the application. Non-Fellow members may serve as co-authors)

1. Name

First Name : Sanjeev

Last Name : Agarwal, MD

2. Email:

sanjeev.agarwal@downstate.edu

3. Institution:

SUNY Downstate Medical Center

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?

Musculoskeletal Medicine

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

SI Joint Pain topic

8. Do you want to apply for a second topic?

Yes

9. Second Topic: For Which Section Do You Want To Apply?

Musculoskeletal Medicine

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

Facet mediated pain and lumbar zygapophyseal joint arthropathy topic.

11. Do you want to apply for a third topic?

Yes

12. Third Topic: For Which Section Do You Want To Apply?

Musculoskeletal Medicine

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

Thoracic Outlet Syndrome

14. Do you want to apply for a fourth topic?

Yes

15. Fourth Topic: For Which Section Do You Want To Apply?

Musculoskeletal Medicine

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

Compression Fractures of the Spine

17. Do you want to apply for a fifth (and final) topic?

No

Fifth Topic: For Which Section Do You Want To Apply?

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

18. Do you have previous writing experience?

Yes

19. Please describe the extent of your writing experience:

Extensive. Participated in previous knowledge Now topics

20. Please describe the extent of your expertise on the topic(s) you have selected:

Extensive.

PM&R CHIEF, pd AND bOARD CERTIFIED IN pAIN AND sPORTS mEDICINE

21. Will you have Co-Authors?

Yes

22. Co-Author contact information:

	Full Name	Email
Co-Author 1	Rebecca Takele, DO	Rebecca.Takele@downstate.edu
Co-Author 2		
Co-Author 3		
Co-Author 4		

3. Disclosure and Copyright

23. I have a relevant Financial Relationship to disclose:

No

Disclosure Information:

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