



**LASIK SURGERY OPERATIVE DATA REVIEW FORM
CERTIFICATION**

Please complete the information requested below and sign the statement at the bottom of the page. The *LASIK Surgery Operative Data Review Form* and this *Certification* must be completed and submitted along with your Application for Certification to the American Board of Eye Surgery.

Candidate's Name _____
First Middle Last

Today's Date _____

Procedures reported from _____ to _____
month and year month and year

Download the Operative Data Review form 50 consecutive cases of LASIK surgery, including no more than 20 co-managed cases. Select cases where the original procedure was performed at least 6 months ago, so as to permit up to 6 months of follow-up. The cases should reflect surgeries completed within the previous 18-month period, and be exclusive of procedures performed during a residency and/or fellowship. Do not include cases which were prepared for surgery, but not completed for reasons of equipment malfunction prior to flap creation, patient apprehension, anxiety, or concern, or anatomical/medical considerations (including prior corneal surgery). Accurate identification of each case is essential for independent review of operative data.

Refer to the *Instructions for Completing the LASIK Surgery Operative Data Review Form* for a comprehensive explanation of the form. Before completing forms for your case, review the general instructions, the key to the endnotes, and the three examples described in the Instructions. Be sure to respond to the questions on page two of this *Certification* form.

I certify that the data reported in the following pages are a true and accurate listing of 50 consecutive LASIK surgeries, including no more than 25 co-managed cases, performed by me during the past 18-month period, exclusive of procedures performed during a residency and/or fellowship.

Signed: _____ Date: _____

Certification

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Please respond to the following questions after selecting the 50 cases you are required to document:

In identifying the final sequence of 50 consecutive cases, including no more than 25 co-managed cases, how many cases which were prepared for surgery were excluded for:

1. Reasons of equipment malfunction prior to flap creation? _____
2. Reasons of patient apprehension/anxiety/concern? _____
3. Anatomical/medical considerations (including prior corneal surgery)? _____
4. Other reasons? (Specify below) _____

How many additional co-managed cases did you exclude to identify the final sequence of 50 consecutive cases? _____