Reviewer information form

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2. Describe your practice setting (Rural/Urban, solo/group, academic/nonacademic, owner/employee, family practice/multispecialty, etc.):

3. List areas of special interest or expertise that may be pertinent to topics covered in FPM.

   Subject area      Nature of interest or expertise
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   For additional comments:

Thank you. Please return this form to Kel Anne Hocker, Editorial Assistant, Family Practice Management.

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