

# Surgery Observation Record

\_\_\_\_\_ observed for \_\_\_\_\_ hours at  
(PT student)

\_\_\_\_\_  
(Site/Hospital)

Procedure(s) observed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(Signature and Title of Surgery Staff)

\_\_\_\_\_  
(Date)

Return to: Becky Dodson  
Department of Physical Therapy  
106 Lewis Hall  
University of Missouri – Columbia  
Columbia, MO 65211