Monthly New Patient Retention Stat Sheet
(Do Not Send to Dr. Rosen)

For the month of _____

From the office of _____

DATE	NEW PATIENT	ROF	SIGNED UP FOR CARE			STOP BEFORE 1st RE-EXAM	RE-EXAM	RE-REPORT	Continues Care after Re-report	STOP BEFORE (any other) RE-EXAM
TOTALS										

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