



## **RESIDENT DISCUSSION FORM**

Please fill out the form below and return it to the TRS in order to receive your reimbursement for the meeting.

Please make a presentation to a resident group describing the meeting, your experience, and the TRS/ACR organization.

Date of Presentation:

Number of residents in attendance:

Short paragraph describing the meeting:

Questions that you could not answer and would like response to:

Thank you for your participation.

Sincerely,  
Texas Radiological Society