



THE FOLLOWING DOCTORS HAVE EXPRESSED A WILLINGNESS TO ADMIT NEW RESIDENTS TO THEIR PRACTICE. **PLEASE CONTACT THE DOCTOR OF YOUR CHOICE TO CONFIRM THEY WILL ACCEPT A NEW RESIDENT.** ONCE A DOCTOR HAS BEEN CONFIRMED PLEASE CONTACT ADMISSIONS WITH THE DOCTORS NAME.

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THE FOLLOWING DOCTORS ARE ONLY WILLING TO FOLLOW **CURRENT** RESIDENTS FROM THEIR OWN PRACTICE.

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