The James B Edwards College of Dental Medicine XX Annual Continuing Education Course

The Dr. Carlos F. Salinas Dental Program for the Diagnosis and Treatment of Individuals with Special Health Care Needs

Friday, September 28, 2018

LOCATION: North Charleston Convention Center (Adjacent to Embassy Suites Hotel) 5001 Coliseum Drive (North Charleston, South Carolina 29418)

SCHEDULE:
7:30 a.m.- 8:00 a.m. Registration and Continental breakfast
8:15 a.m. – 4:00 p.m. Course Sessions

Course Sessions
Featured Presenters will be Jimmy Rivers DMD, MHS; Michelle E. Ziegler DDS, FSCDA; Chad Adams DDS; John Hansford DMD; Steve Beetstra DDS; Isabel Driggers DMD; Mai-Ly Duong DMD, MPH, MAEd; with a special art presentation from Nicolas Lyford-Pike

ATTENDEE INFORMATION: (one registration form per person, please print)

Name:_________________________________________________________________________
Degree: ______ Name preferred on course badge:_____________________________________
Address:________________________________________________ __________________________
City: ___________________________________ State: ______ Zip Code:_________________
Telephone:_____________________________ Email____________________________________

The MUSC JBE College of Dental Medicine is an ADA CERP recognized provider. ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. The MUSC JBE College of Dental Medicine designates this activity for 6.0 hours of continuing education credits. The objective of this course is to provide current oral health information about patients with special needs to the dental professionals in SC. With this collaboration, our goal is the reduction of oral health disparities and achieving a better quality of life for this special and very vulnerable segment of our population. It will offer a combination of lectures, visual presentations and Q&A sessions.

REGISTRATION: (Please make checks payable to “MUSC Foundation.”)

□ Dentists, MD, Ph.D. - $120.00
□ Retired dentist - $80.00
□ Dental hygienist, other health professionals - $80.00
□ Student members of American Academy of Developmental Medicine & Dentistry (AADMD) - $80.00
□ I would like to sponsor the tuition for ______ (AADMD) dental student(s) X $80.00 each.
□ I would like to make a one time donation to the program in memory of Dr. Carlos Salinas $______________

Please note that only mailed registrations with checks will be honored.

Total amount enclosed $________________

MAIL TO:
Dr. S. Ted McGill
Medical University of South Carolina
James B. Edwards College of Dental Medicine
173 Ashley Avenue, BSB 552 MSC 507
Charleston, SC 29425-5070

QUESTIONS:
If you need additional information, including cancellation policy, please contact
Dr. S. Ted McGill mcgillt@musc.edu

Commercial Sponsorship

[Henry Schein Dental Logo]