



“OPTIMIZING HYGIENE: REGENERATIVE THERAPIES”
 Saturday April 13th 2019 4 CE credits
 8:00 am – 9:00 am Registration and Light Breakfast
 9:00 am – 1:00 pm Presentation
 Oak View Room at the Walnut Creek Library (pay parking)
 1644 N. Broadway, Walnut Creek CA 94596

COURSE DESCRIPTION:

As dental professionals we are ethically, legally, and morally obligated to ensure our patients are given all the treatment options to ensure they make an informed decision. When we educate our patients in this way we allow them to become their own dental healthcare advocate. In order to appropriately educate our patients we must first ensure that we are educated in the latest dental technologies ourselves. We will discuss the history of periodontal disease and compare what we knew then and what we know now. This course is designed to provide the dental professional with the most recent evidenced-based protocols and decision tree for treatment or referral. We will discuss surgical and nonsurgical therapies for periodontal diseases. A review of the literature on regenerative therapies and their modalities will be included in this course.

COURSE OBJECTIVES:

- Create protocols to establish a more periodontally aware practice
- Define evidence-based periodontal treatment protocols
- Describe the indications for use of regenerative therapies
- Discuss the methods of use and potential of regenerative therapies
- Examine the biologic basis for bone and soft tissue response



ABOUT THE SPEAKER:

Amy L. Kinnamon RDH MS

Amy’s powerful presentation style engages and excites her attendees while teaching the value of every member of the dental team. Embark on a journey to a new awareness of the field of dentistry in these courses built for interaction, entertainment and high-level learning. Amy will ignite your passion for what you do everyday.

<p>REGISTRATION FORM: - USE ONE FORM PER REGISTRANT</p> <p>Name: _____</p> <p><input type="checkbox"/> RDH <input type="checkbox"/> DDS <input type="checkbox"/> RDA/DA <input type="checkbox"/> STUDENT <input type="checkbox"/> OTHER _____</p> <p>Address: _____</p> <p>CDHA Membership #: _____</p> <p>Phone: _____ E-mail: _____</p> <p>Credit Card # _____ Exp date _____ CVV# _____</p>	<p>SEND REGISTRATION TO: Debbie Phillips, RDH, BS 182 Cameo Drive Danville, CA 94526 925-831-8632 Dubus56@aol.com CREDIT CARDS NOW ACCEPTED</p>										
<p>TUITION: <i>Pre Registration by April 6th 2019</i> <i>Walk In (if space available)</i></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"><input type="checkbox"/> CDHA MEMBER \$65.00</td> <td style="width: 50%; border: none;"><input type="checkbox"/> CDHA MEMBER \$85.00</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Potential-member RDH \$95.00</td> <td style="border: none;"><input type="checkbox"/> Potential-member RDH \$115.00</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> DDS \$65.00</td> <td style="border: none;"><input type="checkbox"/> DDS \$85.00</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> RDA/DA/Other \$65.00</td> <td style="border: none;"><input type="checkbox"/> RDA/DA/Other \$85.00</td> </tr> <tr> <td style="border: none;"><input type="checkbox"/> Student \$25.00</td> <td style="border: none;"><input type="checkbox"/> Student \$25.00</td> </tr> </table>		<input type="checkbox"/> CDHA MEMBER \$65.00	<input type="checkbox"/> CDHA MEMBER \$85.00	<input type="checkbox"/> Potential-member RDH \$95.00	<input type="checkbox"/> Potential-member RDH \$115.00	<input type="checkbox"/> DDS \$65.00	<input type="checkbox"/> DDS \$85.00	<input type="checkbox"/> RDA/DA/Other \$65.00	<input type="checkbox"/> RDA/DA/Other \$85.00	<input type="checkbox"/> Student \$25.00	<input type="checkbox"/> Student \$25.00
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<p>Please list component affiliation: _____</p> <p>ALL CANCELLATIONS MUST BE MADE BY THE EARLY REGISTRATION DEADLINE AND A 25% ADMINISTRATION FEE WILL APPLY. NO REFUNDS AFTER THAT DATE. FOR PAYMENT BY CREDIT CARD PLEASE EMAIL FORM TO DUBUS56@AOL.COM</p>											

**PLEASE MAKE
CHECK PAYABLE TO:
MDDHS**