Complete Denture Update Course

Grand Hyatt Atlanta- In Buckhead
May 21-22, 2010
Atlanta, GA

Course Overview

You will learn:

1. The effects of edentulism relating to patients' overall health;
2. Important aspects of the patient examination and classification;
3. 'Hands-on' evaluation of relevant anatomy and physiology;
4. Functional impression making and denture laboratory techniques;
5. Treatment options for implant-supported dentures;
6. Concepts of denture occlusion and esthetics.

***Registration Fees:** $795 per person for ACP Members, $895 per person for Non-Members
Residents may attend at a reduced rate of $395 per person.

*All registrations received after May 7 will be subject to a $50 increase in fee

Location
Grand Hyatt Atlanta- In Buckhead
3300 Peachtree Road, N.E.
Atlanta, GA 30305

Group Rate: $139 single/double exclusive of applicable taxes, please call 800-233-1234 or 404-237-1234 to make a reservation. A limited quantity of rooms is being held on a first come first serve basis, deadline to reserve group rate is April 29, 2010.

Continuing Education Credit
This course has been approved for 13.5 credit hours. The American College of Prosthodontists (ACP) is an ADA-CERP recognized provider of continuing education.

The ACP is designated as an approved PACE Program Provider by the Academy of General Dentistry. The formal continuing education programs of this program provider are accepted by AGD for Fellowship, Mastership and membership maintenance credit. Approval does not imply acceptance by a state or provincial board of dentistry. The current term of approval extends from 10/19/06 to 10/18/10.

Program Agenda

Course Director:
Frank Lauciello, DDS, FACP
Ivoclar Vivadent, Inc.

Friday, May 21

7:00-7:45 am:	Registration and Continental Breakfast
8:00-8:30am:	Introductions
8:30-9:15am:	**Relationship between Edentulism and Systemic Health** David Felton, *DDS*, *MSD*, *FACP* *University of North Carolina*
9:15-10:00am:	**Oral Exam, Dental History, Medical Records, ACP Edentulous Classification, Tissue Conditioning** Lillian Mitchell, *DDS*, *FACP* *University of Alabama*
10:00-10:15 am:	Break
10:15-11:30 am:	**Anatomy and Physiology of Impression Making for the Edentulous Patient with Hands-On Outlining of Casts** Frank Lauciello, *DDS*, *FACP* *Ivoclar Vivadent, Inc.*
11:30am-12:00 pm:	**Functional Impressions** David Felton, *DDS*, *MSD*, *FACP* *University of North Carolina*
12:00-1:00pm:	Lunch (on your own)
1:00-2:00pm:	**Pouring Impressions, Cast Preparation, Impression Tray Fabrication, Denture Duplication** Robert Kreyer, *CDT* *Kreyer Dental Prosthetics*
2:00-2:45pm:	**Tools of Communication** Frank Lauciello, *DDS*, *FACP* *Ivoclar Vivadent, Inc.*
2:45- 3:00 pm:	Break
3:00- 3:45pm:	**Cast Analysis, Denture Base Fabrication, Wax Rim Fabrication, Mounting Casts** Robert Kreyer, *CDT* *Kreyer Dental Prosthetics*

3:45- 4:30pm: **Denture Tooth Characterization Following the Concepts of Dentogenics**
Frank Lauciello, *DDS*, *FACP*
Ivoclar Vivadent, Inc.

4:30-5:00pm: Wrap up discussion

Saturday, May 22

7:00-7:45am: Continental Breakfast

8:00-9:30am: **Implant Retained Overdenture**
David Felton, *DDS*, *MSD*, *FACP*
University of North Carolina

9:30- 10:00am: **Implant Restorative Options- Open Discussion**
R. Kreyer, *CDT*; F. Lauciello, *DDS*, *FACP*; D. Felton, *DDS*, *MSD*, *FACP*; L. Mitchell, *DDS, FACP*

10:00-10:30am: Break

10:30- 11:15am: **Setting Teeth, Wax Try In, Processing, Insertion, Denture Adhesives**
R. Kreyer, *CDT*; F. Lauciello, *DDS, FACP*; D. Felton*, DDS, MSD, FACP*; L. Mitchell, *DDS, FACP*

11:15am-12:00pm: **Tricks and Tips for Fabrication and Processing Implant Supported Fixed and Removable Denture Restorations**
Robert Kreyer, *CDT*
Kreyer Dental Prosthetics

12:00-1:00pm: Lunch (on your own)

1:00-2:15pm: **Denture Occlusion with Emphasis on Lingualized Occlusion**
Lillian Mitchell, *DDS*, *FACP*
University of Alabama

2:15-3:00pm: **Denture Esthetics**
David Felton, *DDS*, *MSD*, *FACP*
University of North Carolina

3:00-3:30: Wrap up discussion

Registration Information

3 WAYS TO REGISTER

WEB: www.prosthodontics.org

MAIL: ACP 5198 Eagle Way Chicago, Illinois 60678-5198

FAX: (312) 573-1257

Please call the ACP at 312-573-1260 if you have any questions.

Web Registrations
If you decide to register online please email any special meal requests/food allergies or assistance required for a disability as defined by the American Disabilities Act to education@prosthodontics.org a staff member of the ACP will contact you to follow up.

Meals
Continental breakfast and light refreshments will be provided; lunch will be on your own.

Dress Code
Business Casual

CANCELLATION POLICY:

All cancellations are subject to a $50 processing fee. Full refunds for registration minus the $50 processing fee will be given only if written notice of cancellation is received 30 days prior to the course. A 50 percent refund will be given if written notice is after 30 days, up until one week prior to the course. No refunds will be given within one week prior to a course; therefore “no shows” will not be eligible for a refund. The ACP is not responsible for travel expenses or penalties under any circumstances. In the event of a cancellation by the ACP, all registrants will receive a full refund of any registration fees paid. Notice of cancellation should be made in writing and sent to the ACP by e-mail to education@prosthdontics.org or fax to (312)-573-1257.

AMERICAN COLLEGE OF PROSTHODONTISTS

Complete Denture Update Course
May 21-22, 2010
Atlanta, GA

HOW TO REGISTER:

- Web: www.prosthodontics.org
- Mail: ACP 5198 Eagle Way Chicago, IL 60678-5198
- Fax: (312) 573-1257

*All registrations received after May 7 will be subject to a $50 increase in fee

ATTENDEE INFORMATION (Please print clearly.)

First Name MI Last Name

Organization or Institution

Address

City State Postal Code, Country

Phone Fax

Email

***COURSE REGISTRATION FEES**

☐ Member: $795 ☐ Non Member: $895

☐ Resident/Student: $395 ☐ Dental Tech/Staff: $495

MEALS

☐ Vegetarian

☐ Kosher

☐ ***Special Needs-*** *If you have a disability as defined by the American Disabilities Act that requires special needs, accommodations or requirements please check the box and you will be contacted by a staff person.*

METHOD OF PAYMENT

☐ Check enclosed (Please make check payable to American College of Prosthodontists)

☐ Visa ☐ MasterCard ☐ American Express

Card No. Exp. Date

Card Holder Signature