



TEXAS AGD MASTERTRACK (LECTURES JUNE 23-26 2011)

ON-SITE/IN-OFFICE VERIFICATION OF COURSE CREDIT

**Electives (Technology) – Dr. Paul Feuerstein
Periodontics – Dr. Paul Rindler & Dr. Clint Falk**

AGD APPROVED SPONSOR # **219328**

PARTICIPANT NAME: _____

PRESENTATION DATE: _____

MAJOR CODES (UP TO 48 HRS IN ANY ONE SUBJECT AREA)

Plan to Present	Presented	Subject Code/Category	Classroom	In Office Assignments	Case Presentations	Total Participation Hours
		130 Electives: Laser Therapy, Digital Photography/Radiology, Digital Impression, CAD-CAM, Digital Wax/Smile Design				
		310 Oral & Maxillofacial Surgery: Dentoalveolar Surgery, Bone Grafting/GTR Surgery, Ridge Preservation				
		490 Periodontics: Ridge Preservation, also all perio sub-codes except Splinting				
		550 Practice Management: Computers, Digital/Video Imaging				
		730 Oral Medicine: Digital Radiology, Clinical Diagnosis				

MINOR CODES (UP TO 12 HRS PER SUBJECT AREA)

		010 Basic Science: Anatomy, Microbiology, Dental Materials				
		070 Endodontics: Traumatic Injuries, Cracked Tooth, Endo/Perio Lesions				
		180 Occlusion: TM Disorders using imaging				
		250 Operative (Restorative) Dentistry: Use of matrices in anterior/posterior composite restorations				
		310 Oral Surgery: Pre-prosthetic surg, Implant Surg				
		370 Orthodontics: Surgical Ortho				
		690 Implants: Surgical & Reconstructive Phase Therapy, Implant Surgical Stents, Diagnosis & Trtmt, Implant Placement Surgery				
		730 Oral Medicine: Use of lasers in tx of soft tissue surgery or lesions				
		780 Esthetics/Cosmetic Dentistry				

		Total Hours	20	20	8	48
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Verification Code: _____

PROTOCOL ASSIGNMENTS:

- 1) Rindler/Falk Perio Assignment: Show perio related procedure using techniques and/or materials discussed: _____
- 2) Feuerstein Electives Assignment: Show a technique, instrument or high tech application that you use. Give pros and cons with comparisons or alternatives. _____

PROPER CASE DOCUMENTATION/RECORD KEEPING MAINTAINED:

- | | |
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| <input type="checkbox"/> 1. Necessary radiographs & Photographs
<input type="checkbox"/> 2. Patient Consent Forms/Photo Consent Forms | <input type="checkbox"/> 3. Treatment rendered materials, methods, etc.
<input type="checkbox"/> 4. Medical/dental histories |
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ON FILE

Signature