

The Second Annual Local Dental Health Forum

~November 2nd 2007~

The Mount Baker Dental Hygienists' and Mt. Baker District Dental Societies are proud to again partner and present a potpourri of speakers that will engage the entire dental office team. The speakers are specialists in their fields and are dedicated to education and excellence. In providing us with new information and updates on current topics, the majority of the speakers have graciously donated their time and expertise to provide us with valuable information that can be implemented immediately into our daily practices. The line up of speakers is in, and we are excited to present another great opportunity to learn together, build office team excellence and network with other dental professionals in Whatcom, Skagit and Island and San Juan Counties.

“The Indications and Contraindications of Nitrous Oxide Use”

presented by Dr. Ashoka Subedar DMD, PS 8:45-9:45am

“Take It to Heart – Cardiology vs. Dentistry”

presented by Dr. Phillip Chen DDS -9:45-Noon

◀EMERALD BAY CATERED LUNCH (INCLUDED) NOON TO 1PM▶

”All You Want to Know About Perio”

presented by Dr. Paul Zosel DDS 1:-2:00pm

“Who, What, When, Guidelines For Initiating Orthodontic Treatment”

presented by Dr. David Cummins DDS, MS~ 2-3pm(

“If This Is Bone Loss, It Must Be Periodontal Disease” 3-5pm

Dr. Hester Rumberg RDH, DDS, Board-Certified Oral and Maxillofacial Radiologist

St Luke’s Community Health Center 3333 Squalicum Pkwy, B’ham, WA 98225

~Registration and Continental Breakfast 8-8:45am~ 7CEU’s Total Available

\$75.00 per person (includes morning cont’l breakfast and lunch)

Please make checks payable to **MBDHS** (Dental Hygienists) and send with registration to P.O Box 28817 Bellingham, WA 98227

For more information, contact Sandra Carlson, 360-715-9219, thecarlson4@netzero.net

Register The Following To Attend The Dental Forum Nov. 2, 2007:

Name _____ position _____
 Name _____ position _____
 Name _____ position _____
 Name _____ position _____
 Name _____ position _____
 Name _____ position _____

From the Office of Dr.(s) _____



Total # Attending _____ x \$75.00= \$ _____ is enclosed

***Legible Email Address Necessary for Confirmation

Save the Date! We Look Forward to Seeing You There!