

2016 CE and Networking Event Hosted by the Minneapolis, Saint Paul and Student Districts along with the Minnesota Dental Association

Thursday, September 29, 2016 ♦ 5:00 p.m.—9:00 p.m.

University Of Minnesota
McNamara Alumni Center

200 Oak Street SE, Minneapolis, Minnesota 55422

5:00 p.m. Social/Networking Reception ♦ 6:00 p.m. Program and Lecture ♦ 7:15 p.m. Student Networking

“Mini, Maxi and Mid-Size Implants: What? Where?”

Course Description

Implant therapy has become the standard and often most desirable treatment choice to replace missing teeth or stabilize loose dentures. Implant treatment options range from a single tooth implant and crown to full arch immediate bridges on four to eight implants. Our patients have ranged from the early teens to the mid 90s. In addition to the variety of patients and needs, there are now a huge variety of implants to choose from. Successful results based on good diagnosis, treatment planning, surgical skills, and documented research should be everyone’s goal.

Program Learning Objectives

- Understand the variety of implant modalities available.
- Understand the indications and limitations of different implants.
- Know the training and surgical skills needed for implant placement.
- Be able to treatment plan dental implants for predictable success.

Drs. Scott Lingle and Joe Trowbridge are both full time practicing dentists at St. Paul Dental Center in St. Paul and at the Dental Implant Center in Golden Valley. In addition to general dentistry, they provide referral implant surgery services to dentists throughout the state. They are the co-founders of the Great Lakes Implant Institute and have been faculty at the Rocky Mountain Dental Institute. Dr. Lingle also teaches at the Triangle Implant Institute in North Carolina. Drs. Lingle and Trowbridge are both graduates of the University of Minnesota School of Dentistry and are both Fellows in the International Congress of Oral Implantologists. Dr. Lingle is a past president of the St. Paul District and the Minnesota Dental Association. Dr. Trowbridge is a past treasurer of the St. Paul District and current treasurer of the Pierre Fachard Academy.

One continuing education credit will be given.



Drs. Joe Trowbridge & Scott Lingle

Notice to Practicing Dentists —

Advice you can share with new D.D.S. on their future search.

This is your opportunity to network, make one-on-one contacts with and meet with the dental students from the U of M.

A speed networking event will be held at 7:15 p.m. for all attendees.

Looking for an associate or dental partner?

**Bring your business cards along!
Help a young future D.D.S.**

REGISTRATION INFORMATION ON THE REVERSE SIDE

Registration Form /or Online Registration Available

<https://www.mndental.org/studentnetworking/>

**Continuing Education and Networking Event
with Drs. Joe Trowbridge and Scott Lingle
Thursday, September 29, 2016 ♦ 5:00 p.m.—9:00 p.m.
University of Minnesota, McNamara Alumni Center, Minneapolis**

Social Reception

*A variety of chef specially-created butler-passed and buffet hors d'oeuvres
to be enjoyed during the networking social reception with the dental students.
Cash Bar — Everyone will receive one (1) complimentary beverage ticket with registration.*

*Please register early. Payment must accompany your reservation.
No refunds after noon on Monday, September 26, 2016*

Name (Please Print): _____

Guest/Staff Name: _____

E-mail Address: _____

Mailing Address: _____

City/State/Zip: _____

Telephone Number: (_____) _____

Per Person	ADA	Dental	Guest/Staff	ADA
Program Event Fee:	Member	Student	Member	Non-Member
_____	\$40.00	_____	\$45.00	_____
		\$10.00		\$80.00

Dental Students: Upon arrival to the event, you will be refunded the entire registration fee.

I would like to sponsor a dental student at the full cost for \$40.00, the ADA member cost. Number of students: _____

I would be interested in participating in the speed networking event with the dental students: _____

I am currently looking for an associate or dental practice partner: _____

Total Payment Enclosed: _____

MAIL TO: Minneapolis District Dental Society

2475 - 15th Street NW, Suite C, New Brighton, MN 55112-5606

Telephone Number: 651.631.9845

FAX TO: 651.631.9846 (if paying by credit card)

Online Registration Available:

<https://www.mndental.org/studentnetworking/>

Check Made Payable to the MDDS is Enclosed.

Credit Card # _____
(Only Visa or MasterCard Accepted)

Expiration Date: _____

Zip Code of Billing Address for Credit Card: _____

Card Member Name: Authorized Signature: _____

Please Check All That Apply:

- A. I am a Program Director.
- B. I am a General Dentist. Metro Rural
- C. I practice in a Large Group Practice. Metro Rural
- D. I am a Specialist. Specialty: _____
- E. I am continuing in dental education in a Residency Program.
- F. I am a Student looking for a metro position.
- G. I am a Student looking for a rural position.