

Garden State Periodontal and Implant Study Group

Marc Goldman, DDS
David Goteiner, DDS
Lucian Kahan, DDS
Steven Scrivo, DMD
David Stein, DMD

Mark Terry, DDS
Jerald Rosenberg, DMD
Tat Chiang, DMD
Paul Barabas, DDS

*The Garden State Periodontal and Implant Study Group
In Association with the Department of Dentistry, Morristown
Memorial Hospital*

Invites you to attend:

An Afternoon of Periodontics in the New Millennium for the Dental Hygienist

Moderated by Dr. Steven Scrivo

The Program will include the following topics and speakers:

Welcome
Communication
Advanced Root Planing
Non-Surgical Therapy
Risk Factors
Oral Effects of Medication
New Methods of Antibiotic Delivery
Surgical Crown Exposure
Regeneration
Root Coverage
Mucogingival Procedures
Esthetics
Ridge Preservation
Periodontal Disease and Systemic Health

Mrs. Donna Jenkins
Dr. Marc Goldman
Dr. David Stein
Dr. David Stein
Dr. Tat Chiang
Dr. David Goteiner
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Dr. Jerald Rosenberg
Dr. Tat Chiang
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Dr. Mark Terry
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Dr. David Goteiner
Dr. Paul Barabas

We appreciate the kind support of Pfizer, the makers of Listerine oral rinse.

Approved for 4 Hours of Continuing Education (pending)

Date: Wednesday, May 4, 2005
Place: Morristown Memorial Hospital Auditorium (For directions please call your host)
Time: 12:30 p.m. – 1:00 p.m. Registration & refreshments
1:00 p.m. – 5:00 p.m. Presentation
Tuition: \$35.00

The Garden State Periodontal and Implant Study Group has been in existence for over 15 years. We are a close-knit collection of Periodontists who share similar philosophies of patient care and management. We are dedicated to improving communication with our referring colleagues and mutual continued professional growth.

RVSP to your host by April 18, 2005

If additional Hygienists would like to attend, please copy this invitation, fill out and return to your host.

Doctor David Goteiner
2A North Rd
Chester, NJ 07930-2308

Please return the registration form along with a check to your host.

----- (cut on line) -----

- ☐ YES, I will attend the seminar
☐ NO, I cannot attend. Please keep my name on your mailing list.

Name: _____

I work primarily at the office of Dr _____

Office Address: _____

Office Telephone: _____ Office Fax: _____

Your E-mail: _____