

SAID 55TH ANNUAL SEMINAR

CONTINUING EDUCATION ATTENDANCE VERIFICATION FORM

PLEASE NOTE: In order to receive credit for this program, this form must be emailed to **said@saident.org** You may print, fill and scan this form or complete it electronically. Forms not turned in will result in no credit being awarded. To ensure that proper credit is awarded, please be sure to complete the demographic information at the end of this form. You should only claim credit hours commensurate with the extent of your participation in this activity. Lack of participation will result in a deduction of credits awarded. To receive credit, please fill in the verification code and check each session attended.

Thursday, November 5, 2020	Attended (X)
8:00 AM - 8:45 AM - When You Look At Me, What Do You See? <i>Matthew Schwab</i> VERIFICATION CODE: 750 - _____	<input type="checkbox"/>
8:45 AM - 10:00 AM - Dental Aerosols and Disease Transmission <i>Gaylene Baker, RDH, BSDH, MBS</i> VERIFICATION CODE: 148 - _____	<input type="checkbox"/>
10:30 AM - 11:30 AM - Pearls of Wisdom - Learn from Each Other <i>David Itzkoff, DDS</i> VERIFICATION CODE: 750 - _____	<input type="checkbox"/>
11:30 AM - 12:40 PM - Coping Strategies for Dental Professionals Regarding Covid-19 <i>James Casadia, LCSW, LCADC</i> VERIFICATION CODE: 550 - _____	<input type="checkbox"/>
1:25 PM - 3:00 PM - Dental Material Considerations for the Patient with Special Needs <i>Aous Abdulmajeed, BDS, PhD</i> VERIFICATION CODE: 250 - _____	<input type="checkbox"/>
3:00 PM - 4:00 PM - Results from Study on Oral Care Aides in Skilled Nursing Facilities <i>Kimberly Ward</i> VERIFICATION CODE: 750 - _____	<input type="checkbox"/>
2:45 PM - 3:45 PM - Breakout Rooms	<input type="checkbox"/>
TOTAL HOURS ATTENDED THURSDAY (UP TO 8 HOURS)	



SPECIAL CARE ADVOCATES IN DENTISTRY (SAID)
 Nationally Approved PACE Program
 Provider for FAGD/MAGD credit.
 Approval does not imply acceptance by any regulatory authority
 or AGD endorsement.
 6/1/2020 to 5/31/2023
 Provider ID # 210875

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PLEASE NOTE: In order to receive credit for this program, this form must be emailed to **said@saiddent.org** You may print, fill and scan this form or complete it electronically. Forms not turned in will result in no credit being awarded. To ensure that proper credit is awarded, please be sure to complete the demographic information at the end of this form. You should only claim credit hours commensurate with the extent of your participation in this activity. Lack of participation will result in a deduction of credits awarded. To receive credit, please fill in the verification code and check each session attended.

Friday, November 6, 2020	Attended (X)
8:00 AM - 9:10 AM - Regenerative Dentistry - The Future of Dentistry? <i>Zhao Lin, MS, MMSc, PhD</i> VERIFICATION CODE: 490 - _____	<input type="checkbox"/>
9:25 AM - 10:20 AM - Exploring Medicare Dental Coverage for Vulnerable Patients <i>Shirley Spater, DMD</i> VERIFICATION CODE: 550 - _____	<input type="checkbox"/>
10:35 AM - 12:15 PM - Literature Review <i>Mannie Levi, DDS and Douglas Veazey, DDS</i> VERIFICATION CODE: 750 - _____	<input type="checkbox"/>
1:45 PM - 2:40 PM - How I Use A Weighted Blanket in the Dental Operator <i>Kristin Compton, DMD</i> VERIFICATION CODE: 750 - _____	<input type="checkbox"/>
4:00 PM - 4:45 PM - Breakout Rooms	<input type="checkbox"/>
TOTAL HOURS ATTENDED FRIDAY (UP TO 6 HOURS)	

Participant Credentials:

DDS DMD RDH CDA Other (please specify): _____

I certify that I attended the sessions marked and that the number of credits claimed is accurate.

 Signature Last 4-digits of SS#: XXXX-XX-_____
(Required)

First Name: _____ MI: _____ Last Name: _____
Please Print

Email: _____ Work Personal (check one)

Telephone Number: (_____) _____ Work Home Cell/Other (check one)