**ESDHA Seminar for Wednesday, February 7, 2018 6 - 9 pm**

**“Diagnosis and Treatment of Recession”**

**Presented by Peter Leone, DDS, MS**

**Location: Sycamore Hills Golf Club, 48787 North Ave, Macomb, MI 48042**

Dr. Peter Leone was born in Detroit and raised in Sterling Heights. He attended the University of Detroit School of Dentistry, and graduated with his dental degree in 1991. Dr. Leone then attended a periodontal specialty program at The Ohio State University. He graduated in 1996 with a Specialty Certificate in Periodontics and a Master of Science Degree. In 1997, he became a Diplomate of the American Board of Periodontology, making him a Board Certified Periodontist. Dr. Leone has had academic appointments as a clinical instructor at the University of Detroit and The Ohio State University. Dr. Leone served as a member of the Michigan Periodontal Specialty Board, as a Clinical Examiner, and also served on the Michigan Periodontal Association Peer Review Board. He is currently an active member of the Michigan Dental Association’s State Peer Review board. Dr. Leone maintains private practice locations in St. Clair Shores, Sterling Heights, and New Baltimore. He enjoys hunting, fishing, team sports and spending time with his wife and four children.

**Course Purpose and Mission:**

Check-in: 5:30 – 6 pm

Dinner served starting at 6 pm

ESDHA Business Meeting: 6:15 pm

Dr. Peter Leone Presentation 7-9 pm

**Registration form and payment is due BEFORE January 20, 2018**

Seminar Fee: ADHA Member - $30 Non ADHA Member - $60 Student - $15

**Please make check payable to “ESDHA”**

\*\***2 CEUs and meal is included with registration fee**\*\*\*

Invite your friends and co-workers to attend with you!

**The Diagnosis and Treatment of Recession lecture** will provide the definition, classification, and documentation of recession defects. Various etiological factors associated with recession and various soft tissue grafting procedures will be shared. **This course provides 2 CEUs.**

**ESDHA Registration form for Wednesday, February 7, 2018 6 - 9 pm**

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Please select your meal preference.

\_\_\_\_Chicken Marsala, \_\_\_ Almond crusted tilapia, \_\_\_ Grilled chicken salad and soup

Name: ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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What is your profession? RDH RDA/CDA DDS/DMD Student Other \_\_\_\_\_\_\_

What is your professional license number/ID? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you a member of ADHA? YES or NO

If YES, what is your ADHA number? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If NO, why haven’t you become a member of the ADHA? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mail Check (Please make check payable to ESDHA and Registration form to:**

**Susan Radzom, RDH; 69870 Ferguson St., Richmond, MI 48062**

## Any questions? Please email us at esdhaeditor@gmail.com