

Over The Shoulder: Anterior Aesthetics

Information
and techniques
that can be
put into
practice the
first day back
in your office!



Dentistry by
Dr. Miller.

Restorations
by Sundance
Dental Labs.



8010 east mcdowell road, suite 223
scottsdale, arizona 85257
480.429.3543
fax: 480.429.3697
www.sundancedentalab.com

Reserve your space today!
Attendance is limited!

Sundance Dental Laboratory has been designated an approved Program Provider by the Arizona constituent of the Academy of General Dentistry. This Program Provider's formal CDE programs are accepted by the AGD for membership maintenance. Fellowship and Mastership credits. The current term of approval extends from October 1, 2004 to September 30, 2007.

2006 seminar series

Over The Shoulder: Anterior Aesthetics

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course outline

- Watch the preparation and temporization of a ten-unit case in the morning and the bonding of a ten-unit case in the afternoon.
- Learn the proper preparation techniques that will provide consistent quality results.
- Learn how to make beautiful temporaries in 15 minutes.
- Discover which restorative and impression materials will give you the best result and why.
- Learn methods for making cosmetic treatment affordable for your patients.
- Learn communication tips with the lab for a successful case.

date & time

April 7, 2006
8:30am-5:00pm
Sundance Dental Laboratory
8010 East McDowell Road, Suite 223
Scottsdale, AZ 85257
480.429.3543

registration fee

\$950 - lunch is included

credits

7 AGD CE credits

rsvp

Please contact Sundance
by March 24, 2006
480.429.3543
Fax: 480.429.3697
sundancedl@aol.com

Dr. Edward Miller

Dr. Edward Miller of Aesthetic Dentistry of Scottsdale will be presenting this seminar. Dr. Miller is a senior clinical instructor at The Las Vegas Institute for Advanced Dental Studies. Dr. Miller has presented more than 40 over-the-shoulder seminars.



SUNDANCE
DENTAL LABORATORY



Yes, I/we will join you for this very special lecture featuring one of the most respected names in contemporary aesthetics.

Name: _____

Phone: _____

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Address: _____

City: _____

State: _____

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Detach and mail this registration form to:

Sundance Dental Laboratory
8010 East McDowell Road, Suite 223
Scottsdale, Arizona 85257

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