

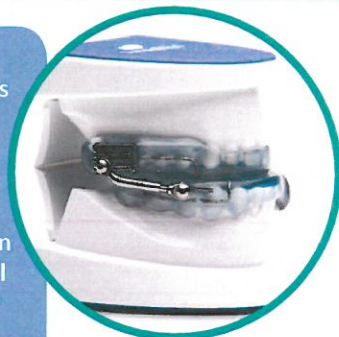


# SLEEP DISORDER SEMINAR

## Recognizing ALL Sleep Disorders In your Dental Practice

Guest Speaker Ron Perkins, DDS, MSD

After receiving a B.S. degree from Oklahoma State University, Dr. Perkins graduated from Baylor University College of Dentistry with numerous honors, including the Scholastic Honors Award for graduating in the top of his class, and the coveted Crown and Bridge Dentistry Award for clinical excellence. He continued at Baylor for his Orthodontic Specialty Degree. He then spent two years as the orthodontist for the midshipmen at the US Naval Academy, before starting in private practice. For the past 16 years Dr Perkins has been practicing as a TMJ, Headache and Sleep Disorder Specialist and you can visit his website [www.perkinstmjsleep.com](http://www.perkinstmjsleep.com) which is dedicated to helping patients understand the true cause of sleep breathing problems.



- Course will provide Dentists the ability to easily recognize many more patients with SLEEP DISORDERS including Sleep Apnea.
- Dentists will learn multiple symptoms technique to aid in your diagnosis and treatment of ALL SLEEP DISORDERS.
- Dentists will learn how to get the best Sleep Studies done as well as the easiest way to get paid by medical insurance.
- You will leave this lecture with a much better understanding of ALL Sleep Disorders and be able to start the next day improving the quality life of your patients, as well as increasing the revenue of your practice.

Date and Time: Friday, February 8, 2019, 9 AM - 1 PM

Location: SomnoMed North American Headquarters  
6513 Windcrest Drive, Suite 100, Plano, TX 75024

Tuition: No cost to registered dentist or physician. Limit two entries per registration.  
Any additional associate \$199 (Must be part of current registration)  
Any additional staff \$99

\*We require a one week notice to cancel; late cancellations or no shows will have a \$50 fee charged to their MCS Account.

To register, complete this form and fax to 310.848.1338 or email it to [orders@MCSdental.com](mailto:orders@MCSdental.com)

Name: \_\_\_\_\_ Office Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Signature: \_\_\_\_\_

Please call 310.848.1329 to pay and register additional associates or staff.