NITROUS OXIDE CE COURSE
SATURDAY, OCTOBER 4, 2014

Sponsored by
The University of Cincinnati Blue Ash College
Dental Hygiene Program

Presented by
Jerome McMahon, DDS

Cost
Included in the course fee of $200.00 is 8 hours of CE credit and instructional materials.

CE Credits/ Course Number
This course is approved by the OSDB for 8 hours. You must be on time, stay for the entire instructional period and pass the course test to receive these credits. Note that 8 hours is the time prescribed by the Board. This course number is UCBA 2014-01.

Registration Deadline
Complete registrations must be received by Monday September 15, 2014. Course maximum is 30 participants (minimum 15).

Location/Parking
The course will be held at UC Blue Ash College, 9555 Plainfield Road, Blue Ash, OH 45236. Registration will be in the reception area of the Dental Hygiene Clinic located in Walters Hall. Parking is available in white–lined stalls only. Arrive early to allow time to park etc. Directions can be found at http://www.ucblueash.edu/maps/index.html or www.mapquest.com.

<table>
<thead>
<tr>
<th>Times</th>
<th>Saturday, October 4, 2014</th>
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<tbody>
<tr>
<td></td>
<td>Full course time</td>
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<tr>
<td>Group A</td>
<td>6:30am-11:00am</td>
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<tr>
<td>Group B</td>
<td>8:30am-1:00pm</td>
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Only bottled water and very light snacks will be available at registration so plan accordingly.

Please choose your group/time and we will make every effort to accommodate your request. If you want to be in a group with other participants, send in the registrations together and we will attempt to put you together. However, we cannot guarantee you will be in the group you choose. If you cannot switch groups/times, please indicate that on the registration form. That may preclude you from participating.
Withdrawal and Refund Policy
An administrative fee of $50.00 will be charged for any cancellations up to September 15, 2014. No refunds will be granted after September 15, 2014. Full refunds will be made in the event of a cancellation by UCBA. “No shows” will not be given refunds. Registrations will be processed on a first-come, first-served basis. Registration is limited to the first 30 complete/paid registrations.

Participation
You will be required to receive nitrous oxide. If you have a medical condition which contraindicates the use of nitrous oxide, please let us know PRIOR to registering.

Textbook/Reading
You MUST purchase the required text book on your own and it may be shared. It will not be available in the UC Blue Ash Bookstore. You can go to www.us.elsevierhealth.com or www.amazon.com to purchase.
Handbook of Nitrous Oxide & Oxygen Sedation, 3rd Edition
By Morris Clark, DDS, and Ann Brunick, RDH, MS, ISBN: 978-0-323-04827-9

Course Materials
The course director will be sending course materials by email to each participant prior to the seminar. Please provide an email address so we may get the materials to you in a timely manner. Course participants MUST complete the required reading assignments prior to the course. A self-study test over the reading will be included. The open book test must be completed and brought to the course. We will collect them at registration. You must obtain a 75%. Retakes will be permitted.

Clinic Attire
Please wear clinic attire (uniform or street clothes and lab jacket) and clinic shoes.

Proof of Current CPR and 2014 License
Everyone must send a copy of their current CPR certification (be sure you have signed the card) and their 2014 Ohio RDH license with the completed application. Go to www.dental.ohio.gov for information on Permissible Practices Documentation for Dental Hygienists and Permissible Practices Documentation for Dental Assistants.

Emergency Contact
We will provide a contact number for you closer to the time of the course. If there is a problem, you can call the number beginning the morning of the course.

If You Have Questions
Contact Susan Scott (email preferred) at scottso@ucmail.uc.edu and put “Nitrous Oxide CE” in the Subject line or call (513) 745-5635.
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Registration Form

Please complete and include a check for $200.00, along with documentation of current CPR and Ohio RDH licensure and return by September 15, 2014.

CIRCLE A or B depending on whether you “prefer” or “must have”:

I prefer group A or B.             I must have group A or B.

PARTICIPANT'S NAME _________________________________________ Circle: RDH  CDA  DA

HOME ADDRESS ___________________________________________________________

CITY __________________________ STATE ____________ ZIP CODE _____________

HOME PHONE ______________________ BUSINESS PHONE ____________________

CELL PHONE _______________________

E-MAIL ADDRESS __________________________________________________________

Registration will NOT be processed without payment in full.

Payment  ___$200.00 (check made payable to UC Blue Ash College)

RDH Licensure Certification  ___Copy of current license/certificate – RDH only

CPR Certification  ___Copy of unexpired card with your signature
                                   (both RDH and CDA/DA)

Please return to:  UC Blue Ash College Dental Hygiene Program
                      Susan Scott
                      9555 Plainfield Road
                      Blue Ash, OH 45236-1906