

Oral Sedation

Stanley F. Malamed, DDS

Sponsored by HealthFirst

Tuesday, October 10, 2023

5:45-6:45pm • Registration & Exhibitors

6:50-7:15pm • Announcements & Dinner | **7:30-9:00pm** • Speakers

Hilton Sacramento Arden West | 2200 Harvard St • Sacramento

Fear of the dentist is one of our most common fears. Many patients avoid seeking dental treatment because of these fears. Children are no exception.

In this program, Dr. Malamed will review the two most commonly employed management techniques for dental fear and anxiety: the oral route of drug administration (e.g., triazolam [Halcion]) and inhalation (N2O-O2).

We will compare their efficacy and safety, as well as their utility in the pediatric dental patient.

Learning objectives:

At the conclusion of this program, the attendee should be able to:

- Name 5 routes of sedative drug administration
- Compare the efficacy and titratability of these 5 routes of drug administration
- Discuss the regimen for use of oral sedation in the dental office
- Describe the technique of administration of N2O-O2

\$85

3 CEU, CORE

Dr. Malamed is a dentist anesthesiologist and emeritus professor of dentistry at the Herman Ostrow School of Dentistry, located in Los Angeles, California, USA. In 1973, Professor Malamed joined the faculty of the University of Southern California School of Dentistry (now the Herman Ostrow School of Dentistry of USC). Dr. Malamed retired from the university in 2013.

Dr. Malamed has authored more than 180 scientific papers and 17 chapters in various medical and dental journals and textbooks in the areas of physical evaluation, emergency medicine, local anesthesia, sedation, and general anesthesia.

This Course Sponsored by



PARKING INCLUDED IN REGISTRATION PRICE!

Who's coming? _____
(include designation)

Telephone: _____ Email: _____

SDDS Member's Name: _____

	SDDS / ADA Member / Staff	Non-Member
Early Price (ends 9/26):	\$85	\$190
Regular Registration (begins 9/27):	\$95	\$190
Late Registration (begins 10/9):	\$99	\$190

Payment Method: Check Credit Card Total Amount: \$ _____

Cardholder Name: _____ Card #: _____ Exp. Date: _____

CVV: _____ Billing Address: _____

Dentists only: I am a participant in the DMD program. Yes No ••• This is the first General Membership Meeting I have attended. Yes No

MEAL SELECTION:

(please list choice after each registrant's name)

- (A) Chicken Marsala with Portobello Mushrooms and Boursin Risotto
- (B) Roasted Eggplant & Veggies, Sautéed Spinach and Himalayan Red Rice



Please fax, scan, or mail form to: SACRAMENTO DISTRICT DENTAL SOCIETY: 2035 Hurley Wy, Ste 200 • Sacramento, CA 95825 • Phone: 916.446.1227 • Fax: 916.447.3818 • www.sdds.org
The Sacramento District Dental Society is an approved CE provider through the Dental Board of California (RP2168) • This course meets the Dental Board of California's requirements for units of CE listed.

Cancellation Policy: Full refund granted less \$25 administration fees, if received in writing 14 days before the class. NO REFUNDS if cancelled within 13 days of the class or for No Shows or registration received after that date. Attendee substitutions OK. By registering for this course/event, I agree to the terms and conditions of this event. Visit sdds.org for full details. PLEASE CALL SDDS WITH ANY SPECIAL DIETARY NEEDS.



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