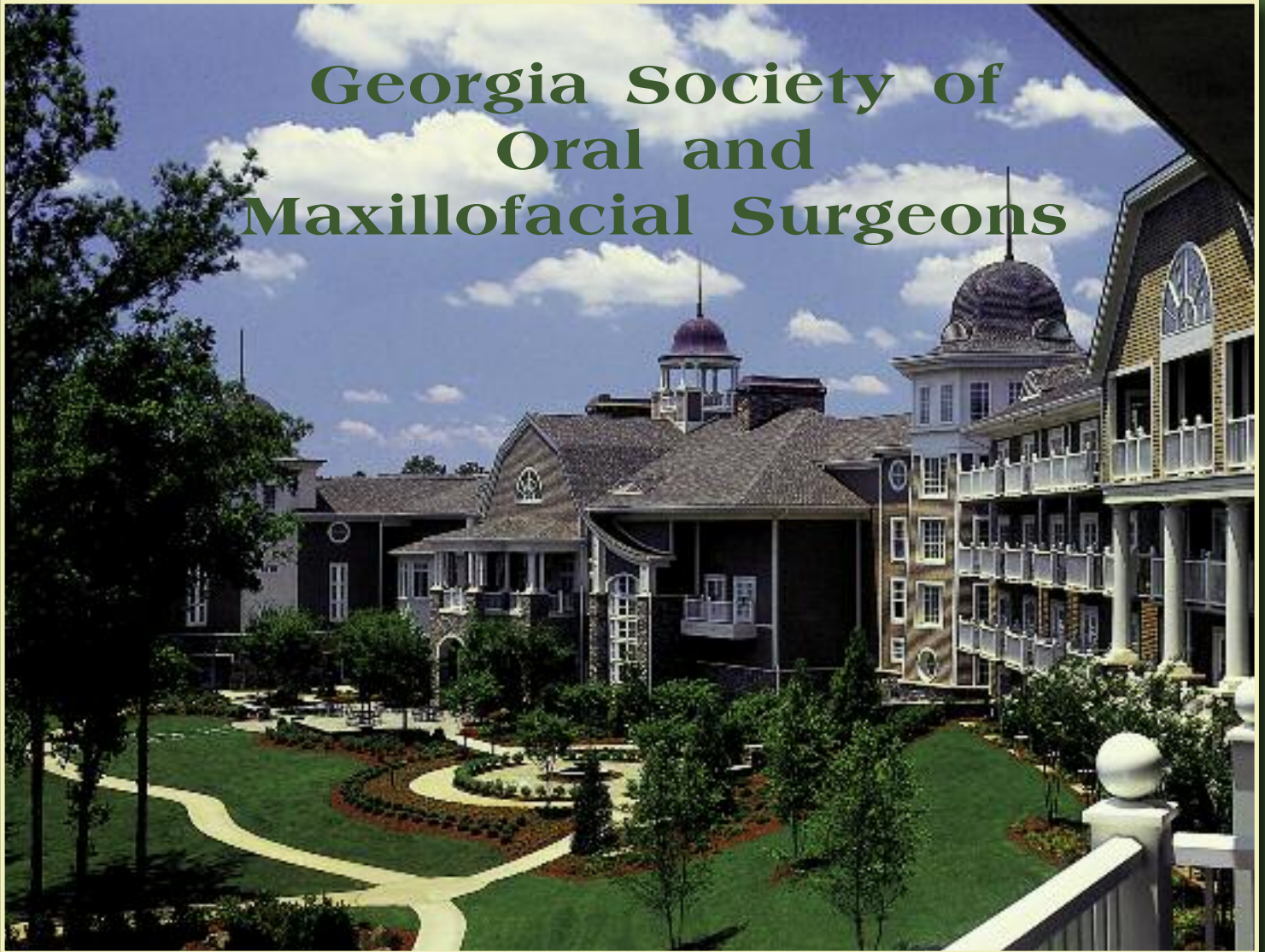
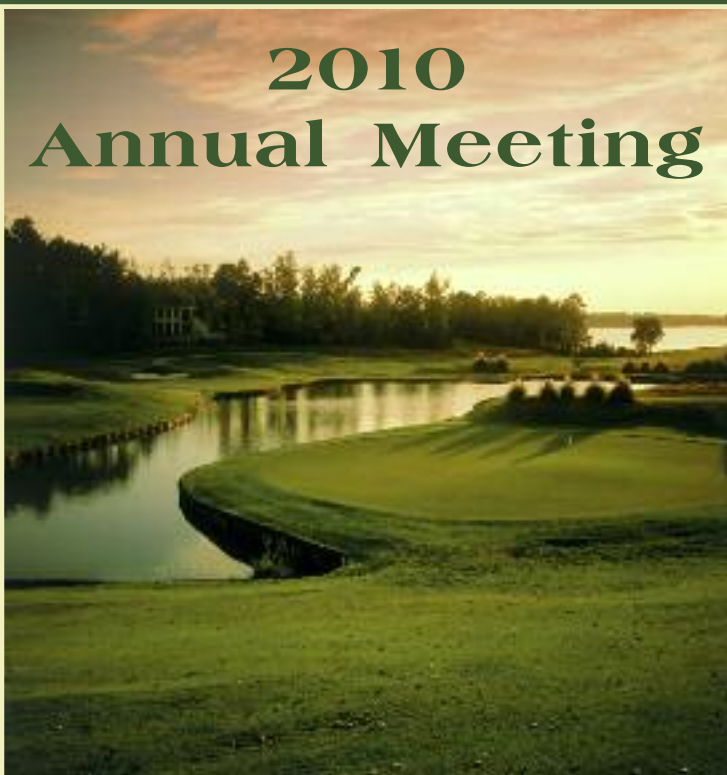


Georgia Society of Oral and Maxillofacial Surgeons



2010 Annual Meeting



**August 20-22, 2010
The Ritz Carlton Lodge at
Lake Oconee
Greensboro, Georgia**

**Featuring
Raymond Fonseca, DMD**

**“Things I Have Learned in
Orthognathic Surgery”**

“Transverse Maxillary Deficiency”

Conference Information

CONFERENCE REGISTRATION

To register for the 2010 Georgia Society of Oral and Maxillofacial Surgeons Annual Meeting, complete the enclosed registration form and mail it along with the appropriate payment to the GSOMS office at 4850 Golden Parkway, Suite B-417, Buford, GA 30518.

HOTEL ACCOMMODATIONS

We have reserved a block of rooms at the Ritz Carlton Lodge featuring several restaurants, a championship golf course, tennis center, indoor and outdoor pools, a full service spa, fitness center, on site cultural and historical center with activities, children and teen programs, water sports, a nearby equestrian center and clay shooting range.

Set on 8,000 wooded acres along the banks of Lake Oconee, the Ritz-Carlton Lodge, Reynolds Plantation draws on local history and tradition. With its spectacular natural settings and gracious Southern hospitality, it's an experience like no other. We encourage all of our members to stay overnight in order to participate in all that the resort has to offer. For the Ritz-Carlton experience, log on to www.ritzcarlton.com.

For hotel reservations, call 706.467.0600. **Deadline for hotel reservation is August 4.** Room rate is \$265 for single/double occupancy. Rooms are limited, so we urge you to respond today.

DIRECTIONS

The Ritz-Carlton Lodge is located just more than an hour from Atlanta. Detailed directions can be located on their website at www.ritzcarlton.com/resorts/reynolds_plantation/ under resort overview. Parking – Valet parking only at \$15 per day.

RESORT AMENITIES

Arrangements for resort amenities can be made by calling the concierge at 706.467.7130.

GOLF

The Ritz Carlton Lodge has several courses for you to choose from. If you are interested in playing golf, please contact the course for green fees and tee times.

Oconee (directly outside the Lodge) 706.467.1200, designed by Rees Jones – wide open fairways, made to be enjoyable for all golfers

Reynolds Landing 706.467.1565, designed by Bob Cupp – most challenging, NOT forgiving

National 706.467.1142, designed by Tom Fazio – huge elevation changes, water features

Plantation 706.467.1135, designed by Bob Cupp – most forgiving, golfer friendly. Great couples course.

ATTIRE

Resort attire is appropriate throughout the conference.

About Our Speaker and Course



Raymond Fonseca, DMD

Dr. Fonseca received his DMD degree from the University Connecticut School of Dental Medicine in 1973 and completed his oral surgery residency at Parkland Memorial Hospital Dallas in 1976. He received his certification from the American Board of Oral and Maxillofacial Surgery in 1978.

Following his postgraduate training, he held the position of assistant professor and associate director of Graduate Education at the University of North Carolina at Chapel Hill. In 1980, Dr. Fonseca joined the faculty of the University of Iowa as associate professor and director of the Graduate Education in the department of Oral and Maxillofacial Surgery.

Dr. Fonseca was chairman and professor of Oral Medicine, Pathology and Surgery at the University of Michigan School of Dentistry from 1982-1989. From 1989 to 2003, Dr. Fonseca was the dean of the University of Pennsylvania School of Dental Medicine. He has published 62 articles, 15 book chapters, 27 abstracts and 7 major books. He is also the editor of the seven

volume text of *Oral and Maxillofacial Surgery* published in July 2000. He was awarded the *Outstanding Educator* award, the *Distinguished Researcher* award, the *Gies* award, The *W. Harry Archer* award and is a fellow of the International College of Dentists.

COURSE OBJECTIVES

Things I Have Learned In Orthognathic Surgery

1. There will be a discussion of the complications and pitfalls in the management of the orthognathic surgical patient.
2. The participant will learn how to manage these complications.

"Transverse Maxillary Deficiency"

1. There will be a discussion of the diagnosis, treatment planning, surgical procedure and post-operative care of the patient with transverse maxillary deficiency.
2. The participant will gain an understanding of the treatment of orthognathic patients in the third, transverse dimension.

This conference has been approved for
6 CE credit hours.

Schedule & Course Outline

Georgia Society of Oral and Maxillofacial Surgeons

August 20-22, 2010 The Ritz Carlton Lodge at Lake Oconee Greensboro Georgia

FRIDAY, AUGUST 20, 2010

4:00 - 6:00 p.m.

Registration

6:30 - 8:00 p.m.

Reception/Dinner (no program)

SATURDAY, AUGUST 21, 2010

7:00 - 8:00 a.m.

Continental Breakfast and Exhibits

8:00 - 10:00 a.m.

“Things I Have Learned in Orthognathic Surgery”
Raymond Fonseca, DMD
Clinical Professor
University of North Carolina
School of Dentistry
Asheville, North Carolina

10:00 - 10:30 a.m.

Break and Exhibits

10:30 a.m. - 12:00 p.m.

Seminar Continues
Raymond Fonseca, DMD
Asheville, North Carolina

12:00 p.m.

Adjournment
Dinner on Your Own

SUNDAY, AUGUST 22, 2010

7:00 - 8:00 a.m.

Continental Breakfast and Exhibits

8:00 - 10:00 a.m.

“Transverse Maxillary Deficiency”
Raymond Fonseca, DMD
Asheville, North Carolina

10:00 - 10:30 a.m.

Break and Exhibits

10:30 - 11:30 a.m.

Business Session

11:30 a.m.

Adjournment



Conference Registration

Georgia Society of Oral and Maxillofacial Surgeons
Annual Meeting August 20-22, 2010
The Ritz Carlton Lodge at Lake Oconee, Greensboro, Georgia

Complete and mail or fax this form with your credit card information or check to the GSOMS office.
Hotel Deadline: Please make your reservation prior to **August 4**. We have limited number of rooms and they will fill up quickly.

Name: _____
(Please print) First Last Degree First Name for Badge

Spouse/Guests: _____
First Name for Badge

Office Address: _____

City/State/Zip: _____

Phone: () _____ **Fax:** () _____

Email: _____

Credit Card: Visa Mastercard American Express
Card Number: _____ **Exp. date:** _____

MEETING REGISTRATION FEES

Registration fee includes: scientific sessions, breakfasts, breaks and exhibits, Friday Reception dinner.

Member	\$250.00	\$ _____
Non-trust Member	\$350.00	\$ _____
Non-Member	\$450.00	\$ _____
Spouse/Guests	\$100.00	\$ _____

(Spouse/Guests are required to pay the registration fee if attending; includes all meals)

TOTAL: \$ _____

Georgia Society of Oral and Maxillofacial Surgeons
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