

2010 Table Clinic Guidelines

What is a Table Clinic?

A Table Clinic is a **5 to 7 minute** tabletop demonstration of an **educational** topic of clinical or practice management interest to dental professionals. As a clinician, you are encouraged to use models, x-rays, charts, and other visual aids. At the end of your presentation, you should invite viewers to ask questions, but keep the question and answer period brief. *Remember, the goal is to repeat your presentation every 5 to 7 minutes.* Table Clinic applications are considered based on the presentation synopses provided; if we determine that your table clinic presentation qualifies for .25 CE credit, you will be given a pre-assigned completion code to provide to your viewers.

When will Table Clinics be held?

The 2010 Table Clinic program will be offered at three separate sessions on Friday, April 23. **In 2010, the table clinics will be re-located to the exhibit floor near the Exhibit Hall Café.** This is to provide a quieter learning environment and to ease traffic congestion on the meeting room level. Please see below for the time periods:

Table Clinic Sessions:

Session A: 9:30 a.m. ó 11:00 a.m.

Session B: 12:30 p.m. ó 2:00 p.m. (*MnDHA students only*)

Session C: 3:30 p.m. ó 5:00 p.m.

MnDHA students will be assigned to present in Session B only. All other applicants may choose to present in either Session A, or Session C, or both. Clinicians will be assigned on a first-come, first-served basis. A confirmation letter will be sent to the primary clinician with your scheduled presentation time.

Rules and Regulations:

Table Clinic presentations are to be educational, not promotional or political, in nature. Promotion or advertisement of a particular product, organization, or agenda is not allowed. There will be no solicitation of names for drawings, petitions, mailing lists, or any other purpose. Table clinics must begin and end at the posted times. Table clinicians must remain behind their tables at all times during their presentations and may not use motion pictures, heavy office equipment, amplified sound devices, or actual patients. A maximum of three clinicians will be allowed per table. Presenting a table clinic at the Star of the North Meeting is an opportunity granted by the MDA, and inclusion of any presentation as part of the Table Clinic program at the Star of the North Meeting is at the discretion of the MDA Scientific Session Committee. The committee reserves the right to accept or reject any table clinic application and to take action onsite, up to and including closing down a table clinic, if the committee becomes aware that a table clinic presentation is not adhering to its stated educational content, or for any infraction of the Table Clinic rules outlined here, or for any activity considered detrimental to the MDA.

Are handouts allowed?

Yes, you may provide handouts to attendees. We ask that you submit a copy of your handout to the MDA no later than **March 26, 2010** for review by the Table Clinic Chair. Handouts that have not been reviewed and approved in advance of the meeting *will not be permitted*. Please note that approved table clinic handouts may be distributed only as part of table clinic presentations; general distribution of literature or materials is not allowed at the Star of the North Meeting.

Do I need to pre-register?

All table clinicians must be registered to attend the 2010 Star of the North Meeting. A badge will be required to gain access onto the exhibit floor where your clinic will be located. Please be sure to pre-register on the Star of the North website by March 25th or provide enough time to register onsite at the meeting (a \$20 onsite registration fee may apply).

What should I plan to do on my presentation day?

Plan to arrive at the RiverCentre at least 30 minutes prior to your scheduled clinic start time. Office uniforms are not required, but please wear attire appropriate to your profession. Tables must be set-up and equipment tested in advance. The MDA wants to do an outstanding job of assisting with your table clinic needs, and we are able to do so only with sufficient lead time.



Exhibitor Table Clinic Application
April 23, 2010 Saint Paul RiverCentre
Application deadline: February 19, 2010

Please print or type clearly:

Primary Clinician's Name: _____ Dr. Mr. Ms.

Name of Company: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Title of Presentation (please type or print clearly): _____

Table Clinic Synopsis: On a separate page, please attach a brief summary/synopsis and submit it with this application. This application will not be accepted without a summary/synopsis.

Co-Presenters: All correspondence will be mailed to primary clinician only.

Clinician's Name #2: _____ Dr. Mr. Ms.

Clinician's Name #3: _____ Dr. Mr. Ms.

Table Clinic Session: Table Clinics will be offered at two separate sessions. Please select the time period in which you prefer to present (if you would like to present in both session, please check both boxes). Clinicians will be assigned on a first-come, first-served basis only.

9:30 a.m. to 11:00 a.m., Friday, April 23

3:30 p.m. to 5:00 p.m., Friday, April 23

Table Clinic Equipment: The following equipment will be automatically ordered for you.

- (1) Table 24" wide x 72" long x 42" high
(1) Counter-high stool per presenter
(1) Sign indicating table clinic title

Will your Table Clinic require an electrical outlet? Yes, please No, thanks

If you are interested in ordering additional supplies (bulletin board, easel, table lamp, etc) for your Table Clinic, you may order desired equipment through GES Exposition Services. Please check the box if you are interested in receiving ordering information:

Yes, please send me additional information No, thanks

I have read the 2010 Table Clinic Guidelines for information on the rules and regulations.

A \$50.00 fee is required to participate in a table clinic at the 2010 Star of the North Meeting.

Please charge the following credit card account \$50.00 as payment for a table clinic:

Mastercard Visa American Express Discover

Credit Card Number: _____ Expiration Date: ____ / ____

Company Name: _____ Cardholder's Name: _____

Signature: _____

Return to: Minnesota Dental Association, Table Clinics, 1335 Industrial Blvd. Suite 200, Minneapolis 55413

Fax: 612.767.8500

Applications received after February 19, 2010 will not be accepted.