

CLINICAL PHOTOGRAPHY WORKSHOP



Clinical dental photography today, obtaining optimum results

Clinical photography is an essential skill in every area of dentistry today. With increased use of technology in dentistry, acquiring or improving photographic skills is a significant advantage for all members of the dental team in every area of dentistry, whether in general practice, specialist practice, hospital, community/public service or in academic/university settings.

Understanding the fundamentals of clinical photography, learning to choose the correct equipment and developing a reproducible technique enabling participants to capture high quality photographic images, to aid their practice, is the aim of this workshop.

Practical take away information on incorporating clinical photography into daily practice will be emphasised. This workshop will help clinicians achieve optimum benefit from the use of clinical photography in their day to day practice of dentistry.

Learning outcomes

Understanding the fundamentals of clinical photography, learning to choose the correct equipment and developing a reproducible technique enabling participants to capture high quality photographic images, to aid their practice, is the aim of this workshop.

Practical advice will be offered in helping to overcome the perceived difficulties in obtaining high quality clinical images, documenting lesions as well as reproduction of conventional radiographs, models, prostheses and other special applications. Practical take away information on incorporating clinical photography into daily practice will be emphasised. This workshop will help clinicians achieve optimum benefit from the use of clinical photography in their day to day practice of dentistry.



PJ Byrne

*Director of the Programme for Clinical Dental Photography (Postgraduate Core Course) since 1998, Dublin Dental University School & Hospital.
Practice limited to Periodontics & Oral Surgery, Dublin*

Saturday February 22
IDA House 10am – 1pm

LIMITED to 12
PARTICIPANTS


irish dental association
Cumann Fiaclóireachta na hÉireann

PLEASE PRINT AND COMPLETE IN BLOCK CAPITALS

Name: _____

IDA membership number: _____

Address: _____

Email: _____

Telephone: _____

€195 (IDA MEMBERS ONLY) to include refreshments

PAYMENT



Cheque (enclosed)



Expiry date /

CVV number

Amount to be debited: _____

Signature _____

Please return completed form to: Irish Dental Association,
Unit 2, Leopardstown Office Park, Sandyford, Dublin 18.

10am – 1pm Saturday February 22. IDA House, Sandyford