

COMBINING TMJ, SDB & MYOFUNCTIONAL ORTHODONTICS 4-DAY EUROPEAN SUMMIT 2024

6th - 9th NOVEMBER 2024

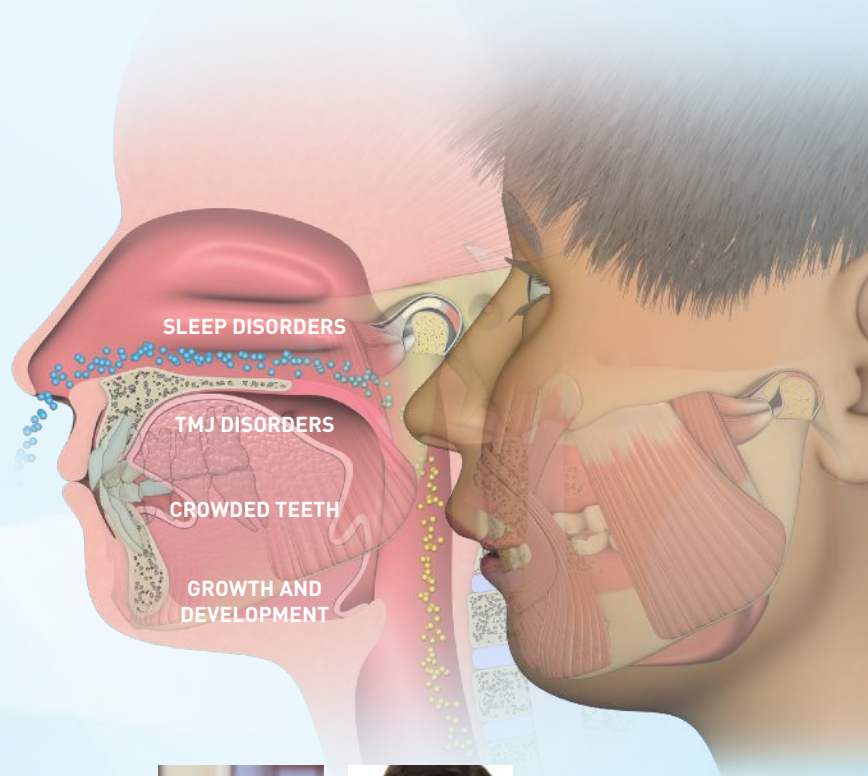
For more than 30 years, Myofunctional Research Co. (MRC) has recognised breathing disorders as the major cause of malocclusion, poor jaw growth and TMJ Disorder. By effectively changing the way orthodontics for children is performed, the Myobrace® myofunctional orthodontic system, by MRC, fundamentally delivers airway and habit correction to resolve orthodontic problems.

A complete training program for orthodontic & dental professionals.

MRC Head Office & Training Centre
Waalwijk, the Netherlands

LEARNING OUTCOMES

- Practical aspects of the implementation of myofunctional treatment in your practice.
- Understanding the development of occlusion and function.
- Diagnosis of soft tissue dysfunction, Sleep-Breathing disorders, Tongue Tie and Malocclusion.
- An extensive presentation of treatment possibilities with MRC's treatment systems Myobrace, Myosa and TMJBDS.
- Effectively educate parents and patients to achieve consistent results.
- Myofunctional Orthodontics - treating the causes rather than the symptoms of malocclusion.
- Evaluation & discussion of cases.



LECTURERS OVERVIEW (PRELIMINARY)



Dr Chris Farrell



Dr Madeeha Khan



Dr John Flutter



Dr Barry Raffael



Patrick McKeown



Dr Steven Olmos



Dr Imran Rangzeb



Prof Luca Levrini



Dr Ben Miraglia

myobrace®

myosa®

TMJBDS®
FOR TMJ, BREATHING & DISORDERED SLEEP

myoTAREA®

MYOFUNCTIONAL
RESEARCH CO.
CORRECTING BREATHING HABITS
FOR THE LAST 30 YEARS

COMBINING TMJ, SDB & MYOFUNCTIONAL ORTHODONTICS

REGISTRATION FORM

Early Bird Registration 10% Discount

Valid till 31 January 2024

REGISTRATION FEES (FULLY CATERED)

4-DAY EU SUMMIT

4 DAYS

Practitioner € 1.555,00

Staff (max 2 per practice) € 1.015,00

Prices include 21% VAT (No refund after August 31)

3 DAYS

€ 1.435,00

€ 895,00

REGISTRATION DAYS

Wed Fri

Thu Sat

DISCOUNT:

25% MEMBER

50% MCP

REGISTRATION DETAILS

Profession: Name:

Practice Name:

Contact Number: Email:

Postal Address:

Dietary Requirements:

ADDITIONAL ATTENDEES

Name:

Position Held:

Contact Number: Email:

Dietary Requirements:

PAYMENT DETAILS

Amount €: Make payment to Myofunctional Research Co.

Credit Card (Visa or Mastercard) Bank Transfer

Card Number: / /

Expire Date: / CWV:

VENUE DETAILS



MRC EUROPE HEAD OFFICE & INT. TRAINING CENTRE

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