# COURSE ATTENDANCE VERIFICATION

**Participant's Name**: Lena Sapozhnikoff

**Email**: info@drlenadentistry.com

**License** #: 054200 **State**: NY

**Course Title**: 1-16 Diagnostics in Pediatric OSDB II: Diagnostic Modalities

**Speaker Name**: Michelle Weddle, DDS

**Course Date**: May 08 2024

**Location & Educational Method**: Online Self-Instruction

**CDE Hours**: 1.5

**Participant AGD ID#**: 1.5

**AGD Subject Code**: 730

**Verification Code**: VBP

**Authorized Signature**: Michelle Weddle

**ASAP Pathway**
Nationally Approved PACE Program Provider for FAGD/MAGD credit.
Approval does not imply acceptance by any regulatory authority or AGD endorsement.
11/1/2021 to 10/31/2024.
Provider ID# 398507

***Keep this form for your records.***

**AGD Members:** ASAP Pathway will submit attendance verification to the AGD on your behalf.

Please allow at least 60 days for documentation of participation to be added to your transcript.