

# ICOI Implant Curriculum



Ady Palti



Alvaro Ordonez



Isaac Tawil



Rick Ferguson

## 02

November 7–8, 2025

**Augmentation/  
Complications  
& TMJ/Occlusion**

Drs. Ady Palti  
& Alvaro Ordonez

**16 CEUs**



Louie Al-Faraje

\* Speakers/Topics  
subject to change

## 04

March 6–7, 2026

**All-on 4, Zygoma,  
Zirconia Implants  
& Troubleshooting**

Dr. Louie Al-Faraje

**16 CEUs**

## 03

January 9–10, 2026

**Guided Bone  
Regeneration, Solutions  
for Compromised Cases,  
Digital Workflow**

Drs. Isaac Tawil  
& Rick Ferguson

**16 CEUs**

### ICOI Central Office

1 Bridge Plaza N  
Suite 950  
Fort Lee, NJ 07024

Please visit  
[www.icoi.org/events](http://www.icoi.org/events) for  
registration information

## ADA C.E.R.P.®

Continuing Education  
Recognition Program

ICOI is an ADA CERP Recognized Provider. ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. Concerns or complaints about a CE provider may be directed to the provider or to the Commission for Continuing Education Provider Recognition at [CCEPR.ada.org](http://CCEPR.ada.org).



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FOR CONTINUING  
EDUCATION

International Congress of Oral Implantologists (ICOI)  
Nationally Approved PACE Program Provider for  
FAGD/MAGD credit.  
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4/1/2024 to 3/31/2028  
Provider ID# 217378

## Registration Form

ICOI ID# \_\_\_\_\_ First Name \_\_\_\_\_ Last Name (Surname) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip Code \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_ AGD# \_\_\_\_\_

### Registration Fees

### ICOI Member

### ICOI Non Member

#### Individual Sessions

\* Pricing is per weekend and payment is due in full at time of registration.

☐ \$2,750 (per session)

☐ \$3,300 (per session)

#### Please select your session(s):

☐ **Session 2**  
November 7–8, 2025

☐ **Session 3**  
January 9–10, 2026

☐ **Session 4**  
March 6–7, 2026

## Payment

Total Amount USD:

\$ \_\_\_\_\_

#### Cancellation Policy:

May cancel up to 31 days prior to event with \$500 cancellation fee. Less than 30 days prior to the event, no refund but may transfer to another program up to one year from date of cancellation.

#### Ways To Pay:

##### 1. Credit card:

Complete payment information below & fax to (973) 783-1175 or email to [icoi@dentalimplants.com](mailto:icoi@dentalimplants.com)

##### 2. Mail (make checks payable in US funds to ICOI):

One Bridge Plaza N, Suite 950, Fort Lee, NJ 07024  
Phone: (973) 783-6300

#### Credit Card:

☐ MasterCard

☐ Visa

☐ Amex

Card Number \_\_\_\_\_

Billing Zip \_\_\_\_\_

CVV No \_\_\_\_\_

Exp \_\_\_\_\_