Activity name: **Forensic Odontology for the Dental Professional**  
Date: **April 28-29, 2016**  
Type: Lecture, Workshops, Laboratory, Hands-On Skills  
Location of a program: **Regional Forensic Center, Knoxville, TN**  
Instructor(s)’s name(s): **Murray Marks, PhD, D-ABFA**

<table>
<thead>
<tr>
<th>Strongly Disagree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>

**Meeting site was adequate in size, comfortable, and convenient**

**Course administration was efficient and friendly**

**Course objectives were consistent with the course as advertised**

---

**Based on the course, I feel more confident in my ability to:**

**Identify the role of the dentist in the medico-legal death investigation, engaging the forensic pathologist and forensic anthropologist in the field during recovery and at autopsy.**

**Explain the positive identification process assessing antemortem and postmortem radiographs, the securing and interpretation of antemortem radiographs, their digitization and comparison to taking postmortem films during the oral autopsy procedure.**

**Utilize database software identification used for mass disaster preparation including DEXIS software for single identifications and WINID3 and other computer-based systems for multiple casualties**

**Discuss bitemark soft tissue recognition and how to “capture” this evidence for digitization and exclusion.**

**Produce written reports for legal medicine and expert witness testimony for court appearance including how to write for a legal document and how much to say in a court of law to defend the findings of the dentist**

**Course material was up-to-date, well-organized, and presented in sufficient depth**

**Instructor demonstrated a comprehensive knowledge of the subject**

**Instructor appeared to be interested and enthusiastic about the subject**

**Audio-visual materials used were relevant and of high quality**

**Handout materials enhanced course content**

**Overall, I would rate this course as helpful for my practice**
Overall, I would rate this instructor as giving me useful information for my practice

<table>
<thead>
<tr>
<th>Rating</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall, this course met my expectations</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>The teaching method utilized was effective</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

Comments (positive or negative):

Future topics and/or speakers you would like to have offered:

Educational level of the activity:  □ Introductory  □ Intermediate  □ Advanced

Preferred course length:  □ Half day  □ Full day  □ Weekend

Preferred time of day:  □ Morning  □ Evening

Preferred day of the week:
  □ Monday  □ Tuesday  □ Wednesday  □ Thursday  □ Friday  □ Saturday

Preferred teaching method:  □ Lecture  □ Hands-on  □ Breakouts  □ Panel

If multi-day activities are offered, would you attend a planned networking event like a dinner or reception?  □ Yes  □ No

Is price a consideration when registering?  □ Yes  □ No

Are you interested in team training?  □ Yes  □ No

Profession:  □ Dentist  □ Hygienist  □ Specialist  □ Assistant  □ Other: ____________

Number of years in practice: ________

Type of practice:  □ Private  □ Group  □ Institutional/Hospital  □ Other: ____________