



Oral Health
Network
FOR Professional Education
AND Development



Verification of participation for
Mrs. Ann Paul-Augustine

Test passed on 23 July 2021

COVID-19 AND ORAL CAVITY

Student contact info:

Name: **Ann Paul-Augustine** Profession: **Dental Hygiene Student** Country: **United States** State: **New York**
City: **Brooklyn** Address: **285 Jay street** Zip/Postal code: **11201** Phone: **3476045856** E-mail:
annt.paulaugustine@mail.citytech.cuny.edu