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DENTAL TRIBUNE

The World's Dental Newspaper • U.S. Edition

NOVEMBER 2014 — VOL. 9, No. 11

www.dental-tribune.com

GET AN UP-CLOSE LOOK AT MICROSCOPIC DENTISTRY

Academy of Microscope Enhanced Dentistry annual meeting and scientific session is Nov. 14–16

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HYGIENE TRIBUNE BACK-TO-SCHOOL PROGRAM

Henry Schein provides more than 5,000 children with essential school supplies.

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IMPLANT TRIBUNE IMPLANTS GO 'MAINSTREAM'

Q&A with Dr. Clark Stanford, University of Illinois College of Dentistry.

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Adults with developmental disabilities need more than just better access to oral-health care

Report shows vulnerable population continues to have significant dental disease

Despite a policy focus on expanding access to care for adults with developmental disabilities, this vulnerable population continues to have significant dental disease. In the October issue of The Journal of the American Dental Association, researchers from Tufts University School of Medicine and Tufts University School of Dental Medicine report on the first large-scale survey to investigate factors influencing at-home oral care provided by caregivers to adults with developmental disabilities. The study findings suggest that, in addition to addressing access to care, policy initiatives must improve support for caregivers.

"While access to dental care is a necessary component of good oral health, it is not enough to guarantee positive oral health outcomes in this vulnerable population. Our findings highlight the need for additional training and support for caregivers in promoting oral health," said principal investigator and corresponding author Paula M. Mini-

han, PhD, MPH., an assistant professor in the department of public health and community medicine at Tufts University School of Medicine.

The research team's landmark 2012 study found that access to specialized dental care alone was not sufficient to meet the substantial oral health needs of adults with developmental disabilities. People with developmental disabilities have a high prevalence of cavities, gum disease and tooth loss. If a person with a developmental disability cannot independently brush or floss, caregivers provide assistance and support.

In the new study, the researchers surveyed 808 caregivers (family caregivers as well as paid caregivers) with extensive experience providing care to adults with developmental disabilities (DD) in either family homes or supervised residences in Massachusetts.

Survey results revealed that:

- 85 percent of adults with DD received

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AAID Annual Meeting, Nov. 5–8, Orlando

Earn as many as 18 hours of C.E. credit through sessions presented by leading oral implantology experts from around the world — and take advantage of a comprehensive implant-oriented exhibit hall — at the 2014 Annual Educational Conference of the American Academy of Implant Dentistry, Nov. 5–8, at the Hyatt Regency Orlando (formerly the Peabody Hotel) in Orlando. Photo/Provided by www.dreamstime.com

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- First Fridays provide narrow-body implant training at the Dentatus Implant Center in the heart of New York City
- Orasoptic and Surgical Acuity unified under a single Orasoptic brand
- R-dental's METAL-BITE earns awards
- New radicular pivot line: direct overdenture application; comes in two diameters, three lengths
- Barrier protection is critical in dental professionals' gloves

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Novel restorative material developed at CU-Boulder

Polymer fills cavities with a single application that is then light cured

A novel dental restorative material that should make life easier for dental care experts and their patients, which is based on technology developed by a team of University of Colorado Boulder engineers, was recently unveiled by the 3M Company.

Based on work by a team led by professor Christopher Bowman of CU-Boulder's chemical and biological engineering department, a team from 3M ESPE developed the new polymer, which makes it possible for dentists to fill cavities with a single application that is then cured with light to achieve the desired strength and shape. Cur-

rently it can take up to four applications of polymer material, with each layer requiring an individual light-curing procedure, to fill a single, deep-tooth cavity, said Bowman.

The new restorative material also eliminates expensive dispensing devices, according to 3M ESPE, part of 3M Health, a business group of 3M based in St. Paul, Minn. And unlike some composite cavity-filling materials used today that can shrink or even leak at the surface of a tooth over time, the new material has been shown to have lower stress and to be more wear resistant over time.

The innovative technology development effort between CU-Boulder and 3M ESPE included the financial support of the National Institutes of Health. The new 3M restorative material, primarily for posterior teeth, is known as Filtek Bulk Fill.

"Our team is excited about seeing this process come to fruition," said Bowman. "Hopefully there are other implementations of this technology in other fields on the horizon."

The technology was licensed through the CU Technology Transfer Office.

(Sources: CU-Boulder, 3M ESPE)

• DISABILITIES, page A1

assistance with teeth cleaning.

- 79 percent brushed twice daily as recommended by the American Dental Association.
- 22 percent flossed daily as recommended by the American Dental Association.
- 45 percent never flossed.

More caregivers (63 percent) reported that behavioral problems interfered with oral health care routines than any other factor.

Although the frequency of brushing and flossing among the adults with DD in this study was higher than reported in previous studies, many still did not meet American Dental Association recommendations regarding brushing and flossing.

Flossing in particular presented substantial challenges. The researchers commented that innovative strategies are necessary to ensure adults with DD are benefitting optimally from at-home

oral care to prevent dental disease.

"Oral health disparities among people with developmental disabilities are a significant public health issue," said senior author Aviva Must, PhD, professor and chair of the department of public health and community medicine at Tufts University School of Medicine. "We were surprised to find that, while 71.6 percent of paid caregivers who participated in our study reported having received formal group training in oral health care, only 6.4 percent of family caregivers reported the same. Given the vital role that caregivers play in promoting good oral health in this population, we need to ensure that all receive the guidance and support they need to be effective."

Co-principal investigator John Morgan, DDS, an associate professor in the department of public health and community service at Tufts University School of Dental Medicine, added, "In addition to the effective use of fluoridated toothpaste and the application of topical fluorides, policy makers should

also consider establishing an organized system that provides caregivers, including family caregivers, with information and support."

The caregivers who participated in this study visited the Tufts Dental Facilities for Persons with Special Needs (TDF), a network of clinics that have provided comprehensive oral health care to adults and children with developmental disabilities throughout Massachusetts since 1976. Through a partnership between Tufts University School of Dental Medicine and the state's Department of Developmental Services and Department of Public Health, this nationally recognized program serves more than 7,000 patients annually and supports education and research to improve the oral health of this population, which is at high risk for oral disease.

Some limitations to the study

The authors acknowledged certain limitations in their study. The TDF clinics are designed for and financially accessible to people with developmental disabilities in Massachusetts, and many caregivers and patients have developed long-term relationships with dental professionals at the clinics. The study authors recognize that caregivers in this survey may not represent the experiences of caregivers more broadly. Caregivers who participated in the survey may also be particularly interested in oral home care and the information they provided reflects self-reports. In addition, the survey's focus was on the occurrence of oral home care practices and not on their quality.

Caregivers who would like tips on how to help people with developmental disabilities with oral care can visit "Dental Care Every Day: A Caregiver's Guide," a resource published by the National Institute of Dental and Craniofacial Research.

This research was supported by the National Institute of Dental and Cra-

• See DISABILITIES, page A4

DENTAL TRIBUNE

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How to Increase your Practice Income

while you work less and feel more fulfilled

By Dr. Ken Whelan

Dr. Ken Whelan generated \$9.2 million within 5 and-a-half years in one scratch practice in ultra-competitive Southern California on a 3-day weekly schedule.

He's launched multiple million-dollar practices and helped many other dentists do the same.

Become the go-to dentist in your area

How do you position yourself so new patients flock to you for ideal care because you are viewed as the best, not because you are "in-network" or have the lowest fees? You must position yourself as the go-to community dental leader.

If you look at dental gurus, your local specialists, and leading dentists who have million dollar practices and continue to "crush it" in this economy, they do it by attracting masses of patients because they are perceived as community dental leaders.

After learning from and modeling after some of these legendary dentists, I was able to rapidly go from a struggling dentist to \$1.1 million within the first 10 months in my start-up. I earned \$9 million just 5 years later, working part-time with a small team in that one practice.

How? Simply, by educating my community on the newest dental advancements. I've helped other doctors do the same and we've helped improve the lives of countless patients which has been extremely fulfilling both professionally and personally.

Take the first steps

But when I share this exciting opportunity with colleagues, most doubt their skills and cannot imagine themselves being a local leader. Maybe you experience the same doubts?

However, I have no doubt that if we looked at your accomplishments together, I could quickly show you that you have what it takes to become a local leader too. In fact, it is easier now than ever before to do this because of all the great training that's readily available.

To make it happen you have to believe in yourself and just take your first step. I've boiled down the 5 things you need to know to accelerate your path.

1. Do high-profit, in-demand services

If you want to be a highly-paid, leading dentist you have to enhance your skills to provide one-stop-care for all the high-production services new patients are actively searching for online every day. Did you know baby

boomer patients make up 35% of the population and are expected to increase annual spending on wellness procedures from \$200 million to \$1 trillion over the next 10 years?

What services should you do first to attract these new patients? Start with one service you love to do. If needed, get more training to master it. Some services to consider are implants and sedation.

I chose to become a local leader in sedation. This is how I went from producing \$1,000 insurance-only dentistry days, to producing \$28,000 ideal dentistry days all while working just 12 days each month. At the Winning Practice Strategy (W.P.S.) you'll learn what the best services are to do and how to balance your schedule for peak profitability while maximizing your time off to recharge and enjoy life.

2. Attract new patients pre-committed to getting the best care

How do you attract pre-committed new patients who will pay you for the high-profit services you love to do? One way is with your website. Research tells us that 33% of adults online watch health videos and prefer to have a doctor be the one to talk about procedures.

How do you do this? By placing valuable informative videos on your website that feature you educating potential patients' about how the latest, dental services can improve their lives.

This will allow ideal patients, who want to invest in high-profit services, to connect and bond with you and reinforce your community leader status. This is how I consistently attract patients who pay me \$10,000 and more to do optimal dentistry. You'll learn how to do this and other advanced Internet strategies at W.P.S.

3. Bundle care for high-profit relationships.

Many doctors won't diagnose optimal care because they are afraid they'll scare or upset patients or sound "salesy". This leads to an untold number of missed opportunities for patients to choose the best care and for doctors to do high-profit services.

World-renowned dental guru Dr. Frank Spears nailed it when he said "The only way patients can choose more is if they are informed of what's possible." How do you do this easily and efficiently?

At W.P.S. we teach you a simplified 3-step approach that allows you to be both highly profitable and nonjudgmental: 1. Universally offer comprehensive care to all your patients. 2. Bundle all associated common procedures. 3. Do it automatically at the click of a button in your software.

For example, for a patient to have the best choices for treatment of an extraction on #20 you should comprehensively diagnose and bundle an extraction, implant and crown all at the click of a pre-programmed button. This is what I do to consistently have \$20,000-plus days all with zero sales pressure. I simply tell patients everything I see that can help them and then let them choose the best care for their situation.

4. Power boost collections

How do you quickly eliminate no-shows, cancellations, accounts receivables, and non-productive schedule holes to skyrocket your collections? Commit patients to care by collecting payments at the time of scheduling. A common myth is patients won't do this. But it's actually rather easy when patients are coming in pre-committed for the best care due to your leader status.

This is how my start-up rapidly collected \$50,000 in my first month and \$9 million within five years. One client who followed all these methods launched a brand new office at the height of the recession, collected over \$1 million in his first 12 months and also took a month-long dream vacation. You'll learn how to do all this at W.P.S.

5. Change your mindset

Of course, the number one reason more dentists are not achieving this level of success is because they don't believe their skills are worthy enough to promote. But I'm here to tell you that they are. Your disbelief is the only thing standing between you and a thriving practice.

This is what I share with my coaching clients and hope to bring to everyone with the Winning Practice Strategy.

My challenge for you is this: Become the dental leader in your community by sharing your knowledge to help improve people's lives. You really can earn a massive income by making a difference. Now is your time!



Dr. Ken Whelan is the founder of Winning Practice Strategy Coaching. He's one of the country's leading marketing and practice growth strategists.

His popular training is inspiring doctors globally to make a greater difference.

Visit Him and Receive FREE Training on "The Million Dollar Practice Plan" at www.NewLocalLeader.com



The single-day Toronto Academy of Dentistry Winter Clinic, Friday, Nov. 14, has a new home: Toronto Sheraton Centre. Photo/ Provided by Starwood Hotels & Resorts Worldwide

Winter Clinic: Same time, new place

The 77th Annual Winter Clinic is on the move, with its 2014 meeting day scheduled for Friday, Nov. 14, at the Toronto Sheraton Centre.

The new venue presents a great opportunity to add an evening or even the rest of the weekend in downtown Toronto to the end of the single-day conference. The Sheraton Centre is connected to the financial and entertainment districts by way of the PATH, a 16-mile underground network of shops and services.

A wide selection of shopping destinations, the Mirvish Toronto theatres, world-class dining and major Toronto museums are steps away.

Among the attractions: Art Gallery of Ontario, Royal Ontario Museum, Hock-

ey Hall of Fame, Harbourfront, Casa Loma, Ontario Science Centre, Niagara Falls, Casino Niagara, Casino Rama, Ontario Place, Air Canada Centre, Rogers Centre (formerly SkyDome), Eaton Centre, Holt Renfrew and Yorkville Shopping District.

Broad spectrum of topics

The Winter Clinic is the largest one-day dental convention in North America, attracting dental professionals who come to learn from world-class speakers and explore and save on products and services.

This year's clinical program covers a broad spectrum of topics and includes: an examination of the way digital technology is transforming the workflow

in the dental office; demonstrations of cutting-edge tools and equipment; specialized techniques for prosthetic tooth repositioning; the use of lasers in periodontal therapy; a discussion of current views on the use of X-rays as a diagnostic tool; advice on the latest legal requirements for health and safety in the dental office; and how to meet the demands of your modern dental practice through healthy habits and humour.

You can bring the whole team to share the knowledge. The single-day event features 24 separate programs in contemporary dentistry, offering something for all.

(Source: Toronto Academy of Dentistry)

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niofacial Research of the National Institutes of Health, under award number 1RC1DE020396.

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About Tufts University School of Dental Medicine

Founded in 1868, Tufts University School of Dental Medicine (TUSDM) is committed to leadership in education, patient care, research and community service. Students obtain an interdisciplinary education, integrated with medicine, with access to training in dental specialties.

Clinics managed at TUSDM provide comprehensive care to more than 18,000 diverse individuals annually, including those with special needs. Nationally and internationally, the school promotes health and educational programs and researches new procedures, materials and technologies to improve oral health.

Additionally, Tufts University School of Medicine and the Sackler School of Graduate Biomedical Sciences at Tufts University are recognized as international leaders in innovative medical and population health education and advanced research.

Ranked among the top in the nation, the school of medicine is affiliated with six major teaching hospitals and more than 30 health care facilities.

Tufts University School of Medicine and the Sackler School undertake research that is consistently rated among the highest in the nation for its effect on the advancement of medical and prevention science.

(Source: Tufts University School of Dental Medicine)

Close look at microscopic dentistry

Experienced and novice users alike are invited to Nov. 14–16 AMED meeting

The Academy of Microscope Enhanced Dentistry's 13th Annual Meeting and Scientific Session, "Pathways to Perfection," runs from Friday, Nov. 14, through Sunday, Nov. 16, at the University of Maryland, Baltimore Southern Management Corporation Campus Center. Hands-on courses will be at the University of Maryland School of Dentistry.

Meeting and registration details are available at www.microscopedentistry.com. A variety of lectures and courses are on the agenda, aimed at experienced microscope users and those who are simply interested in learning more about it.

Among the offerings:

- "Clinical Benefits of a Microsurgical

Approach in Periodontal and Peri-Implant Surgery — New Insights Into Biology of Wound Healing," presented by Rino Burkhardt, DDS, DMD.

- "New Frontiers in Periodontal and Bone Regeneration," presented by Mark A. Reynolds, DDS, PhD, MA.

- "Dental-Labial Harmony through Cosmetic Dentistry and Injectables," presented by Laurence Rifkin, DDS.

- "Microsonic Management of Calcified Canals," presented by Noushad Rahim, BDS, MDS, MFGDP, MJDF RCS Eng.

- "Protocol of Preparation for Full Crowns and Veneers with Microscope — Full Mouth Micro Invasive Rehabilitation," by Nazariy Mykhaylyuk, DMD.

- "Ultrasonic Preparations: Myth, Magic, and Magnification," presented by Jeff Hamilton, DDS.

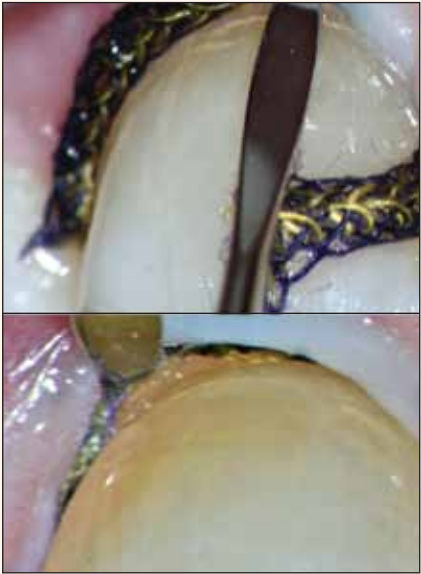
- "Microscopically Guided External Sinus Floor Elevation (MGES) — A New Microsurgical Protocol in Oral Implantology," by Behnam Shakibaie, DMD.

- "Minimally Invasive Interventions for Esthetic Dentistry," presented by Masayuki Okawa, DDS.

- "Microscope Enhanced Restorative Dentistry: A Prosthodontic Perspective," presented by: Keith Boenning, DDS.

- "Techniques of Micro Suturing," presented by Arnold Sindler, DDS.

(Source: AMED)



Hands-on courses enable you to get up close with microscopic dentistry at AMED event. Photo/Provided by Assad Mora, DDS, MSD, FACP

YDC exhibit hall filled with C.E. options

The 2015 Yankee Dental Conference 40th year celebration, Jan. 29 through Feb. 1, at the Boston Convention & Exhibition Center, will include celebratory activities in the exhibit hall, Jan. 29 through 31. There also will be the usual abundance of C.E. credit opportunities.

- On Thursday, Jan. 29, registered attendees will receive \$5 in Yankee Dining Dollars to be used toward any food or beverage purchase on the exhibit hall floor between 11:30 a.m. and 2 p.m. Then in the afternoon, you can enjoy a complimentary 40th birthday cupcake.

- The *Fabulous at 40 Reception*, 4–5 p.m., Friday, Jan. 30, provides an opportunity to enjoy complimentary wine or beer and snacks while socializing with colleagues and browsing the show floor.

- On Saturday, Jan. 31, the exhibit hall hosts the *15th Annual Chowder Tasting* at noon in the food court. Attendees will be able to sample award-winning chowder from Levy Restaurants, Hilton Back Bay, Seaport Hotel, Hyatt Regency Boston and Starwood of Boston.

- There will be multiple daily chances to win rewards by shopping in the exhibit hall. Spending \$5,000 enters you to win an AMEX gift card. Also, Mystery Shoppers will reward random exhibit-hall shoppers with gift cards. And there will be opportunities to win free registration to YDC 2016.

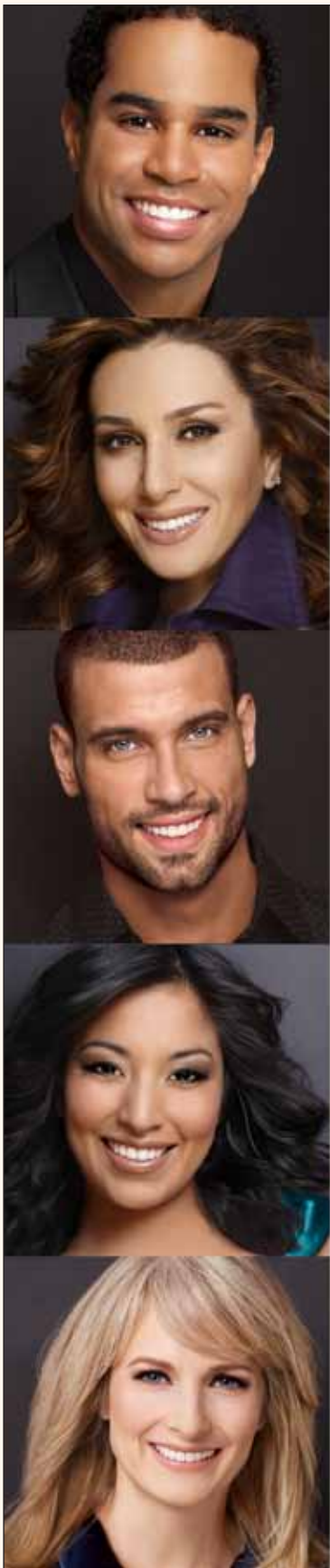
- The *Lounge* provides an opportunity to take a quick break while charging your phone or tablet and having a bite to eat.

- The *High-Tech Playground* provides the opportunity to test drive the latest in dental technology. Demonstrations featuring state-of-the-art devices and services will take place each day. The idea is to let attendees try out products free of sales pressure and watch presentations before serious shopping on the exhibit hall floor.

- At the *Live Dentistry* stage, you can learn from some of the profession's top clinicians as they perform actual procedures.

Exhibit hall hours are 9:30 a.m.–5:30 p.m., Jan. 29 and 30 and 9 a.m.–4 p.m., Jan. 31.

(Source: Yankee Dental Conference)



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- Discuss the TENS bite technique
- Recognize the risks of obstructive sleep apnea and treatment options

EVENT DATES AND LOCATIONS

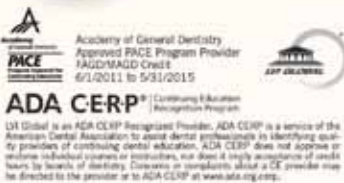
October 17-18, Ottawa, ON Canada
November 21-22, Cincinnati, OH

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MICRODENTAL
LABORATORIES

Using DrQuickLook SD for an implant presentation

By Dr. Bob Clark, Founder, DrQuickLook

Having used DrQuickLook™ SD for some time now, I see how its range gets larger each and every day. By that I mean I find more and more uses for it. I can literally tell when I need to use it. I get to a quiet, thoughtful spot in the patient visit — thinking how I am going

to tell the patient a bit of bad news perhaps and that is when it happens — I grab the DrQuickLook SD and do a show and tell. I always feel “saved” after that happens because it helps me through those stressful moments. This is the exact scenario that happens with cases that end up needing dental implants. Let me give you a perfect case and



see if this rings a bell at all – I am sure it will. An emergency patient appears in my schedule with the notation “loose

crown” or “crown off.” You know just by those phrases that things could go badly for the patient. Sure, maybe it’s just a recementation after a caramel snack; but, if not, the news is usually bad. The patient walks in and hands the assistant a crown with the entirety of the tooth structure that once held it securely in place within the crown itself. Apparently the patient has not seen the site where the crown once resided because he or she says, “My crown just fell out for no reason and I just want to get it back in place.” The dental assistant, unwilling to drop the bad news on the patient, lets you know the patient is seated. So there it is: the perfect storm for trashing a perfectly good day.

Quick Draw to the rescue

Here’s how I untangle this mess with DrQuickLook SD. I’ll tell you right away that I have the SD Plus version with what we call Quick Draw and the Patient Education option. You’ll know why in a minute.

Before my shoes enter that operatory, my dental assistant shows the patient the crown with the tooth remnants inside. We’re not talking about just looking at it; I am referring to the assistant holding the crown in her hand and taking several images with DrQuickLook SD Plus at differing angles to show the patient exactly what the situation is. The patient holds the image while the assistant talks about the tooth. Next, the assistant takes several images of the remaining structure of the tooth and reviews with the patient. My assistants love to use the Quick Draw feature or the SD Plus model. They can circle any areas that are particularly bad so there is no doubt in the patient’s mind what the situation is.

Just the facts

Remember, I haven’t been in the room yet. My assistants are careful not to provide a final diagnosis or recommend treatment. They tell the patient that is my job.

With patients fully informed, my job is to tell them what the diagnosis is — quite possibly an unrestorable tooth (they know this already) and recommend treatment options. All these images are saved to the SD card and eventually to the patients’ charts, so when a patient forgets how bad things looked — and you know that will happen — we can remind the patient clearly and objectively.

Patient education that sticks

Once patients hear the options, they want more specifics. Our optional Pa-

AD

9,000 dentists from 48 different countries and according to an independent survey, *92% of them love being a dentist because of LVI. Want out of the typical dental rat race?

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“If you are truly interested in building a practice away from having to do “retail dentistry” then LVI is the VERY BEST place to learn the VERY BEST from the VERY BEST! I only wish that I had been smart enough to have started 15 years ago!”
Dr. Terry Frey, North Vernon, IN

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June 1, 2011- May 31, 2015

► See PRESENTATION, page A7

First Fridays start at Dentatus Implant Center in the heart of New York City

By Dentatus Staff

Dentatus, the first to introduce to dentistry narrow-body implants, welcomes you to join us at our Implant Center where participants will learn the distinctive technologies of the Anew, Atlas and Elypse implants. Our modern facility is equipped with all necessary instrumentation, models, implants and components used in the workshop. Participants will learn how to select and place narrow-body implants and construct a chairside interim crown. They will learn the great benefits of having the means to treat the widest range of patients' needs, especially for patients with inadequate bone and narrow spaces.

Due to this special narrow-body technology that requires less time, procedures are attractive to many patients who would otherwise not be able to afford or benefit from this major development. At the conclusion of the workshop, you will leave with your own constructed temporary crown on a model for staff training and patient education.

•PRESENTATION, page A6

tient Education software does a great job showing patients differing treatment modalities in a focused setting. For implants, this is perfect.

Great animation plus good headphones equals a patient who understands.

Care to use your own narration? Our slides are the perfect complement.

Patient accepts responsibility

Prior to using DrQuickLook SD Plus™ with Patient Education, my job was to somehow make the patient understand that this was not my fault. I never understood this, but patients seemed to place the blame directly on my shoulders.

With DrQuickLook SD Plus, the patients hold their problem in their hands. They take responsibility. DrQuickLook SD Plus is my biggest asset.



DR. ROBERT CLARK completed his undergraduate studies at Albany College of Pharmacy and Health Sciences, going on to earn a doctorate of dental surgery

degree from the University at Buffalo School of Dental Medicine. His dual education and professional experience in pharmacy and dentistry help him successfully assess and address patients' individual dental health needs.

The Dentatus Implant Center offers unique opportunities to improve your expertise of emerging technologies with hands-on experience under guidance of experts in the field. Advanced registration is required in order to reserve space and instrumentation. Friday workshops are conducted 8 a.m. to noon. Come to New York City for First Fridays at Dentatus' Implant Center and stay in the city of art, fashion and entertainment. Register at www.dentatusUSA.com or by calling (800) 323-3136 or by emailing dmanekas@dentatus.com.



Dentatus is open every 'First Friday' for you to learn hands-on about narrow-body implants. The center has all instrumentation, models, implants and components needed to construct a temporary crown on a model to use in your staff training and patient education. Photo/ Provided by Denatus

FIRST FRIDAYS @DENTATUS

With changes in the healthcare environment calling for more affordable treatment options, now is the time to incorporate narrow-body implants from Dentatus into your armamentarium.

ANEW® is the only narrow-body implant with a screw-retained prosthetic system, that can be placed in interdental spaces as narrow as 3.5mm.

ATLAS® is designed to effectively retain & stabilize dentures, providing Denture Comfort. It is the only system on the market today that eliminates the hardware typically associated with overdentures.

Both systems are FDA-approved for long-term use and backed up with over 10 years of clinical research.

Join us at our Implant Center in New York City to learn how Dentatus Narrow-Body Implants offer minimally invasive treatments at affordable prices, helping you treat more patients.

First Fridays @ Dentatus is an educational workshop designed to introduce you to innovative treatment modes.

The format is designed for restorative dentists and specialists, encouraging open forum discussion followed by Hands-on participation.

Reserve your seat today!
Call (800) 323-3136

For more information, download the course brochure here :



New York: 800-323-3136
Stockholm: +46-8-546-509-00
dentatus.com



Atlas & Anew are available in 1.8, 2.2, 2.4 & 2.8mm diameters

Orasoptic and Surgical Acuity unified under a single brand

Orasoptic™, recognized as a leader in vision solutions for dental professionals, will

consolidate its medical-centric brand Surgical Acuity under the same Orasoptic moniker. The Surgical Acuity brand will be phased out by the end of the year, at which time the single Orasoptic brand will be aligned with both dental and medical markets.

"The merging of Surgical Acuity under the Orasoptic brand gives us the opportunity to better serve our customers



through unified communications, improved process controls and enhanced product access," said James Onderak, Orasoptic director of marketing. A new logo emphasizes the company's long-standing commitment to visual aid technology. The logo pays tribute to core product lines with colors that represent magnification (blue), illumination (yellow) and ergonomics (green).

Orasoptic is a member of the KaVo Kerr Group, a global portfolio of dental brands, including

KaVo, Kerr, Kerr Total Care, Pentron, Axis|Sybron Endo, Orasoptic, Pelton & Crane, Marus, Gendex, DEXIS, Instrumentarium, SOREDEX, i-CAT, NOMAD, Implant Direct and Ormco. KaVo Kerr Group uniquely serves 99 percent of all dental practices, according to the company. Learn more at www.kavokerrgroup.com.

(Source: Orasoptic)



METAL-BITE universal registration product is available in standard 50 ml auto-mixing cartridges and is dispensed with a commercial mixing pistol. Photo/Provided by R-dental

R-dental's METAL-BITE earns awards

The universal registration material METAL-BITE®, from German manufacturer R-dental Dentalerzeugnisse GmbH, has developed into a standard for occlusal registrations since its introduction in early 2000, according to the company.

Numerous awards granted by "The Dental Advisor" (Dental Consultants Inc.) and "REALITY" between 2012 and 2014 justifies the rank of METAL-BITE as one of the leading universal registration materials.

According to R-dental, the universal registration material is indicated for a broad variety of universal registrations, and among the many dental professionals recommending are German opinion leaders Prof. (HR) Dr. Alexander Gutowski and Todd Ehrlich (Austin, Texas).

Additionally, according to the company, METAL-BITE is predestined for bite-plate applications of the facebow registration system (www.sam-dental.de) and for manufacturing surgical guides for implantology (www.sicat.de). According to the company, it is used successfully for the fit of para-occlusal tray adapters in CMD therapy.

The physical characteristics of the product are described by the company as "convincing." For example, the company describes the material as being extremely fast and hard, easy to trim — and "very suitable" for cutting and contouring. The company reports that the material has no taste, is radiopaque and offers an "excellent dimension stability."

The product is available in standard 50 ml auto-mixing cartridges and is dispensed with a commercial mixing pistol (dispenser).

To learn more, you can contact manufacturer R-dental Dentalerzeugnisse, in Germany, by telephone at +49 (402) 275-7617 or by email at info@r-dental.com. You can learn more online at www.r-dental.com or www.pattersondental.com.



Scan this code to read more on the R-dental website.
www.r-dental.com



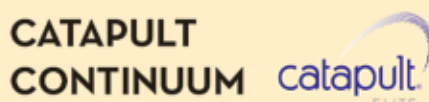
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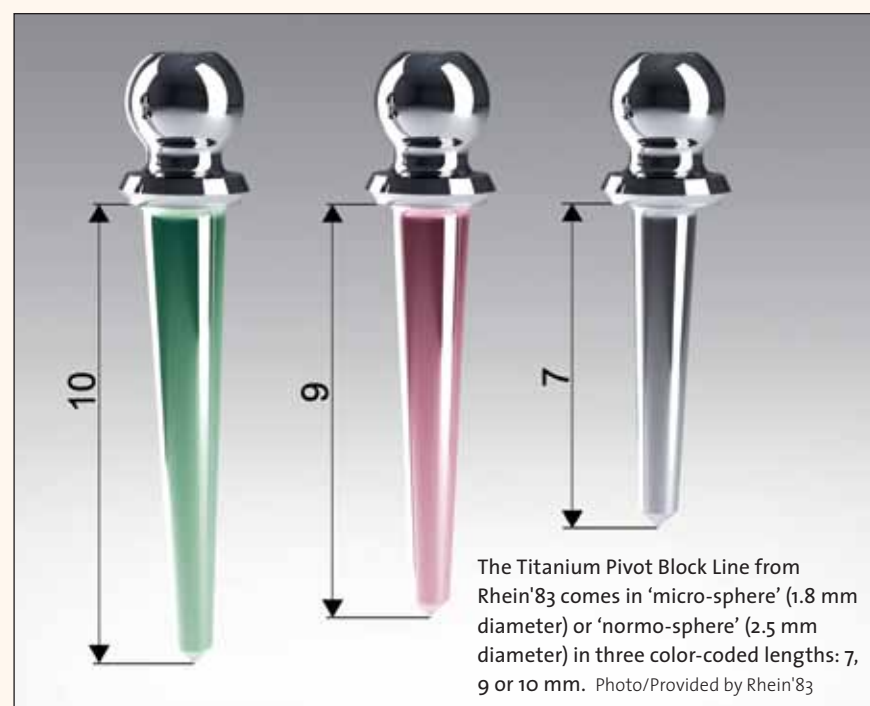
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New radicular pivot line: Direct overdenture application

Titanium Pivot Block Line comes in two diameters, three lengths



By Rhein'83 Staff

Rhein'83 has introduced its new Titanium Pivot Block Line. To assure a better identification of the pivots, a specific color corresponds to a determinate length. Two diameters are available: "micro-sphere" with a 1.8 mm diameter and "normo-sphere" with a 2.5 mm diameter. Each line also is divided into three lengths: 7, 9 or 10 mm.

The innovative design of the Pivot Block Line offers a perfect solution for a temporary attachment. To use the pivots as a permanent solution, a special bur will be required to create the proper radicular channel.

Pivot Flex line flexible head connection option available

Also available in a titanium pivot line is an innovative flexible head connection. The Pivot Flex line, thanks to a rotating head, enables a safe and trauma-free insertion of the prosthesis.

Each Pivot Flex has a 7.5 degree rotation faculty in every direction to solve the divergency issues.

Designed to conserve stability and functionality

Rhein pivots can serve a perfect solution as a pre-implant therapy that enables practitioners to conserve the stability and functionality of the root.

When clinical cases are compromised and require a "first aid" application, Rhein pivots can provide the perfect application — offering a functional and high-quality solution with reduced costs and working times.

Providing a 'perfect solution' for a variety of cases

Rhein pivots can provide a perfect solution in a variety of clinical cases. They can be used as an alternative to an implant treatment when the patient prefers to contain costs; and at the same time, pivots can be the perfect solution as a pre-implant treatment that enables practitioners to save and conserve the root functionality that will receive the implant.

For additional information, contact Rhein by email at info@rhein83usa.it or by phone at (877) 778-8383.

You can visit the company online at www.rhein83usa.com.

Equator profile

MAXIMUM stability
MINIMUM space

compatible with all implant brands

4,4mm
2,1mm

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