PACIFIC DENTAL CONFERENCE

DENTAL TRIBUNE

The World's Dental Newspaper · Canada Edition

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www.dental-tribune.com

EARLY CHILDHOOD CARIES NO. 1 REASON FOR KIDS' DAY SURGERY

Recent study shows 'bottle mouth' is driving Canadian preschoolers into day surgery more than any other cause.

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DOING WELL BY DOING GOOD

Henry Schein Canada, as part of its Calendar of Caring program, shines the spotlight on various ways that its customers are 'giving back.'

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IMPLANT TRIBUNE

NOVEL POST/CROWN

Create an esthetic, predictable moderate-term provisional to preserve site for future implant.

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If it's Vancouver, it's Pacific Dental Conference time

British Columbia backdrop to major dental meeting

The latest count on the number of speakers presenting sessions at the Pacific Dental Conference is 148. That's quite a bit of choice, especially considering the fact that because of the conference's continued commitment to its one-fee registration strategy, attendees have the option of attending any of the sessions they want — with no preselection required for open sessions.

Just be sure to arrive early enough for your sessions of choice to ensure you get a seat. The speaker roster represents some of the top names in the industry, so all of the sessions tend to attract strong turnouts.

Among the 2014 speakers: John Granham, Hardy Limeback, Tieraona Low Dog, Jo-Anne Jones, Anne Guignon, Howard Glazer, John Kois, Kristy Menage Bernie, Ray Padilla, Edwin T. Parks, Gail Williamson, John Cranham, Sergio Kuttler, Greg Psaltis, Ross Nash, Derek Mahony, Rob Roda, Louis Malcmacher, Bart Johnson, Jesse Miller, Rhonda Savage and Nancy Andrews.

The sessions comprise a wide selection of open C.E. lectures, hands-on courses — and the "Live Dentistry Stage."

The 2014 Pacific Dental Conference runs from March 6–8 (Thursday, Friday and Saturday) in Vancouver, British Columbia, at the Vancouver Convention Centre, West Building.

The variety of topics covered means the entire dental team can access the latest information on dental technology, techniques and materials.

Event includes University of British Columbia Speakers Series

With the University of British Columbia Faculty of Dentistry celebrating its 50th anniversary, the PDC will present the "UBC Speakers Series," with UBC alumni addressing a variety of topics.

The Live Dentistry Stage is back in the exhibit hall, with demonstrations on Thursday and Friday. On Saturday, the "So You Think You Can Speak?" program features 50-minute presentations by speakers who responded to a call for presentations and were accepted by the meeting's scientific committee. A number of timely dentistry topics will be covered.

Dental Technicians Association of BC

Also combined with the Pacific Dental Conference this year is the 32nd annual meeting of the Dental Technicians Association of British Col-

▸ See VANCOUVER, page A4

The 137-metre-long and 70-metre-high Capilano Suspension Bridge — and surrounding coastal rainforest park featuring smaller suspension bridges linking old-growth trees — is a seabus and city bus ride away from the Vancouver Convention Centre, host site of the Pacific Dental Conference. Photo/Dental Tribune file photo

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- Air-driven handpiece is top product

AD

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Caries accounts for one-third of day surgeries for preschoolers

Although most Canadian children are treated for caries in community-based dental offices or clinics, a significant number of young children who do not benefit from prevention strategies develop serious dental diseases such as early childhood caries. According to a new report, this condition accounts for about one-third of all day surgeries for preschoolers.

Overall, an estimated 19,000 day operations are performed to treat cavities caused by dental caries among children younger than 6 each year.

According to the report, surgery for ECC accounted for 31 percent of all day surgeries for children aged 1–5 during the two-year period 2010/2011 to 2011/2012, rendering ECC the most common reason for day surgeries among young children.

More than 99 percent of the children in the study needed anesthesia owing to the severity of the condition and spent an average of 82 minutes in the operating room.

However, the investigators cautioned that this report represents only the tip of the iceberg because only day procedures at hospitals were included. Children who had undergone surgery in dentists' offices or community clinics were not included. The researchers also found that rates of ECC day surgeries were almost nine times higher among children who lived in a neighborhood with a high proportion of Aboriginal residents. In addition, rates were more than three times as high for kids from rural neighborhoods as from urban neighborhoods.

One of the risk factors for early childhood caries, also known as baby bottle tooth decay, is frequent and prolonged exposure of a baby's teeth to high sugar content liquids such as fruit juice, milk or formula. Photo/Razief Adlie, *www.sxc.hu*

The hospital costs totaled $21.2 million each year, but the report highlighted that these day operations may have cost more, as the costs of care providers, such as dentists and anesthesiologists, and travel were not included.

The full report, titled "Treatment of Preventable Dental Cavities in Preschoolers: A Focus on Day Surgery Under General Anesthesia," can be downloaded from the Canadian Institute for Health Information's website.

(Source: Canadian Institute for Health Information)

AD

50 countries to celebrate World Oral Health Day

World Oral Health Day 2014 — March 20 — will focus on the importance of healthy mouths and teeth in everyday activities. The day celebrates the benefits of a healthy mouth and promotes worldwide awareness of the issues around oral health.

With 90 percent of the world's population projected to suffer from oral diseases at some point, global interest in World Oral Health Day is growing rapidly — with more than 50 countries to date planning to organize activities.

FDI helps its member states lobby their governments to support prevention, detection and treatment programmes.

Among the highlights from 2013 were a "Free Oral Health Camp" in Pakistan, which provided a free dental checkup to more than 2,600 patients; citizens in Nigeria achieving a new world record with 300,000 children simultaneously brushing their teeth; and the opening of the NASDAQ by FDI representatives and members of the American Dental Association.

Activities planned this year include: in Asia, a world-record attempt for the number of people brushing their teeth at the same time; in the Baltic region, a competition for children to interpret the campaign slogan "celebrating healthy smiles" in an art competition; in India, a planned national educational tour visiting schools across the country; and, in Ukraine, the building of a

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Natural dentition: Risk of extinction?

Are we doing enough to teach dentists how to diagnose and prognose the ailing dentition?

By Sebastian Saba DDS, Cert. Pros., FADI, FICD, Editor in Chief

During the past few years, there appears to be an increase in continuing education. Many of the courses are about implant dentistry. The conventional courses that form the basis of learning the skills of saving teeth have been fewer in number. Everybody wants to learn how to surgically place a dental implant. It appears that some apparent "need" of patients has driven clinicians to subscribe to these weekend courses in surgery so they can respond to these patient "needs." Patients see their dentist regularly to save their teeth, not to have their teeth sacrificed for implant dentistry. Are we sending the wrong message here?

Better for the patient?

Once the courses are finished, most clinicians receive the golden label of approval, a dental certificate of completion that they can hang on their dental mantel at the office. On Monday morning, they become changed and charged individuals. They have been pre-programmed to now look at patients as potential implant patients. Their approach to dentistry has changed overnight. In the past, they spent four to five years in dental school learning most of the skills to save teeth. These skills involve different forms of dentistry, not limited to periodontics, operative dentistry or endodontics. They spent countless hours learning about how to negotiate root surfaces in debridement, root canal curvatures in endodontics and multiple techniques in operative dentistry to save teeth. But overnight, all that has changed. Why spend so much time saving teeth, when you can remove them and place a dental implant at half the time? Is this really better for the patient?

Why burden the patient with multiple periodontal procedures to save teeth when the alternative is here? This approach seems to be contagious in the thinking of clinicians today. Many are concerned that dentists are not promoting the right approach to saving the integrity of the natural dentition. This attitude is so contagious that even some endodontists are learning to place dental implants. Is this not a clear conflict of interest? What is their motivation?

Are we doing enough to teach dentists how to diagnose and prognose the ailing dentition? When does the ailing dentition become a failing dentition? When is it appropriate to choose implant dentistry over conventional, time-proven and predictable conventional dentistry? The removal of key aspects of dental training creates dentists who are not confident to diagnose or render the necessary procedures to save teeth adequately. Their clinical skills in recognizing and managing ailing dentitions are limited. Their ability to recognize when and where dental implants may be used can be influencing their ability or motivation to save teeth. Are we not creating a conflict of interest for our patients? The true "need" should be to go back to basics and learn how to save teeth first, so patients are able to keep the most natural dental implant of them all.

SEBASTIAN SABA, DDS, CERT. PROS., FADI, FICD, is a graduate of the Goldman School of Dental Medicine, Boston University. He has published extensively on the topics of prosthetic and implant dentistry and has a private practice in Montreal limited to prosthetic and implant dentistry.

◂ WORLD, page A2

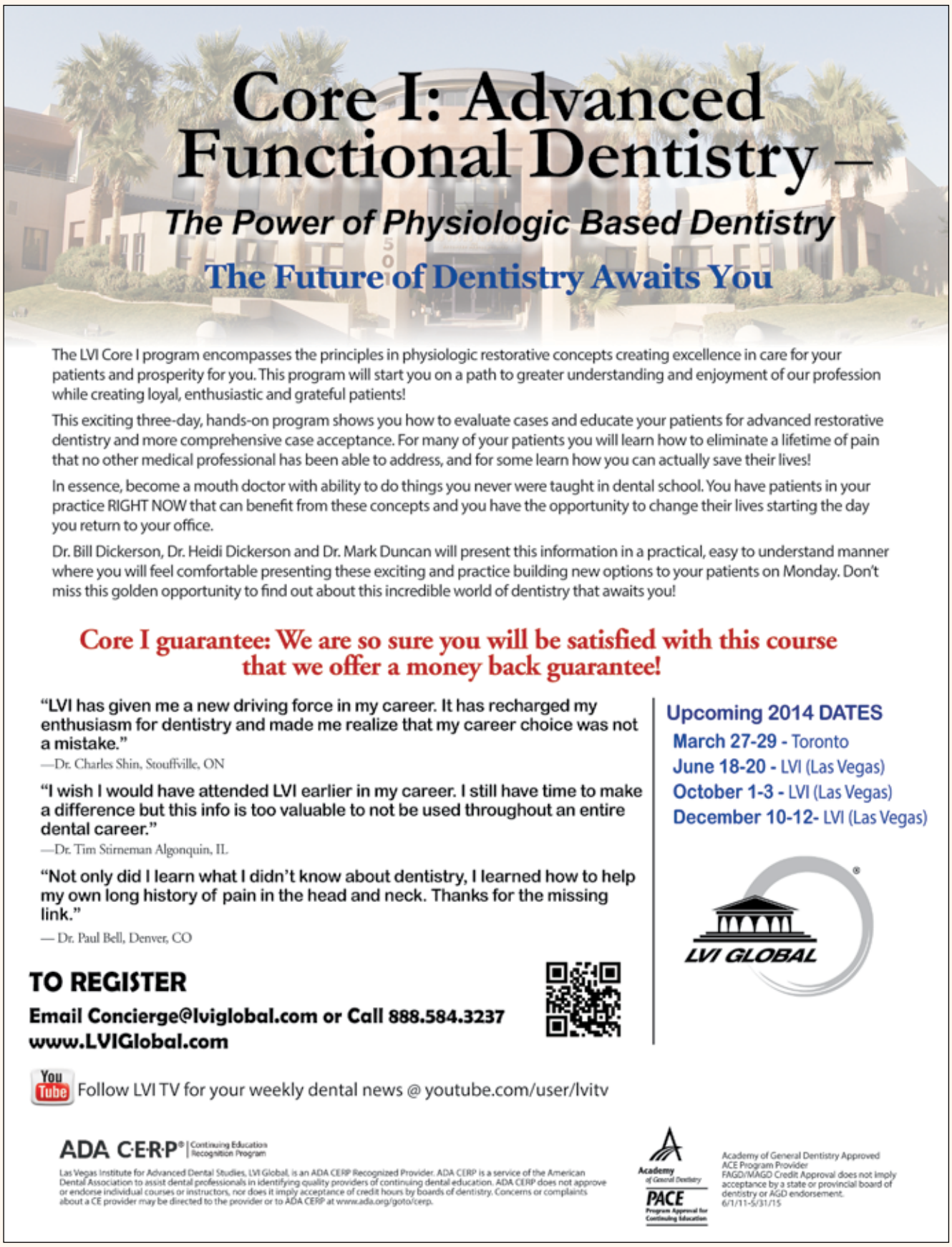
giant photo montage of healthy smiles.

WOHD 2014 campaign posters are now available to all national dental associations and other specialized groups for use in their local communities. And slots in radio shows are being booked and newspaper articles are being written to promote the upcoming activities and spread awareness.

Dental students around the world, organized under the umbrella of the International Association of Dental Students, also are participating, going into schools and other community centers to inform and help improve oral health. Based on respone to date, the number of Dental Student Associations participating in 2014 will likely double the amount seen in 2013.

(Source: World Oral Health Day)

AD



Today's successful practice has a chief operations officer. Do you?

Running a dental practice isn't hard, the challenge is running a successful one

By Roxanne Moulden
Founder and Executive Director, DOMACAN

In today's world, dentists have to be savvy businesspeople as well as excellent clinicians. Organizing a successful dental practice has become more time consuming and definitely more complex as each year passes.

The list seems endless: ever-changing human resource issues, complex government/provincial/dental regulations, the need to train new team members, promoting the practice in a highly competitive marketplace, meeting patient needs and expectations, mastering new technology — all while keeping the schedule full. This is just a sampling of what a 21st century office manager (or, as the position is now called, "practice administrator") deals with on a weekly basis.

Why the name change from "office manager" to "practice administrator"? It's because most people do not like to be "managed," which is something we learned a long time ago.

The question is: Should you have an "office manager" or hire a "chief operations officer"? By definition, a COO is responsible for the corporation's operations. This individual looks after issues related to marketing, sales, production and personnel. More hands-on than the CEO, the COO looks after day-to-day activities while providing feedback to the CEO (the dentist/owner). Doesn't this sound like what every modern dental office needs today?

'I just want to do dentistry'

I hear over and over again from dentists across the country: "I just want to do dentistry and let someone else handle the rest." Easier said than done!

A dentist in the 21st century office is working harder than ever before trying to balance office hours and family life. He or she is often working evening hours and Saturdays, bringing charts home to treatment plan — and staying on call 24/7 for emergencies — to provide exceptional care to patients and remain competitive.

A COO may be just what your office needs to relieve you of the many tasks that could be delegated to someone else.

Most effective practice administrators or COOs are not born that way. You may have a very skilled team member with many years of experience, but that person most likely doesn't possess the necessary leadership skills and abilities to be your COO.

What makes a good COO?

Let's examine the qualities of a good COO. An effective COO must:

- Possess an attitude of gratitude.
- Have a high dental IQ and be emotionally intelligent.
- Demonstrate strong communication skills.
- Excel at motivating and leading others.
- Lead by example so others will follow.
- Take initiative and think "outside of the box."
- Think quickly and solve problems.
- Understand all software reports.
- Be the most positive person you know.
- Be the liaison between the office and accountant, bank, sales reps, marketing companies, etc.
- Share your practice vision.

In a nutshell: Your COO must be everything you are not!

If you already have this person on your team, remember to thank them daily.

If you need someone like this to join your team, where do you start to look?

Whether you promote someone from within your office or hire someone from outside, the key to success is in the training of this individual.

Did you know there is a new organization to help you train and continually guide your future COO?

This organization is the Dental Office Managers and Administrators of Canada (DOMACAN), which was created to bridge the gap between the clinical and business sides of dentistry.

DOMACAN is the official Canadian education and networking association created for all dental professionals: office managers, administrators, treatment coordinators, patient coordinators, hygienists, assistants, spouses and dentists.

The organization's goal is to be the trusted daily, weekly and monthly news and information resource with tools, tips and inspiration for dental practice success and profitability. Each year DOMACAN strives to bring the best and most relevant speakers to our annual conference and provide members with networking opportunities year-round through forums, articles, webinars and "Ask-the-Expert" resources.

There is a new organization to help you train and continually guide your future COO: The Dental Office Managers and Administrators of Canada (DOMACAN), created to bridge the gap between the clinical and business sides of dentistry.

Photo/Provided by DOMACAN

'DOMACAN is the official Canadian education and networking association created for all dental professionals: office managers, administrators, treatment coordinators, patient coordinators, hygienists, assistants, spouses and dentists.'

For entire dental team

DOMACAN has something for everyone on the dental team.

I invite you to become a member today by visiting *www.domacan.org*. For a limited time, you will be able to enjoy a complimentary membership courtesy of Henry Schein.

If you want to take your practice to the next level, you first need to understand that you need to take your team to the next level. To take a first step, join DOMACAN and start training the right person to be your COO to maximize the potential in your team and your office today.

About the author

ROXANNE MOULDEN is the founder and executive director of DOMACAN, the Dental Office Managers and Administrators of Canada. She can be contacted at *info@domacan.org* or through the DOMACAN website, *www.domacan.org*.

◂ VANCOUVER, page A1

umbia. The bulk of sessions oriented specifically toward dental technicians will be concentrated on Saturday, March 8. There also will be a DTABC exhibit hall on that day, from 9 a.m. to 3 p.m., with more than 20 exhibitors participating.

The Pacific Dental Conference typically attracts around 12,000 attendees, seeing consistent growth in recent years — and reaching a new record of 12,200 participants in attendance at the 2013 meeting.

For the majority of attendees, C.E. credit is given for general attendance (maximum of five hours) and hour-for-hour credit for individually attended courses. It is the responsibility of each individual to submit his or her own C.E. to the applicable provincial authority. Be sure you are scanned in and out of every session.

Two-day exhibit hall

The exhibit hall promises to be busy, with more than 300 companies projected to fill approximately 600 booths. Exhibition hours are 8:30 a.m. to 5:30 p.m. on Thursday and Friday, March 6 and 7.

Special hotel rates are available to attendees, with early booking recom-

▸ See VANCOUVER, page A6

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PDC features two days of live dentistry

The Live Dentistry Stage returns to the Pacific Dental Conference exhibit hall with procedures on Thursday and Friday, March 6 and 7. Each sesion is eligible for C.E. credits. Here is the schedule (subject to change).

Thursday, March 6

11 a.m.–12:30 p.m., Glenn van As, DMD, BSc, with "Laser Dentistry: Removing Porcelain Veneers, Crown Lengthening, Tissue Management," co-sponsored by BIOLASE.

1–2 p.m., Shannon Pace Brinker, CDA, CDD, with "Complete Records Visit."

2:30–4 p.m., Peter Walford, DDS, FCARDP, with "Restoring Incisal Attrition with Composite Resins," co-sponsored by 3M ESPE Dental Products.

Friday, March 7

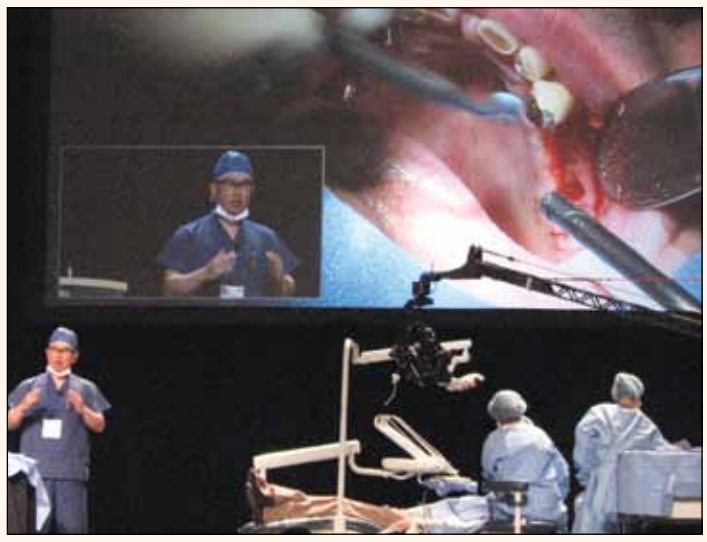
8:30–10:30 a.m., Mark Kwon, DMD, FICOI, and Mark Lin, BSc, DDS, MSc (Prosthodontics), FRCD (C) with "Teeth in a Day: Implant Dentistry," co-sponsored by Hiossen Implant Canada Inc.

11:30 a.m.–1:30 p.m., Elliot Mechanic, BSc, DDS, with "Anterior Tooth Wear – Restoration," co-sponsored by Canadian Academy for Esthetic Dentistry.

2:30–4 p.m., Alex Touchstone, DDS, with "CAD/CAM," co-sponsored by Henry Schein.

The Live Dentistry Stage is sponsored by A-dec and Sinclair Dental.

(Source: Pacific Dental Conference)



Dr. Mark Kwon performs 'Implant with Sinus Surgery' as Dr. Bernard Jin (standing at left and inset on the giant video screen) provides commentary on the Live Dentistry Stage at the 2013 Pacific Dental Conference. Photo/Dental Tribune file photo

AD

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mended to ensure availability. Reservations can be made directly with conference hotels via the links on *www.pdconf.com*.

Among the social events at the conference is "Life is Too Short to Drink Bad Wine, Australia Versus New Zealand." Scheduled from 6–7:30 p.m. on Thursday, the wine tasting event features a selection of wines from New Zealand and Australia. You get to decide which country deserves bragging rights for the best expression of a variety of families of wine. Information will be provided about each of the wines, and David Lancelot, known as "The Wine Whisperer," will be available to answer wine-related questions. Tickets cost $40.

The "Saturday Morning Breakfast Session" will feature stand-up comic Meg Soper, who has a background in health care. She helps health-care professionals improve their ability to find humour in situations to reduce stress. The continental breakfast and Soper's presentation is from 8:30 to 9 a.m. Tickets are $15.

The "14th Annual Toothfairy Gala and British Columbia Dental Association Awards" is Saturday, March 8, in the signature ballroom of the Vancouver Convention Centre, overlooking Vancouver Harbour. The evening's activities begin at 6 p.m. and include a champagne reception, silent auction, four-course dinner and the awards presentations. A "Cake Auction" will feature designer cakes being auctioned off in the presence of the toothfairy. Dress is black tie (or 1960s chic) optional. All proceeds from the event benefit the University of British Columbia Faculty of Dentistry Community Outreach Programs.

On-site registration

Online registration closes at midnight, Friday, Feb. 21. On-site registration will be open on Tuesday, March 4, 2–6 p.m.; Wednesday, March 5, 7 a.m. to 7 p.m.; Thursday, March 6, 7:30 a.m. to 6 p.m.; Friday, March 7, 7:30 a.m. to 6 p.m.; and Saturday, March 8, 7:30 a.m. to 4 p.m.

(Source: Pacific Dental Conference)

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JDIQ in Montreal, May 23–27

The 44th edition of the Journées dentaires internationales du Québec will take place from May 23–27 at the Palais des congrès de Montréal.

Hosting the Association of Prosthodontists of Canada

One of the biggest changes with the 2014 edition of the meeting is that the JDIQ will host the Association of Prosthodontists of Canada. Among the benefits expected from this joint venture, which also involves the Association of Prosthodontists of Quebec, will be a larger number of top speakers in implant and restorative dentistry — and a presence at the meeting of a larger number of prosthodontists from across Canada.

The annual meeting of the Ordre des dentistes du Québec continues to be one of the highest-attended dental meetings in North America. In 2014, meeting organizers expect to host more than 12,000 delegates from around the world.

More than 100 lectures and workshops in English and French

The meeting will feature a scientific program with more than 100 lectures and workshops presented in English and French. The JDIQ meeting is described by organizers as being Canada's most highly attended bilingual convention.

More than 225 exhibitors will occupy approximately 500 booths in the exhibit hall, making it one of the largest in Canada. The exhibition will be open Monday and Tuesday, May 26 and 27, and it will feature a continental breakfast on both days for the early risers as well as a wine and cheese reception to close out both afternoons.

Featured 2014 speakers already in the lineup include Drs. Dale Miles, Robert Langlais, Steven Olmos, Stephen Niemczyk, Manor Hass, Jonathan Bregman, Michael Di Tolla, Gerry Kugel, Karl Koerner, Joe Blaes, Jason Smithson, Brian Novy, Ken Hargreaves, Thomas Dudney, Robert Gutneck, Tieraona Low-Dog and James Mah, to name just a few.

For more information about the meeting, you can call (800) 361-4887, visit online at *www.odq.qc.ca* — or you can send an email to *congres@odq.qc.ca*.

(Source: Ordre des dentistes du Québec)

Toronto Academy of Dentistry Winter Clinic packs big meeting into one day

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.

There is a new host venue for the Toronto Academy of Dentistry Winter Clinic: The single-day Friday, Nov. 14, meeting will be held at the Toronto Sheraton Centre in the heart of downtown Toronto. Photo/Provided by Starwood Hotels & Resorts Worldwide Inc.

Many major Toronto attractions close to venue

Among the attractions: Art Gallery of Ontario, Royal Ontario Museum, Hockey 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.

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)

Greater New York Dental Meeting adds new events

A number of new events are already on the schedule for the 2014 Greater New York Dental Meeting. Some highlights:

• The World Implant Expo, four days of innovations in implantology.

• An expanded exhibit floor with more than 1,700 exhibit booths filled by more than 700 companies.

• An expanded ColLABoration Dental Laboratory Meeting, bringing together dentists and tab techs in a highly interactive environment.

Presented with Aegis Publishing, ColLABoration is expected to surpass its inaugural 2013 numbers: 1,183 technicians and technician students, 50 exhibitor booths and two classrooms for seminars and workshops.

The new World Implant Expo will be held simultaneously with the main Greater New York Dental Meeting, from Nov. 28 through Dec. 3.

The 2014 GNYDM exhibit hall dates will be from Nov. 30 through Dec. 3.

Again for 2014, the GNYDM, which is sponsored by the New York County Dental Society and Second District Dental Societies, will remain free of any registration fee.

Four days of exhibits

Other distinctions that help make the GNYDM stand out include:

• Only event with four-day exhibit hall

• More than 300 educational programs

• One C.E. unit for exploring the exhibit floor

• Eight "Live Patient Demonstrations"

• Multilingual programs (in Spanish, Russian, Portuguese, French and Italian)

Three major airports — Newark Liberty (EWR), Kennedy (JFK) and La Guardia (LGA) — and hotel discounts make it easy for professionals to attend the meeting and enjoy all that New York City has to offer during the holiday season. Learn more at *www.gnydm.com*.

(Source: Greater New York Dental Meeting)

LVI Core I three-day course enables dentist and team to learn together

By Mark Duncan, DDS, FAGD, LVIF, DICOI, FICCMO
Clinical Director, LVI

As a patient, I expect the best care I can find. As a doctor, I want to deliver the best care possible. That takes us to the power of continuing education, and as doctors we are faced with many choices in continuing education.

As a way to introduce you to the Las Vegas Institute for Advanced Dental Studies, or LVI, I want to outline what LVI is about and what void it fills in your practice. The alumni who have completed programs at LVI were given an independent survey, and unlike the typical surveys, 99.7 percent said they love practicing dentistry, and of those surveyed, 92 percent said they enjoy their profession more since they started their training at LVI. That alone is reason enough to go to LVI and find out more.

While the programs at LVI cover the breadth of dentistry, the most powerful and life-changing program is generally reported as Core I, "Advanced Functional Dentistry: The Power of Physiologic-Based Occlusion."

This program is a three-day course that is designed for doctors and their teams to learn together about the power of getting their patients' physiology on their side. In this program, doctors can learn how to start the process of taking control of their practice and start to enjoy the full benefits of owning their practice and providing high-quality dentistry.

Whether he or she works in a solo practice or in a group setting, every doctor can start the process of creating comprehensive care experiences for his or her patients.

We will discuss why some cases that doctors are asked by their patients to do are actually dangerous cases to restore cosmetically. We will discover the developmental science behind how unattractive smiles evolve and what cases may need the help of auxiliary health care professionals to get the patient feeling better.

The impact of musculoskeletal signs and symptoms will be explored and how the supporting soft tissue is the most important diagnostic tool you have — not simply the gingiva, but the entire soft-tissue support of the structures not just in the mouth but also in the rest of the body.

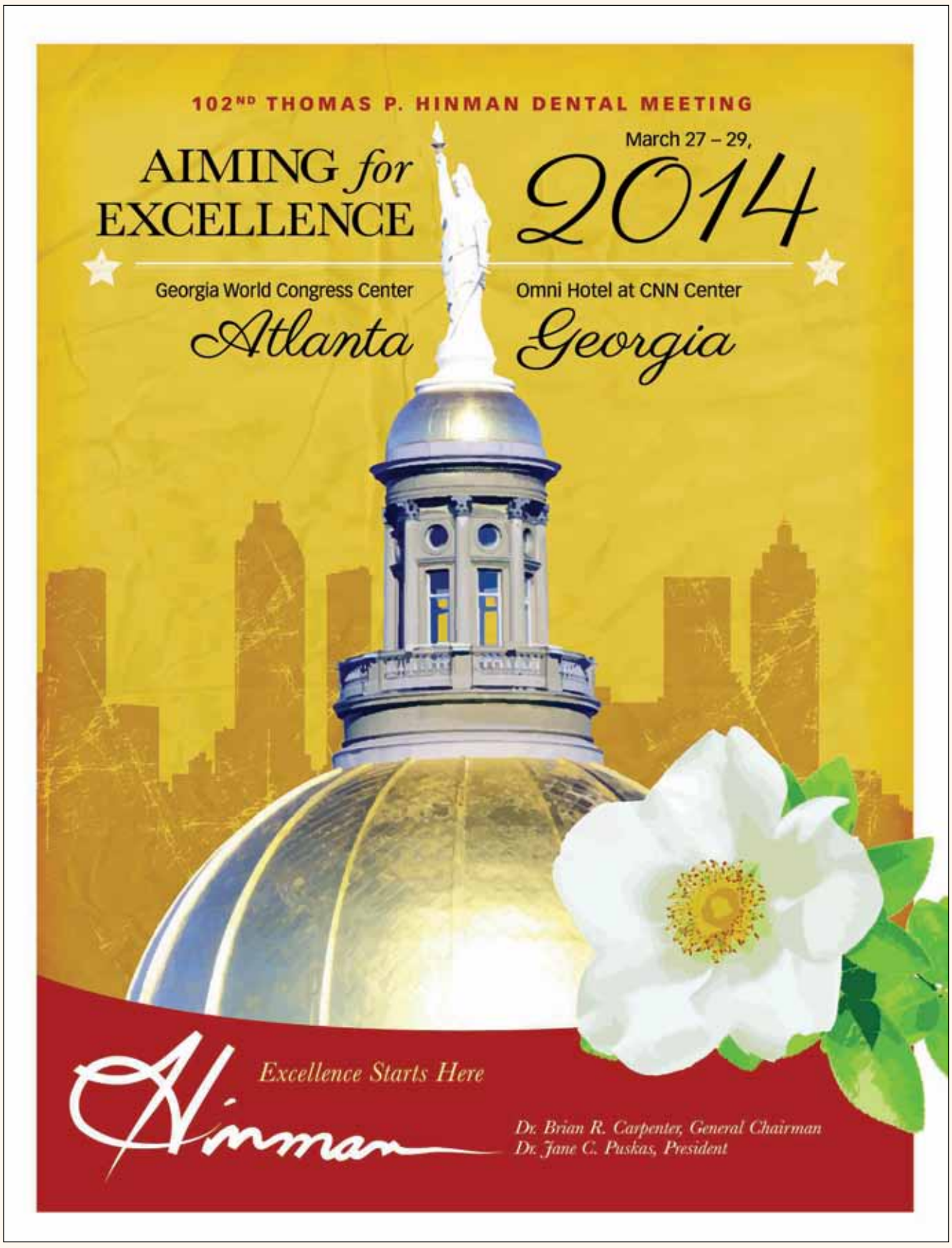
Comprehensive care

A successful restorative practice doesn't need to be built on insurance reimbursement schedules.

An independent business should stand not on the whims and distractions of a fee schedule but rather on the ideal benefits of comprehensive care balanced by the patients' needs and desires.

Dentistry is a challenging and thankless business, but it doesn't have to be. Through complete and comprehensive diagnosis, there is an amazing world of thank-yous and hugs and tears that our patients bring to us, but only when we can change their lives. The Core I program at LVI is the first step on that journey.

That's why when you call, we will answer the phone, "LVI, where lives are changing daily!"

Las Vegas Institute for Advanced Dental Studies offers Core I, a three-day course for doctors and their teams. Photo/Provided by Las Vegas Institute for Advanced Dental Studies

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