TA EDITOR

DENTAL TRIBUNE

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Vol. 5, No. 12



Where are the periodontists? Read about the mind-set change in perio and decide for yourself if it's good or bad. ▶ page 4A

ENDO TRIBUNE

AAE hosts meeting

New techniques and products revealed at San Diego event.

COSMETIC TRIBUNE

The Smile Design Wheel

Learn the four steps of this wheel, which will simplify an often complex design process.

page 1C

NCOHF grants support community-based children's care

By Fred Michmershuizen, Online Editor

The money donated to National Children's Oral Health Foundation: America's Toothfairy is being put to good use. NCOHF recently announced it has awarded grants totaling \$109,050 to eight not-for-profit community, university and hospital-based dental programs nationwide.

The grants are as follows:

- Catholic Healthcare West, Chandler, Ariz., \$15,000
- Community Oral Health Services, Salinas, Calif., \$15,000
 - Sonrisas Community Dental Center, Half

Moon Bay, Calif. \$9,050

- The Children's Dental Center, Inglewood, Calif., \$15,000
- \bullet The Gary Center, La Habra, Calif., \$10,000
- Indiana University School of Dentistry, Indianapolis, \$15,000
- Community Dentistry on Wheels, Largo, Md., \$15,000
- A Fluoride Connection Non Profit Corp., Madison, Wis., \$15,000

According to the NCOHF, the grant recipients are members of the growing affiliate network delivering comprehensive preventive, restorative and education-



(Photo/NCOHF)

page 2A , 'NCOHF'

Hello, San Antonio!

The Henry B.
Gonzalez Convention Center in San
Antonio will host the
Texas Dental Association's meeting May
6-9. Read about
what there is to do
in the city when you
have some spare
time.

→ See page 3A



(Photo/Brandon Seidel, Dreamstime.com)

Economic hardship takes toll on teeth

Is it true that people postpone or forgo dental treatment in difficult economic times? According to one recent survey of dental practitioners, the answer is, unfortunately, yes.

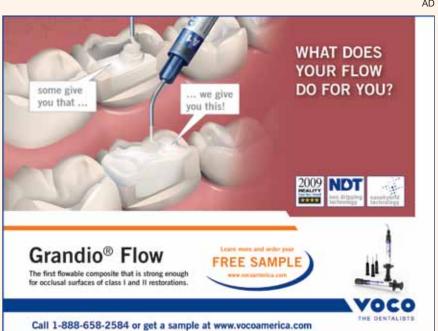
The Chicago Dental Society conducted a poll of 250 members to learn more about their opinions on currents trends, dental topics and more. According to the survey, the

effects of the recession on the dental industry have worsened over the last year.

More than 90 percent of dentists surveyed said their clients are putting off cosmetic procedures, the Chicago Dental Society reported. In addition, more than 75 percent of

→ DT page 2A , 'Economic'

AD



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'More should be done to improve children's oral health,' AGD says

By Fred Michmershuizen, Online Editor

According to the Academy of General Dentistry, more needs to be done to improve children's oral health as oral diseases negatively impact learning, interfere with eating and contribute to poor self-esteem.

AGD President David F. Halpern, DMD, FAGD, testified in the nation's capital recently during the first meeting of the Institute of Medicine (IOM) Committee on Oral Health Initiative. During his testimony, Halpern emphasized access to care and oral health literacy.

"Public schools have played a critical role in keeping our children healthy," Halpern said. "Schools routinely hold programs to ensure that our children can hear properly, see properly and are free from other diseases. However, dental diseases, the most prevalent of all, do not receive the same attention."

Halpern asked the Department of Health and Human Services (HHS) to consider mandating oral health programs in all public schools.

Additionally, Halpern expressed his support for initiatives that ensure that minority and rural populations receive quality oral health care services from dentists. Such initiatives, he said, could include loan repayment programs to dentists working in community health and underserved settings, the restoration of Title VII, and patient transportation and non-dental social services programs.

Halpern also spoke about the

importance of shifting from a treatment-based concept of medicine to one based on prevention. He stated that this transformation can be achieved by assisting patients, physicians and communities to become oral health literate.

"Yes, the HHS must continue its water fluoridation programs as a fallback to maintain a minimal level of oral health in communities, but this is not nearly sufficient — utilization through greater oral health literacy is mandatory," Halpern said.

Halpern also expressed his disappointment over the lack of a practicing private-practice dentist on the committee and encouraged the committee to reconsider appointing a general dentist from the private-practice community.

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Publisher & Chairman

Torsten Oemus

t.oemus@dental-tribune.com

Vice President Global Sales Peter Witteczek

p.witteczek@dental-tribune.com

Chief Operating Officer
Eric Seid

e.seid@dental-tribune.com

Group Editor & Designer

Robin Goodman r.goodman@dental-tribune.com

Editor in Chief Dental Tribune Dr. David L. Hoexter d.hoexter@dental-tribune.com

Managing Editor/Designer Implant Tribune & Endo Tribune Sierra Rendon

s.rendon@dental-tribune.com

Managing Editor/Designer Ortho Tribune & Show Dailies Kristine Colker

k.colker@dental-tribune.com

Online Editor

Fred Michmershuizen f.michmershuizen@dental-tribune.com

Product & Account ManagerMark Eisen
m.eisen@dental-tribune.com

Marketing Manager Anna Wlodarczyk a.wlodarczyk@dental-tribune.com

Sales & Marketing Assistant Lorrie Young l.young@dental-tribune.com

C.E. Manager
Julia E. Wehkamp
j.wehkamp@dental-tribune.com

Dental Tribune America, LLC 213 West 35th Street, Suite 801 New York, NY 10001 Tel.: (212) 244-7181 Fax: (212) 244-7185

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all oral-health programs to children from vulnerable populations.

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ADS

Through continued support from financial and product contributions, as well as technical resources, the affiliate network has reached more than 1 million children since 2006, NCOHF said.

"It is only through the continued generosity of NCOHF individual, organizational and corporate partners that America's Toothfairy grant awards are possible," said Fern Ingber, NCOHF president and CEO, in expressing gratitude to supporters.

"We are honored to serve as a comprehensive resource provider for our affiliate network of nonprofit health-care facilities, and we are grateful that so many donors share in the NCOHF mission to eliminate children's unnecessary suffering from pediatric dental disease."

A representative of A Fluoride Connection Non Profit Corp., one of the grant recipients, expressed gratitude to NCOHF for the financial support.

"We work in an area that has many rural poor farm families. Many don't qualify for the state-offered dental health plan, and as a result our organization receives very low reimbursement from the state program," said Kathleen Traut, executive director of A Fluoride Connection.

"We won't turn any child away if they are uninsured or otherwise aren't on the program, we simply get paid less. Funding from America's Toothfairy has eased our financial worries in providing vital services for the little ones who won't otherwise have any dental experiences at all. It is gratifying to share such a passion for children's oral health with America's Toothfairy."





← DT page 1A, 'Economic'

dentists said their patients are putting off needed dental work and visits for preventative dental care are also on the decline according to more than half of dentists.

The survey also revealed that nearly 75 percent of dentists surveyed said their patients are reporting increased stress in their lives, and 65 percent of dentists are seeing an increase in jaw clenching and teeth grinding among their patients, signs that stress may be taking its toll on the mouth.

By Fred Michmershuizen, Online Editor

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Hello, San Antonio!

By Robin Goodman, Group Editor

San Antonio is Texas' second most-populated city and is best known for the Alamo and the River Walk — a three-mile stretch of waterside paths laden with shops, restaurants and nightclubs.

For those attending the upcoming Texas Dental Association meeting, here are some free things to do in the city, but you can also head out to visit some nearby towns. (There's even one that will let you be a cowboy for a day. Giddyap!)

The Missions & the Alamo

San Antonio's beginnings are found in the five Spanish colonial missions that were built along the San Antonio River. These missions and the Alamo offer free admission. If you are feeling energetic, grab a bike (or your hiking boots) and cruise the 12-mile Mission Trail that links them all.

The River Walk

Complete with shade-filled parks, the sound of splashing water and lots of people watching, the River Walk is worth a trip. Browse the wares and take your pick of one of the many restaurants and dessert options along the way.

La Villita

Along the River Walk is la villita, which means "the little village." Today this historical site is an art village with galleries, shops and private residences.

Live music

The Main Plaza, found near the River Walk and San Fernando Cathedral, features free music concerts on the weekends. Marvel at the wise, old oak trees and the tinkling of water in nearby fountains.

Glass blowing

Gini Garcia is a renowned glass blower who you might be able to catch a glimpse of in action in Southtown at Garcia Art Glass.

Mexican artists

Head to Market Square to view the cornucopia of works presented by local working artists. This happens to be the largest Mexican market in the nation too.

Japanese Tea Garden

Located next to Brackenridge Park, you'll find Koi ponds strewn around stone paths that wander through the gardens. (The San Antonio Zoo is nearby too.)

Gruene Market Days

Revel in arts and crafts galore just 20 miles outside of San Antonio in the town of Guene. Painting, sculpture and everything in between are part of the monthly juried art show called

Gruene Market Days. Hit downtown for music and German cuisine, and shuffle over to the Guene Dance Hall for country and Tejano music.

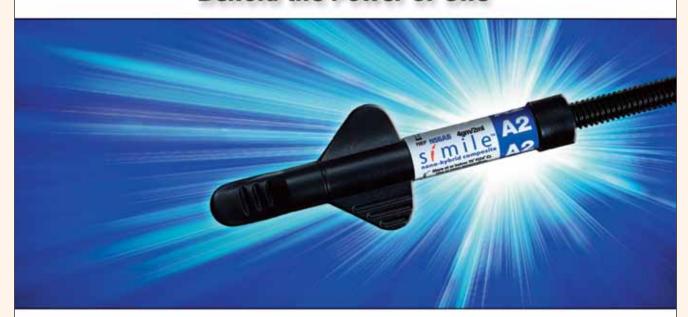
Cowboy for a day

Just 40 miles outside of San Antonio is Bandera. Bring your cowboy hat to enjoy horseback riding or a longer trail ride through the Texas Hill Country. There are rodeo shows every night at Lightning Ranch or Twin Elm Guest Ranch.

(Source: www.visitsanantonio.com)



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Sybron Dental Specialties

Where did all the periodontists go?

By Louis Malcmacher, DDS, MAGD

Through my weekly travels to



different cities across America, I speak to many dental specialists and their groups on the hottest topics in dentistry, practice management and total facial esthetics.

There are definite treads that are changing in all specialties across the board, whether it is short-term orthodontics versus long-term orthodontics, adhesive resin endodontics versus traditional gutta-percha endodontics or the conversation as to whether or not general dentists should be providing some of these specialty

I would have to say that the big-

gest change of any single dental specialty that I have seen has been in the periodontal field. There has been a real mind-set change that deeply affects the profession. I am not commenting here on whether this change is good or bad — I will leave that up the to the reader to

It is certainly something to consider as general dentists who refer patients to periodontists on what your treatment will be for the long

I have always believed that general dentists are the quarterbacks of any patient treatment case and we certainly rely on the skills and input of dental specialists, but the ultimate responsibility should be on the general dentist.

Here is what I am being told by many periodontists whom I have spoken to over the last couple of years: they would rather remove teeth and place implants than actually treat patients through traditional periodontal surgery and try having them maintain their dentition.

The reason for this is really quite simple and every dentist knows this inherently. Patients refuse to take good care of their teeth even after they have gone through the time, cost, commitment and pain of traditional periodontal surgery. This is certainly not earth-shattering news to any of you.

For years in our own practice, we have had patients who did not want periodontal surgery and would rather maintain the state of their oral health with threeto four-month recall prophylaxis visits. We would often predict that their teeth would fall out within two to three years.

Surprisingly, many of these patients have done reasonably well 20 years later, with the occasional loss of a tooth here or there.

This thought was blasphemy to periodontists for years and years, but certainly it seems that conservative non-surgical periodontal recall visits and treatment has helped many patients maintain their dentition in a reasonable state so that they can function and smile with their original teeth for

As general dentists we have known that even with the best periodontal surgery treatment, patients would often fall into their old habits and eventually their dentition would fail anyway. Not all patients, but many of them.

We have learned that we have to treat people as people and sometimes you just cannot change them no matter what you do.

It seems to me that periodontists have now caught up with this concept and that is where this mind-set has really changed





(Photo/Webking, Dreamstime.com)

periodontics today. Patients like the concept of implants, which are still vastly underused in North America.

Many patients would rather not have to take care of their teeth and have these unsightly, mobile teeth extracted and replaced with implants, which would restore their function and their esthetics.

With a 94 percent implant success rate, it is hard to argue when that success rate is so high compared to the poor long-term suc-

cess rate of traditional periodontal surgery.

This is primarily because we have to depend upon the patients to keep up their regimen for the long-term success of their natural dentition.

New procedures — such as the wavelength optimized periodontal therapy (WPT) procedure with the Powerlase AT Laser by Lares Research, and LANAP procedures done with the Periolase laser by Millenium Dental — have brought

periodontal services into the minimally invasive realm as a solution for patients who do want to keep their teeth without heavily invasive periodontal surgery.

Laser periodontal treatment will continue to develop and become even more effective in the future.

Procedures such as implants

and minimally invasive laser periodontal therapy will continue to improve and change the way we practice in this new decade.

Is this good or bad?

You are the dental clinician, so this is for you, the periodontist and the patient to decide.

About the author

Dr. Louis Malcmacher is a practicing general dentist in Bay Village, Ohio, and an internationally recognized lecturer and author known for his comprehensive and entertaining style.

An evaluator for Clinicians Reports, Malcmacher has served as a spokesman for the AGD and is president of the American Academy of Facial Esthetics.

You may contact him at (440) 892-1810 or e-mail *dryowza@mail.* com.

You can also see his lecture schedule at *www.commonsense dentistry.com* where you will find information about his Botox and dermal filler live patient hands-on training, practice-building audio CDs and free monthly e-newsletter.





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Offer pediatric patients a 'NuSmile'

Esthetic crowns provide a durable restoration for decayed primary teeth

By Sierra Rendon, Managing Editor

NuSmile offers practitioners easy placement of esthetic stainless-steel crowns for children, said CEO/President Diane Johnson Krueger.

"Stainless-steel crowns have always been the restoration of choice for ease and durability for children whose teeth are affected by early childhood caries (ECC), but parents and doctors have never been happy with the esthetics of these restorations," she said.

NuSmile was first introduced in 1991, and though other companies have similar products, Krueger said NuSmile is set apart by its quality and durability.

"There are a few other companies that have similar products, but NuSmile has performed with consistently higher results in laboratory studies that measure things such as fracture and fatigue resistance, color stability and wear," she said.

"Also, in two separate surveys of pediatric dentists, more dentists preferred NuSmile crowns than any other esthetic pediatric crowns offered."

Dentists can quickly learn the NuSmile technique for properly fitting crowns.

"The technique for placing Nu-Smile crowns differs a bit from the technique for placing standard stainless-steel



Jason Johnson, chief operating officer of NuSmile Primary Crowns, shows off the company's products in the exhibit hall at the recent Midwinter Meeting in Chicago. (Photo/Sierra Rendon)

crowns," Krueger said. "We have a great instructional DVD with actual patient cases that demonstrates exactly how to prepare the tooth and seat a NuSmile crown. NuSmile crowns are offered for both anterior and posterior deciduous teeth.

"There are currently two shades offered; they are sold in kits and individually with no minimum order," she said.

What's the main thing to remember when considering NuSmile crowns?

"Easy placement, not technique-sensitive like a strip

crown. Full coverage protection of remaining tooth structure, just like a stainless-steel crown," Krueger said.

"Good esthetics for many years; these crowns are extremely durable ... more so than strip crowns or any other esthetic-coated crowns available.

"Our company is dedicated to beautiful, healthy smiles for all children. NuSmile anterior and posterior crowns are anatomically correct, stainless-steel crowns with the most natural-looking, tooth-colored facing available."

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how committed you are to fighting this disease by signing up to be listed at www. oralcancerselfexam.com.

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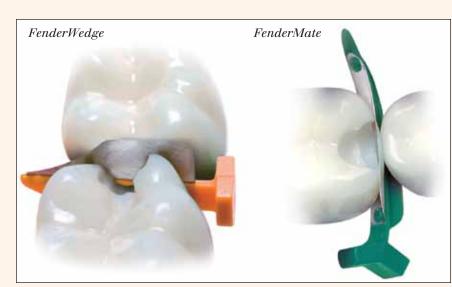
During Class II preparation there is a major risk for damaging the adjacent tooth. Research shows adjacent teeth are damaged in up to 70 percent of all cases.

Until now, protection methods have the disadvantage that the shield loosens when the approximal contact point is cut away, increasing the risk of accidental aspiration of the shield.

The need for improved pro-

tection methods led Directa to design and develop FenderWedge, a plastic wedge with an attached vertical stainless-steel band that protects the adjacent teeth and, at the same time, separates the teeth for an optimal restoration of the contact point. FenderWedge is securely held in place throughout the entire preparation.

FenderWedge is inserted into the approximal space as easily as



(Photo/Directa)

ADS





'Available only in states where applicable

any other wedge. As the wedge creates interdental separation, the vertical steel band automatically establishes correct positioning for a good contact point.

The comfort of knowing that 0.08 mm of metal protection will help avoid needless damage to healthy teeth is simply priceless.

FenderWedge is available in four different sizes from extra small (1.0 mm) to large (2.3 mm). They accommodate all interdental

In Directa's quest to design and develop high-quality useful products, the logical next step after the use of FenderWedge is the introduction of FenderMate, an innovative wedge and section matrix combined. FenderMate offers a two-in-one-step procedure like nothing else in the market.

After pre-separation of the interdental space with Fender-Wedge, FenderWedge is removed and replaced by FenderMate.

After insertion, FenderMate adapts around the tooth and holds shape without the use of a reten-

FenderMate's flexible wing separates the teeth and firmly seals the cervical margin. A good contact point is created by the unique pre-shaped indentation in the matrix. No burnishing is neces-

FenderMate is available in two wedge widths, regular and narrow, and for left or right application. The new innovative design accommodates most approximal

The combined use of Fender-Wedge and FenderMate sets a new standard in dentistry with a tissuefriendly approach for the preparation and filling of Class II cavities.

FenderWedge protects the adjacent tooth and separates the teeth, thus creating a perfect contact point, while FenderMate aids fast and efficient restorations with a one-piece wedge and matrix application.

Information about Directa products and distributors may be found at www.directadental.com or by calling (203) 788-4224. DT

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N California Wine Country—4 Ops, 1,500 sq. ft., GR \$958K #14296

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Porterville—6 Ops, 2,000 sq. ft., GR \$2,289000 #14291 Red Bluff—8 Ops, 2008 GR \$1,006,096, Hygiene 10 days a week. #14252

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Dixon—4 Ops, 1,100 sq. ft., GR \$122K. #14265 Grass Valley—5 Ops, 1,500 sq. ft., GR \$714K #14272 Oroville—Owner deceased, 7 ops, GR\$770K, 3000 sq. ft. bldg. #14310

Redding—5 Ops, 2,200 sq. fr., GR \$1 Million #14293 CONTACT: Dr. Thomas Wagner @ 916-812-3255

Laguna Beach—GR \$898K 2008, 4 Ops, 2,000 sq. ft. #14314 Laguna Hills—GR \$868K 2008, 6 Ops, Remodeled Office 2004 #14317

San Diego—GR \$185K 2009, 3 Ops, PPO and Fee for Service #14315

CONTACT: Thinh Tran @ 949-533-8308

CONNECTICUT

Fairfield Area—General practice doing \$800K #16106 Southburg—2 Ops, GR \$254K #16111 Wallingford—2 Ops, GR \$600K #16113 CONTACT: Dr. Peter Goldberg @ 617-680-2930

FLORIDA

Miami—5 Ops, Full Lab, GR \$835K #18117 CONTACT: Jim Puckers # 863-287-8500

Jacksonville—GR \$1.3 Million, 5,000 sq. ft., 7 Ops, 8 days hygiene #18118

CONTACT: Deanna Wright # 800-730-8883

GEORGIA

Atlanta Suburb—3 Ops, 2 Hygiene Rooms, GR \$863K #19125 Atlanta Suburb—2 Ops, 2 Hygiene Rooms, GR \$633K #19128 Atlanta Suburb—3 Ops, 1,270 sq. ft., GR \$438,563 #19131 Atlanta Suburb—Pediatric Office, 1 Op, GR \$426K #19134 Dublin—GR \$1 Million+, Asking \$823K #19107 Macon—3 Ops, 1,625K sq. ft., State of the art equipment #19103 North Atlanta—3 Ops, 3 Hygiene, GR \$678K+ #19132 Northeast Atlanta—4 Ops, GR \$607K #19129 Northern Georgia—1 Ops, 1 Hygiene, Est. for 45 years #19110 South Georgia—2 Ops, 3 Hygiene Rooms, GR \$722K+ #19133

ILLINOIS

Chicago—i Ops, GR \$709K, Sale Price \$461K #22126 1 Hr SW of Chicago—5 Ops, 2007 GR \$440K, 28 years old #22123

Chicago—5 Ops, GR \$600K, 3 day work week #22119 Galena—GR180K, located in Historic Bed & Breakfast Community #22129

Western Suburbs—5 Ops, 2-2,000 sq. fr., GR Approx \$1.5MM, #22120

CONTACT: Al Brown @ 630-781-2176

CONTACT: Dr. Jim Cole # 404-513-1573

MARYLAND

Southern—11 Ops, 3,500 sq. ft., GR \$1,840,628 #29101 CONTACT: Sharon Mascetti @ 484-788-4071

MASSACHUSETTS

Boston—2 Ops, GR \$252K, Sale \$197K #30122 Boston Southshore—3 Ops, GR \$300K. #30125 North Shore Area (Essex County)—3 Ops, GR \$500K+ #30126

Western Massachusetts—5 Ops, GR \$1 Million, Sale \$514K #30116

CONTACT: Dr. Peter Goldberg @ 617-680-2930

Middle Cape Cod—6 Ops, GR \$900K, Sale price \$677K #30124

Boston—2 Ops, 1 Hygiene, GR \$302K #30125 Middlesex County—7 Ops, GR Mid \$500K #30120 New Bedford Area—8 Ops, \$628K #30119 CONTACT: Alex Litvak @ 617-240-2582

MICHIGAN

Suburban Detroit—2 Ops, 1 Hygiene, GR \$213K #31105 Ann Arbor Area—Low Overhead - Well Run Practice GR 600K #31108

CONTACT: Dr. Jim David @ 586-530-0800

MINNESOTA

Crow Wing County—4 Ops, Sale Price \$412K #32104 Fargo/Moorhead Area—1 Op, GR \$185K #52107 Central Minnesota—Mobile Practice. GR \$730K+ #32108 Twin Cities—Move in & Practice Immediately GR \$800K #32110

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MISSISSIPPI

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Brooklyn—3 Ops (1 Fully equipped), GR \$175K #41115 Woodstock—2 Ops, Building also available for sale, GR \$600K #41112

CONTACT: Dr. Don Coben # 845-460-3054

Syracuse—4 Ops, 1,800 sq. ft., GR over \$700K #41107 CONTACT: Marty Hare @ 315-263-1313

New York City—Specialty Practice, 5 Ops, GR \$502K #41109 CONTACT: Richard Zalkin @ 631-831-6924

NORTH CAROLINA

Charlotte—7 Ops - 5 Equipped #42142

Foothills-5 Ops #42122

Near Pinehurst—Dental emerg clinic, 3 Ops, GR in 2007 \$373K #42134

New Hanover County—A practice on the coast, Growing Area #42145

Raleigh, Cary, Durham—Doctor looking to purchase #42127 CONTACT: Barbara Hardee Parker @ 919-848-1555

OHIO

Medina—Associate to buy 1/3, rest of practice in future. #44150 North Central—GR 619K, 4 Ops, Well Established #44159 North Central—GR 700K, 5 Ops, Well Established #44157 CONTACT: Dr. Don Moorhead @ 440-823-8037

PENNSYLVANIA

Northeast of Pittsburgh—3 Ops, Victorian Mansion GR \$1.2+ Million #47140

CONTACT: Dan Slain @ 412-855-0537

Chester County—High End Office, 4 Op's, Digital, FFS + a few PPO's #47141

Lackawanna County—4 Ops, 1 Hygiene, GR \$515K #47138 Lancaster County—Very Established Practice, Newly redecorated #47145

Montgomery County—Spectacular Office, 2,000 sq. fr., 4 ops #47146

Philadelphia County (NE)—I Ops, GR \$500K+, Est 25 years #47142

CONTACT: Sharon Mascetti # 484-788-4071

RHODE ISLAND

Southern Rhode Island—4 Ops, GR \$750K, Sale \$486K #48102

CONTACT: Dr. Peter Goldberg @ 617-680-2930

SOUTH CAROLINA

HHI—Dentist seeking to purchase a practice producing \$500K a year #49103

CONTACT: Scort Curringer @ 704-814-4796

Columbia—7 Ops, 2,200 sq. ft., GR \$678K #49102 CONTACT: Jim Cole @ 404-513-1573

TENNESSEE

Elizabethon-GR \$385K #51107

Memphis—Large profitable practice GR \$2 Million+ #51112 Suburban Memphis—Leading Practice in Area GR \$946K #51113

CONTACT: George Lane @ 865-414-1527

TEXAS

Houston Area—GR \$1.1 Million w/adj. net income over \$500K #52103

CONTACT: Deanna Wright @ 800-730-8883

VIRGINIA

Greater Roanoke Valley—2,500 sq. ft., GR \$942K updated equip. #55111

CONTACT: Bob Anderson @ 804-640-2373