

DENTAL TRIBUNE

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	COSMETIC TRIBUNE The World's Cosmetic Dentistry Newspaper · U.S. Edition	HYGIENE TRIBUNE The World's Dental Hygiene Newspaper · U.S. Edition
Ortho surgery and esthetics Esthetic orthodontics is mainly adult orthodontics. ▶ Page 13A	Shading technique Natural teeth are difficult to imitate. ▶ Page 1B	Fluoride varnish About 90 percent of adults over 40 have dental caries. ▶ Page 1C

'The Art and Science of Dentistry'



Take a gander at some of the highlights from the California Dental Association's upcoming meeting in San Francisco, Sept. 10-13.

→ CDA Meeting, pages 24A, 25A

AD

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ADA continues to monitor proposals for health care reform

By Fred Michmershuizen, Online Editor

As Congress prepared to adjourn for its summer recess, the American Dental Association was taking a wait-and-see approach to pending health care reform legislation.

"The dental provisions they contain can best be described as the good, the bad and the undecipherable," ADA President Dr. John S. Findley told ADA News, the association's official publication. "Our most pressing concern is with the proposal for a government-run insurance plan that would compete with private insurers in the marketplace and private plans offered in the so-called 'exchange.'"

Findley said that a proposal to require dental coverage for children would need clarification before the ADA would support it.

"The whole concept of a public plan remains troubling, and we would oppose any plan that required dentists to participate, directly or indirectly dictated fees for the private market or would lead to a government-run system," he said.

The ADA has continued to make its message clear through dialog with members of Congress and the administration, following the approval of policy by the ADA House of Delegates at the 2008 annual session in San Antonio.

"The ADA does not support a



single-payer system because we believe it would stifle access and innovation and reduce the quality of patient care," said Findley, who pointed out that the association's efforts in the nation's capital are ongoing.

"We are pursuing amendments to improve the dental provisions," he said.

Findley said that flatly opposing the whole thing is not an option.

"If we aren't highly visible in the process, we open the door to other groups who will claim to be the voice of the oral health community and attempt to dictate what kind of dental provisions get included," he said. "As the saying goes, you are either at the table or on the menu."

According to the ADA, the proposed legislation should be rewritten to enhance Medicaid reimbursement. Without it, Findley said, there would be "no significant access improvements for the poor and other vulnerable populations." **DT**

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Dr. Fred Pockrass and his wife, Ina, operate the first certified 'green' dental practice and are also founders of the Eco Dentistry Association.

Eco Dentistry Association announces international launch

New dental association aims to make profession eco-friendly one toothbrush at a time

The Eco Dentistry Association (EDA), an international association of dental professionals, was launched in May by the creators of the country's first green dental office to give colleagues access to eco-friendly practices and consumers the power to encourage their dentists to adopt earth-friendly methods.

- If every U.S. dental office installed a device capturing mercury-containing waste, at least 7,400 pounds of toxic waste would be kept out of the nation's water supplies each year.

- By switching to reusable and non-toxic disinfection methods, the dental industry would prevent 680

million disposable chair barriers, light handle covers and patient bibs, and 1.7 billion instrument sterilization pouches from ending up in landfills yearly.

The Eco Dentistry Association offers dental professionals practical tips on reducing waste and pollution and conserving resources, such as using cloth wrappers instead of disposables to sterilize dental instruments, installing energy efficient lighting, properly disposing of mercury-containing dental waste, and incorporating planet-friendly building and office methods, such as non-toxic paint and recycled copy paper. It provides the public with infor-

mation about digital X-ray systems that reduce radiation exposure by up to 90 percent, educates them about keeping dental appliances free from the hormone-disrupting chemical, bisphenol-A, found in many plastics, and gives them questions to ask their dentists about environmental stewardship.

Soon after launch, the new planet-friendly organization had registered eco-conscious members in 20 states and Canada. The group's members hail from all over the country, including places like Waxahachie, Texas; Beachwood, Ohio; and Fort Bragg, N.C.

The organization is the brainchild of Dr. Fred Pockrass, a dentist, and his lawyer-turned-entrepreneur wife, Ina Pockrass. Six years ago, the couple created the model for eco-friendly dentistry, and they operate their own successful dental practice in Berkeley, Calif., the first in the country to be certified as a green business. They formed the organization to stimulate a movement in the dental industry to employ environmentally sound practices.

"Dentistry and dental hygiene have always been in the forefront of preventative care. Now we are in the forefront of planetary care," said Pockrass. "The Eco Dentistry Association gives dental practitioners a single point of contact for resources and research to green their practices, and access to a collaborative community of like-minded professionals."

"While some people still think that doing environmentally responsible business costs more," said Gil Friend, CEO of Natural Logic, a sustainability consulting firm that analyzed costs and benefits for the EDA, "our study busts that myth. Nearly every eco-friendly innovation is also friendly to the bottom line. Even simple things, like making the switch from paper patient charting to digital charting, can yield an immediate payback."

For more information please visit www.ecodentistry.org. **DT**

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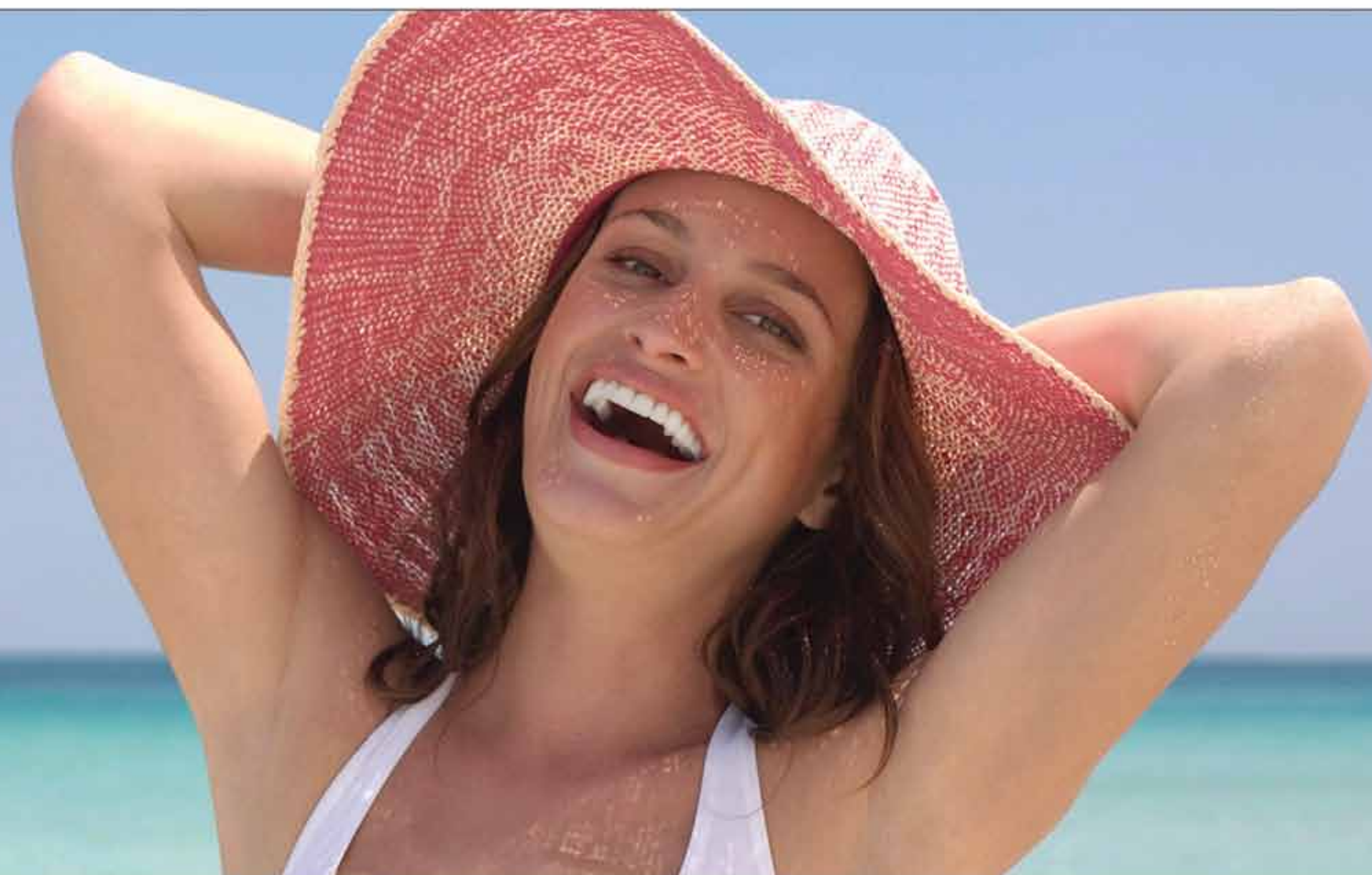



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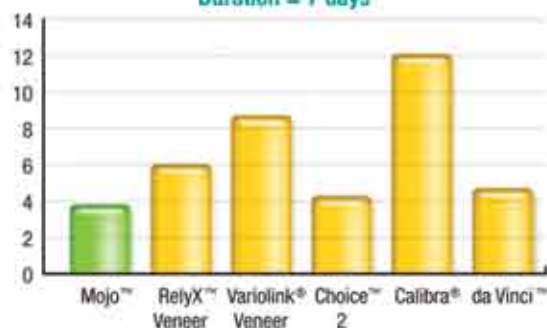
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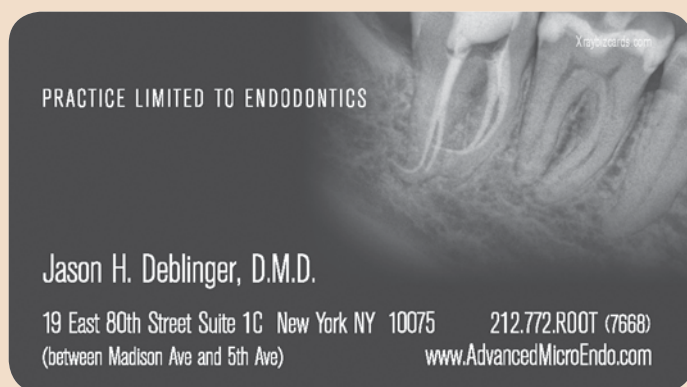
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Align Technology and Ormco end patent dispute, plan to collaborate

Align Technology, manufacturer and marketer of Invisalign, has reached a settlement with Ormco, a subsidiary of Danaher, to end all pending litigation between the parties and to begin a new strategic collaboration.

As part of the settlement, Align will make a cash payment of approximately \$13 million to Ormco and issue approximately 7.6 million shares of Align's common stock to Danaher, that after issuance will be equal to approximately 10 percent ownership interest in Align.

The value of the shares is approximately \$77 million (based on the closing price of Align's common stock on Friday, Aug. 14).

Align and Ormco have also agreed upon an exclusive collaboration over the next seven years to develop and market an orthodontic product that combines the trademarked Invisalign system with Ormco's trademarked Insignia orthodontic brackets and arch wires sys-

tem to treat the most complex cases.

Each party will retain ownership of its pre-existing intellectual property, and each party will be granted intellectual property licenses in their respective field for jointly developed combination products.

"We are pleased to resolve this ongoing litigation with Ormco and to begin a new relationship that meets our shared goals of providing innovative products and excellent service to our orthodontic customers," said Thomas M. Prescott, president and CEO of Align Technology, in a news release.

"This collaboration with Ormco, a fellow innovator in digital orthodontics, gives us the ability to compete for a segment of the market that is difficult to treat with Invisalign alone and accelerates our long-term plan for a combination product."

(Sources: Align Technology and Danaher Corp.)

Local anesthesia is truly effective only when injected

A painful truth in dentistry today is that for most dental procedures, local anesthesia is truly effective only when injected. The problem, of course, is that both the insertion of the needle and the injection of the anesthetic fluid itself can cause discomfort.

Dentists have been using topical anesthesia to reduce the pain involved in needle insertion and fluid injection for decades, and they have tried to use finer-gauge needles in the belief that they cause less pain. However, recent research has shown that needle gauge has no effect on perceived pain level.

Topical anesthesia can be useful for minimizing the pain associated with needle insertion, but it has not been proven to address pain associated with the actual injection of the local anesthetic solution.

A recent study in *Anesthesia Progress* examined the effectiveness of topical anesthesia in reducing pain associated with needle insertion separately from the pain associated with injection of the anesthetic. Results were investigated after different intervals (two, five and 10 minutes) to determine the time for optimal efficacy of the topical anesthetic.

In a double-blind, placebo-controlled study, responses from 85 people showed that the topical anesthetic was statistically and significantly more effective compared to the placebo for reducing the pain caused by needle insertion alone at all time points (two, five and 10).



However, it had no effect on perceived pain intensity associated with injection of the local anesthetic solution at any of the time intervals.

At all time lengths, patients reported the same degree of pain from anesthetic solution injections in topically anesthetized and placebo locations.

Therefore, the minimum two-minute period appears to be sufficient for the topical anesthetic application, as a five- or 10-minute delay has no added benefit in reducing the pain of needle insertion.

To read the entire study, "Effect of Time on Clinical Efficacy of Topical Anesthesia," visit www.allenpress.com/pdf/anpr-56-02-03.pdf. **DT**



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Journées Dentaires de Nice shines once again

By David L. Hoexter, DMD, FACD, FICD, Editor in Chief

The Journées Dentaires de Nice dental meeting gathered in Nice, France, in June — as it has for every other year since 1976 — to exchange information on all phases of dentistry, as well as to give exciting up-to-date presentations on futuristic possibilities in our profession.

In June, the sun reflects on the French Riviera like no other place on Earth, making it a perfect location for practitioners to sparkle with the knowledgeable exchange of dental presentations.

Participating supporters from the Chicago Midwinter Dental Meeting and the Greater New York Dental Meeting were there in full force, sharing information with colleagues from France and the rest of the world.

An added glow this year was a warm reception at a beautiful mansion and garden on the sea. There, the mayor of Nice awarded personal citations and medals to a select few who enhanced this wonderful cultural exchange.

Dr. Robert Edwab, executive director of the Greater New York Dental Meeting, was one the recipients. Edwab extended an invitation for all to come, share and participate in the Greater New York Dental Meeting in November, which attracted more than 55,000 attendees from around the world last year.

Since its inception, every Journée Dentaires de Nice has had a special auditorium devoted solely to implants and



(From left) Dr. M. Kaduch, organizer of the Journées Dentaires de Nice; Dr. Robert Edwab, executive director of the Greater New York Dental Meeting (GNYDM); Dr. Cliff Salm, general chairman of the GNYDM; Prof. David Hoexter, editor in chief of Dental Tribune.

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implant-related presentations. While many meetings these days have sessions related to implants, this group had the foresight and fortitude to offer them years earlier than any other meeting.

Dr. Gerard Scortecci is the chairman of the implant section of the Journée Dentaires de Nice, and has been for many years. He has done a formidable job with masterful presentation choices that are devoid of the political or commercial pressures that sometimes surround such organizations.

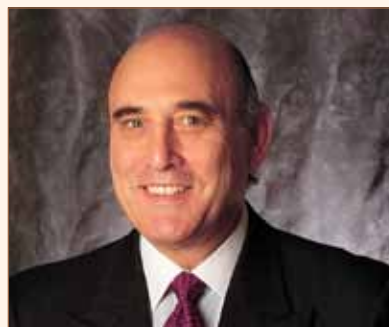
Scortecci is a wonderful practitioner, author and modest colleague who endeavors to give a forum to practitioners, as well as implant manufacturers, to elucidate new procedures, products and regenerative materials so that participants can best serve their patients. He is to be congratulated on his achievements and impartiality.

During the Nice meeting, the exhibits were presented in a neat and orderly fashion, making it easy to find the new products as well as making them accessible to all.

Drs. M. Kaduch and M. Burdin have worked exhaustively over the years to cultivate a wonderful meeting with a unique personality that incorporates all of the style and class the French Riviera is known for.

I have attended this congress several times, and I hope this gem of a biennial meeting continues to flourish and sparkle under the French Riviera's sun. **DT**

About the author



David L. Hoexter is director of the International Academy for Dental Facial Esthetics, and a clinical professor in periodontics at Temple University, Philadelphia.

He is a diplomate of implantology in the International Congress of Oral Implantologists as well as the American Society of Osseointegration, and a diplomate of the American Board of Aesthetic Dentistry.

Hoexter lectures throughout the world and has published nationally and internationally. He has been awarded 11 fellowships, including FACD, FICD and Pierre Fauchard. He maintains a practice at 654 Madison Ave., New York City, limited to periodontics, implantology and esthetic surgery.

He can be reached at (212) 355-0004 or drdavidlh@aol.com.

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Fiscally fit in 2009

Tax breaks and limited-time laws make 2009 the right time to invest in your practice

By Keith Drayer

The American Recovery and Reinvestment Act of 2009 was signed into law on Feb. 17 with some of the best benefits having limited remaining time eligibility.

Small business owners have limited time in 2009 to benefit from the most lucrative tax incentives for acquiring technology and/or equipment.

If your practice is ready to buy equipment or software, the tax incentives for doing so are better than ever. These benefits will expire, or be reduced, as of Jan. 1, 2010.

The American Recovery and Reinvestment Act accompanied by lower interest rates make this a strategic time to invest in your practice to meet the demands of today's health care industry.

Because of these beneficial conditions, installing equipment and technology in 2009 can create a cash flow win-win for health care practitioners "in the know."

Can you deduct \$250,000?

For the 2009 tax year, many small businesses may potentially deduct up to \$250,000 if the equipment or software is placed in service.

This valuable break is the Section 179 depreciation deduction privilege, and it is an exception to the general rule that you must depreciate equipment and software costs over several years.

Section 179 is an annual "use it

or lose it" accelerated deduction benefit that optimally lowers taxable income.

The bonus depreciation is allowable for regular and alternative minimum tax (AMT) purposes for the tax year in which the property is placed in service.

Property eligible for this treatment includes:

- Property with a recovery period of 20 years or less (almost all dental equipment).
- Standard software/practice-management software.

Who can take the deduction?

This deduction is available whether you are a sole proprietorship, partnership or corporation (S corporations are subject to different rules). If you plan to acquire equipment in the near future, purchasing it before year's end is prudent.

What type of financing is eligible?

Utilizing a finance agreement or capital lease to acquire technology or equipment will qualify for this benefit, while true leases or fair market value agreements will not.

If you use a finance agreement to acquire your equipment and you have deferred payments, you may file your tax returns and achieve the benefits before you have made any payments.

Avoid last-minute decisions

Don't wait too long to acquire technology or upgrade your office.

Although it is true that you can



Annual Internal Revenue Code Section 179 Example

Calculations	Equipment not more than \$800,000
A. Equipment price	\$300,000
B. Section 179 deduction	\$250,000
C. 50% bonus depreciation (A - B x 0.50)	\$25,000
D. 2009 MACRS deduction (A - B - C x 0.20)	\$5,000
E. Total first year tax deduction	\$280,000
F. Combined federal and state tax bracket	38%
G. Total 2009 tax savings as a result of capital expenditure (E x F)	\$106,400

have equipment placed in service by Dec. 31 to take advantage of the incentives, waiting too far into the year may mean that you will settle on your selections because of diminished year-end choices.

Now is the right time to meet with an equipment or technology specialist and discuss acquiring the optimal production-enhancing technology and equipment that will help your practice stay fiscally fit.

Don't forget bonus depreciation

Your practice may generally claim

first-year bonus depreciation deductions equal to 50 percent of the cost that is left over after subtracting allowable Section 179 deductions (if any).

If your business uses the calendar year for tax purposes, you only have until Dec. 31 to take advantage of the generous \$250,000 allowance.

Don't wait to see if 2010 will provide the same opportunity. Act now and take advantage of all the benefits available through this current legislative windfall. **DT**

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AD

About the author



Keith Drayer is vice president of Henry Schein Financial Services, which provides equipment, technology, practice start-up and acquisition financing services nationwide.

Henry Schein Financial Services can be reached at (800) 853-9495 or hsfs@henryschein.com.

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Shaw Low—2 Ops, 2 Hygiene Rms, GR in 2007 \$645,995
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Fresno—In professional park. Take over lease. #14292
Lindsay/Tulare—2 practices, Combined GR \$1.4 Million #14240
Madera—1,650 sq. ft., 3 Ops, GR \$449K #14269
Madera—7 Ops, GR \$1,921,467 #14283
Modesto—12 Ops, GR \$1,097,000, Same loc for 10 years #14289
Porterville—6 Ops, 2,000 sq. ft., GR \$2,289,000 #14291
Red Bluff—8 Ops, GR over \$1 Million, Hygiene 10 days a wk. #14252
San Francisco—4 Ops, GR 875K, 1500 sq. ft. #14288
North of San Francisco—4 Ops, 1,500 sq. ft., GR \$958K, #14296
San Jose—4 Ops, #14295
South Lake Tahoe—3 Ops, 647 sq. ft., 2007 GR \$534K #14277
Sunnyvale—3 Ops, Potential for 4th, GR \$271K #14285
Thousand Oaks—General Prac, New Equip, Digital #14275
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Grass Valley—3 Ops, 1,500 sq. ft., GR \$714K #14272
Redding—5 Ops, 2,200 sq. ft., GR \$1 Million #14293
Santa Rosa—Patients records sale - Approx 245 patients. #14286
Yuba City—5 Ops, 4 days hyg, 1,800 sq. ft., GR \$500K #14273
CONTACT: Dr. Thomas Wagner @ 916-812-3255
San Marino—6 Ops, 2,200 sq. ft., 2008 GR \$762K #14294
CONTACT: Mario Molina @ 323-974-4592

CONNECTICUT

Fairfield Area—General practice doing \$800K #16106
New Haven—Perio practice-associate to partner #16107
New Haven Area—Associateship general practice #16102
Southburg—2 Ops, GR \$250K #16111
Wallingford—2 Ops, GR \$600K, #16113
CONTACT: Dr. Peter Goldberg @ 617-680-2930

FLORIDA

Miami—5 Ops, Full Lab, GR \$835K #18117
Ocala—Associate buy-in #18113
Pensacola—4 Ops, GR approx \$550K, large lot #18116
Port Charlotte—General practice for sale #18109
Port Charlotte—3 Ops, 1 Hygiene Room, GR \$295K #18115
Southern—General practice for sale #18102
CONTACT: Jim Puckett @ 863-287-8300

GEORGIA

Atlanta Area—2 Ops, 2 Hygiene Rms, GR \$480K #19114
Atlanta Suburb—3 Ops, 2 Hygiene Rms, GR \$861K #19125
Atlanta Suburb—2 Ops, 2 Hygiene Rms, GR \$633K #19128
Atlanta Suburb—3 Ops, 1,270 sq. ft., GR \$438,563 #19131
Dublin—Busy Pediatric practice seeking associate #19107
Mabelton—6 Ops, GR \$460K, Office shared with Ortho #19111
Macon—3 Ops, 1,625K sq. ft., State of the art equipment #19103
Near Atlanta—2 Ops, 2 Hygiene Rms, GR \$700K #19109
North Atlanta—Spacious Oral Surg. Office, GR 518K #19123
Northeast Atlanta—4 Ops, GR \$750K #19129
Northern Georgia—4 Ops, 1 Hygiene, Est. for 43 years #19110
NW Atlanta Suburb—GR \$780K, Upgraded Equip #19113
Savannah (Skidaway Island)—4 Ops, GR \$500K #19116
Savannah—Group practice seeking associate. #19108
South Georgia—4 Ops, 1 1/4 acres #19121
South Georgia—1,800 sq. ft., GR 400K #19124
CONTACT: Dr. Jim Cole @ 404-513-1573

IDAHO

Boise—Dr looking to purchase a general dental practice #21102
CONTACT: Dr. Doug Gulbrandsen @ 208-938-8305

ILLINOIS

Chicago—3 Ops, Condo available for purchase #22108
Chicago—3 Op practice for sale #22108
Chicago—14 Ops, \$2 Million specialty office, On site lab #22121
Chicago—Established Practice Looking for Dentist #22122
Chicago—4 Ops, GR \$709K, Sale Price \$461K #22126
1 Hr SW of Chicago—5 Ops, 2007 GR \$440K, 28 years old #22123
Kane County—4 Ops, building also available for purchase #22115
Rockford Area—5 Ops solid practice. Very good net #22118
CONTACT: Al Brown @ 800-668-0629

INDIANA

St. Joseph County—GR \$270K on a 3 1/2 work week. #23108
CONTACT: Deanna Wright @ 800-730-8883

KENTUCKY

Eastern Kentucky—5 Ops, Good Hyg. Program, Growth Potential #26101
CONTACT: George Lane @ 865-414-1527

MAINE

Auburn—Looking for Assoc. GR \$2 Million #28111
Lewiston—GP Plus real estate, state of the art office #28107
CONTACT: Lori Bell @ 978-602-0279

MARYLAND

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

MASSACHUSETTS

Boston—2 Ops, 2 Hygiene, GR \$650K, #30113
Boston—2 Ops, GR \$252K, Sale \$197K #30122
Boston Southshore—3 Ops, GR \$300K #30123
Lowell—GR \$400K #30106
Middlesex County—7 Ops, GR Mid \$500K #30120
New Bedford Area—8 Ops, \$650K #30119
Somerville—GR \$700K
Sturbridge—5 Ops, GR \$1,187,926 #30105
Western Massachusetts—5 Ops, GR \$1 Million, Sale \$512K #30116
CONTACT: Lori Bell @ 978-602-0279

Middle Cape Cod—6 Ops, GR \$900K, Sale price \$677K #30124
CONTACT: Alex Litvak @ 617-240-2582

MICHIGAN

Suburban Detroit—2 Ops, 1 Hygiene, GR \$325K #31105
Grand Rapids Kentwood Area—3 Ops, Building available #31102
CONTACT: Dr. Jim David @ 586-530-0800

MINNESOTA

Crow Wing County—4 Ops #32104
Fargo/Moorhead Area—1 Op, GR \$185K #32107
Hastings—Nice suburban practice with 3 Ops #32105
Central Minnesota—Mobile Practice. GR \$730K+ #32108
Minneapolis—Looking for associate #32105
Rochester Area—Looking for associate #32106
CONTACT: Mike Minor @ 612-961-2132

MISSISSIPPI

Eastern Central Mississippi—10 Ops, 4,685 sq. ft., GR \$1.9 Million #33101
CONTACT: Deanna Wright @ 800-730-8883

NEVADA

Carson City—5 Ops, 2 Hygiene, 2,200 sq. ft., GR \$1 Million #37105
Reno—Free Standing Bldg., 1500 sq. ft., 4 Ops, GR 763K #37106
CONTACT: Dr. Dennis Hoover @ 800-519-3458

NEW HAMPSHIRE

Rockingham County—2 Ops, Home/Office #38102
CONTACT: Lori Bell @ 978-602-0279

NEW JERSEY

Jersey City—2 Ops, GR \$216K, 2 days a week #39107
CONTACT: Dr. Don Cohen @ 845-460-3034

Marlboro—Associate positions available #39102
CONTACT: Sharon Mascetti @ 484-788-4071

NEW YORK

Brooklyn—4 Ops, 2 Hygiene rooms, GR \$1 Million, NR \$600K #41108
Brooklyn—3 Ops (1 Fully equipped), GR \$175K #41113
Bronx—GR \$1 Million, Net over \$500K #41105
CONTACT: Dr. Don Cohen @ 845-460-3034

Oneonta—3 Ops, Approx 1200 sq. ft. #41101
CONTACT: Deanna Wright @ 800-730-8883

Syracuse Area—6 Ops all computerized, Dextrix and Dexis #41104
CONTACT: Donna Bambrick @ 315-430-0643

Syracuse—4 Ops, 1,800 sq. ft., GR in 2007 over \$700K #41107
CONTACT: Marry Hare @ 315-265-1513

New York City—Specialty Practice, 3 Ops, GR \$400K #41109
CONTACT: Richard Zalkin @ 631-831-6924

NORTH CAROLINA

Charlotte—7 Ops - 5 Equipped #42142
Outside Charlotte—5 Ops, 2 Hygiene. #42141
Foothills—5 Ops #42122
Foothills—30 minutes from Mtn. resorts #42117
Near Pinehurst—Dental emerg clinic, 3 Ops, GR in 2007 \$373K #42134
New Hanover Cty—A practice on the coast, Growing Area #42145
Raleigh, Cary, Durham—Doctor looking to purchase #42127
Wake County—7 Ops, High end office #42123
Wake County—Beautiful Cutting Edge Digital Office #42139
Wake County—4 Ops #42144
CONTACT: Barbara Hardee Parker @ 919-848-1555

OHIO

Akron—Excellent Opportunity, 2,300 Active Pts, 6 days of Hygiene #44141
Columbus—4 Ops, FFS practice for sale #44125
Darke County—35 yrs, 1200 Acr. Pts, GR \$530K #44139
Dayton—10 Ops, Associateship with buy-in option #44121
North Eastern—2 Yr. Old Facility, State of Art Tech. GR \$830K #44143
North of Dayton—6 Ops, 15 days of hygiene/wk #44124
CONTACT: John Jonson @ 937-657-0657
Medina—Associate to buy 1/3, rest of practice in future #44150
CONTACT: Dr. Don Moorhead @ 440-823-8037

PENNSYLVANIA

Beaver County—Ortho practice for sale #47118
Mon Valley Area—Practice and building for sale #47112
Pittsburgh Area—High-Tech, GR \$425K #47135
Pittsburgh—4 Ops, GR over \$900K #47114
70 Miles Outside Pittsburgh—4 Ops, GR \$1 Million #47137
Northeast of Pittsburgh—3 Ops, Victorian Mansion GR \$1.2+ Million #47140
Robinson Township Area—GR \$300K #47108
Somerset County—3 Ops, 2006 GR \$275K+ #47122
Southside & Downtown Pittsburgh—2 practices for sale #47110
CONTACT: Dan Slain @ 412-855-0337

Dauphin County—6 Ops, GR over \$1,100K, Sale price \$718K #47133
Harrisburg—3 Ops, GR \$383K, Listed at \$230K #47120
Lackawanna County—4 Ops, 1 Hygiene, GR \$515K #47138
Lancaster County—Associate positions available #47116
CONTACT: Sharon Mascetti @ 484-788-4071

RHODE ISLAND

Southern Rhode Island—4 Ops, GR \$750K, Sale \$456K #48102
CONTACT: Lori Bell @ 978-602-0279

SOUTH CAROLINA

Charleston Area—8 Ops fully equipped #49101
Columbia—7 Ops, 2200 sq ft, GR \$678K #49102
CONTACT: Scott Carringer @ 704-814-4796

TENNESSEE

Chattanooga—For sale #51106
Elizabethon—GR \$400K #51107
Loudon—GR \$600K #51108
Spring Hill—4 Ops, Good Hyg. Program, Fast Growing Town #51103
Suburban Knoxville—5 Ops #51101
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

Burgess—General practice #55101
Danville Area—3 Ops #55105
CONTACT: Bob Anderson @ 804-640-2373

WISCONSIN

Southeastern Wisconsin—2 Ops, 1,800 sq. ft., GR \$500K. #58118
CONTACT: Deanna Wright @ 800-730-8883

For a complete listing, visit www.henryschein.com/ppt or call 1-800-730-8883