

today



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|  <p>Get educated</p> <p>Attend the DTSC Symposia and learn about topics from caries detection to 3-D imaging to self-adhesive technology.</p> <p>»starting from page 4</p> |  <p>Scenes from Sunday</p> <p>Show off your golf swing, get some cuddles, add some giraffes to your office and – gasp! – pick up a Red Sox toothbrush.</p> <p>»starting from page 14</p> |  <p>See it to believe it</p> <p>If you think you can't place eight implants immediately into function, then you haven't see Dr. Ara Nazarian in action.</p> <p>»page 50</p> |
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Get a move on

• A flash mob breaks out into a dance as a way to promote the Gendex Experience on Sunday afternoon. See page 26 for more information. (Photo/Carlo Messina, Flx Video & Photography)

There is a lot to see here at the 87th Greater New York Dental Meeting

By Fred Michmershuizen
Dental Tribune

■ It's the 87th annual Greater New York Dental Meeting, and here at the Jacob K. Javits Center, there's an unparalleled selection of products and services for dental professionals to explore. On Sunday, opening day of the meeting, the exhibit hall floor was jam packed with meeting attendees looking for new offerings to pique their interest.

There is plenty on tap for every specialty. Here are some of the many highlights available to attendees of the New York meeting:

- The various narrow-body implants available from Dentatus (booth No. 2401) offer solutions for patients who might not have as much bone structure as the typical implant patient, and at a fraction of the

» see move, page 54

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Educational opportunities abound

By Robin Goodman, Dental Tribune

Those who made their way to the newly established education hall yesterday hopefully made time for both offerings located there: the Live Dentistry Arena and ADA CERP-accredited C.E. credits at the Dental Tribune Study Club (DTSC) Symposia.

For the first time since these two educational options have been available, the GNYMD created a separate section from the exhibition hall that was also well insulated in terms of acoustics.

If live dentistry caught your attention, then you likely saw either Dr. Frank Milnar or Dr. Michael Miyasaki lecturing to standing-room-only crowds. The day's DTSC Symposia offered the option of six C.E. credits from a respected lineup of speakers including Dr. Howard Glazer, Dr. Shamsun Kherani, Dr. Ron Kaminer, Dr. Louis Malcmacher, Dr. Brian Novy and Dr. George Freedman.

Today's offering brings another great selection of up to six C.E. credits during the DTSC Symposia, starting with Dr. Gregori Kurtzman discussing "Core Buildups, Post & Cores and Understanding Ferrule," and Dr. Pedro Lazaro Calvo speaking about "Surgical Decisions Making in Aesthetic Implant Dentistry."

Other speakers today include tandem lectures by Dr. George Freedman and Dr. Fay Goldstep on "The Diode Laser: The Essential Soft-Tissue Handpiece" as well as Dr. Stanley Malamed and Dr. Mic Falkel speaking about "Local Anesthetic Performance: Fact, Fiction and Advancements (Precision Buffering)."

Then, Dr. Enrico Divito ends



Dr. Shamsun Kherani stops for a photo just before his lecture yesterday on 'Comprehensive Dentistry Using Digital Impression Technology' during the Dental Tribune Study Club Symposia in aisle 6000, room 3. (Photos/Robin Goodman, Dental Tribune)

the day's offering with a lecture on "Minimally Invasive Endodontics Using Photon Induced Photo Acoustic Streaming (PIPS)."

As the ADA CERP-accredited DTSC Symposia lectures are free (yes, you read that right, free!), be sure to arrive promptly to catch the first half of the C.E. credit code. The second half of the code is given at the conclusion of the lecture.

In addition, today's Live Dentistry Arena offers Dr. Frank Milnar again but also Dr. Ara Nazarian, so be sure to come early if you want a seat!



Above: Dr. Frank Milnar kicks off the Live Dentistry presentations at 10 a.m. on Sunday, talking about 'Creating A Complex Class IV Restoration,' with supplies provided by Voco.

Left: DTSC Symposia lecturer Dr. Howard Glazer and C.E. Manager Julia Wehkamp are all smiles after Glazer's lecture on 'GIOMERS: New Giants of MI Dentistry.' Visit aisle 6000, room 3 today for an opportunity to earn six C.E. credits on a variety of pertinent topics.

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Easy, healthy dentistry for patients and dentists

Dr. Fay Goldstep explains how simple it can be to integrate new caries detection systems into your dental practice

By Kristine Colker, Managing Editor

► Today from 10 to 11 a.m. in aisle 6000, room 3, Dr. Fay Goldstep will present "What Patients Want... What Dentists Want: Easy, Healthy Dentistry!" as part of the DTSC Symposia.

In her session, she will discuss new caries detection systems and how they make treatment more scientific and more medically significant. Discover the latest remineralization therapies, including glass ionomers and Giomers, to proactively treat caries.

Direct repair instead of indirect replacement is a "patient-friendly" minimally invasive option. Predictable direct restorative procedures are the backbone of the general dental practice. Today's "super" flowables can be as strong as hybrids and have easy handling properties. See how to use these "dentist-friendly" materials to provide your patients with simple, maintainable, healthy dentistry.

Goldstep sat down with today to share more insights into her session.

Your DTSC Symposia session is called "What Patients Want... What Dentists Want: Easy, Healthy Dentistry!" What are some of the key issues you will be discussing in your presentation?

We work in an information-driven world. Our patients come to see us armed with focus and information. They are interested in health and healthy options. They know what they want and ask for it. Today, health has joined cosmetic dentistry as a major driving force for patient visits. Our patients eat right and exercise and want to stay "healthy." They are aware of the oral-systemic link. They are aware that there are "minimally invasive options." They would like to keep their teeth for a lifetime.

Dentists can repair and maintain the patient's teeth for a lifetime using many new restorative materials. This session will provide the attendee with an innovative system of how to treat these patients and keep them coming to the office: the system of Proactive Intervention Dentistry.

You are going to talk about how to treat caries. How do these new caries detection systems work and what are the advantages of them for patients? Is there any downside?

Caries detection systems work through several different means. The most common is to detect bacterial

About the speaker



Fay Goldstep, DMD, has been a featured speaker in the ADA Seminar Series, and has lectured at the ADA, Yankee, AACD, AGD and the Big Apple dental conferences. She has lectured nationally and internationally on CONSERVATIVE Dentistry, Innovations in Hygiene, Dentist Health Issues, Magnification and Office Design. Goldstep has served on the teaching faculties of the Post-graduate Programs in Esthetic Dentistry at SUNY Buffalo, Universities of Florida (Gainesville), Minnesota (Minneapolis) and UMKC (Kansas City). Goldstep sits on the Editorial Board of Oral Health Magazine (Healing/Preventive Dentistry) and Dental Tribune US Edition. She is a fellow of the American College of Dentists, International Academy of Dental-Facial Esthetics and the Academy of Dentistry International. Goldstep has been a contributing author to three textbooks and has published more than 20 articles. She has been listed as one of the leaders in continuing education by Dentistry Today since 2002. Goldstep is a consultant to a number of dental companies and maintains a private practice in Toronto, Canada.



activity or tooth breakdown through demineralization. We can detect and map out areas of demineralization. We can also track remineralization and repair of these surfaces. The advantage to the patient is more scientific

and medically significant treatment. No system is ideal yet, but it is getting very close. Very soon, we will all be using one of these systems.

You are also going to be speaking about "dentist-friendly" materials. What exactly do you mean by dentist friendly?

Dentists contend with many stresses in the office. We want materials that are easy to use and that work consistently. In other words, the physical properties of the restorative materials must be excellent, but equally important is how the material handles in the dentist's hands. Direct restorative procedures are the backbone of the general dental practice.

We need to keep it as simple as possible. We need materials that perform like hybrids and handle like flowables. This is possible with today's new "super" flowables.

If an attendee is interested in going to your session, is there anything he or she should be aware of ahead of time? Is your session geared to specialists or is it more of a general topic?

The session is geared to the general dentist. Just come with an open mind. Be prepared to think outside the box.

It will be fast-paced, and you will leave with lots of information on how to make dentistry easier and how to attract and keep patients by practicing the new paradigm of Proactive Intervention Dentistry.

Your session is sponsored by Shofu. How did you begin working with the company and what is it that you like about its products and services?

I have been working with Shofu since the 1980s. I have always been extremely pleased with the quality of their products, and I have been especially impressed with the integrity and professionalism of the people who work for Shofu.

Today, they are at the forefront of proactive intervention dentistry with their unique Giomer technology. They are also leaders in making the practice of dentistry easier, with the introduction of their new "super" flowables.

If there is one thing you hope attendees to your session come away with, what would it be?

Dentistry can be fun and easy and we can make a difference in our patients' health. They are asking for this. We must be prepared.

today About the Publisher

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Why the soft-tissue diode laser is an essential part of your dental practice

Drs. George Freedman and Fay Goldstep give us the scoop on this vital tool

By Kristine Colker, Managing Editor

► **Today from 2 to 3 p.m. in aisle 6000, room 3, Dr. George Freedman and Dr. Faye Goldstep will present "Diode Lasers and Restorative Dentistry" as part of the DTSC Symposia.**

In the session, they will discuss how the soft-tissue diode laser has become an essential part of the dental practice. Restorative dentistry is a snap with soft-tissue lasers; no more retraction cord, no more missed margins on impressions. A 15-second troughing prepares every abutment for a perfect impression. Decay or fracture below the gingival? Why wait for conventional soft tissue surgery when it can be done immediately chairside? The soft-tissue laser is also a vital tool for periodontal treatment by dentists and hygienists. The diode

laser empowers the dental team to take an even greater role in the healing therapies designed for the dental patient including laser bacterial decontamination, laser-assisted periodontal therapy and laser bio-stimulation.

Freedman and Goldstep sat down with today to share more insights into the session.

You are both presenting a DTSC Symposia session, "Diode Lasers and Restorative Dentistry." What can you tell us about this presentation? What should attendees expect to learn?

The attendees will learn the relevant science, what the clinical studies say, how easy it is to operate the laser and exactly how to implement this exciting new treatment easily into the practice.

In fact, do you need a soft-tissue

laser? And can you afford to be without one?

Could you tell us a little more about the specific benefits of using a soft-tissue diode laser? Why should those who practice restorative or periodontal dentistry in particular want to look at these lasers?

The soft-tissue laser is a vital tool for restorative and periodontal treatment by dentists and hygienists. Restorative dentistry is a snap with soft-tissue lasers. The diode laser empowers the dentist to immediately and predictably prepare soft tissues for any and all restorative procedures. No more retraction cord, no more missed margins on impressions. A 15-second troughing prepares every abutment for a perfect impression. Decay or fracture below the gingival? Why wait for conventional soft-tissue surgery when it can be done immediately chairside. It is no longer necessary to delay restorative treatment due to periodontal considerations, nor required to refer the patient to a specialist practice. The dental team is able take a more direct role in therapies including gingivectomy, gingivoplasty, haemostasis and a host of others.

How did you both begin using lasers yourselves? What was it like the first time you tried them?

Freedman was an early laser adopter, beginning in 1991. He has practiced with a variety of soft and hard tissue lasers over the past two decades and has used soft-tissue diode lasers extensively since 2009. Goldstep prefers to wait for technology to be "tried and true" before jumping in. The soft-tissue diode laser made laser treatment user-friendly, and she realized in 2009 that she could not work without one.

If an attendee is interested in learning more about diode lasers after attending your session, what steps would you recommend they take?

- Check out the booth
- Get it into your hands
- Use it
- Fall in love!

Your session is sponsored by AMD LASERS. How did you begin working with the company and what is it that you like about its products and services?

While we have known and worked with the principal of AMD for many years, when we first saw the Picasso in 2009, it was clear that this was the technology that we had been waiting for. Picasso's advantages are a

About the speakers



Fay Goldstep, DMD, has been a featured speaker in the ADA Seminar Series, and has lectured at the ADA, Yankee, AACD, AGD and the Big Apple dental conferences. She has lectured nationally and internationally on CONSERVE-active Dentistry, Innovations in Hygiene, Dentist Health Issues, Magnification and Office Design.



George Freedman, DDS, is past president of the American Academy of Cosmetic Dentistry and the chairman of the Dental Innovations Forum (Singapore). Freedman is the author or co-author of 11 textbooks, more than 400 dental articles and numerous CDs, video and audiotapes and is a Team Member of REALITY. Freedman is a co-founder of the Canadian Academy for Esthetic Dentistry and a diplomat of the American Board of Aesthetic Dentistry.

trifecta: it is easy to use out of the box, it has many daily indications, and it is very affordable.

If there is one thing you hope attendees to your session walk away with, what would it be?

It is impossible to conduct an effective and efficient restorative practice without a soft-tissue diode laser.

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Practice Activator e-service can help you reach non-responsive patients

By Larry Emmott, DDS

■ Would you be interested in a high tech product that substantially increases your income with no expensive equipment to buy and maintain, zero training, zero staff or doctor time to us, and, at the same time, significantly improves the overall care you provide to your patients?

Does anything that perfect actually exist? The surprising answer is yes, and the product is called Practice Activator

Practice Activator is an e-service that incorporates the best of computer science and artificial intelligence to identify patients who need dental care but are not getting it. This includes those who are non-responsive (that is, they haven't responded to recall cards, e-mails or even front desk calls) and those who need additional treatments but haven't started or followed through,

'Practice Activator gets patients to return by focusing on the top one or two procedures the patient needs, based on the patient's health record.'

whether they have a treatment plan or not.

Practice Activator analyses your patients' electronic records, identifies patients to target and creates a clinically personalized letter it then sends on your behalf, all based on

each patient's unique history and demographics.

The clinically personalized nature of these letters regularly and consistently generates an unusually high return response from patients, resulting in an amazing and consistent return on investment of 400-700 percent.

Three cases studies

We will cover these three cases in more detail in class, but here is a summary.

Office A shows fairly typical results. The office is small and invested just \$300/month over seven months and generated \$16,443. They did not make a large investment yet they saw a return of 783 percent%

Office B is a much larger practice, with more unresponsive patients to reactivate. They invested \$1,000/month for three months and have already produced \$26,040 in additional revenue. That is an amazing 868 percent return

Office C has just started with the program and, so far, its ROI is in the process of ramping up. They invested \$600 a month ago and generated \$1,864 for a return of 310 percent.

Practice Activator's sophisticated algorithms were developed over many years by leading experts in statistical analysis and data mining from MIT and Stanford. The system incorporates more than 10 dentist-years of real-time clinical input and has been proven in real world environments on more than two million unique patient transactions.

Practice Activator gets patients to return by focusing on the top one or two procedures the patient needs, based on the patient's health record. The system applies its dental intelligence distilled from the collective expertise and experience of dozens of practicing dentists to determine what these procedures are.

It usually takes a letter recipient two to three weeks to call to set up an appointment, and several more weeks

Attend the session

Today from 12:45 to 11:45 p.m. in aisle 6000, room 3, Larry Emmott, DDS, will present "Remember When 'e' was Just a Letter? Use eServices to Improve Patient Care and Increase Profitability" as part of the DTSC Symposia. In his session, he will explain how digital technology is revolutionizing every aspect of dental practice including how we make clinical decisions and how we communicate. One of the most powerful trends in technology is the development and expansion of the Internet and e-services yet many dentists do not understand or utilize e-services. This course will explain what an e-service is and how we can use e-services to improve patient care and increase profitability.



About the author

Larry Emmott, DDS, is one of the most entertaining speakers in dentistry and is considered a leading dental high tech authority in the country. He has addressed hundreds of professional groups and has been a featured speaker at every major U.S. dental meeting. He is a pioneer in online publishing with his blog, *Emmott OnTechnology.com*. You can contact him at larryemcott@drlarryemcott.com.

to get the work done. As a result, a typical practice begins to see results in two to three weeks, with continued increases over time as more patients come in for care.

The ROI will increase over time reaching (and maintaining) its maximum potential three or four months after starting the program. However, the actual results show continued increases well beyond the initial few months.

The reason is that patients who have not been to a practice for a long time behave a lot like new patients. They typically need more than what was discovered by Practice Activator, which translates into many subsequent follow-up visits.

Practice Activator is an e-service. That means it runs over the Internet, and you have nothing to install or maintain; it is easy to use, makes money and improves our patient's dental health.

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■ Dental practitioners play two roles on a daily basis. They are a healer to their patient and a manager to their practice. For many practitioners, passion roots from their desire to relieve human pain, and they are driven to success by the all-important steps taken to manage a flourishing practice.

In today's rapidly changing healthcare environment, 3-D imaging is becoming an essential tool for diagnosis and treatment in dental and specialty practices. The Suni3D Cone Beam System blends three technologies into one, providing a multifaceted solution to meet all practitioners' needs.

Suni3D is a state of the art 3-in-1 system that allows for high-digital panoramic capabilities, cephalometric imaging and anatomically correct 3-D cone-beam imaging. Suni3D technology's crystal-clear results are quickly becoming the industry standard. It's a superior three-dimensional imaging tool for dental diagnosis but is also three-dimensional in how it applies to dentistry, management and investment.

As a dental practitioner wanting to improve diagnostic ability and explore greater treatment options, Suni3D technology replaces what were once suspect diagnoses with clear answers. For your endodontic practice, Suni3D is the best choice for your procedures. Available in a 5x5 cm or 8x5 cm field of view, Suni3D allows you to see more lesions with crystal-clear 3-D image quality, assess anatomic structures quickly and easily and identify root-canal morphology and 3-D anatomy – all with a minimal radiation dosage. Suni3D is also the perfect fit for your implant practice.

Easily determine bone width and height for accurate placement, identify and mark anatomical elements like sinuses and the mandibular canal and receive detailed information to place your implants safely and correctly.

As a manager who seeks a fruitful practice, Suni3D technology provides gains from increased patient satisfaction and a boost in overall efficiency,

which leads to a higher patient turnover. Suni3D's state-of-the-art imaging sensors eliminate time wasted manipulating images, clearing up time in the dentist's day to see more patients; patients whose confidence in stronger diagnoses have resulted in a newfound sense of relief from the anxiety felt all too often in a dentist's chair. Just as it has always been, referrals from patients are critical to a thriving practice's success.

Finally, incorporating Suni3D technology is an invest in yourself and your practice. The "American Recovery and Reinvestment Act" of 2009 encourages businesses with incentives to

purchase next generation equipment like 3-D sensor technology. Section 179 of the IRS tax code "allows businesses to deduct the full purchase price of qualifying equipment purchased or financed during the tax year.

That means that if you buy a piece of qualifying equipment, you can deduct the full purchase price from your gross income." (Check out www.section179.org for more information). Value leader Suni Medical Imaging currently offers competitive rates that bring affordability to a desirable digital imaging product.

Recent pressures to raise the standards of dentistry have forced the

industry to move forward into a new generation. 3-D medical imaging is to the dental industry what hybrid technology is to the auto industry. Many dentists have wasted no time in showing some "teeth" and making the move to reinvent their practices.

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Today from 11:15 a.m. to 12:15 p.m. in aisle 6000, room 3, Dr. Damien Mulvany will present "Why View Your 3-D Patients with 2-D Images? A Common-Sense Approach to 3-D Imaging in the General Practice" as part of the DTSC Symposia.

About the speaker

Dr. Damien Mulvany of Acacia Dental Group is a native of Australia. Mulvany holds his dental degree from the Washington University School of Dental Medicine and completed a general practice residency at Southern Illinois University.

Kherani offers laser dentistry overview with an update on closed flap osseous

By Shamshudin (Sam) Kherani DDS, FAGD, LVIM, MICCMO

■ A paradigm shift has occurred in esthetic dentistry. In the past, we used to be limited to the patient's bony architecture when contouring tissue. Resulting architecture may not have been optimal based on nature's golden proportion, or the 1/1.6 ratio we are striving for, but with the implementation of all-tissue lasers, we can now create these optimal proportions without a flap!

As the LVI clinical director, I see us complete hundreds of esthetic cases a year. Since implementing the all-tissue laser three years ago, on average 25 percent of the cases require closed flap osseous to take our cases from good to great.

For a detailed video on this procedure, visit www.lvi.com/Kherani_osseous where I show a 10-minute overview of the procedure in detail. There will also be a detailed breakout at the IACA in San Diego.

Paradigm shift regarding bone

One of the most stressful situations as a dentist is when our patient has any sort of osseous issues. Based on past experience, we know that if we have to contour bone, we will most likely have to outsource the procedure, it is going to hurt the patient and be difficult to get vertical bone growth. The implementation of all-tissue laser technology in dentistry has dramatically changed how we now deal with these various osseous situations.

Why is this? Can it really be done easily, predictably and without discomfort for the patient by a general dentist? The answer to all of these questions is yes, and here is why:

- All-tissue lasers are very different than a bur. Burs cut with contact and cause micro fractures and leave a smear-layer. Lasers cut by non-contact surface ablation, no smear layer or micro fractures.
- All-tissue lasers can be calibrated to remove cell layers of bone per pulse of energy. This capability

causes no collateral damage, gives the clinician complete control and the patient will heal in an expedited fashion with nominal discomfort.

- All-tissue lasers reduce bacteria and cross contamination dramatically reducing the probability of postoperative infection.
- All-tissue lasers have bio-modulation properties that expedite healing and growth at a cellular level on both tissue and bone.
- All-tissue lasers do not cut primarily with thermal energy like diodes, which is what most clinicians are used to. All-tissue lasers cut by photo-acoustic ablation if primarily a surface interaction only. Additionally water is emitted with an all-tissue laser when cutting, cooling the surface which also cools the area.

All these factors make dealing with osseous issues completely different than with "traditional" modalities.

Osseous applications

The following are just a few osseous applications that are much more predictable to do with all-tissue lasers:

- *Hard-tissue crown lengthening/alveoloplasty without extraction*

From esthetics, crown and bridge, and lesions/fractures below the bone, many times we need to create 1-2 mm of biological width. With the laser, in most cases, this can now be done without a flap.

- *Periodontal defects and furcations*
On some of the minor furcations and defects, all-tissue laser makes these cases much more conservative and clean for the general dentist making it more predictable and pain-free than in the past.

- *Implants and bone grafting*
All-tissue lasers can help with access to the osteotomy site and help remove smear layer for easier implant placement. Cleaning up tissue around salvageable implants is selective and clean. Also, using all-tissue lasers to cause bleeding on the cortical plate at a grafting site will start to heal much quicker, and patients will have much less postoperative pain for the patient.

Performing osseous procedures with all-tissue lasers are much more conservative, have nominal or no bleeding, heal in an expedited fashion and patients respond very positively to these once feared procedures.

Finally, think of all the cases that were compromised, watched or referred out "pre" all-tissue laser. If a general dentist just did two of these osseous cases a month at \$750 per site, which is an additional \$18,000 in annual revenue for a practice in just these cases alone. Remember,

Attend the session

Today from 3:15 to 4:15 p.m. in aisle 6000, room 3, Dr. Shamshudin "Sam" Kherani will present "The Power of Dentistry: Positively and Significantly Affecting Our Patients Lives" as part of the DTSC Symposia. In his sessions, he will explain how, as contemporary dentists, we have the ability to interact with our patients in a manner that allows them to inform us of such chronic issues that they may be facing and, at the same time, be able to understand the presented physiology by the patient to render treatment that allows for cessation of such pain and dysfunction. Kherani will discuss the theory and science behind the neuromuscular occlusion philosophy and its application in treating numerous cases that range from esthetic needs to pain management in a contemporary setting.

About the author



Shamshudin "Sam" Kherani, DDS, FAGD, LVIM, MICCMO, is a graduate of University of Western Ontario and has been in general practice since 1981, with a special interest in adhesive dentistry. Prior to joining LVI full-time in his role as vice president of educational advancement, he served as a clinical instructor at the institute as well as a regional director. Awarded fellowship from the Academy of General Dentistry, and appointed trustee of Public Colleges Foundation by the Government of Alberta, Kherani is also one of a few recipients of the mastership designation from the LVI as well as a mastership designation from the International College of Cranio-Mandibular Orthopedics (ICCMO).

all-tissue laser can be used on more than 65 ADA codes, so when a practice simply adds a handful of other ADA codes, you can start to see adding \$3,500 a month or more than \$42,000 to a practice annually is easily attainable for the average general dentist. The all-tissue laser can help you clinically while simultaneously having a positive effect on your practice's bottom line.

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DIODE LASERS AND RESTORATIVE DENTISTRY

3:15 - 4:15 DR. SHAMSHUDIN KHERANI // COURSE NO. 4710

**LASER DENTISTRY OVERVIEW WITH AN UPDATE ON CLOSED
FLAP OSSEOUS**

4:30 - 5:30 DR. MARTY JABLOW // COURSE NO. 4720

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Understanding advances in self-adhesive technology and how to incorporate them into your practice

By Martin Jablow, DMD

■ There is considerable confusion for the practitioner when discussing self-adhesive materials and when to best utilize these different types of products. With the introduction of self-etch, self-adhesive flowable composites, cements, bonding agents and core material, the confusion has increased.

We will review the different types of materials and how to best use these to provide better restorations and improve the quality of dental treatment. There are two distinct types of adhesive bonding systems: total etch and self etch. Total etch requires a separate phosphoric acid step to etch the enamel and dentin, a subsequent rinse and application of primer and bond.

Self-etch systems have an acidic resin, which etches and primes without the need for etching or rinsing, and then there will be a subsequent application of bond. Companies have attempted to improve on the bonding process by including both the primer



Fig. 1: Fractured maxillary central incisor.



Fig. 2: Example of a self-adhesive bonding agent

and bond together in one bottle. This is where the generation of bonding numbers was introduced.

So how do you choose whether to use Total Etch or Self Etch? Well it depends on the amount of enamel or dentin available for bonding. If you have a lot of enamel or uncut enamel as in a Class IV restoration then using a total etch technique may be best (Fig. 1). If there is mostly dentin, then use a self-etch technique.

Self-etching bonding agents can be used directly on cut enamel or dentin surfaces. In many cases self-etch bonding agents are referred to as 7th generation bonding. The wetting agent penetrates into the dentin tubules bringing with it the acid and resin. The self-etching primer then polymerizes in the tubules. This is why there may be reduced sensitivity when restoring teeth with the self etch technique (Fig. 2).

Indirect restoration cementation can be routinely done with self-etching resin cement. Crown-and-bridge restorations should be retentive due to the ferrule and parallel walls of the abutment preparations. The tenants of good crown and bridge should not be ignored and expect the resin cements to overcome prosthetic shortcomings. Look for dual cure cement so you have maximum versatility along with fluoride release and a good shade selection. On the dental materials side, you should select self-adhesive cements with high dentin bond strengths and low expansion. This will enable you to use these types of cements for varied substrates such as composite, metals and ceramic crowns.

Self-etch adhering composites are the latest progression in self-etch technology. These materials combine

Attend the session

Today from 4:30 to 5:30 p.m. in aisle 6000, room 3, Dr. Martin Jablow will present "Understanding the Advances in Self-Adhesive Technology and How to Incorporate Them Into Your Restorative Practice" as part of the DTSC Symposia. In his session, he will explain that there is considerable confusion for the practitioner when discussing self-adhesive materials and when to best utilize these different types of products. With the introduction of self-etch, self-adhesive flowable composites, cements, bonding agents and core material, the confusion has increased. He will review the different types of materials and how to best use these to provide better restorations and improve the quality of dental treatment.



About the author

Martin Jablow, DMD, America's Dental Technology Coach is a clinician, speaker and author. He presents and publishes worldwide on state-of-the-art dental technology and dental materials. He achieved fellowships in the AGD and International Academy of Dental Facial Esthetics. Jablow serves on the DentalCompare C.E. Advisory Board and the Eco-Dentistry Association Advisory Board. For almost 20 years, he has been a member of his local peer review and is currently an attending at the JFK Medical Center in Edison, N.J. As the Internet has grown, so has Jablow's online presence with his dental blog and webinars.

the benefits of adhesive and composite technology into one product. Simply syringe the flowable composite into preparation, agitate or brush then light-cure. There is no need for an etchant or an adhesive. Self-adhering composites work especially well as a base for larger composite restorations. These materials can be used for small Class I, III and V preparations. They can be used for pit-and-fissure sealants but you will need to etch the uncut enamel first.

Self-adhesives do not require the acidic removal of the smear layer. Self-etch materials have changed the way we approach many restorative dental procedures. Self-etch materials reduce postoperative sensitivity, simplify procedures and save time. So, as you can see, the use of self-etch bonding systems leads to more predictable bonding.

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Scenes from Sunday



• Registration lines were long but moved quickly throughout the morning on Sunday.



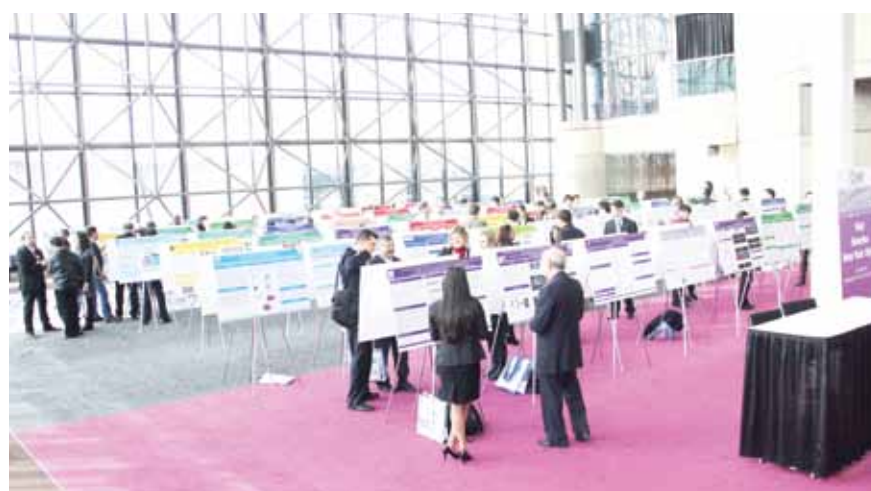
• Lucas Walter, left, and Michael Maccaquano of 3Shape (booth No. 4616).



• Dr. Thomas Hirsch, founder and CEO of Isolite Dental Systems, demonstrates the Isolite on Tarah Despain at the company's booth, No. 315.



• Are you a golfer? If so, stop by to see Dawn Kline of Musty Putters (booth No. 4233).



• A bird's eye view of Sunday's Scientific Poster Sessions, located outside of the Special Events Hall, included hygiene students, undergraduate and graduate students as well as international participants from Mexico and Brazil.



• Get your cute cuddlies at Practicon (booth No. 4621).



• A meeting attendee stops at Hands On Training Institute (booth No. 1103) to get more information.



• Meeting attendees visit the NSK booth (No. 233).



• A captive audience watches as the music moves a 'flash mob' at the Gendex bus on Sunday.



• Jon Rosenthal of DMG America (booth No. 1807).



• When it comes to making your office more kid-friendly, Richard Heier of Beetling Design Corp. (booth No. 2119) is the man with the plan.



• The guys at Aseptico (booth No. 807) are all smiles: Jeff Baxter, from left, Mark Mayer and Stefan Gefter.



• Thelma Bruns, left, and Craig Bruns of Danville Engineering & Materials (booth No. 1016).

• Chase Vice President of National Sales Laura Nadler and dental industry sales coach Anthony Stefanou, DMD, help visitors learn more about the ChaseHealthAdvance program (booth No. 4623) on Sunday. Stefanou works closely with the Chase team of representatives.



• Analiz Aquino of Benco Dental shows off a scooter, one of many items you can get by redeeming your BluChips. Stop by booth No. 3825 to learn more.



• Ouranla Vlahopoulos of Colgate (booth No. 2825).



• Lee Ann Szymanowski of Second Story Promotions (booth No. 1119).



• Katy Nierman, left, and Ashley Truitt of Henry Schein Dental (booth No. 1217) are on hand to tell meeting attendees about Sleep Compare.



• Jason J. Kim offers an educational presentation on Sunday morning at Jason J. Kim Dental Aesthetics (booth No. 3613).



• Meeting attendees stop by George Taub Products (booth No. 2708) to stock up on supplies.



• Bob Zettler of Dux Dental (booth No. 4505).



• Say hello to the guys from Flight Dental Systems (booth No. 129): Joseph Hui, from left, Charles Hui and Bill Rimmer.

Photos by Robin Goodman, Fred Michmershuizen and Robert Selleck of Dental Tribune and Carlo Messina of Fix Video & Photography



• Mike Hooper, left, and Lisa Stillman of Spry/Xlear (booth No. 3438).



• Lou Graham, DDS, teaches a two-part hands-on workshop in the exhibitor hall Sunday on 'Advancements in Direct Adhesion Dentistry.'



• Rick Dweck of Samsonic Trading Co. (booth No. 1513) shows off a Red Sox toothbrush. The company also has Yankees and other Major League Baseball teams.



• During the all-day workshop on dermal fillers, Dr. Bruce Freund demonstrates technique.



• Meeting attendees visit the VOCO America booth (No. 4415) to get new products.



• Flavio Gobbo, left, and Keila Lacourt of Spazzolificio Piave (booth No. 2112).



• Linda Johnson of PHB (booth No. 2714) has dental hygiene products that are playful and practical.



• Max Chu of SS White (booth No. 2503).



• Meeting attendees stop at iDentist (booth No. 3831) to learn more about reaching new patients via the iPhone.

What happens next?

By David Keator, Keator Group

■ During the last 30 years, we have seen investment “bubbles” of different varieties that are nothing more than extreme investment swings based on a myriad of factors. Internet, commodity and real estate bubbles, to name just a few, have all caused many investors anxiety. The primary drivers of these inflated values are based upon momentum and greed. It comes from a feeling that everyone else is making money and the investor is missing out.

It is OK to be an optimist, but it is a good idea to be watchful when everyone is an optimist. Beware of crowds at the extreme. When we see the type of exuberance that typically leads to inflated values, we believe it is a good time to take a breath and put up a safety net.

In early spring, many economists and market analysts warned that bond prices would decline and the result would be higher interest rates. As a result, the conventional wisdom was to shorten the duration of a fixed

income portfolio in an attempt to create a bunker. Because we have enjoyed unprecedented and historically low yields (high-bond prices), many heeded this call. Some saw a bond “bubble,” and it was time to take profits.

On March 1, the five-year treasury yield was 2.23 percent. Four months later, the five-year yield was 1.48 percent. When prices on bonds rise, their yields typically fall. That means the short-term investment call was premature, giving credence to market calls being more art than science.

So, what is being done with all of the cash that is being held?

Investors are searching for a place to invest it. Short treasury yields (one year) have fallen from .30 basis points (one-third of 1 percent) to .16 basis points (one-sixth of 1 percent) between March 2010 and July 2011. This has caused investors to hunt for yield and seek higher income potential from more aggressive investments.

Theoretically, the higher the potential yield, the greater the risk, but the appetite for higher yield has been

strong and that has the potential to cause a bubble in the high-yield market just as high demand for Internet stocks caused unrealistic valuations in the late 1990s.

Buyer beware: A fixed-income investment paying a 5 percent yield might not seem risky on face value, but if it is compared to the relative security of treasuries, then you can easily see a potential for a disconnect.

So, back to our title: “What happens next?” The next step for each investor is to evaluate where your safety net is. Do you have an investment plan? Have you figured out your risk profile and adjusted your investments accordingly? Do you have a bunker?

If the market drops by 10 to 20 percent, do you have enough cash and liquid investments as a reserve so that you can avoid selling undervalued assets to meet emergency or even day-to-day needs? Are you properly diversified?

It is painful to see CDs and short-term treasuries paying less than 1 percent. If it is part of your bunker, you have to stay disciplined. If your

About the author

David Keator is a partner at Keator Group. Contact him at (877) 532-8671.

investment time frame is short, you must be very careful of volatility. With a longer time frame, you could possibly take advantage of high-quality stocks with dividend potential or short-term corporate bonds. Remember, we are in a global economy, so do not overlook investment opportunities throughout the world.

We believe one of the safest ways to invest is with a long-term horizon.

Editor's note: The opinions expressed here are those of the author and are not necessarily those of Wells Fargo Advisors Financial Network or its affiliates. The material has been prepared or is distributed solely for information purposes and is not a solicitation or an offer to buy any security or instrument or to participate in any trading strategy. Additional information is available upon request.

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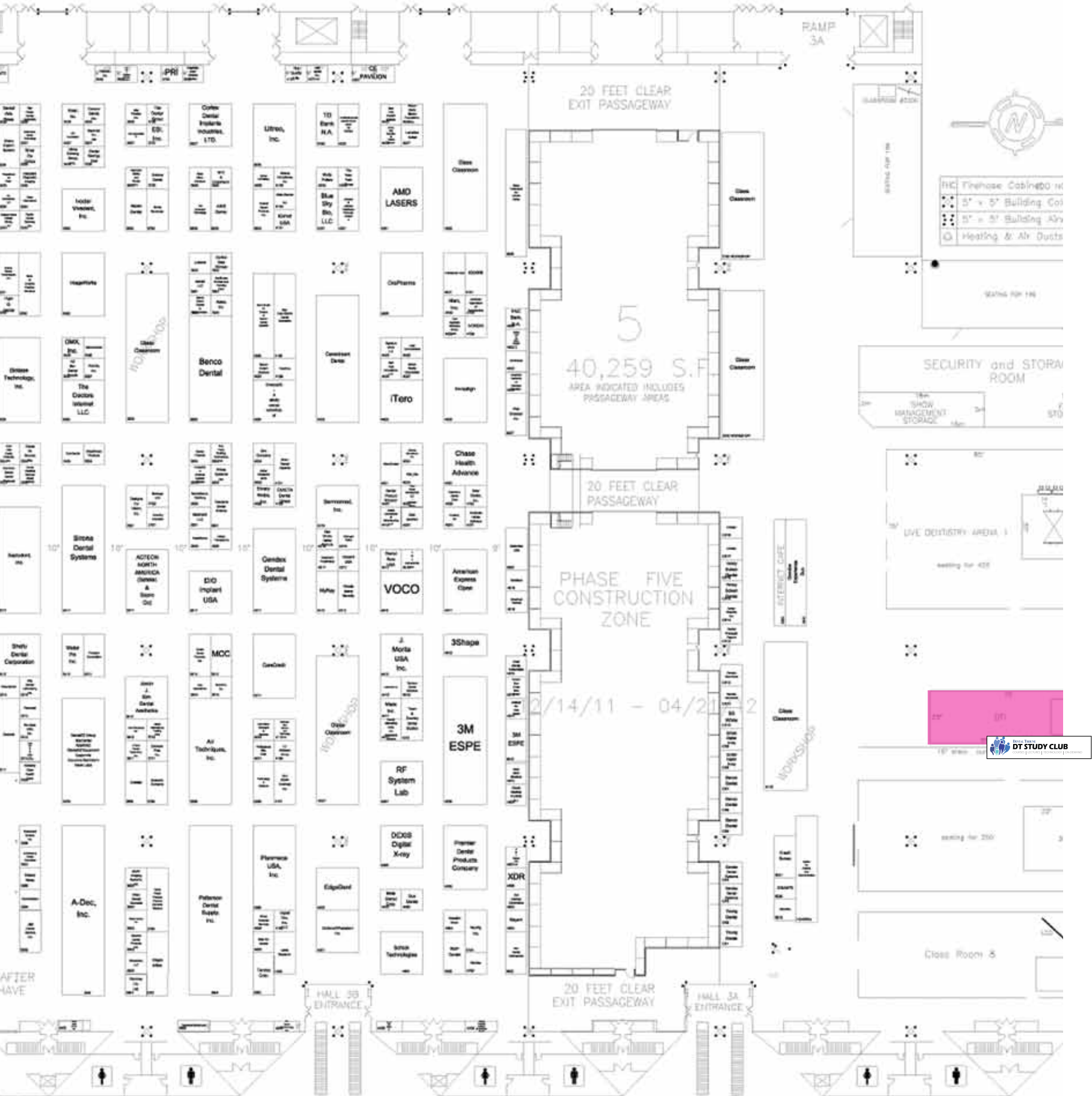
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It happened in a flash!

What happened in “a flash” at the GNYDM took a lot of time in the planning and implementation from the Gendex team.

Attendees’ curiosity was piqued when they received special invitation cards to the Gendex booth on the first day of the meeting.

As everyone soon found out, the people milling around the booth and touring the bus were not just dentists and their associates.

As the curious crowd gathered, the “flash mob” event started to unfold. As dancers appeared from every direction, even streaming off of the bus – until the group grew to 120 people, dressed in Experience Gendex shirts and hat, suits and even scrubs.

With Pavan Thimmaiah of PMT Dance Studios as the choreographer, the “mob” moved to the mash up of music that incorporated the Experience Gendex theme song and the sounds of “Drum Machine,” a number by local artist Matt Palmer.

Reportedly, the flash mob was the first event of its kind at the GNYDM. Filippo Impieri, director of marketing for Gendex, said: “We are already driving



Flash mob dancers cut loose near the Gendex bus on Sunday at the GNYDM. (Photo/Carlo Messina, Flx Video & Photography)

innovation across the nation. As a truly creative company, we are on the cutting edge of new concepts for our products and the way that we showcase them. The flash mob is a new and exhilarating way to embody the excitement that always surrounds a Gendex experience.”

Cameras were set up in various locations to catch the event, and Gendex will post the full version next week on

its YouTube Channel. Gendex promises to keep bringing the innovation and excitement of new technology to dentist offices throughout the nation. The Experience Gendex bus is traveling around the country, with its dynamic products, including the newest GXDP-700™ pan-ceph-3D imaging system, digital intraoral X-ray and intraoral sensors.

While the flash mob was a fun sur-

prise, it is evident that after a century of research and development, Gendex has taken its time to be in perfect harmony with the quality, safety and efficiency imaging needs of the contemporary dental practice.

Be sure to visit the Gendex booth, No. 4017, and the Experience Gendex bus located next to the Internet Café near the Live Dentistry area.

AD

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Digital imaging firm's reputation for reliability is 50 years in the making

By Rob Selleck, Dental Tribune

The biggest challenge Instrumentarium Dental faces when encouraging existing clients to upgrade equipment is convincing them to let go of perfectly functioning Instrumentarium systems that may be decades old. The company has clients across the world using Instrumentarium X-ray

Instrumentarium Territory Manager Richard Kelstein fielded many questions Sunday about the Instrumentarium OP300 digital imaging system, displayed front and center in booth No. 2208.

Here in New York

To see a variety of Instrumentarium and Soredex imaging systems and learn about the GNYDM special offers, visit booth No. 2208. You also can visit www.instrumentariumdental.com, www.soredex.com or call (800) 558-6120.

systems bought in the early 1970s. Given that the company developed the technology in Finland in the 1950s and sold its first system in 1961, user loyalty is not so surprising. In fact, it's on the 50th anniversary of the 1961 introduction of the company's Orthopantomograph® scanner, that the company has produced its latest advancement in dental panoramic X-ray imaging: the Orthopantomograph OP300.

"It's 50 years in the making," said Instrumentarium Territory Manager Richard Kelstein. "And with the quality of these machines, they just last forever. We're the oldest company doing this in the world, which is a big reason why the knowledge of our sales force is second to none."

Upgrading is a bit less of a challenge these days for both Instrumentarium and its clients because all of its systems are designed for quick and easy expansion from 2-D panoramic digital imaging to include either cephalometric or cone-beam 3-D imaging or a combination of both.


Drawing on the latest in CMOS (complementary metal oxide semiconductor) sensor technology and 14-bit image data, the OP300 produces intensely sharp images and ideal exposure levels. The resulting images provide highly accurate clinical information for treatment planning. The 3-D imaging option enables clinicians to see detailed anatomical structures with three-dimensional reconstructions and cross-sectional views.

All of the traditional Instrumentarium features are included, too: stable, accurate patient positioning; versatile planning and viewing software that is compatible with most other applicable dental-practice software; and a wide-range of settings that enable optimized scanning time and dose levels based on the specific patient and procedure.

All Instrumentarium systems are also available in the lower-priced Soredex line.

Working closely with dental professionals, universities and research organizations, Instrumentarium develops, manufactures and markets high-tech systems and solutions for dental and maxillofacial imaging. The company offers a full range of premium quality imaging solutions for both intraoral and extraoral imaging.

AD




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Monday, November 28, 2011



DR. SHAMSHUDIN "SAM" KHERANI
Course: Predictable Comprehensive Dentistry: Addressing Occlusion, Sleep Breathing Disorders and Aesthetics
Time: 9am - 12pm
Location: 1E06 - GNYDM
Tuition: FREE
Credit: 3 CEUs

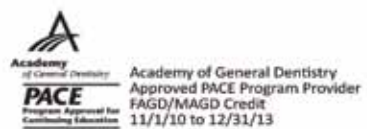


DR. MARK DUNCAN
Course: Comprehensive Care - It Isn't About the Teeth! In Our Quest To Be Better Dentists, Are Our Patients Paying The Price?
Time: 2 - 5pm
Location: 1E06 - GNYDM
Tuition: FREE
Credit: 3 CEUs

Both seminars are recommended for Dentists, Hygienists, Assistants, Administrative Staff, Lab Techs, and Students

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Shofu's Beautiful Flow Plus users 'branch out'

By Robin Goodman, Dental Tribune

What's the news from Shofu here at the Greater New York Dental Meeting?

Shofu Inc. President Noriyuki Negoro: We are very pleased with the acceptance of Beautiful Flow Plus by dentists in the U.S.A., as well as Asia and Europe. This unique product offers both doctors and patients excellent esthetics, durability and time savings, as well as fluoride release and recharge. We are seeing that dentists in America and other areas outside Japan are now appreciating that Shofu is an excellent source of restorative materials.

Shofu Dental President and CEO Brian Melonakos: Beautiful Flow Plus was actually launched here at the Greater New York Dental Meeting [GNYDM] last year and has already proven to be the most successful restorative product in the history of Shofu Americas.

It's actually put us on the map as a restoratives company here in North America as the acceptance has been very broad, and it's been an innovative product in the sense that it is the first global material, global restorative, that is indicated for all indications, Class I through IV.

We're finding that some of the people that first started using the product, as long as a 12-months ago or nine months ago, are starting to branch out into non-traditional flowable indications.

We had Dr. Howard Glazer lecture for us this morning as a part of the DT Study Club Symposia here at the GNYDM, which was very well received, and Dr. George Freedman and Dr. Fay Goldstep will be lecturing as well. Drs. Goldstep and Freedman are not only frequent users of Beautiful Flow Plus, but they also have it in their own mouths, as do I.

Director of Marketing Lynne Calliott: Moving into 2012, we have a very aggressive C.E. schedule that includes hands-on courses as well as traditional lectures from key opinion leaders at the major dental meetings throughout the year, regional meetings and at Shofu-sponsored events.

What type of show specials are available?

Calliott: There are four package options available, which cater to first-users as well as confirmed users of Beautiful Flow Plus, BeautiBond and Beautiful II. For example, there is Beautiful Flow Plus Trial Kits, available in a standard or a pedo option. For seasoned users, there is the 'buy three get one free' option for Beautiful Flow Plus and Beautiful II.

Here in New York

For more information, visit the Shofu website at www.shofu.com or stop by the booth, No. 3512.



Shofu Inc. President Noriyuki Negoro, left, and Shofu Dental President and CEO Brian Melonakos at the redesigned Shofu booth (No. 3512).

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For the fourth year in a row, Dental Tribune Study Club hosts its annual C.E. Symposia at the GNYDM, offering four days of focused lectures in various areas of dentistry.

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Each day will feature a variety of presentations on topics, which will be led by experts in that field. Participants will earn one C.E. credit for each lecture they attend, with potential to earn a total of 24 credits! DTSC is the official online education partner of GNYDM.



SUNDAY, NOVEMBER 27

10:00 - 11:00 DR. HOWARD GLAZER // COURSE NO. 3780
GIOMERS: NEW GIANTS OF MI DENTISTRY

11:15 - 12:15 DR. SHAMSHUDIN KHERANI // COURSE NO. 3790
COMPREHENSIVE DENTISTRY USING DIGITAL IMPRESSION TECHNOLOGY

12:45 - 1:45 DR. RON KAMINER // COURSE NO. 3800
MINIMALLY INVASIVE DENTISTRY: TIPS AND TRICKS TO MAXIMIZE SUCCESS

2:00 - 3:00 DR. LOUIS MALCMACHER // COURSE NO. 3810
THE HOTTEST TOPICS IN DENTISTRY

3:15 - 4:15 DR. BRIAN NOVY // COURSE NO. 3820
TECHNOLOGY TO IMPROVE YOUR CARIES MANAGEMENT

4:30 - 5:30 DR. GEORGE FREEDMAN // COURSE NO. 3830
EVOLVING CONSERVATIVE RESTORATIONS

TUESDAY, NOVEMBER 29

10:00 - 11:00 DR. GREGORI KURTZMAN // COURSE NO. 5690
CORE BUILDUPS, POST & CORES AND UNDERSTANDING FERRUL

11:15 - 12:15 DR. PAUL GOODMAN // COURSE NO. 5700
CAPITALIZE ON THE HIDDEN IMPLANT PRODUCTION IN YOUR PRACTICE

12:45 - 1:45 DR. GEORGE FREEDMAN AND DR. FAY GOLDSTEP // COURSE NO. 5710
THE DIODE LASER: THE ESSENTIAL SOFT TISSUE HANDPIECE

2:00 - 3:00 DR. SELMA CAMARGO // COURSE NO. 5720
LASERS IN ENDODONTICS: CLINICAL APPLICATION FOCUS ON DIFFICULT CASES

3:15 - 4:15 DR. STANLEY MALAMED AND DR. MIC FALKEL // COURSE NO. 5730
LOCAL ANESTHETIC PERFORMANCE; FICTION, FACT AND ADVANCEMENTS (PRECISION BUFFERING)

4:30 - 5:30 DR. ENRICO DIVITO // COURSE NO. 5730
MINIMALLY INVASIVE ENDODONTICS USING PHOTON INDUCED PHOTOACOUSTIC STREAMING (PIPS)

MONDAY, NOVEMBER 28

10:00 - 11:00 DR. FAY GOLDSTEP // COURSE NO. 4670
WHAT PATIENTS WANT... WHAT DENTISTS WANT: EASY, HEALTHY DENTISTRY!

11:15 - 12:15 DR. DAMIEN MULVANY // COURSE NO. 4680
WHY VIEW YOUR 3D PATIENTS WITH 2D IMAGES? A COMMON SENSE APPROACH TO 3D IMAGING IN THE GENERAL PRACTICE

12:45 - 1:45 DR. LARRY EMMOTT // COURSE NO. 4690
REMEMBER WHEN "E" WAS JUST A LETTER? USE E-SERVICES TO IMPROVE PATIENT CARE AND INCREASE PROFITABILITY

2:00 - 3:00 DR. GEORGE FREEDMAN AND DR. FAY GOLDSTEP // COURSE NO. 4700
DIODE LASERS AND RESTORATIVE DENTISTRY

3:15 - 4:15 DR. SHAMSHUDIN KHERANI // COURSE NO. 4710
LASER DENTISTRY OVERVIEW WITH AN UPDATE ON CLOSED FLAP OSSEOUS

4:30 - 5:30 DR. MARTY JABLOW // COURSE NO. 4720
UNDERSTANDING THE ADVANCES IN SELF-ADHESIVE TECHNOLOGY AND HOW TO INCORPORATE THEM INTO YOUR RESTORATIVE PRACTICE

WEDNESDAY, NOVEMBER 30

10:00 - 11:00 DR. IRA LAMSTER // COURSE NO. 6600
MANAGEMENT OF THE PATIENT WITH DIABETES MELLITUS: CONSIDERATIONS FOR DENTAL PRACTICE

11:15 - 12:15 DR. GEORGE FREEDMAN AND DR. MARC GOTTLIEB // COURSE NO. 6610
ABC'S OF BONDING CERAMIC CROWNS AND CERAMIC REPAIR

12:30 - 5:00 **THE 2ND ANNUAL OSSEO UNIVERSITY SUMMIT: REVOLUTIONARY IMPLANT DESIGN UNVEILED; FOLLOWED BY THE LASER SUMMIT** // COURSE NO. 6620 THIS PROGRAM INCLUDES THE FOLLOWING LECTURES:

12:45 - 1:45 DR. RON KAMINER AND DR. ARMIN NEDJAT
MINIMALLY INVASIVE IMPLANT DENTISTRY FOR THE GENERAL PRACTITIONER

1:50 - 2:50 DR. DAVID HOEXTER
IMPLANTS AND BISPHOSPHONATES, OSTEONECROSIS, OSTEOPOROSIS AND ESTHETICS

2:55 - 3:55 DR. ROBERT HOROWITZ
OPTIMIZING PERIODONTAL, RESTORATIVE AND IMPLANT THERAPY WITH A 1064 LASER

4:00 - 5:00 DR. MICHAEL EGAN
OVERVIEW OF THE MOST PRACTICAL PROCEDURES PERFORMED BY ERBIUM, 1064 NDIYAG, 1064 DIODE EMPHASIS ON PERIODONTAL PROCEDURES



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Incorporate sleep medicine into your practice

Henry Schein Dental can help you with that

■ Henry Schein, the largest provider of health-care products and services to office-based practitioners, announced the launch of its Sleep Complete™ program, an integrated comprehensive solution that provides all the information and products necessary for the implementation of dental sleep medicine into the dental practice. Henry Schein Dental's Sleep Complete program was developed in collaboration with Nierman Practice Management, Modern Dental Laboratory USA and Itamar Medical.

Henry Schein Dental's Sleep Complete program provides tools to address all of the key components of dental sleep medicine: education, treatment, reimbursement and monitoring. The Sleep Complete package includes the Dental Writer™ Diagnostic Report Writer and Medical Billing Software for Dentistry through Nierman Practice Management. This specialty software simplifies the billing and reimbursement process for dentists on procedures that require reimbursement from the patients' medical insurance and provides the tools needed to easily submit reimbursement paperwork at the click of a button.

Additionally, as part of the Sleep Complete package, Henry Schein Dental is offering dentists registration to the Nierman Practice Management two-day "Successful Implementation of Dental Sleep Medicine" seminars featuring John H. Tucker, DMD, Diplomate ABDSM, Diplomate ICOI. These two-day live educational courses offered around the country as well as one-hour webinars provide dentists with a comprehensive overview of sleep disorders and guide them in successfully incorporating dental sleep medicine into their practice.

The Sleep Complete package also includes the oral appliance starter kit from Modern Dental Laboratory USA

Here in New York

For more information, visit the Henry Schein website at www.henryschein.com or visit the booths, Nos. 1032/1217.

that consists of pre-paid vouchers for The Moses™, the EMA® First Step and EMA® custom oral appliances as well as marketing materials and other useful tools for the dentist to incorporate this therapy solution into their practice. This selected range of oral appliances offer options suited to all types of patients. These appliances are all FDA cleared for the treatment of snoring and mild to moderate sleep apnea or for patients who cannot tolerate CPAP (Continuous Positive Air Pressure).

The final component of the Sleep Complete package is the WatchPAT™ testing device provided through Itamar Medical. WatchPAT is a user-friendly, non-invasive, portable sleep-testing device that gathers data related to the patient's sleep tendencies that can be interpreted by a sleep physician and used by the dentist to titrate the oral appliance being used for the treatment of obstructive sleep apnea. Dentists utilize the WatchPAT portable sleep-monitoring device in collaboration with the patient's physician.

"Sleep apnea is a serious health problem, and dental sleep medicine presents a very promising practice extension opportunity for dentists," said Tim Sullivan, president of Henry Schein Dental. "Our Sleep Complete program provides all of the key tools and guidance necessary to help dentists easily navigate the intricacies of treatment, reimbursement and monitoring, and it makes it simple for our dentist customers to successfully incorporate dental sleep medicine into their practices."

Sleep apnea, which occurs when the tongue and soft tissues fall back into the throat and block the airway during sleep, is a very serious health condition. According to the American Academy of Sleep Medicine, approximately one-half of people who snore loudly have obstructive sleep apnea, which can contribute to an increased risk for high blood pressure, heart attack, stroke, diabetes, depression, memory and concentration problems, obesity, excessive daytime sleepiness and driving accidents.

The American Academy of Sleep Medicine also notes that while an estimated 18 million Americans suffer from sleep apnea, 80-90 percent remain undiagnosed.

The Sleep Complete package will be offered to dentists through a bundled financing package through Henry Schein Financial Services, significantly lowering the financial barrier to entry that often faces dentists interested in incorporating sleep medicine into their practice.

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New products for better contacts

■ Garrison Dental Solutions (booth Nos. 207 and 4514) is introducing several new products to help clinicians achieve tight, anatomical contacts on posterior Class II restorations.

Chief among the product improvements is the newly redesigned Soft-Face™ separator ring (part number 3D500). This ring is the backbone of Garrison's flagship sectional matrix system, Composit-Tight 3D.

The new ring boasts a 35 percent reduction in the size of the reinforcing over-mold while improving chemical resistance and longevity. The ring retains the over-the-wedge placement design and anatomy-hugging soft silicone tips that made it an instant success.

The reduction in body size provides improved visibility and greatly simplifies ring placement. This was made possible by a new high-strength, heat resistant autoclavable plastic that allowed for the size reduction without sacrificing tooth-separating power. As an added benefit, the new material has greater chemical resistance. Used in connection with Garrison's sectional matrix bands, the new rings produce tight, anatomically shaped contacts on Class II composite restorations.

In addition to the redesigned separator ring, the Composit-Tight Ring



■ Garrison's new Soft-Face separator ring. Inset: The ring in use. (Photos/Provided by Garrison Dental Solutions)



Placement Forceps (part number AUMRDF-100) have been improved. The changes have allowed for a more ergonomic grip, easier opening and placement of high-tension separator rings such as the Soft Face 3D500.

Another major new product is designed to help clinicians who prefer Tofflemire-style matrix systems. The PerForm™ proximal contact instrument (part number CFK01)

gives the clinician complete control over the formation of interproximal contacts on posterior composite restorations. Regardless of the matrix system employed, the PerForm's simple push/pull technique holds the matrix and composite material in the ideal position.

The curing light is placed directly on the unique Fresnel lens that aids in directing the light deep into the

Here in New York

Attendees are invited to stop by one of the Garrison booths (booth Nos. 207 and 4514) to see all of their matrix systems and accessories as well as practice on typodonts.

proximal box. Once cured, PerForm is easily removed, and the restoration is completed resulting in perfectly formed tight contacts.

PerForm comes in a set with instruments for both large and small preparations. Each double-ended instrument has a mesial contact former and distal contact former. Carefully engineered tips form the composite during polymerization without the risk of getting locked in place. The instrument is steam autoclavable and is the perfect complement to any matrix system or technique.

Attendees are invited to stop by one of the Garrison booths to see all of their matrix systems and accessories as well as practice with them on typodonts.

Garrison Dental Solutions is a Michigan-based company that has been exhibiting New York for 14 years. Their products are available direct in the United States and through select dealers worldwide.

Picasso laser technology featured in lectures, live dentistry demos and hands-on clinics

■ AMD LASERS, manufacturers of award-winning Picasso laser technology and a global leader in providing ultra-affordable laser technology for dental professionals, is proud to announce that numerous Picasso laser users have incorporated AMD LASERS technology into a wide range of topics and lectures on the program at the Greater New York Dental Meeting (GNYDM).

Prospective or current laser users will see Picasso laser technology in use in lecture topics ranging from taking excellent impressions using a diode laser, uncovering implants with minimal tissue trauma, creating a laser-based periodontal and soft-tissue management program in your practice, performing soft-tissue crown lengthening, tissue grafting or numerous other clinical applications.

Dr. Joseph Massad, an internationally renowned clinician in the field of prosthodontics, will be featuring Picasso laser technology during his free all-day course in the GNYDM's "live" 300-seat High Tech Arena on the exhibit floor in aisle 6000. Massad has lectured around the world and was named one of the top clinicians in

Here in New York

The Greater New York Dental Meeting and several laser companies, including AMD LASERS, are sponsoring two hands-on laser courses available Tuesday and Wednesday on the exhibit floor in aisle 6000 room 1 from 2 to 5 p.m. each day. For more information, visit AMD LASERS at booth No. 4431.

continuing education for 2000-2011 by Dentistry Today magazine. He is a recipient of the Chicago Dental Society's "Gordon J. Christensen Recognition Lecturer Award." His free all-day course will feature live dentistry using the Picasso laser.

"We are delighted that so many Picasso laser users are on the podium here at the GNYDM," said Alan Miller, president and founder of AMD LASERS. "We are grateful that so many renowned clinicians have adopted this transformative technology and are in turn pushing their experiences to their audiences at the GNYDM and many other events throughout the year."

Additional Picasso laser users on the program at the GNYDM include



■ Dr. Glenn Van As with a Picasso laser at the AMD LASERS booth (No. 4431). (Photo/Fred Michmershuizen, Dental Tribune)

several notable clinicians such as Dr. Jon Suzuki and Dr. David Little. The Dental Tribune Study Club C.E. Symposia held each day in aisle 6000 of the exhibit hall also features Picasso laser users like Drs. Howard Glazer, Louis Malcmacher, George Freedman, Fay Goldstep, Marty Jablow, Ron Kaminer and David Hoexter. Finally, the GNYDM and several

laser companies, including AMD LASERS, are sponsoring two hands-on laser courses available Tuesday and Wednesday on the exhibit floor in aisle 6000 room 1 from 2 to 5 p.m. each day.

For a complete listing of GNYDM courses, and lectures, refer to your official program or visit AMD LASERS in booth No. 4431.

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The Dental Company

U.S. EPA to propose a new dental rule

By Al Dubé, Solmetex, National Sales Manager

■ The U.S. Environmental Protection Agency (EPA) was scheduled to release a proposed dental rule in October 2011. The proposed dental rule has been released from the draft committee and now is undergoing a cost analysis.

Once this analysis is complete, the document will head to the Office of Management and Budget for final approval before the proposed rule is released.

This release is now anticipated to be early in 2012. This proposed rule would require all U.S. dental facilities that place or remove amalgam to practice Best Management Practices (BMPs).

BMPs are rules for managing mercury waste, more specifically amalgam, which contains as much as 50 percent mercury by weight.

In 2003, the American Dental Association (ADA) published a BMP adding the recommended use of amalgam separators in 2007. The EPA simply is going to make the BMPs a requirement, including the installation of amalgam separators.

Once the EPA's proposed dental rule is released, there will be an opportunity for public comment within a specified period of time. Anyone has the right to offer their comments regarding the proposal in writing to the EPA.

As an example, if someone feels dental offices should install separators sooner than the desig-

nated time, they can recommend this to the EPA. The EPA will review the public comments and anticipates the dental rule to go final by first quarter 2012. Hints of what to expect are:

- Installation of a 2008 ISO 11143 certified amalgam separator. Required maintenance and potentially annual regulatory inspections. The do's and don'ts of amalgam management.
- An unspecified implementation period will be granted providing a required mandatory amalgam separator installation date.

Please stay tuned for updates and the posting of the EPA dental rule. For more information, stop by the Solmetex booth, No. 2821.

NuSmile pediatric crowns turn skeptic into advocate

■ When early childhood caries creates the need for restorations, a treatment of choice for strength, durability and protection has long been basic stainless steel crowns. But when it comes to esthetics — especially with anterior teeth — shiny stainless steel quickly loses top ranking.

For many dentists, that means facing the challenges of strip crowns or composites. In 1991 NuSmile® joined the effort to end the esthetics-versus-durability dilemma, introducing its proprietary approach to manufacturing coated stainless-steel crowns.

"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," said NuSmile CEO and President Diane Johnson Krueger. "Also, in two separate surveys of pediatric dentists, more dentists preferred NuSmile Crowns than any other esthetic pediatric crown offered."

One such dentist would be Carla Cohn, DMD, of Winnipeg, Manitoba, who works exclusively in children's dentistry. With 20 years of experience, she also is a clinical instructor at the University of Manitoba and international lecturer on pediatric dentistry issues.

"Immediately following dental school, I entered into a general dentistry private practice," Cohn said. "But my true passion was for the children, and after a children's hospital dental internship, I limited my practice to children. I haven't had a moment's regret since. For me, treating kids, all day every day, is a pleasure."

Cohn was introduced to NuSmile Crowns at a dental convention exhibition booth but wasn't a quick convert. "Initially, I dismissed the need for such a product," she said. "I mistakenly thought I could treat the kids in my practice with my current armamentarium: strip crowns, composite and stainless-steel crowns. In time, I realized how invaluable these

Here in New York

Carla Cohn, DMD, will present a hands-on course Tuesday, Nov. 29, from 9:45 a.m. to 12:45 p.m. in an exhibit-floor classroom. Participants can work with NuSmile Crowns and learn how, when and where to place them for success. Cohn's teaching philosophy is inspired by the statement, "Tell me and I will forget, show me and I may remember, involve me and I will understand." Visit the NuSmile Primary Crowns booth No. 2007. You may also call (800) 346-5133 or visit www.nusmilecrowns.com.

esthetic crowns really are."

Today, Cohn has come full-circle, using an exhibit-floor classroom at a dental convention to guide fellow practitioners through the NuSmile process. Her answers to a series of questions presented by Dental Tribune provide insight into her journey from skeptic to advocate.

What made you want to try NuSmile products?

Over the years, I spent countless hours fussing over anterior strip crowns — trying to maintain a dry field, finishing and polishing and never being quite happy with the results. I worried that those teeth that needed pulpal treatment would ultimately fail due to leakage of the composite.

After time, the strip crowns would stain and chip. NuSmile Crowns are much less technique sensitive than strip crowns. Moisture and hemorrhage control are not as crucial to their success as with strip crowns. They are more durable than strip crowns and will not exhibit leakage and risk failure of a pulpally treated tooth due to contamination. Best of all, they give an esthetic result with virtually no finishing required.

What about posterior teeth?

For posterior teeth, there are clear indications for full coverage: large and extensive caries, pulpally treated teeth, high-risk patients. Stainless-steel crowns are the gold standard



■ Miki Tiedt, RDH, with NuSmile Primary Crowns (Booth No. 2007), discusses the product with pediatric dentist Dmitry Stillman, DDS, chief of staff pediatrics at Cavity Free, a clinical dentistry practice for children and adolescents with special needs. Stillman is at the GNYDM with the Russian-American Dental Association. (Photo/Rob Selleck, Dental Tribune)

for restoration of these teeth, but the esthetics of a stainless-steel crown are very clearly lacking. It is becoming more and more common for parents to seek an esthetic alternative. Far too many practitioners place composites in these teeth, and they are simply doomed to fail. The simple fact is, that unless you have this in your armamentarium, you cannot provide an esthetic alternative in these situations.

What are some advantages of NuSmile products that you like in comparison with similar products?

I have found the finish of NuSmile Crowns to be very esthetic. The facing has a natural appearance. The sizing system is easy to work with, and, in my experience, they have been very durable. I have had great success with the retention and wear of the NuSmile Crowns. The parents in my practice have been delighted. I have had several patients come seeking a second opinion from me, and when I am able to offer them an alternative to a stainless-steel crown, they are thrilled.

Slow to convert, quick to master

Once Cohn committed to trying NuSmile, mastery came quickly. "It really is easy to prep for the NuSmile Crowns and place them," she said. "General practitioners in particular, who are accustomed to preparing teeth for



■ Dr. Carla Cohn with a patient. (Photo/Provided by NuSmile)

full coverage as in a porcelain-type crown, will find the preparation very similar in the amount of tooth structure that must be removed. It only takes one or two times to get used to working with them."

The more success Cohn had with NuSmile Crowns, the more she found herself recommending them. As a former skeptic, she puts this question to the hesitant: "If a parent or patient flat out refuses a stainless-steel crown due to esthetics — what are you going to use as a restoration? If you don't have an esthetic full-coverage alternative, you have no alternative."

Cohn said she has learned that practitioners can't just act on the needs of patients, but also must understand desires. "We must be able to deliver quality treatment with confidence," she said.

K

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CAESY expands to the clouds

■ CAESY Cloud is Patterson Dental's latest addition to the CAESY Patient Education Systems family of products. CAESY Cloud is online and guarantees dental professionals immediate access to more than 280 multimedia patient education presentations, including the most up-to-date materials featuring 3-D animation, full-motion video, narration and colorful images.

Recently updated, CAESY Cloud version 1.1 now includes six new orthodontic presentations to help practices keep patients informed, including braces care for adults,

early intervention, retainers, molar uprighting, Invisalign Teen and identifying oral habits for kids.

A number of existing presentations were also updated in CAESY Cloud version 1.1, including adult braces procedure, child braces procedure and Invisalign for adults.

Additional CAESY Cloud features include:

- Easy startup with no installation required and only a low monthly subscription fee so you can start using CAESY Cloud in your practice immediately.
- Compatibility/accessibility with

both PC and Mac services, smartphones and the iPad, iPhone and iPod – no additional software purchases are necessary.

- No network connections are necessary between participating computers, allowing presentations to be accessed from multiple locations within the practice with no additional charge.
- Presentations are updated frequently, and with the ease of a standard Internet connection, users will immediately be able to use the latest videos in all patient appointments.

Here in New York

For more information, visit www.caesy.com, call (800) 294-8504 or stop by the Patterson Dental Supply booth, No. 3801.



With the addition of CAESY Cloud, dental professionals now have more tools and more options to present their patient education materials. There are three chairside formats to choose from – CAESY Cloud, CAESY DVD or CAESY Enterprise – as well as front office programming with the Smile Channel. According to Patterson, countless dental professionals have seen how CAESY optimizes staff time, eliminates the fatigue of repeating explanations and increases case acceptance rates in the practice.

Dr. Marty Jablow, a beta-tester and new user of CAESY Cloud, said: "I have found the convenience of a cloud-based system delivers many benefits in comparison to the alternatives. Using a cloud-based system eliminates the need for time-consuming and frustrating installations. It's as simple as opening up a web browser and logging in to a website.

"With some other patient education systems, there is a need to update software or install the latest version. However, with CAESY Cloud, practices have instant access to all updates and all new presentations automatically. There is no hassle updating software. IT headaches and, more importantly, IT costs are eliminated by using the cloud."

"I find that using CAESY Cloud along with other educational tools, such as CAESY Smile Channel from Patterson Dental in the reception area, is an effective way to educate patients and create new business," Jablow said. "I would definitely recommend it for small and large practices alike that want to increase case acceptance rates and put their practice at the forefront of technology."

CAESY Education Systems has been one of dentistry's premier developers of leading-edge patient education technology and content since 1993. Patterson Dental Supply acquired CAESY in May 2004. The award-winning multimedia information on preventive, restorative and esthetic treatment options helps dental practices worldwide educate their patients and grow their practices.

The CAESY content is distributed via video and computer networks, DVD players and now through the cloud throughout the clinical and reception areas of a dental practice. The entire family of products includes CAESY Cloud, CAESY DVD, Smile Channel DVD and CAESY Enterprise, which includes CAESY, Smile Channel and ShowCase.

AD

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This?



Amalgam

- Currently banned in Denmark, Norway and Sweden; in Costa Mesa, CA there is resolution for dentists to voluntarily switch to non-toxic alternatives†
- 12 states currently require the use of amalgam separators for waste†
- Shade - metallic with zero translucency
- Requires additional tooth preparation
- More recurrent caries with amalgam†
- Patients are requesting amalgam alternatives

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90
min

GC

Safe from the get-go



• NOMAD Pro Handheld X-ray System (Photo/ Provided by Aribex)

Studies confirm handheld X-ray technology is not dangerous for either operators or patients

■ At the end of the 19th century, when researchers developed the first X-ray machine, they knew it posed potential danger. Because of leakage from X-ray tubes, scientists developed protocols to protect operators from imminent X-ray exposure during procedures. These protocols included lead-lined walls, lead vests and/or the operator leaving the room. Such steps remained intact through the end of the 20th century.

Now things have changed. When Aribex developed a handheld X-ray system in 2005, the company created a device that was entirely safe from the get-go. Clinicians can now safely hold a lightweight cordless X-ray unit, called the NOMAD®, in their hands while taking X-rays.

“Numerous studies have been done to ensure that the NOMAD is indeed safe,” said Dr. Larry Emmott, DDS, who is considered one of the leading authorities on dental high-tech in the country. “In fact, one study actually showed NOMAD users received less exposure than those who used a traditional system.”

This is made possible through Aribex’s patented shielding on the X-ray source and collimator cone, as

shield that protects the operator from reflected radiation.

More than 30 independent and third-party evaluations and scientific studies from universities, physicists, test houses, government and military groups have concluded the Aribex NOMAD Handheld X-ray System is both safe and effective.

With the handheld X-ray system, the operator can not only hold the unit and stay in the room, he or she can also keep the NOMAD in place while taking X-rays and reassuring anxious patients, including children.

Here in New York

For more information on Aribex, including on the various studies done on the NOMAD, visit www.aribex.com or stop by booth No. 925.

The device can be operated anywhere, anyplace, at the point-of-care.

“In fact, as the ultimate benefit of mobility, you can use the NOMAD at a nursing home, mobile clinic or on a humanitarian mission,” Emmott said.

Because it is so easily transportable, the NOMAD allows dentists to practice in remote areas where conventional X-ray devices could never go. In addition, because of the built-in shielding and backscatter shield, numerous independent tests have proven its safety for operator and patient alike.

“The NOMAD has forever changed the way that dental radiography is performed,” said Dr. D. Clark Turner, president and chief executive officer of Aribex. “It has become a staple in dental offices everywhere.”

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Global handpiece manufacturer expands North American presence

NSK Dental invests in support, service and distribution to serve more practices

For years, NSK dental handpieces have had a strong base of devoted users in the U.S. and Canada, attracted to the reliable, user-friendly performance and reputation for quality. A word-of-mouth advertising strategy combined with highly targeted customer relationships has worked well for the organization. But the strategy also has meant that there are many dental professionals who still aren't sure about what makes NSK so different in the handpiece market.

That's about to change.

The dental equipment manufacturer, founded in 1930 in Japan, is raising its U.S. and Canadian profile in a big way, perhaps most tangibly to date by the May 2011 opening of its newly constructed North American headquarters in Illinois. The facility includes a showroom, training facility, expanded warehouse space and a larger parts and service center.

"The company made the decision last year to increase its investment in North America in 2011," said NSK Dental Marketing Manager Rob Gochoel. "We've also added office and technical-service staff – and an internal team of representatives who will be able to work directly with a greater number of dental practices."

The company also is expanding its distributor relationships. As a whole, the efforts should enable NSK to provide information about its unique business model to most of the dental practices in North America.

The company's efforts also include an expanded dental convention presence, beginning with the Greater New York Dental Meeting, so practitioners are more easily able to hold an NSK handpiece and experience firsthand what has enabled the company to become one of the top handpiece manufacturers in the world.

"We're making the investment in an opportunity to connect with more customers," Gochoel said. "Not only will we be able to handle customer questions and inquiries much faster, but we also will be able to further develop a sense of loyalty by developing even more personal-relationships with doctors."

Innovation based on input

Close relationships with its customers are critical to the company, because that is what has driven its global growth for more than eight decades. "Everybody is pretty excited,"



• **NSK quality is achieved primarily through uncompromising process control, which enabled it to acquire ISO9001 certification in 1997. Its factory has more than 100 state-of-the-art computerized numerical control machines running 24 hours per day. (Photos/Provided by NSK Dental)**



• **The S-Max Pico from NSK, with the world's smallest head and neck size, owes its existence to dentists asking NSK for a better device to use with patients with smaller mouths. Now, the handpiece is also netting praise from pediatric dentists.**



• **At NSK, innovative engineering starts where the product is being used: in the dental office. In response to demand for vibration-free, accurate, stable cutting, NSK answered with Integrated Shaft Bearings (ISB), in which the shaft itself forms an inner race for holding the outer race, ensuring all three needs are met efficiently, compactly and reliably.**

said NSK Dental President Mirco Stiehle. "We have very good feedback from the market so far. I am looking forward to working with dental professionals and learning more about what they want from us – because that's where we're coming from. We need to understand what we need to be doing to be successful in the U.S. And that means providing products that fit customer demands."

NSK is able to respond quickly and specifically to localized needs because it maintains complete in-house control of the manufacturing process.

An example of how such a philosophy translates into real products is the NSK S-Max Pico, which has the smallest head and neck size of any

handpiece on the market. NSK built it in response to requests from practices in Asian markets with higher numbers of patients with smaller-than-average mouths. Interestingly, a bonus realized by the company's willingness to address this need is that the S-Max Pico has gone on to also receive high interest from pediatric practitioners throughout the world.

"We know there are other needs out there that aren't being met," Gochoel said. "We want to provide options based on what customers are asking for. We love to solicit feedback through our office at (888) 675-1675 and through our microsite, www.nskdental.us."

Key to the company's ability to develop equipment in direct response to customer need is its commitment to controlling the entire manufacturing process. Nearly 90 percent of the 17,000-plus parts that go into the creation of its handpieces are manufactured in house.

Focus on quality starts at the top

In addition to supporting its market responsiveness, NSK's keep-it-in-house philosophy enables it to relentlessly control quality at every step of the development, testing and manufacturing process. "Quality is really the top priority for us," Stiehle said, "especially for Eiichi Nakanishi [NSK president and CEO]."

Nakanishi, confirmed that statement: "Since the founding of the company," he said, "we have adhered to very strict quality controls to make sure our products earn dentists' satisfaction. We have strong policies on manufacturing almost all components in-house. Currently about 90 percent of the mechanical components, including electric micromotors and high-speed ball bearings, are manufactured in-house. No other competitors can make ball bearings and micromotors in-house like we do now. This is one of our biggest

Here in New York

For more information on NSK dental handpieces, e-mail info@nskamerica-corp.com, visit www.nskamerica.com or stop by booth No. 233.

NSK Dental LLC
1800 Global Parkway
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strengths and competitive advantages."

Based in Japan, but frequently traveling the world, Nakanishi described his core role at NSK as being to ensure the global organization has a strong, motivated team in place with a clear understanding of what it takes to delight customers.

"We have the engineering excellence needed to enable dental professionals to make their dream products real," Nakanishi said. "We want to listen to the voices of dentists in order to develop very useful and wonderful products."

Stiehle said that responding to specific customer demand isn't limited to a product's purpose and function. "It's not just that we offer a product in every category of dentistry from a clinical point of view," Stiehle said. "It also means offering a range of price points."

Cost sensitivity also drives the company's focus on providing one of the largest selections of coupler adapters available – to make it easier for practitioners to test-drive and purchase an NSK handpiece.

"Our intent is to make it as easy as possible to integrate an NSK handpiece into the practice," Gochoel said. "By being compatible with virtually all competitor coupler systems, we eliminate the need to buy a lot of additional couplers or incur the expense of retrofitting all the operatories. It's just one more example of a smart, customer-centric focus."

Rounding out the commitment to quality assurance, pricing options and responsiveness, is awareness that the ultimate customer is the patient.

"I am a strong believer in the need to be aware that we are a medical device company, and that, with that, comes a huge responsibility not just in terms of quality, but also comfort and safety of the patient," Stiehle said. "When I am sitting in the dentist chair, I want to make sure that I am worked on with the best product out there. That's what is most important to us: the safety and comfort of the patient."

(Source: NSK Dental LLC)

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The Cubex System: Increasing profit through digital inventory management for today's dental practice

By Vicki Louk Balint

■ How do you order and manage dental supplies for your practice?

Maybe your office manager's desk serves as ground zero for an onslaught of post-it notes from staff when inventory levels dip. Or perhaps you take the spur-of-the-moment approach and order over the phone because a rep happened to call.

Have you ever been tempted to order items in bulk to receive a discount – only to end up throwing away expired items months down the road? Or maybe you've run out of an item during a procedure – with a patient in the chair?

Despite recent innovations in patient care, many dental offices still take a “fly by the seat of the pants” approach when it comes to managing thousands of dollars in inventory. It's inefficient. And costly.

But what if your supplies were stored in a controlled, easy-to-access cabinet in a central location – accessed, managed and re-ordered via a simple computer placed right on the face of the cabinet?

The Cubex System allows a dental practice to do just that. CEO Anton Visser and his team developed the Cubex system so that any dental practice could manage inventory as Fortune 500 companies do – on a “just-in-time” basis. With more than 20 years of high-tech sector management experience, Visser brings a passion for reducing costs and managing efficiency to his clients.

“What we do is bring that level of sophistication to the dental office,” Visser said. “And they get to track supplies with a touch of a button.”

It's a sleek, see-through cabinet with a computerized entry system on the front, placed at eye level. A bank of drawers and shelves within the cabinet hold everything from bonding agents and implants to latex gloves. The Cubex cabinet connects to the Cubex Smart Inventory Manager, a secured Cloud app where reporting on inventory levels and usage can be accessed.

Here's how it works. Employees access the Cubex through a fingerprint reader, then select the item they need on the ATM like touchscreen. Tiny lights along the facings of the shelving in the Cubex cabinet flash on-and-off to guide the user to the location of the item. Once located, the user presses a button on the face of the drawer or shelf.

The Cubex System software then subtracts that item from the inventory



• The Cubex System allows a dental practice to store supplies in a controlled, easy-to-access cabinet in a central location. (Photos/Provided by Cubex)



• Cubex Digital Inventory Solutions work much like an ATM machine that automates the access, control and dispensing of dental supplies.

system. The user logs out of the system – and the cabinet locks securely. As the supplies are depleted, the system sends orders automatically to suppliers for replenishment.

Getting started with the Cubex System begins with assessing the pre-existing supply data of a practice by a Cubex representative. The Cubex team brings years of point-of-use (POU) supply-management technology experience to every client

they serve, creating a Cubex System tailored to the needs of any dental practice.

“What's great about what we do is that we actually work with the staff members and see their operation process prior to Cubex,” said Jennifer Burgus, co-founder of Cubex. “We work with them throughout the implementation process. Then we see the results and their reaction to the savings Cubex generates.”

The Cubex System provides convenient access to intuitive reporting, helping practitioners to identify pain points and make corrections quickly. It maintains detailed tracking and in-depth data analyses for all inventory stocked.

Reports can also be sent via e-mail to the dental provider and/or the office manager, Burgus said. Practitioners can log in to the Cloud anytime, or anywhere, to see the data.

For the first time, with the Cubex System, a dentist can make business decisions based on the overall costs of supply management.

“They now can see what their consumption is on a monthly, quarterly, even a daily basis,” Burgus said. “They can even see where they can consolidate different types of products, too – now that they've actually got data.”

Mark Peck, DDS, recently began using the Cubex System at Dental

Here in New York

For more information on the system, visit Cubex at the Henry Schein Dental booth, No. 1217.

Studio 101, his Cave Creek, Ariz., practice. The implementation process itself, Peck said, was truly an “ah-ha” moment.

Peck realized inventory worth thousands of dollars was stored in various locations around the office. That was making the re-ordering process just plain inefficient – and needlessly costly.

Peck estimates his practice now stores around \$20,000 less in total supply inventory at any given time.

“We think in terms of overhead, rent, staff, the facility – but supplies? I think dentists have sort of a skewed vision of what that is.”

The Cubex System has changed his practice and his way of thinking.

Dr. Dean Brewer has also recognized significant efficiencies in his daily operations at his Modesto, Calif., practice with the installation of two Cubex cabinets.

Brewer DDS Dental Assistant and Supply Manager Jamie Van Laar concurred.

“On a day-to-day basis, I really just don't have the stress level that I had before in making sure we had everything we needed,” she said. “I have a lot more time to spend with our patients.”

Staff members trained on the Cubex System play a key role, Burgus said. This instills pride of ownership and a team-player attitude among employees. “They now see what a benefit they are providing to the practice, co-workers and patients.”

The return on investment of the Cubex System is fairly quick, Visser said, with most practices seeing payback within 12 months. Visser noted that with today's economic conditions, driving efficiency within an office has become even more important to the business of practicing dentistry.

And with the Cubex System, practitioners have the tools to do exactly that. The response is electric – and Visser is thrilled.

“Our clients are saying they don't have to think about inventory anymore. And that's exactly what we want to hear,” he said. “They've forgotten about the difficulties and stresses of supply management. Because the Cubex System takes care of it for them.”

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(Photo/Provided by Argen)

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When your scrap is received at Argen, technicians carefully document the contents of your package under strict security protocol and send you a confirmation e-mail of the package's arrival along with an estimated date of completion. What follows is an intricate procedure designed specifically to maximize the value of your precious scrap.

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While the metals are in a molten state, a vacuum pin tube sample is taken. This sampling method ensures a homogenous mix and a true representation of the amounts of each metal present in the scrap.

Three samples are then dissolved and analyzed by expert chemists using a sophisticated ICP machine, the most sophisticated measurement device available. Each batch is tested against controls, and the level of accuracy means it is clear how much precious metal is present in a lot of scrap and how much it is worth.

The customer service that accompanies the process also sets Argen's refining services apart from others. You are kept updated throughout the process and provided a straightforward, all-inclusive settlement record with no hidden charges.

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Go paperless with Dentrrix

Integrated eServices can help you make the transition

By Erin Brisk

■ Going paperless is one of the most talked-about topics in dental offices today. Many practices are trying to find ways to streamline workflow, reduce waste, increase efficiency and improve profitability by going paperless.

Each day there are specific tasks you and other staff members must perform in order for your practice to operate smoothly, and you can do several, if not all, of these tasks with less paper.

In some cases, you'll still need to use paper. For example, if you're working with an insurance carrier who does not accept electronic claims or attachments, you'll have to print and send paper claims through the mail. And some of your patients are still going to want paper receipts.

The most important thing to remember about going paperless is to digitize when and where you can.

For example, during patient check-in, you can eliminate the need to print paper forms and store them in paper patient files. Instead, you can create patient forms in the Dentrrix Questionnaires module, and patients can complete them electronically with Dentrrix Patient Kiosk in your office or online using Dentrrix Website Manager. You can also create electronic consent forms and have patients sign them electronically and store them in the Dentrrix.

Keep your schedule full by sending e-mail and text message appointment reminders to patients with Dentrrix Communication Manager. And, if your patients like to receive postcards, you can send automated postcard reminders. That way, patients still receive the postcards they want, but you don't have to maintain an expensive postcard library or keep files full of postcards that need to be sent to patients on certain dates.

Instead of taking several hours or a whole day to print, stuff, seal, address and mail billing statements to patients, you can send billing statements to a fulfillment center with Dentrrix QuickBill and have them take care of the printing and mailing for you.

You can store electronic copies of the billing statements in Dentrrix, so you won't have to keep copies of billing statements in paper files. And patients who leave with unsettled balances can use credit cards to make online payments on your eCentral website.

If your office processes insurance claims, you can send claims and claim attachments electronically with Den-

trix eClaims. You can also track the status of these electronic claims online and save time by not having to call insurance companies to track claim statuses.

When you receive EOBs from insurance companies, you can store electronic copies in the Dentrrix Document Center.

Going paperless is not something that can be done overnight — it's a process that will take time and preparation. The degree to which you are able to eliminate paper processes depends on your staff willingness,

patient willingness and the level of technology available in your office.

Before you begin the process of going paperless, make sure you have adequate equipment and appropriate office policies, and ensure that your team members receive the necessary training to work in a paperless office.

When you are ready to streamline workflow, reduce waste, and increase efficiency in your office by going paperless, visit the links in the box at the right to learn more about the process of going paperless and the tools you'll need.

Here in New York

To learn more about using Dentrrix and eServices to reduce paper in your office, go to www.dentrrix.com/practicepaperless to download a "Guide to Going Paperless," which introduces the concept of going paperless, gives suggestions of tasks you can perform in your office with less paper and outlines how to prepare and where to get help. You can also browse www.dentrrix.com/eservices to find out more about the eServices products mentioned in this article, including Patient Kiosk, Quick-Bill and eClaims, or stop by the Dentrrix booth, No. 1422.

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Clinical case report: 3 mm diameter mini implants for retention of a mandibular overdenture

By David Cummings, DDS,
and Christopher P. Travis, DDS

Mini implants were initially used as provisional or transitional implants during the osseointegration phase of standard-diameter root-form implants. As a result of their clinical success, mini implants were cleared by the FDA for long-term use in 1997. While mini implants can be as narrow as 1.8 mm, the 3 mm diameter mini implant is an option if the patient has adequate bone width.

The following case report details the preoperative work-up, as well as the surgical and prosthetic procedures used to provide increased retention of a patient's mandibular denture.¹⁻⁵

Preoperative planning

The 77-year-old female patient presented with well-fitting mandibular and maxillary dentures. She desired improved stability of her lower denture.

A clinical examination revealed a severely atrophic mandibular ridge (Fig. 1). The lingual flanges in the retromylohyoid region of the denture were extended to provide added support for the mandibular denture.

Implants were reviewed as a treatment option. A CBCT scan showed severe vertical and horizontal atrophy. Four small-diameter implants were planned in the symphysis to provide retention for the overdenture.

Surgical procedure

Before starting the surgical procedure, a surgical guide was fabricated for a 1.7 mm drill, which was selected in deference to radiographic evidence of the patient's bone density. Sleeves of appropriate diameter were added to complete the surgical guide.

Upon insertion of the first implant, it was determined that the osteotomies should be widened. The 2.4 mm drill was used to widen the 1.7 mm pilot holes. To act as a paralleling aid, the first implant was not completely seated.

Final seating of the implants was done by hand using a torque wrench. With implants in their final positions, the tops of the collars should remain slightly above the crest of the soft tissue (Fig. 2).

Prosthetic procedure

While adequate primary stability was obtained during the surgical procedure, the decision was made to relieve the patient's existing denture for a

Here in New York

For more information on mini implants, stop by the Glidewell booth, No. 2203.

soft relined. The heads of the implants were marked, and the intaglio surface of the patient's denture was relieved and soft relined (Fig. 3).

A new denture incorporating the O-ring housings will be fabricated for placement in three to four months.

Discussion

The success of any implant overdenture begins with a well-made, well-fitting denture.^{6,7} If the patient's existing denture does not fit these criteria, a new denture should be fabricated prior to implant placement.

The placement of mini implants must be precisely planned. The anatomical locations of the mandibular canal must be identified. This includes the mental foramina and the alveolar nerve, including the possibility of an anterior loop. This should be done utilizing proper radiography.

To maximize denture stability, implants should be placed with as wide an anterior-posterior spread as possible. The tops of the polished collars should be slightly above the crest of the soft tissue over the ridge to discourage gingival overgrowth.

Primary stability of the implants is critical because they will be immediately loaded. If good primary stability is not achieved, an implant of wider diameter may be an option, provided there is adequate bone.

With smaller diameter mini implants, such as 2.2 mm and 2.5 mm, it is recommended that a single drill be utilized to prepare the osteotomy to a depth of approximately one-half the length of the threaded portion of the implant, taking into account any additional depth such as soft tissue and surgical template thickness. The 3 mm diameter falls between the smaller diameters and conventional-sized implants.

Another option is to start with a smaller diameter drill to get a clinical feel for the bone quality and then adjust your protocol as needed.

The one-piece design of a mini implant provides additional strength and eliminates an abutment-implant interface. However, this design does limit prosthetic flexibility when compared to a two-piece implant that can be converted to a fixed restoration if additional implants are placed. Therefore, patients should be informed that



Fig. 1: Visual examination revealing atrophic mandibular ridge. (Photos/Provided by Glidewell Laboratories)



Fig. 2: Four mini implants placed in the symphysis.



Fig. 3: Soft relined of the patient's existing denture.

mini implants with an O-ball design are strictly for the retention of an overdenture.

If vertical space is limited, a cast framework may be required to provide sufficient strength to the prosthesis. While the O-ring housings can be rotated to correct for up to 30 degrees of divergence between implants when they are processed into the denture, all efforts should be made to place the implants and housings as parallel as possible. This will help to minimize stress on the implants and also extend the life of the O-rings within the housings.

Conclusion

In appropriate cases and with proper selection, planning and execution of surgical and prosthetic procedures, mini implants can provide an excellent solution to denture instability. Their smaller width, minimally invasive surgical protocol and record of clinical success make them a viable alternative in situations where conventional-diameter implants cannot be prescribed due to anatomical, medical or financial limitations.

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David Cummings, DDS, received his undergraduate degree in applied mathematics from University of California, San Diego. He completed his dental degree at USC School of Dentistry and his training in oral and maxillofacial surgery in 1996, followed by a fellowship in orthognathic surgery. Cummings has been an assistant clinical professor at USC School of Dentistry since 1998, specializing in the field of dental implants.

Christopher Travis, DDS, received his dental degree and certificate in prosthodontics from USC School of Dentistry, where he was an assistant clinical professor in predoctoral and graduate prosthodontics. For the past 30 years, he has maintained a full-time private practice specializing in prosthodontics in Laguna Hills, Calif. Travis is director of the Charles Stuart Study Group in Laguna Hills, prosthodontic coordinator for the Newport Harbor Academy of Dentistry and active member of the Pacific Coast Society for Prosthodontics, American College of Prosthodontists and AO, as well as a fellow of the American College of Dentists.

Change your life at LVI

By Mark Duncan, DDS, FAGD, DICOI, LVIF

■ Welcome to the GNYDM and congratulations on actively moving your professional success forward.

It is only through excellent education that we can individually grow and develop as dental health professionals and, through that, build a practice that is not just successful but delivers comprehensive and high-quality care.

As a patient, I expect the best care I can find. As a dentist, I want to deliver the best care possible.

That takes us to the power of continuing education and, as dentists, we are faced with a variety of 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 of dentists, 99.7 percent love being a dentist and of those

Here in New York

To start your LVI journey or learn more, attend Dr. Mark Duncan's complimentary seminar titled "Comprehensive Care – It Isn't About The Teeth! In Our Quest To Be Better Dentists, Are Our Patients Paying The Price?" from 2 to 5 p.m. Monday, Nov. 28, located in room 1E06 at the GNYDM.



• Dr. Mark Duncan teaches a Core I class at LVI. (Photo/Provided by LVI)

surveyed, 92 percent enjoy his or her profession more since beginning training at LVI!

While the programs at LVI cover

the full breadth of dentistry, the most powerful and life-changing program is generally reported as being Core I, or Advanced Functional Dentistry – The Power of Physiologic Based Occlusion.

This program is a three-day course that is designed for clinicians and their teams to learn together about the power of getting the patient's physiology on their side.

In this program, clinicians can learn how to start the process of taking control of their practice and start to enjoy the full benefits of owning a dental practice and providing high-quality dentistry. Regardless of if it is a solo practice or a group setting, every clinician can start the process of creating comprehensive care experiences for their patients.

In Core I, we will discuss why some cases that dentists are asked by their patients to do are actually dangerous cases to restore cosmetically! We will discover the developmental science behind how unattractive smiles develop 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!

A successful restorative practice should not 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 balance by the patient's 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 our patients bring to us when we change their lives. The Core I program at LVI is the first step on that journey. That's why when you call, we answer the phone saying, "LVI, where lives are changing daily!"

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ChaseHealthAdvance brings health-care financing to Facebook

■ The landscape of health care and health-care financing is changing; consumers are taking more control of their health-care decisions. A February 2011 poll by Pew Research Center's Internet and American Life Project reported that 80 percent of Internet users search for health-related information. Consumers are using the web to look up symptoms, find and research providers and even explore options to make elective procedures affordable.

ChaseHealthAdvance, a leader in healthcare financing, has embraced the growing influence that technology, the Internet and social media have had on the field. As part of its commitment to helping providers increase case acceptance and improve cash flow, ChaseHealthAdvance has led the market in technological innovation and advocacy.

Since its founding in 2005, ChaseHealthAdvance has worked to be the most digitally advanced company in the marketplace. Building a strong online presence for its products and services, ChaseHealthAdvance has, more recently, integrated technological innovations into its marketing and presentation platforms, all with the goal of making it easier for providers to offer ChaseHealthAdvance financing options to patients.

Through *ChaseHealthAdvance.com*, practices can manage their entire patient-financing portfolio. Clinicians and office staff can quickly and easily submit new patient applications and transactions, track current open approvals and even produce custom reports. Not only does

Here in New York

Visit booth No. 4623 to learn about all the innovations ChaseHealthAdvance has implemented to help providers, see a demonstration of the new ChaseHealthAdvance website and get a walkthrough of the Chase HealthAdvance Facebook Tab.



(Photo/Provided by ChaseHealthAdvance)

this help practices better manage the use of patient financing in their office, but it also reduces the amount of paperwork in the office.

Numerous online marketing tools have been developed by ChaseHealthAdvance to help providers communicate the affordability of financing to their patients. Web banners help providers share financing information on their site.

An online payment calculator helps patients explore the best "no surprise" financing option for their budget and clearly see their entire payment plan. ChaseHealthAdvance also has co-branded letter templates that providers can use to share financing options with patients and help patients feel more comfortable about their choices.

ChaseHealthAdvance's online application and account management features make it easier for providers to offer their "no surprise" financing. Patients can apply on their own, from the comfort of their home or office computer or they can quickly and easily apply right from their provider's office.

ChaseHealthAdvance was the first health-care financing company to recognize the benefits of using mobile devices in the practice. The ChaseHealthAdvance "Present and Apply" tool for the iPad allows practitioners to walk patients through the case presentation process in a simple, easy-to-understand visual format. It communicates affordability and helps remove the cost barrier for the patient. The tool allows the patient to apply for financing right from the iPad, so the provider can schedule the procedure before the patient leaves the office.

Another innovation ChaseHealthAdvance has developed recently is its new Facebook Tab, which lets providers share ChaseHealthAdvance financing options with patients through Facebook. Patients can learn about financing options, and estimate monthly payments for procedures and treatments right from the practice's Facebook page.

The ChaseHealthAdvance Facebook Tab is fully customized to every practice. The page only displays the procedures and treatments offered at the practice. Providers also elect which financing options will be seen by patients on the page.

Adding the ChaseHealthAdvance Facebook Tab to a provider's Face-

book page takes only minutes. Providers are walked through a simple, five-step process that customizes the tab for their practice and uploads the application to their practice's Facebook page.

Providers first enter their practice's provider ID and select their health-care specialty, then identify the procedures they perform, and enter the cost range for each if they choose to do so. Next the provider selects the ChaseHealthAdvance financing options offered by the practice. The last two steps allow the ChaseHealthAdvance Facebook Tab to access the provider's Facebook page, and add the tab to the page.

Once installation is complete, the tab is live on the provider's Facebook page. Patients can immediately get better acquainted with ChaseHealthAdvance and its experience in healthcare financing. They are also able to see the "no surprise" financing options offered by the practice.

Patients can use the built-in Payment Calculator to estimate monthly payments based on the procedures and pricing set by the provider during the installation process. The addition of the Facebook Tab is the latest step in ChaseHealthAdvance's dedication to use technology, the Webxw and social media to help providers increase case acceptance and improve their practice's cash flow.

You can see the ChaseHealthAdvance Facebook Tab for yourself, and once enrolled as a provider, install it on your practice's Facebook page at *ChaseHealthAdvance.com/FacebookTab*.

OCO Biomedical presents live implant surgery

■ At the 2010 Greater New York Dental Meeting (GNYDM), OCO Biomedical stunned more than 200 dentists by placing eight, immediately loaded mandibular implants in only 60 minutes. OCO Biomedical will again exhibit the capabilities of its Dual Stabilization® implant system here at the 2011 GNYDM.

Live on stage, Dr. Ara Nazarian will be placing eight, TSI Two Stage implants in the maxilla, clearly demonstrating the Osseous Fixation™ capabilities of the OCO Biomedical implant system. These eight implants will then be placed into immediate function showing the obvious stability of this innovative system.

OCO Biomedical's TSI implant was specially designed for immediate loading, delayed loading in both one-stage and two-stage surgical options. TSI implants can be placed in the anterior or posterior mandible/maxilla for aesthetic cases, immediate placements, single or multiple tooth replacements or for denture stabilization using



(Photo/Provided by OCO Biomedical)

lization implants fixate into the bone, creating a strong biomechanical lock allowing for selective loading options. The TSI also has many restoration options and can be paired with multiple abutments for several different restoration options.

Nazarian, a key opinion leader for OCO Biomedical, will present this live surgery. He is a graduate of the University of Detroit-Mercy School of Dentistry and maintains a private practice in Troy,

Mich., with an emphasis on comprehensive and restorative care. His articles have been published in many of today's dental publications.

The TSI implant provides high initial stability by employing the Dual Stabilization® system. Combining the patent-pending Bull Nose Auger™ tip, Mini Cortic-O Thread™ and Embedded Tapered Platform™, Dual Stabi-

lization implants fixate into the bone, creating a strong biomechanical lock allowing for selective loading options. The TSI also has many restoration options and can be paired with multiple abutments for several different restoration options.

This live surgery and presentation will be 2:30 to 5 p.m. today at Aisle 6000, Room 4.

Sponsors of this presentation include Carstream Dental Imaging and Aseptico Surgical Technology.

Also here at the GNYDM, OCO Biomedical has introduced its new Engage™ Bone Level Implant. Featuring a universal hex connection, self-tapping body design and platform shifting capabilities, the Engage implant will use a simple surgical protocol and will offer unchallenged implant stability at placement.

For more information, visit *www.ocobiomedical.com*. You can also visit OCO Biomedical's National Sales Manager, Christopher Sanchez, at booth No. 1819 for hands-on implant demonstrations and to learn more about the Engage implant system.

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Is Invisalign the right fit for you?

■ One way to weather the current economy is to expand the list of services that you offer in your practice. However, it is important to make sure that every service you offer – both new and existing – is a good fit for you, your practice and your patients.

It is also important to consider what it will take to successfully integrate any new service into your practice. Many practitioners today are wondering if offering orthodontics is the right choice for their practice at this time.

Orthodontics and clear aligner therapies have been available to the general practitioner for many years, and patients actively search for doctors that offer these services. More than 1.5 million patients have been treated with Invisalign, the most popular clear aligner treatment option, and more than 600,000 potential patients actively search for an Invisalign provider each year.

The first step is to determine if clear aligner therapy is the right fit for your practice. Ask yourself the following questions:

Could your patient base benefit from straighter teeth? Do you see periodontal issues that could improve by correcting malocclusion? Do you regularly see ortho relapse cases in your adult patients? Do you have patients who are preparing for an important event, like their wedding, who want a more beautiful smile? If so, it may be the right time to consider offering this service to your patients.

Do you offer other services that could compliment or benefit from orthodontic treatment, like cosmetic, restorative, implants and TMJ management? Consider the benefit of having teeth in proper alignment and how this would impact your overall patient treatment plan.

Is your team on the lookout for patients who could benefit from the



• Meeting attendees sit down to get more information at the Invisalign booth (No. 4625). (Photo/Fred Michmershuizen, Dental Tribune)

services you offer? Do they discuss these treatments with your patients at regular appointments? Having an engaged team can lead to practice growth and is one of the most successful attributes of successful Invisalign practices.

Once you decide that clear aligner therapy is right for your practice, the second step is to register and attend a new provider training course. Invisalign offers Clear Essentials I, a one-day course designed to give you and your team the clinical and operational training necessary to begin treating a broad range of patients with Invisalign.

As with all clinical education, you will get out of it what you put into it. The following are some ways you can help ensure your success:

• Bring your team with you for training. This is an investment of time

and money, and by having your team with you, it will ensure everyone is on the same page when you get back to the office on Monday morning. Plus, there are breakouts just for the team.

• If available, take any pre-course training before you attend the course. To help get the most out of your in-person lecture, get familiar with the product, methodology and best practices by attending the pre-course. Invisalign recommends that doctors and key team members attend the pre-course as this will make in-person training much more valuable.

• Identify two or three potential cases for your first treatments. Not sure who to put into treatment first? Consider yourself, your staff and your friends and family. Not only will it help you get familiar with using clear aligner therapies, but it is a clever way to show your patients a real example

Here in New York

To learn more about Invisalign and how to become an Invisalign provider, go to www.invisalign.com/provider, or stop by the Invisalign booth, No. 4625.

of an Invisalign patient in treatment.

The third step to successfully integrating any new service into your practice may be the most important. Make sure that you build familiarity with the product, continue ongoing clinical education and make it easier for patients to say “yes” to treatment.

• Start a patient in treatment as soon as possible. Hopefully you have identified them before you attended your training. Not only will this help you put into practice everything that you have learned in a timely way, but it will help make any new service a part of your regular office routine.

• Consider offering patient financing. You want to be in the business of providing excellent care, not chasing payments from patients. Most patients appreciate the option of spreading payments over a period of time, especially for treatments that take several months to complete. Ninety-three percent of Invisalign patients felt their treatment was worth the investment.*

• Take additional training. There are hundreds of educational opportunities available for Invisalign providers, and many of them are tailored to the needs of the new provider. Once you have the basics of Invisalign treatment under your belt, take advantage of these online and in-person courses to get the most out of your Invisalign investment.

*2009 Invisalign Patient Survey Data.

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For more information, visit www.palodentplus.com, call (800) 532-2855 or stop by the DENTSPLY Caulk booth Nos. 2603, 2803, 3103, here in New York.

• (Photo/Provided by DENTSPLY Caulk)



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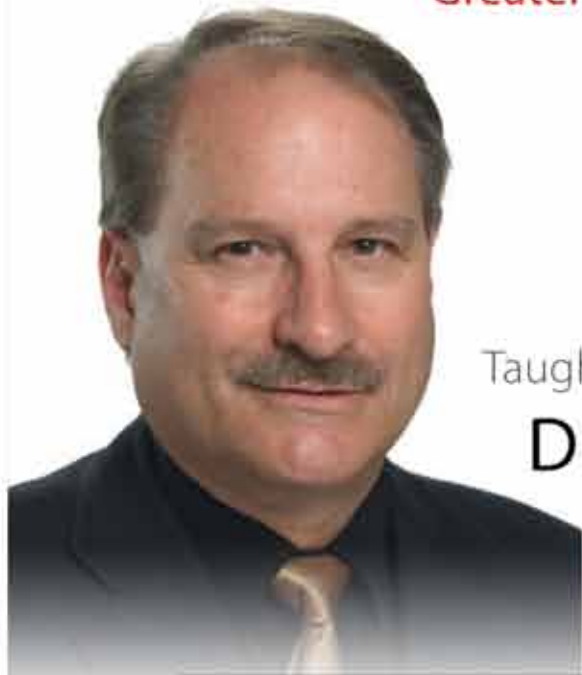
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cost of traditional implants. The Atlas Denture Comfort Implant System is designed for long-term use to effectively retain and stabilize dentures. The system uses no O-rings, no housings and no adhesives. Instead, the unique Tuf-Link silicone reline provides retention to the implants, secured within the denture by an undercut, providing a cushioned fit for stress-free denture insertion, retention and removal. In addition, Anew Narrow-Body Implants are available for patients who have limited interdental spaces or insufficient bone level requiring otherwise lengthy bone augmentation procedures.

- *The Pro-Medic professional toothbrush*, available from United Laboratories & Manufacturing (booth No. 4419), is being billed as the world's first and only toothbrush with VIS-IR ultrasonic technology. According to the manufacturer, the toothbrush offers deeper tooth whitening without chemicals. It also provides gum massage while eliminating gum bleeding and gingivitis, thus regenerating and maintaining nerves in teeth and oral tissue.
- *Heraeus (booth No. 1617) is introducing Gluma Desensitizer PowerGel*, a unique, no-drip gel designed to provide the desensitizing benefits of traditional Gluma with greater control and accuracy, and green color indication for easy visual placement and rinse-clean capability. It is for use by dentists, assistants and hygienists on gingival recession and under all direct and indirect restorations.
- *The new PerioPatch*, available from the PeriZone division of MIS Implants Technologies, is a unique patch that absorbs wound exudates and forms a protective seal over inflamed and irritated oral tissues. Applied directly over the affected area, PerioPatch adheres on contact and provides relief from symptoms associated with inflammation and wounds. Stop by booth No. 2107 to learn more.



• Margie Miranda, left, and Ray Hampton of Bisco Dental Products (booth No. 1601). (Photos/Fred Michmershuizen, Dental Tribune)



• The experts at Dentatus (booth No. 2401) can provide information about narrow-body implants. Denise Manekas, from left, Dr. Mikel Oleaga and Nita Weissman.



• At 9:29 a.m. Sunday, attendees were rarin' to go at the exhibit hall entrance, but security held them at bay until the official opening.



• The exhibit hall on Sunday morning was bustling with activity.

- *Ortho Organizers (booth No. 2303) is introducing Maestro Brackets*, a premium line of low-profile twin brackets and buccal tubes. They provide practitioners with a complete appliance system, resulting in controlled treatment, reduced chair time and increased satisfaction for both clinician and patient.
- *New Revo-S obturation tools*, available from *Micro-Mega* (booth No. 127), are designed for reliable and practical filling of the root canal. Revo-S can be used for both lateral condensation and thermomechanical condensation obturation techniques.

Of course, these are just some of the many offerings available this week here in New York. The exhibit hall is open today and Tuesday until 5:30 p.m. and Wednesday until 5 p.m., so be sure to leave extra time in your schedule to check out all the new products available.

Children's program is fun for all ages

By Robin Goodman, Dental Tribune

■ There was something to put a smile on even the youngest faces during the children's program in the Special Events Hall. The hall provided a safe haven for families to spread out, either in the designed seating areas or just right in the middle of it all, which some of the youngest attendees opted for.

Activities included detailed face painting by two separate artists, as well as a spin painting wheel station

where kids were able to choose their own colors.

In another area of the expansive space was a hair beading station, the line of which was populated by young girls, as well as a stage with a music group encouraging the kids to sing along.

The crowning glory of the children's program, however, were the two bounce houses as well as bouncy adventure trail that was rather like an obstacle course in design. All of these were surefire ways to help kids burn off some of their extra energy.



• This family spent some time at the children's program, held in the Special Events Hall, where all four daughters had their faces artfully painted. (Photos/Robin Goodman, Dental Tribune)



• Who would have thought a child could sit as still as this girl did during the time it took to paint her face?

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