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JAMUAKY 2008

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Editor's Notebook



David G. Hochberg, DDS Editor, AAID News

We asked. You answered. We listened.

A year ago, the AAID annual membership survey focused on AAID communications including AAID News. We asked members what types of articles they wanted to read. You told us vou wanted more substantive material along with information about AAID activities including in depth information about the annual meeting. Among the types of articles mentioned were clinical, research, industry news, marketing and management tips, and legal insights.

see Editor's Notebook p. 10

Study of AGEs and implants funded

The AAID Research Foundation announced today that it will provide funding for a study to determine the effect of Advanced Glycation End Products (AGEs) on osseointegration of loaded titanium dental implants. "AGEs have been shown to increase as a part of the normal aging process and with the development of diabetes. Both the elderly and diabetic populations represent a significant proportion of the patient population requiring dental implant restorations thus making this study valuable," wrote James L. Borke, PhD of the Medical College of Georgia, in the application for the grant.

According to Dr. Borke, this study represents the first to investigate the relationship between AGEs and dental implants. The team will test the hypothesis that AGEs administered to normal rats will have:

- negative effect on osseointegration of dental implants
- negative effect on ostoblasts and ostoclasts at the implant site

This is one of six different research projects the AAID Research Foundation will provide funding for during this calendar year. The other five are:

"Hydroxyapatite Coating on Titanium Implant as a Carrier for Enamel Matrix Derivative (EMD)" — *Dr. Ramin Rohanizadeh; University of Sydney (Australia)*

"Stability of Macro-Implant Design in Variations of Implant Placement Depth" — *Linus Chong; Kornberg Yemple University, School of Dentistry*

see Age Study p. 15

Bennett named AAID Executive Director

Sharon Bennett became the American Academy of Implant Dentistry's executive director effective Jan. 1, 2008. She succeeds J. Vincent Shuck, who retired after more than 15 years at the AAID helm.

Bennett comes to AAID with more than 25 years of experience and a strong background in serving dental and medical associations. professional societies and foundations. As an independent consultant and executive with leading national association management firms, she has worked with the American Academy of Esthetic Dentistry, Academy of General Dentistry, American Society of Clinical Oncology and the

see Bennett p. 17





President's report

By Dr. Lozada, DDS

Colleagues, during our business meeting in Las Vegas November, 2007 I had the opportunity to express my vision and goals for this Academy as the incoming President.

As you probably know, this past October the Board of Directors interviewed candidates to replace our retiring Executive Director. After an extensive and detailed search process the Board has unanimously approved a new Executive Director for this Academy. I would like to personally thank Dr. Kim Gowey for taking a leadership position in this process. His diligence and dedication to the interviews was extremely valuable during the selection.

I am happy to introduce Ms. Sharon Bennett as the new Executive Director of the Academy. Ms. Bennett comes to us with a Master's degree in English Literature from Northern Illinois University and over 25 years of association management experience. She started her association management career at P.M.

Haeger and Associates as an administrative manager and advanced to Senior Account Executive with responsibility for 10 association clients, one of her clients being the American Academy of Esthetic Dentistry. While at Haeger she served as Executive Director for two organizations and implemented 30 annual conferences and trade shows.

of integrity who is loval. forthright, hard-working and well regarded in the association community. She is said to have strong interpersonal and communication skills. We look forward to working with her.

During the candidate interviews our committee became aware that even though our organization is in great shape, it is neces-

we will have the opportunity to offer simultaneous online participation to the meeting, observe live surgical demonstrations and utilize the application of a wireless response system via hand held terminals that will allow the audience to turn from passive to active participants and to receive immediate feedback on issues and topics that will be presented at the meeting.

Other dental implant organizations are moving forward with their own plans to offer credentials to their members following an examination process perhaps similar to ours. This raises interesting issues with our credentialing process and its overall significance. In the next few weeks you will be receiving requests to participate on a survey to address that specific issue of tremendous importance.

I will also be involved in the future direction of our Journal of Oral Implantology and will continue the discussions in regards to the relationships and alliances with other organizations including global outreach.

I am looking forward to continue to work with the district and executive officers of the Academy during the upcoming year.

"We will expand our educational outreach by enhancing online education opportunities."

Ms. Bennett has provided various client management services for different societies including the Academy of General Dentistry, American Society of Clinical Oncology. American Society of Plastic Surgeons and the Society of Women Engineers where she revamped their membership recruitment and retention program using a telemarketing strategy that resulted in doubling their renewals. She has had the responsibility for the general management of associations with budgets of up to \$10 million.

Sharon has been described by former colleagues as being a woman sary to revisit several issues that were discussed during our 2004 strategic plan meeting. Many of the benchmarks that were established have been met. but others have not. As vour President. I will be working diligently with our Board to revise and set the necessary goals to accomplish our new strategic plan.

We will expand our educational outreach by enhancing online education opportunities. This is something that started as one of my personal goals and has now become a common goal of all of us here in the leadership position.

During the next annual meeting, San Diego 2008,

Clinical Bite

The Effect of Connective Tissue Graft in Conjunction with Immediate Tooth Replacement on the Facial Gingival Esthetics: Preliminary Report of Prospective Data

Seung-hwan Chung, DDS, Joseph Y. K. Kan, DDS, MS, Kitichai Rungcharassaeng, DDS, MS, Jaime Lozada DDS

Editor's Note: The new editorial content approach of the AAID News is to enhance the substantive offerings including clinical cases and reports on research dealing with commonly encountered clinical issues. The following is the summary one of the poster presentations at the 2007 AAID Annual Meeting.

Gingival recession is a common occurrence following immediate implant placement and provisionalization, especially in thin biotype situation. While reparative procedures have been vigorously attempted, satisfactory results are

lactic approach to improve soft tissue quality and quantity has been advocated. This study evaluated the effect of subepithelial connective tissue graft in conjunction with immediate tooth replacement on the facial gingival esthetics.

scarce. Therefore, a prophy-



Pre-op



Implant placement

AAID NEWS

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Please notify AAID and your postmaster of address changes noting old and new addresses and effective date. Allow 6-8 weeks for an address change.

Events offered in this newsletter are by credentialed members. Except for the MaxiCourses® (cosponsored by the Academy) the listing of an event does not imply endorsement by the AAID. The editors reserve the right of refusal and to edit.

Materials and methods

Patients and treatment protocol: Ten systemically healthy patients (5 males and 5 females), aged between 22 to 71 (mean age 53.5 ± 18.6) years old, participated in the study. The patients were selected according to following inclusion criteria. 1) Single failing tooth between 2nd premolars with the presence of adjacent dentition. 2) Adequate bone volume to accommodate an implant with minimum dimensions of 3.5mm diameter and 13mm length.

Following atraumatic extraction of the failing tooth, immediate implant placement and provisionalization (Prevail^M, 3i, FL) in conjunction with subepithe-



0 month

3 months

lial connective tissue graft harvested from the patient's palate was performed. The final restoration was either screw-retained (tightened to 20 Ncm torque) or cement-retained (RelyX™ Luting, 3M ESPE Dental Products, St.Paul, MN).

Data Collection:
Marginal bone levels at
mesial and distal aspects of
implant were evaluated
using standardized periapical x-rays. Facial

gingival level of the implant was also evaluated. Data were collected at time of the surgery (0-month), 3-, 6- and 12-month after the surgery.

Results

Two implants lost osseointegration within 3 months of placement. During the follow up period (mean = 9 months; range = 6-12 months), an overall cumulative success rate was 80%

see Clinical Bite p. 10



www.aaid.com JANUARY 2008





Introduction

Implant dentistry can be extremely challenging for both specialty and general practices. For practices to reach their implant potential, they need to approach implants as a "practice within a practice." Whether providing both surgical and restorative or just one phase of the implant treatment, the dentist needs to realize that they are really operating two distinctive businesses under one roof. One is a business with need-based procedures and dental insurance (whether you participate or not). The other is a business that deals with feefor-service elective procedures. This "practice within a practice" philosophy is the foundation of Levin Group's Implant Management and Marketing Program.

The need-based business offers basic services such as extractions, surgeries, and crowns and bridges. This business deals with dental insurance, including its associated fees and co-payments. The second business offers elective services such as dental implants and other esthetic procedures. Both businesses co-exist in the same facility, but the

Business Bite Practice within a Practice

By Roger P. Levin, DDS

Editor's Note: As a part of our effort to provide greater value to AAID members through the AAID News, we are offering a "Business Bite" column in each issue. We hope that you find the following article by Dr. Roger P. Levin valuable. Dr. Levin is founder and chief executive officer of Levin Group, Inc., a leading dental practice management consulting firm that provides a comprehensive suite of lifetime services to its clients and partners. Levin Group can be reached at 888.973.0000 and customerservice@levingroup.com.

implant segment of the practice requires different protocols and systems for the following reasons:

Communication.

Implant treatment involves a high level of collaboration between the restorative and surgical phases of the practice. Think of all the different stages of the implant process - referral, consultation, case presentation, scheduling, surgery, post-surgical care, restorative treatment and follow-up. Many practices are not set up to handle the communication — be it even as a sole practitioner, among the professionals involved within the practice or outside referrals — or with the patient necessitated by dental implant services. This high level of communication is one of the reasons Levin Group recommends that practices that provide the surgical phase hire an Implant Treatment Coordinator (ITC). This individual acts as a point person, guiding patients through the implant process and coordinating communication with restorative practices. In addi-



tion, the ITC works with the implant sales representative to ensure that the practices have the proper supplies, including component parts.

Patient Decision-Making.

The implant patient often has different motivations than most other dental patients. Until the emergence of cosmetic and implant dentistry, most services were based on need. Dental patients generally accept basic treatment on broken or decayed teeth. The same is not true for dental implants. They are a completely elective service that no one has to buy. In addition, patients have other less expensive options including

dentures, partials and crown and bridge. As an elective service, implants are much more of an emotional decision compared to other need-based services. With implants, you are in a sense selling a Porsche to someone more accustomed to purchasing a Ford. While most people need a car, no one has to drive a Porsche. The same goes for implants. Most dental patients who lose teeth will seek treatment, yet the majority will opt for more traditional services . . . unless practices have the right implant systems in place. But aren't implants considered the standard of care for edentulism? It is true that many practitioners view implants as

the standard of care, but most patients still perceive implants as a luxury item.

Case Presentation Issues.

Many clinicians have a high close rate for dental implants. However, when you only present to patients already pre-disposed to implants, then you should have a high acceptance rate. The problem with pre-selecting patients based on initial interest is that you are severely limiting the potential pool of implant patients. Levin Group recommends that every partially or fully edentulous patient be educated on the benefits of implants. In fact, all patients, even if not missing any teeth. should be made aware of implants as an option. As people age, many will eventually experience some form of edentulism. Increasing awareness now will enhance patient receptiveness to implants in the future. In addition, practices cannot rely on need-based case presentation techniques for implants. Most patients do not immediately think of implants as the treatment of choice for missing teeth until practices build value for this treatment option. Implants are much more an emotional choice for patients, and the case presentation needs to be tailored accordingly.

What You Can Do

If you are committed to growing the implant segment of your practice, Levin Group recommends the following strategies:

1. The Team Approach

Although some dentists will provide both the surgical and restorative phases of treatment, in other cases the patient will see two different clinicians. The degree of communication between the surgical and restorative practices will often determine whether

sion in the patient and potentially undermine the treatment. Teamwork between the two practices increases the overall quality of patient care.

2. Implant Exam

A way to increase your focus on implant dentistry is to designate part of every new Patients should be given written information detailing the new patient visit. Simply by placing the implant evaluation on the new patient examination agenda, you have introduced a new standard of care in dentistry.

3. Patient Education

Most patients are not fully aware of the numerous benefits of implants. The dentist and the dental team should educate patients. As with any other patient communication, conversations about implants should be scripted to deliver concise, clear and consistent messages. Use supporting educational materials, such as brochures, to reinforce what has been discussed about implants. Patient testimonials as well as "before and after" photos are very powerful, particularly with unfamiliar procedures such as implants.

"A way to increase your focus on implant dentistry is to designate part of every new patient and hygiene exam as an implant evaluation."

the patient says "yes" to implant treatment.

The restorative doctor and the implant surgeon should review treatment plans for various types of edentulous patients. To provide optimal care, doctors should stay informed of all new developments in implant dentistry by reading the latest clinical studies and attending appropriate continuing education classes and seminars.

If the implant patient is referred to a dentist for the surgical placement of the implant, the restorative practice should inform the surgical practice of any concerns the patient has about the recommended treatment. As the case progresses, the two practices should be in constant contact with one another, so the patient receives consistent information. Miscommunication at any stage can cause confu-

patient and hygiene exam as an implant evaluation. The time has come for dentists to stop making implants a byproduct of the standard full-mouth comprehensive esthetic exam and present it as unique, special, and worthy of attention. By taking this approach, dentists can educate patients that implant dentistry is now a standard of care, an option to truly consider.

For patients with missing teeth, the implant evaluation should take place during each new patient exam, which includes:

- Review of medical and dental history
- Head and neck exam
- Periodontal and intraoral tissue exam
- Individual tooth examination
- Cosmetic exam
- Occlusion or bite examination
- Implant evaluation

Conclusion

Implants are poised to be a growth center for many practices. Taking a practicewithin-a-practice approach is the best strategy for increasing implant production. To move patients successfully through the various stages of the implant process requires a great deal of focus, coordination and collaboration. Most practices aren't built that way. The practicewithin-a practice concept provides the right framework for achieving ultimate implant success.





Legal Bite "Take Me Back"

By Frank R. Recker, DDS, JD

Editor's Note: Each issue of the AAID News will include a "Legal Bite" article written by Frank Recker, DDS, JD who is legal counsel for the Academy. Dr. Recker will share his suggestions for dealing with every day experiences that might lead to legal issues for dentists. Dr. Recker can be reached at: 800.224.3529 or by e-mail at recker@ddslaw.com.

Dentists sometimes encounter a patient that wreaks havoc in their dental practices. No one enjoys encountering a chronically irascible patient. No one wants to engage in conversation with

"... dentists occasionally find it necessary to terminate such patients from their practices."

the patient if it is always unpleasant. The patient's very presence casts a



Crown Seating Pressure's Off

Adjustments Made Easy!

TRADENAME: ContacEZ Diamond Dental Strip WHAT IT DOES: Proximal contact adjustment device makes crown seating supported by implants simple. **HOW IT WORKS:** Used prior to final cementation of indirect restorations for optimal adjustment of proximal contacts. WHAT MAKES IT DIFFERENT: The single-handed design means that there is no need to hold small restorations on fingers to adjust with rotary instruments - alleviating the monotony of taking restorations in and out of patient's mouth. FIND OUT MORE: www.contacEZ.com • (360) 694-1000 "(ContacEZ Diamond Dental Strip) is a significant aid in establishing ideal interproximal relief for crowns, particularly useful in seating crowns supported by implants."

Dr. Charles R. DuFort, Prosthodontist, Vancouver, WA.

shadow over the office and everyone in it. These negative encounters could emanate from chronic patient failures to obtain recommended specialty referrals, repeated broken or cancelled appointments, the patient's poor attitude about their own dental health, or the patient only seeking 'patch' dentistry instead of following recommended treatment plans.

Even worse, the patient might just be angry at the world, impossible to get along with and completely mean spirited. But for whatever reason, dentists occasionally find it necessary to terminate such patients from their practices. And if they don't, they would be well advised to do so from a risk management perspective.

But when such a problem patient receives a 'termination' letter from their dental practitioner, it is often viewed as a personal challenge to regain

their temporary loss of situational control. Worse, the patient may want to come back for more sinister purposes, such as revenge for what they perceive as their personal rejection/humiliation. Often such patients call the dentist personally, feign apologies or purport to have a 'new attitude.' and beg to be reinstated as a patient, promising great change in the future.

Indeed, dentists often succumb to the pleas of such 'former' patients and recant the notice of termination. Unfortunately, during my many years of defending dentists throughout the country. I have seen few occasions where a decision to allow the return of a terminated patient has a happy ending.

More often than not, when the patient returns to the practice he/she is filled with a desire to seek revenge for their rejection and the future relationship often ends up in the legal arena. Although such patients can be very convincing, people rarely

see Legal Bite p. 17

Industry News

Editor's Note: In order to bring AAID members the latest information about the trends in the profession, AAID News now provides an expanded Industry News Section.



Zimmer Dental
Inc., introduces
the 4.1mm diameter Tapered
Screw-Vent®
Implant. This new
offering provides a
solution in clinical

cases where sufficient bone exists to accommodate an implant wider than 3.7mm, but narrower than 4.7mm. The 4.1mm Tapered Screw-Vent Implant brings increased flexibility and added choice for implant placement, allows clinicians to use the maximum bone available for optimal results, and conveniently utilizes the same prosthetics as the 3.7mm design — thus eliminating the need for additional inventory. The 4.1mm Tapered Screw-Vent Implant incorporates all of the features and benefits of Zimmer Dental's renowned Tapered Screw-Vent Implant System: proprietary frictionfit internal hex connection. triple-lead threads, both MTX™ and MP-1® HA surfaces, and a tapered implant body. The versatile Tapered Screw-Vent Implant is now available in 3.7mm, 4.1mm, 4.7mm, and 6.0mm sizes. Contact your Zimmer Dental Sales Consultant or Customer Service at (800) 854-7019, for outside the

U.S., (760) 929-4300, or visit www.zimmerdental.com for more information.



Tel-A-Patient, Inc.,

announces the launch of its newest Message On-Hold product, the Continuing Client Care Program, which makes it absolutely easy for new and existing clients to use hold time to supercharge their internal marketing efforts, boost treatment acceptance and increase patient referrals. Inspired by and designed specifically for busy practices, the new Continuing Client Care Program offers customized on-hold messages, on-going production updates, seasonal scripting options, and message rotation reminders. These and other timesaving features help practices keep their on-hold patient education and internal marketing campaigns fresh and captivating with minimal effort from the doctor and staff. Tel-A-Patient, Inc. was founded in 1986, and has

brought Message On-Hold and Appointment Confirmation technologies to almost 20,000 dental practices. Tel-A-Patient can be reached at 800-553-7373, by email at salesteam@telapatient.com, or online at www.telapatient.com.



The **BIOMET 3i** Global Symposium: Science and Technology Reshape Implant Dentistry will be held April 24-26, 2008 at the Hyatt Regency in Chicago, Illinois. More than 30 internationally renowned speakers will present the latest technologies and techniques during the three-day event. The event includes seven optional, full-day Pre-symposium Programs on April 24 including CT guidance technology, comprehensive treatment planning for the implant team, two practice management programs for the doctor and/or staff members, current principles for augmentation of the posterior maxilla and the latest technologies for the laboratory technician. The General Session will take place on Friday and Saturday, April 25 and 26. Attendees will

have the opportunity to earn as many as 20 CE credits. General Session programs will be simultaneously translated in French, German, Italian and Spanish. For more information and to register, please visit the BIOMET 3i Website at www.biomet3i.com and click on Global Symposium or call 1.800.443.8166 or 561.776.6700.

GC Advanced

Technologies Inc., a GC America Inc. company, has opened a state of the art CAD/CAM milling center in Costa Mesa, California. This is the second of three milling centers GC plans on opening in the next year. The original milling center is located at GC Corporation in Tokyo, Japan, with the third scheduled to open in 2008 at GC Europe located in Leuven, Belgium. The robust GM-1000 5-axis milling machine currently mills Titanium and Zirconia custom implant abutments as well as Zirconia single copings and multi-unit bridges. In the near future, full roundhouse suprastructures will also be offered. Further information can be obtained by contacting

see Industry News p. 9



Ipcoming key AAID dates

FEBRUARY

- Deadline to apply for AAID April 25-27 Associate Fellow Oral Case Exam
- Deadline to apply for AAID April 24-27 Fellow Oral Case Exam

MARCH

- Start of Loma Linda AAID MaxiCourse®
- Start of Medical College of Georgia AAID MaxiCourse®
- Last date to pay AAID 31 Annual Dues
- March Mania discount 31 ends for AAID 57th Annual Meeting

APRIL

Deadline to apply for AAID August 4-8 Associate Fellow Written Exam

- 10-12 AAID Western District Meeting — San Antonio,
- 24-27 AAID Fellow Oral/Case Exam — Chicago
- 25-27 AAID Associate Fellow Oral/Case Exam -Chicago

MAY

- Deadline to apply for AAID June 8 Associate Fellow Written Exam
- 30 Deadline to register for June 27-28 AAID Bone **Grafting Course**

JUNE

- AAID Associate Fellow Written Exam — New York, NY
- 19-21 AAID Southern District Meeting — Atlanta, GA
- **27-28** AAID Bone Grafting Course — Dayton, OH

AUGUST

- AAID Associate Fellow 4-8 Written Exam — Pearson **Vue Testing Centers**
- Deadline to apply for AAID December 8-12 Associate Fellow Written Exam

SEPTEMBER

Early Bird Deadline for AAID 57th Annual Meeting

OCTOBER

- Deadline to apply for AAID November 2 Associate Fellow Written
- AAID Microsurgery Course — Chicago
- 29 Nov. 2 AAID 57th Annual Meeting — San Diego, CA

NOVEMBER

- AAID Associate Fellow Written Exam - San Diego, CA
- Deadline to apply for AAID December 5 Associate Fellow Written Exam
- Deadline to apply for AAID December 12 Associate Fellow Written Exam

DECEMBER

- AAID Associate Fellow Written Exam — Atlanta,
- 8-12 AAID Associate Fellow Written Exam - Pearson Vue Testing Centers
- AAID Associate Fellow Written Exam — Loma Linda University

District Meetings to be held in 2008

The Western District Meeting April 10 - 12, 2008 • San Antonio, Texas.

The theme of the meeting is "Improving Lives with Implant Dentistry - Including Yours."

The meeting will be held at the outstanding Marriot Rivercenter Hotel. Learn from the best while enjoying plenty of Texas Hospitality.

The Southern District Meeting

June 18 - 21, 2008 • Sheraton Hotel Downtown in Atlanta, Georgia.

The theme of the meeting is "Implant Connections" and includes the following featured speakers and topics:

Walter Chitwood, DDS - "Connect with Surgical Asepsis" Stuart Orton- Jones - "Connect with Implant Site Development" Angie Skinner and Penny Limoli - "Connect with Staff & Patients"

A special hotel room rate of \$189 single/double has been set aside for the AAID Southern District Meeting. Contact the Sheraton directly at 888.625.5144 or

online at www.sheratonatlantahotel.com to make your reservations.

Check the AAID Web site at www.aaid.com for more information about both of these outstanding programs.

Industry News continued from page 7

sales@gc-at.com or calling 866.925.4228 or 714.444.4229 or by visiting www.gcamerica.com.

Innovative Implant Technology introduces the revolutionary Sinu-Lift System, a minimally invasive, non-traumatic approach which allows for the placement of implants in the maxillary sinus region — with Predictable Results. The smart Sinu-Drill™ perforates through the bone without rupturing the sinus membrane. To order call 866-944-1118 or go to www.iitweb.com for more information, and to view the surgical technique video.

Imaging Sciences International. announces the Next Generation i-CAT®, the leader in Cone Beam 3-D dental imaging, is now available for sale and installation. The latest i-CAT® version offers the industry's fastest scan times at 5, 8.5, and 26 seconds, with standard reconstruction taking less than 30 seconds, providing dentists with nearinstant data for the best possible patient diagnosis, treatment, and surgical predictability. Other brand-new features include a rotating. Amorphous Silicon Flat Panel Sensor for capturing both small and Extended Fields of View with superior accuracy, data reliability, and control over radiation dosage.



The footprint of the in-office i-CAT® is just 17-square feet, and creates the 3-D images at a reduced cost to dentists and patients. Learn more about Imaging Sciences' cutting edge technologies at www.ImagingSciences.com.

InfoStar has produced an affordable 100% audible web page that introduces the practice, the doctor(s), the office technology, procedures and contact information. Internet users would rather listen and watch entertaining animation rather than read and look at pictures. Surveys show the average length of time on an average dental web site is less than one minutes: however, the survey also shows the average length of time spent on a "Talking Web site" is just under five minutes. InfoStar now offers four levels of web page designs: 1) Standard designs, 2) Custom Designs, 3) "Talking Web Page designs, and 4) Video Web Page designs. For more information call

800.889.4224 or visit www.infostar productions.com.

Materialise Dental, developers of the SimPlant software, have created a new educational program. The SimPlant University Initiative is a brand new program that partners with institutions that have postgraduate resident programs to utilize the complete SimPlant platform at no cost to the school. Through this exciting new program, each academic year, institutions that are participating in the university Initiative are entitled to: Free Simplant Planner software for current faculty and resi-



dents; five free CT or CBCT scanning processing requests; three free regular SurgiGuide custom-made steriolithic surgical guides, free SimPlant software training; and free enrollment to the SimPlant Academy at not charge to the resident or institution. Contact Materialise Dental at 1.888.327.8202 for more information.

DEXIS, LLC commemorates 10 years of evolution, technological advancements,



and multi-national expansion in dental digital imaging. DEXIS® hit the market 10 years ago as a definite innovative contender in digital radiography with the first laptop solution. The key to the advanced design was the completely portable DEXIS PerfectSize[™] sensor system. DEXIS has continued to offer software tools like One-Click Full Mouth Series, ClearVu™ image enhancement, and ClearCapture[™] image acquisition technology, to improve diagnosis, treatment, and workflow. Add to this the availability of specialized modules, such as DEXimage[™], DEXwrite[™], and $DEXimplant^{m}$, as well as integration with all leading Practice Management systems and hardware solutions, and the DEXIS vision to create the dentist's complete imaging hub is a practical reality. Learn more about DEXIS at the company's interactive Web site at www.dexis.com.

ContacEZ is one dentist's vision and a family's venture. Dr. Daniel Kim was determined to find a simple technique for restoring appropriate proximal contact in indirect restorations.

see Industry News p. 16

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Clinical Bite continued from page 3

(8/10). Mean and SD of overall bone levels at 0-, 3-, 6- and 12-months were - 0.26 ± 0.74 mm, -0.49 ± 0.91 mm, - 0.52 ± 0.97 mm, - 0.86 ± 1.20 mm respectively (Table I). Gingival level changes at 3-, 6-, 12-months were 0.07 ± 0.44 mm, $+0.25\pm0.20$ mm, $+0.15\pm0.72$ mm respectively (Table II).

Most of the complications occurred in the first 3 months. Three provisional crowns were broken, 3 provisional crowns and 2 temporary abutment screws were loose.

Conclusion

Based on this preliminary data with mean 9 months follow up; 1.overall implant success rate was 80% (8/10). 2. the overall mar-



Post 3 month X-ray

ginal bone loss was -0.86 \pm 1.20mm. 3. The overall facial gingival changes was -0.15 \pm 1.72 mm. 4. Perimplant facial gingival level seems to be well maintained after immediate tooth replacement in conjunction with subepithelial connective tissue graft.

References

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Table I Mean and SD of Bone Level (mm) (N=8)					
Time	Mesial	Distal	Overall		
0-month	-0.39 ± 1.09	-0.14 ± 0.38	-0.26 ± 0.74		
3-month	-0.50 ± 0.92	-0.49 ± 0.90	-0.49 ± 0.91		
6-month	-0.49 ± 0.91	-0.55 ± 1.03	-0.52 ± 0.97		
12-month*	-0.82 ± 1.14	-0.90 ± 1.25	-0.86 ± 1.20		
*N=6					



1 year

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1 year X-ray

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Table II Mean and SD of facial gingival margin (mm) (N=8)				
Time Interval	Gingival change			
0- to 3-month	-0.07 ± 0.44			
0- to 6-month	-0.25 ± 0.62			
0- to 12-month*	-0.15 ± 1.72			
*N=6				

Editor's Notebook

continued from page 1

We have been working on trying to provide the type of content you mentioned and this January 2008 issue marks the unveiling of that new content approach.

We have also redesigned the *AAID*News to reflect the more substantive content direction. In addition, we want the *AAID News* to feel

more open to you, the readers.

In keeping with the new editorial approach and desire for a more open feeling, we encourage readers members and those in the industry — to provide us with content and suggestions for future articles.

Feel free to e-mail me directly at hochbergdds@ earthlink.net with your comments and suggestions for *AAID News*.

Think You're Good? We'll Make You Better!

Jumpstart Your Implant Career By 10 Years...

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Pacific Implant Institute 2008 Course Dates

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Fundamentals of Fixed Implant Prosthodontics

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Applied Head & Neck Anatomy

Lectures & Labs with Cadaver Dissection

Implant Prosthodontics - "Advanced" Advanced & Removable Prosthodontics

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Courses

There is NO implant educational facility anywhere offering this complete range of specialized implant training. Our modular program allows anyone with any time constraints to complete the entire Master's Program according to their schedule. See our website for complete description of specific courses. We challenge you to register for the Orthopaedic Engineering & Treatment Planning Course regardless of your implant experience. (See our offer below)

Our faculty are specialists and leaders in their fields and have been hand picked to provide you with leading edge procedures in implantology, surgery and practice management skills.

PII courses are designed to benefit the doctor in his/her early learning curve as well as the significantly more experienced clinician.

There is limited attendance for the surgical session.

Location

Vancouver is Canada's Pacific gem: a combination of spectacular natural setting and all the excitement of a culturally diverse world class city. It offers Canada's best climate: a benign mix of mild winters and warm summers moderated

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Our Guarantee To You!

In order to give doctors an understanding of what implant dentistry is capable of achieving, as well as how to evaluate the quality of the surgical and prosthetic results for their patients, we offer a 3-day **Orthopaedic Engineering &**

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2008 Annual Meeting to feature interactive live surgery

Record Attendance at 2007 Annual Meeting

The 2008 AAID meeting will be held October 29 – Nov 2 in San Diego at the Manchester Grand Hyatt. The meeting will allow attendees to observe live surgical demonstrations and communicate with the surgeons during the surgery. A wireless response system will also enable the audience members to communicate their thoughts immediately



A full house listened attentively to the main podium programs.

and anonymously about topics being discussed at main podium programs. This will turn passive audience members into active participants and make the meeting highly interactive to foster extensive and meaningful discussion.

There were more than 2,000 attendees at the American Academy of Implant Dentistry's annual scientific conference, a record for the organization attributable to much more than the lure of Las Vegas nightlife, cuisine and gaming.

Implant dentists and their staff took advantage of the outstanding scientific program presented by the leading minds in implant dentistry who came from around the world to interact with AAID members and non-members. Nearly 20 different limited attendance sessions were available to choose from in addition to the main podium programs that delivered on the promise of "excellence through evidence-based implant dentistry."

Attendees were able to visit with over 120 exhibitors and learn about the latest products and services available to make their practice better.

For more information and to register visit the AAID Web site at www.aaid.com.



Table clinics gave attendees a glimpse at the latest research in dental implant treatment.



Dentists and staff found Implant World Expo an excellent source for products they need.



Lunch and Learns were a popular way to gain more education.

Dear Friends and fellow AAID Members,

It is with great anticipation that I write you today to tell you about our plans for the Western District meeting this coming April 10-12th and to invite you to join us.

It is our desire to do things a little differently this year than we are all used to. For me personally, the AAID means fellowship. I come back year after year to see old friends, make new ones and learn from them. While I enjoy the speakers and their presentations, it is also true that a great deal of what I take back and use on Monday comes from hallway conversations and dinner discussions!

This Academy is the best implant organization on earth and I want every dentist in America to know it. There is not one among us that did not benefit greatly at the beginning of his implant career from dentists we met in the AAID. We all have our list of heroes, the men who shared their offices, skills and hearts with us. It is incumbent upon all of us to pay this forward. Paul Johnson told me this when he took me under his wing. He said, "You can never pay me back for what I am doing for you except by doing it for someone else."

That is what our meeting this spring is about, my friends.

I invite you to come to San Antonio and bring a friend. Bring two! One of the greatest values of membership in this Academy is the support its members provide one another. Mentoring local dentists is a fast track to both personal referrals (cases they can't handle) and Academy growth. We are also planning a networking opportunity for the inexperienced dentists that come without knowing anything about the Academy. This will give you an opportunity to be the support for someone from somewhere else as well. You know, the guy you called in the middle of that surgery when things weren't going well? (Thank you, Paul Johnson, Dick Borgner and Dave Resnick!)

Oh, and did I mention fun? Since it is my opinion that the heart and soul of our organization is the relationships we make, I wanted to create some time to make them. Time spent doing something besides sitting in a dark room looking at bloody pictures. So to this end, we are going to have one afternoon at a thousand acre ranch north of the city. There will be a delicious Texas steak barbeque, campfire, fireworks, line dancing, armadillo races, hay rides, ranch tours and a genuine Texas Hold Em poker tournament for all to participate in at no cost. There will be great prizes for the winners and an afternoon and evening that none will soon forget. San Antonio in the spring is a tremendous destination for any reason and the Marriot Rivercenter is going through a complete renovation the end of this year at a cost of over 70 million dollars. The facility will be brand new.

Last but by no means least, Dr. Jaime Lozada and Loma Linda have agreed to let us give away an entire maxicourse scholarship, by drawing, to one of the registered attendees! This is magnificently generous and I want to add my deepest personal thanks to Dr. Lozada for this tremendous gift. What an opportunity for someone! How cool would it be if you invited that someone?

We have an outstanding speaker line up, including David Vassos, Howard Farran and an all-star line-up entirely from within our fine Academy, but the truth is this meeting isn't really about them, it is about us. It is about showing and sharing what we have in the AAID and it is a celebration. A celebration of the life that we all enjoy made so very much richer thanks to implant dentistry.

Come celebrate with us!

Sincerely,

Jay Elliott, DDS President Western District, AAID

P.S. Go online now for more information and to register! www.aaid.com/meeting/western/index.html



Academy News

Dental Implant ID Card Newest AAID Member Benefit

A Dental Implant ID card for patients is now available in the Members section of the Academy's website. On this

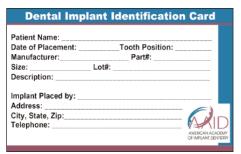
card, dentists can record information for their patients about the implants used in their treatment. Then, should the need for a repair by a new dentist arise, the patient can give this information to her or him, allowing treatment to proceed more easily. Just think of how helpful this information would be if you a patient who you did not treat presented in your office for treatment.

There are two options for printing the card. It can be printed on Avery cards that are 3.5 inches by 2 inches, which can be completed by hand or typed or enter the information online and print on letter-size paper.

Summary of Actions taken by Academy Board of Trustees

The AAID Board of Trustees met in Las Vegas on November 5, 6 and 11, 2007. Following is a summary of the actions taken by the Board of Trustees:

 Selected Sharon Bennett as the new Executive Director of AAID and



Example of new AAID Dental Implant ID card

finalized her employment contract

- Awarded Honorary
 Membership to J. Vincent
 Shuck on the occasion of
 his retirement as
 Executive Director and
 approved a retirement
 gift
- Appointed of Jae-Hyun Shim, DDS as director of the MaxiCourse[®] in South Korea
- Noted that total membership in AAID set a new record at 3,494 members
- Maintained the dues levels for all membership categories for 2008 at prior levels
- Rejected a proposal to add a \$100 penalty to those members who do not renew their membership by March 1
- Implemented a fee, beginning in 2012, to Life Members to cover the cost of Journal of Oral Implantology
- Rejected a recommendation to publish the annual membership directory every other year
- · Directed that an annual

- "call for volunteers" should be announced in the *AAID News* and AAID eGram
- Approved Life
 Membership applications
 for Daniel R. Patrick,
 DDS, MSD and James
 C. Thompson, DDS
- Approved the 2008 budget
- Renewed the appointments to the Editorial
 Board of Drs. Brian
 Banton, Marc
 Kaufman, Toru Okabe,
 Periklis Proussaefs,
 Kevin Mosman and
 Arthur F. Sun
- Approved appointment of committee chairs and members for 2008 year

AAID successful before Colorado Board of Dentistry

J. Vincent Shuck and Dr. Frank Recker, AAID Legal Counsel, along with representatives from other dental organizations, recently testified before the Colorado Board of Dentistry on restrictions on the use of credentials granted by organizations not recognized by the ADA as areas of specialty.

The Colorado Board voted to withdraw proposed restrictive language and refer the matter to the Board's Rules Committee for further study.

New Director Begins Term on ABOI/ID

The Board of Directors of the ABOI/ID is comprised of seven members, each of whom serves a rotating seven-year term. This means that, each year, one new Director rotates on to the Board and that the most senior Director rotates off. On December 31, 2007, **Jerry L.**Soderstrom, DDS, who had served on the Board since 2001, vacated his seat. Accordingly, his



Dr. Frank Recker (AAID Attorney), Dr. Tony Hewlett (President, Academy of Laser Dentistry), Dr. Mickey Bernstein (President-Elect of American Academy of Cosmetic Dentistry), Dr. Vincent Mayher (President Academy of General Dentistry) and J. Vincent Shuck (Executive Director of AAID) testified before the Colorado Board of Dentistry.

departure made a new position available on the 2008 Board.

As it is empowered to do by the ABOI/ID Bylaws, the 2007 Board of Directors nominated Natalie Y. Wong, DDS for the open 2008 position. Dr. Wong is well qualified to serve, as she not only received a degree in dental surgery from the University of Toronto (Canada) in 1996. but also earned a certificate in prosthodontics from the University of Michigan in 2007. She became a Diplomate in 2003. The



Dr. Natalie Wong named to Board of Directors of ABOI/ID.

Board welcomes Dr. Wong as she begins her new term. which became effective January 1, 2008.

Age Study continued from page 1

"Immediate Loading of Dental Implants: Clinical and Radiographic Factors Associated with Implant Failure"— Michael R. Markiewica; University of Buffalo, School of Dental Medicine/Massachusetts General Hospital Research Management

"Retention Characteristics of Ball Attachments" — Yung-Tsung Hsu; University of Alabama at Birmingham, Department of Prosthodontics

"Measuring the Accuracy of Computer Guided Implants" - Steven Woo Il Park; Columbia University, Graduate Prosthodontics

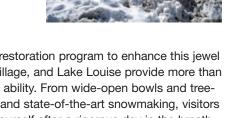
The AAID Research Foundation expresses its appreciation to all those who have contributed generously to help it pursue its goal of a \$1 million endowed foundation. In particular the Foundation wishes to thank Biohorizon and Osteohealth for their recent corporate donations of \$5,000 each.



21st Annual Ski Symposium Joel L. Rosenlicht, D.M.D., Director March 1-8, 2008 LAKE LOUISE, CANADA

Jumping the Crevasse: Traditional to Technological Dentistry

Fairmont Chateau Lake Louise



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The week long meeting will kick off with a Welcome Reception on Sunday evening, participant and guests invited. This year's Symposium will not only present national speakers on a diverse number of topics, but one session will be a panel discussion with specialists from around the country doing an open discuss and answering questions on Dentistry - Technology - Practice Production. On Wednesday, March 5, 2008 a group dinner will be held instead of the afternoon session.

> To register call: 877-649-7374 or email: info@Jawfixers.com Please visit us at www.jawfixers.com for a complete symposium outline



Industry News continued from page 9

During his process each member of his family became equally passionate about his vision!

His daughter, Shilla, a lawyer, helped to apply the patent for ContacEZ Diamond Dental Strip. With the same enthusiasm Dr. Kim's sons, Danny, an industrial designer, and Joshua, a professional photographer, took time from their own careers to work tirelessly to take his vision from the drawing board into production. His wife Hooja,

a retired college instructor and business owner, used her business savvy to set up a new company for her husband's product and currently runs daily operations in addition to those of her own company.

Each member of the Kim family took part in the development of Dr. Kim's flagship product, ContacEZ Diamond Dental Strip, an innovative new precision dental device designed to use prior to final cementation to achieve proper proximal contact adjustment of indirect restorations and was recently honored as a

"Top 100 Dental Product" by Dental Products Report. The company's Web site is www.contacEZ.com.

Straumann announces the launch of its new-generation Bone Level Implant, which complements and adds to the company's existing range of tissue level implants. The new implant line extension was available in most parts of Europe, North America, Australia and New Zealand starting in the fourth quarter 2007, with the rollout to the rest of the world beginning in 2008. The new implant comes in three



diameters and four lengths and is suitable for all dental implant indications. There is a full matching prosthetic portfolio comprising 125 components, each designed for simplicity, reliability and esthetic performance. There is also a CAD/CAM custom abutment service in titanium and ceramic. More details about the Straumann Bone Level Implant are published in the current edition of STARGET. Straumann's customer magazine, and at www.straumann.com.

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AAID Research Foundation Raffle Winners

Four lucky raffle ticket buyers each won at least \$5,000 during the AAID Research Foundation raffle held during the 2007 Annual Meeting in Las Vegas. Following are the winners: Trevor Bavar, DDS – \$7,500 Carl Misch, DDS, MDS – \$5,000 Mira Yasinovsky, DDS – \$5,000 Ronald G. Smith, DDS –

\$5,000

Bennett

continued from page 1

American Society of Plastic Surgeons. Among Bennett's noteworthy achievements for these and other associations are the successful development and implementation of membership recruitment programs, organizational restructuring initiatives, leadership training and strategic planning.

Dr. Jaime Lozada, president of the AAID, praised

Shuck's achievements as AAID's executive director. noting that under his leadership the Academy successfully argued in federal court that educating the public about recognized implant experience validated by a bona fide credential is vital to the public interest. Also. attendance at the AAID annual meeting increased steadily under Shuck's direction. The 2007 AAID Annual Conference had record attendance of more than 2,000.

Legal Bite

continued from page 6

change. And the patient eventually reveals an even more antagonistic attitude.

So the advice is simple: when you have taken the formal leap to terminate a patient, don't allow yourself to be talked out of it. If the patient truly has changed you have done a great service for their future dentist. And if the patient cannot or will not change, you have done yourself a great service!





Membership

NEW MEMBERS

The AAID is pleased to welcome the following new members to the Academy. If you joined the Academy recently and your name does not appear, it will be listed in the next newsletter. We have changed the way we are presenting the names of new members. The list is organized by state and then alphabetically by last name of the new member. We have also included the city where the member has his or her office. Contact your new colleages and welcome them to the Academy.

ALABAMA

Holt Gray, DMD Hoover

ALASKA

Michael Sanders, DMD Eagle River Dirk Menard, DMD Fairbanks

ARIZONA

Adel Shayegan, DMD Phoenix Jupneesh Singh, DDS Phoenix

Lawrence Koussa, DDS Tucson

CALIFORNIA

William Lin, DDS, MS Alhambra David Koo, DDS Arcadia Julie Kim, DDS

Cerritos Jennifer Kimura, DDS Cerritos

Paul Katz, DDS Cirtus Heights Archana Sheth, DDS

Corona Alex Pagonis, DDS

Cupertino Milton Pagonis, DDS

Cupertino Gary Pagonis, DDS

Cupertino Luis Kim, DDS, MS

El Dorado Hills Steven Miyamoto, DDS

Fullerton

Brand Ahn, DDS Larkspur

Nandan Patel, DDS Modesto

Rajiv Bhagat, DDS

Ontario Angela Bayat, DDS Orinda

Michael Giovannini, DDS Palmdale

Son Pham, DDS Pleasant Hill Bruce Lee, DDS Portola Santosh Solanki, DDS Rancho Cucamonga Robert Goslin, DDS

Redding Jong-Gill Ahn, DDS Ridgecrest

Jon Marashi, DDS San Clemente Soteara Tomkiel, MDT

San Clemente Ceancheng Chen, DDS

San Diego

Sherman Lin, DDS San Diego

Robert Lozano, DDS San Diego

Mark Moss, DDS San Diego

Jeff Katz, DDS San Francisco

Mervyn Chang, DDS San Jose

Jan O'Dell, DDS

San Juan Capistrano

R.J. Sondkar, DDS San Leandro

James Choi, DDS San Ramon

David Cashman, DDS Santa Ana

Christine Lee, DDS Santa Clara

Menachem Oren, DMD, DDS Peter Linek, DDS, MD

Sherman Oaks Michael Lin, DDS

Sunnyvale

Hyuk-Jin Kwon, DDS, MSD, PhD

Torrance Jonathan Vu, DMD

Westminster

Douglas Stilson, DDS Yucaipa

COLORADO

Andrew Killgore, DMD Colorado Springs Ryan Tyng, DMD Denver

Jeff Gourley, DDS Frisco

CONNECTICUT

Rostyslav Stepanenko, DMD Peter Hammes, DDS Storrs Aman Dhir, DDS Windsor

DISTRICT OF COLUMBIA

Judith Henry, DMD Washington

FLORIDA

Kenneth Rubinstein, DMD Boynton Beach Alexander Wang, DMD Boynton Beach Johanthan Cohen, DDS Coral Springs Babak Etemandshahidi,

DMD Davie

Carlos Medina, DMD DeLand

Andrew Rudnick, DMD Jupiter

Mauricio Mosfuera, DDS Miami

Andres Rodriguez, DDS

Miami Alain Selenou-Tema, DDS North Miami

Surendra Sirivolu, DDS, MS

Orlando Port Orange

Nick Tawil, DDS St. Augustine

GEORGIA

W. Kevin Dancy, DDS, MS Atlanta Stephen Lee, DDS

Doraville

Billy Pealock, DMD Lawrenceville

Supriya Ganupur, DDS Marietta

David Hayward, DDS Suwanee

Anca Nicola, DDS Suwanee

ILLINOIS

Chicago Maitreyi Mehta, BDS Chicago

Mario Ramos, DDS Chicago

Gregory Lehman, DDS Crystal Lake

Alfonso LaPelusa, DDS Deerfield

Howard Cooper, DDS Gurnee

W. Martin, DDS Savorv

INDIANA

Brian Goldstein, DDS Indianapolis

KENTUCKY

Dwight Peters, DMD Frankfort Michael Bishop, DMD Nicholasville

MARYLAND

John Bitner, DDS Clinton

MASSACHUSETTS

James Nager, DMD Belmont

Arian DiNapoli, DMD Boston

Brian Green, DMD Cambridge

Michael Calabrese, DMD Feeding Hills

Gustavo Perdomo, DMD Newton Highlands

Abdullaibrahim Abdulwaheed, DMD

Quincy Edward Cohen, DMD

Sharon Sam Merabi, DMD

Somers villeTouradj Ameli, DMD, MS Wellesley

Michael Russo, DMD, MSD Worcester

MICHIGAN

Anca Nastasa, DDS Clarkston Mohammad Khalil, DDS Sterling Heights

MINNESOTA

Atif Rizvi, DDS Baxter

Oender Solakogul, DDS, Edina

Ho Young Lee, DDS Maple Grove

Walter Hunt, DDS North Oaks

Deborah Johnson, DDS Plymouth

Philip Sallberg, DDS Roseam

John Haag, DDS Woodbury

MISSOURI

Ronald Antoine, DDS Chesterfield Ruth Gomes, DMD St. Louis

MONTANA

Schuyler VanDyke, DMD Conrad Brett Felton, DMD

Missoula **NEBRASKA**

Angela Curry, DDS Lincoln Chase Pruitt, DDS Lincoln

NEVADA

Bradley Welch, DDS Henderson Greg Welch, DDS Henderson Nelson Lasiter, DMD

Las Vegas Steven Bruderer, DMD

North Las Vegas Eun Duk Choi, DDS North Las Vegas

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Academy

of General Dentistry

Diplomate, American Board of Oral Implantology / Implant Dentistry Fellow, American Academy of Implant Dentistry Fellow and Diplomate, International Congress of Oral Implantologists Founder, Rocky Mountain Implant Study Group





NEW HAMPSHIRE

Randall Viola, DDS Nashua

NEW JERSEY

Kalpana Chaudhri, DDS Elizabeth

Preeti Iyer, DDS Elizabeth

Ravikanth Kallu, DDS Hackensack

Safinaz Morcos, DDS Hackensack

Harveen Bajwa, DDS Jersey City

Sakunthala Chukkapalli, DDS

Jersey City

Anuradha Ganta, DDS Jersey City

Victor Moisseev, DDS Jersey City

Malik Usman, DDS Jersey City

Vidya Kukkundur, DDS Mount Laurel

Marc Etienne, DDS

North Bergen Anthony Ermocida, DMD

Pennsauken Brett Druger, DMD

Springfield Renne Falivene, DMD

West Long Branch

NEW MEXICO

Gene Hilton, DDS Farmington Jeff Jaramillo, DDS Los Lunas John Crisler, DDS Rio Rancho

NEW YORK

Robert Chang, DDS, MD Albany Talal Dimachki, DDS Baldwinsville Olugbenga Akinsanya, DDS Brooklyn

Yevgeniya Gelman, DDS

Brooklyn Vladimir Lempert, DMD

Brooklyn
Lawrence Nalitt, DDS

Brooklyn Heather Wright, DDS

Brooklyn
Pankaj Singh, DDS

Brookville

Marc Weinstein, DDS East Quogue

Mahasamudram Deepika, DDS Forest Hills Dirla Florin, DDS Forest Hills Reena Goyal, DDS

Forest Hills Vera Matshkalyan, DDS Forest Hills

Steven Solomon, DDS Hudson

Samuel Peppy, Jr., DDS Jamestown

Grace Shin, DDS Little Neck

Anthony Quitoni, DMD Mt. Sinai

Nourhan Mekawy, DDS Nanuet

Michael Apa, DDS New York

Constantina Bacspoulou, DDS New York

Guruprakash Bhattal, DDS New York

Hsiao Chen, DDS New York

Dale Goldschlag, DDS New York

Richard Kim, DDS New York

Sarika Kishore, DDS New York

Keith Kou, DDS

New York Ryan Lee, DDS

New York Terry Lin, DDS

New York Arezoo Nasiry, DMD

New York Charles Roy, DDS

New York Pera Muncan, DDS

Rego Park

George Blumenthal, DDS Riverdale Mark Cohen, DDS

Rochester

William Schoepfel, DDS Rochester

Dimitrios Kilimitzoglou, DDS

Smithtown

Anthony Caruso, DDS Southampton

William Corbett, DMD Staten Island

NORTH CAROLINA

Robert Young, DDS Asheboro NORTH DAKOTA Lucas Deeter, DDS Bismarck

OHIO

Michael Sullivan Columbus Aparna Sadineni, DDS Dublin

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PENNSYLVANIA

Adam Miller, DDS, MD Dubois James Ference, DMD

James Ference, DMD Johnstown Bryan Boosz, DMD

Newtown Square Harold Haney, DMD State College

SOUTH CAROLINA

Sylvester Boahene, DDS Columbia

TENNESSEE

Ted Bleckstein, DDS, MS Afton Jonathan Rogers, DMD Greeneville

TEXAS

Sandra McCarthy, DDS Dallas Mazin Nakhleh, DDS

Dallas

Coray Preece, DDS Dallas

Elizabeth Berry, DDS Granbury

Chiara Combs, DDS Houston

William Eng, DDS Houston

Barbara Johnson, DDS

Houston David Mulherin, DDS

Houston Tracy Smith, DDS

Houston Trisha Le, DDS

Plano

UTAH

Chase Williams, DDS Cedar City Rodney Gleave, DMD Salt Lake City

VERMONT

J. Allen Feeley, DDS Essex Junction Greg Penney, DDS Fairfax

VIRGINIA

Kenneth Van Stralen, DDS Alexandria James Seaver, DDS Bristol

Bradley Trotter, DDS Chester Rohit Sethi, DDS

Clifton Shannon Bowman, DDS

Colonial Heights
William Perkinson, III, DDS

Midlothian Thien Le, DDS Springfield

WASHINGTON

Rory Jefferson, DDS Bremerton Michael Shannon, DMD

Kennewick Brice Chang, DDS Vancouver

WEST VIRGINIA

Matthew Kerner, DMD Charleston

WISCONSIN

Stephen Saunders, DDS Waupaca

AUSTRALIA

Jeffrey Albert, BDS Sydney, NSW Bill Kalis, BDS Sydney, NSW

BAHRAIN

Husain Ahmed, BDS

CANADA ALBERTA

Sheena Lambert, DDS Calgary Darren Diakow, DMD

Okotoks BRITISH COLUMBIA

Karim Lalani, DMD New Westminister Natalia Evans, DMD North Vancouver Frederick Li, DMD Vancouver

Vernon MANITOBA

Bharat Dulat, DMD Winnepeg

Karl Denk, DMD

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EGYPT

Ahmed Radwan, BDS Alexandria

FRENCH POLYNESIA

Stéphan Tessede, DDS Papeete, Tahiti

JAPAN

Omori Keiji Kyusyu Hidenobu Aihara, DDS, PhD

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PERU

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Pikos Implant Institute Michael A. Pikos, DDS Advanced Bone Grafting, Advanced Bone Grafting II, Contact: Alison Thiede Phone: 727-781-0491 E-mail: learn@PikosInstitute.com

19th Annual Implant Maxicourse®-NYC

Dr. A. Norman Cranin September 2008 – June 2009 – 1 weekend per month Contact: Ethel Bruck Phone: 718-983-1157 E-mail: ebaebl@aol.com Web site: www.dental implantcourse.com

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Beirut Implant Dentistry Center CE Courses Survey of Surgical and Prosthetic Implant Care Drs. Jihad Abdallah & Andre Assaf Contact: Mahia Cheblac Phone: +961 1 747650 or +961 1 747651 Fax: +961 1 747652 E-mail: beirutidc@hotmail.com

Pathway Learning Series Swiss Implants, Inc. Carol L. Phillips, DDS. Director 84 CE Units – Six 2-Day Workshops Contact: Julie Hansen Phone: 805-781-8700

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April 1, 2008 Contact: Laura Ransom Phone: 732-842-5005 Laura.V.Ransom@gmail.com

Tatum Institute USA Clearwater, FL Implant Surgery and Implant Prosthetics Bone Expansion, Sinus Augmentation, and Comprehensive Dentistry Contact: Rebekah Register Phone: 727-459-4910 tatumsurgical@tampabay.rr.com

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