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AAID News

WINTER 2015

PUBLISHED BY THE AMERICAN ACADEMY OF IMPLANT DENTISTRY



Editor's Notebook

By David Hochberg, DDS,
FAAID, DABO/ID



We take note of two pioneers in implant dentistry in this issue of *AAID News*. We mourn the passing of Per-Ingvar Brånemark, whose discovery of osseointegration revolutionized implant dentistry. We are pleased to present an interview with **Dr. Ralph Roberts**, one of the pioneers of blade/plate form implants.

If you didn't attend AAID's 2014 Annual Implant Dentistry Educational Conference, held in Orlando in November, you missed a truly enjoyable, fun, and magical several days. The education was top notch. **Dr. John Minichetti** — AAID's own wizard — presided over four days celebrating the Academy, implant dentistry, and the pure joy of having fun.

Be sure and join us next year in Las Vegas, October 21-24, "Where Classic Principles Support Cutting-Edge Implant Dentistry." ▸

Foundation awards \$60,000 in research grants

The AAID Foundation awarded \$60,000 to three researchers to help them continue their work in dental implant-specific research. This brings to over \$700,000 the amount awarded by the Foundation over the past few years since the inception of the Endowment Fund.

TITLE: Enhanced Guided Bone Regeneration in Localized Osseous Alveolar Defects by Using a Novel Perforated Resorbable Barrier Membrane

PRINCIPAL INVESTIGATOR: Julio A. Carrion, DMD, PhD; Assistant Professor and Director of Periodontal Research, Department of Periodontology; Stony Brook University School of Dental Medicine

TITLE: Nanodiamond-polymer Composite Coatings for Promoting Bone

Formation in Dental Implants

PRINCIPAL INVESTIGATOR: Prof. Dean Ho; Division of Oral Biology and Medicine and Bioengineering; UCLA School of Dentistry

TITLE: Customized Scaffolds for Craniofacial Cell Therapy

PRINCIPAL INVESTIGATOR: Darnell Kaigler, Assistant Professor; Department of Periodontics and Oral Medicine; University of Michigan

ABSTRACT FOR CARRION PROJECT: Guided bone regeneration (GBR) procedures for implant site development have significantly evolved over the last 20 years. Advances have been made with various barrier membranes with or without the use of bone grafts and other materials.

Some of the main limitations of non-resorbable barrier included cytotoxicity and need for removal, which can adversely affect the regenerated bone volume. Similar GBR success has been documented extensively with cell occlusive resorbable barrier membranes. Recently, we demonstrated supracrestal bone regeneration in guided tissue regeneration procedures in humans with the use of a novel perforated barrier membrane (MPM). The perforations allow gingival mesenchymal stem cells (GMSCs) and other progenitor cells present in the periosteum and gingival tissues to migrate into the osseous defect and contribute to the osseous regeneration potential. Our hypothesis is that membrane perforations will allow gingival mesenchymal stem cells

see **Foundation Grants** p. 16

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President's Message

Inaugural Address presented November 8, 2014, at 63rd Annual Meeting

John Da Silva, DMD, MPH, SCM
President, American Academy of Implant Dentistry

Members of the Academy, my fellow officers and trustees, newly elected Associate Fellows and Fellows, staff and guests; I am honored to stand before you as the next president of the American Academy of Implant Dentistry.

In order for you to understand my focus, you need to understand where I came from. My father's family immigrated to New York from Portugal. My mother's family emigrated from Puerto Rico to New York. We lived in the projects in the Bronx when I was born. My father was always focused on the future and how he could make our lives better. He was fortunate to have been married to my mother who tempered his eagerness and kept him grounded.

My maternal grandfather was a strong influence in my life. There are two things that he said and repeated during my childhood that stay with me.

One was to choose work that you love and it will not be work.

The second was that education is the most important thing for any individual to obtain. It is an equalizer.

My mother raised three children while working full-time and attending college classes in the evenings. She completed her bachelor's degree when I was a junior in high school and her master's degree when I was in college. She set an example for us that was unequivocal.

My drive and inspiration have been bequeathed.

For those of you who do not know, I have been in academic dentistry for my entire career. This is my 21st year as member of the Faculty at Harvard School of Dental Medicine. In January, I was chosen for the position of Vice Dean and in July, I was promoted to Associate Professor in the faculty of Medicine at Harvard. I owe my successes to the values that were instilled in me by my family, and it is part of why I stand before you now.

Our Academy is strong. Our membership has grown. The number of credentialed members is approaching 1,000 and the total number of members is approaching 5,000. Our

leadership has managed our finances well. Now we must look to our future. Our first priority, as I mentioned earlier, is to revise our bylaws. We have done our work on the new bylaws...now it is in the hands of the membership. My hope is that you will take that responsibility seriously and vote to adopt them.

Our second priority is to make our educational offerings the best in the field of implant dentistry. We have been working on this in earnest. We have changed the way we structure our meetings. National meetings are now the work of a

standing committee that is inspired to create meetings that appeal to all of our members. The district meetings have become more interesting, attractive and successful than ever. Now we are working on ways to make implant education more accessible to our members. This summer the Maxicourse® directors met to discuss ways to improve access, reduce the number of hours out of the office and away from home to complete the associate fellow requirements. We have a plan to accomplish this through a web-based

see President's Message p. 8

AAID NEWS

Editor
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Business Bite

Five Ways to Break Down the Barriers to Implant Case Acceptance

By Roger P. Levin, DDS

Introduction

In an ideal world, most dental patients would take full advantage of the many preventive, restorative, and esthetic procedures modern dentistry has to offer—regardless of cost. However, in the real world, a majority of patients deliberate carefully about dental expenditures that are not strictly need-based, especially in the new dental economy shaped by the Great Recession and slow recovery.

Dental practices seeking to increase production must learn how to address and overcome a number of barriers that block patient acceptance of implant treatment. This challenge is complicated by the fact that patient objections are sometimes unspoken. There are five highly effective techniques dentists and their teams can use to consistently achieve higher case acceptance rates:

1. Create scripting and train with it to make the strongest possible case for implant treatment.

Some general dentists and specialists may react negatively to the assertion that case presentation is selling. But the sooner they acknowledge this fact and modify their approach to consults, the sooner they will see acceptance rates climb. It helps for them to understand that, in this situation, “selling” really means showing patients how much they will benefit from the recommended treatment.

Once doctors come to terms with this, the question remains: *What, exactly, should they say to patients?* Clinical details and rationales must be kept to a minimum because few patients will be interested or able to interpret them. Yet many doctors lack the natural ability to speak persuasively about the non-clinical reasons a patient should accept treatment.

The solution is scripting, not only for the doctor, but also for the treatment coordinator (TC), hygienist and any other staff member who may have opportunities to influence patients. By mapping out all the key points, suggesting “power words” and phrases to build excitement, and providing answers to any

possible objections encountered, scripts can increase implant acceptance rates dramatically.

Using a training program based on role-playing with scripts, practices can vastly improve the team’s verbal skills quickly, easily and inexpensively.

2. Figure out and emphasize the benefits of treatment for each patient.

In the business world, marketing communicators are schooled in the art of translating product features into benefits, because that’s what consumers are really buying. Similarly, the description of an implant procedure has far less persuasive power than the description of the positive result for the patient.

As superior as it is to a consult based on clinical details, a benefit-oriented presentation cannot be approached as a one-size-fits-all proposition. For example, the primary benefit of implant treatment can vary from one patient to another. In one case, it may represent the ability to smile without being embarrassed or self-conscious. Another patient may look forward to eating whatever he likes. Yet

another may love the convenience of not having to do anything special to care for her new teeth, as compared to dentures.

There are almost as many possibilities as there are patients, so it’s imperative to figure out what matters most—what the greatest benefit will be—for each individual. This can be accomplished with a combination of communication skills. One is to quickly learn a number of personal facts about the patient. In a few minutes of conversation early in the presentation, the doctor or TC may discover the motivational key. The clues can be both verbal and non-verbal. The point is to take a highly patient-centric approach in presentations so that the greatest benefits for each patient can be discovered and emphasized.

3. Offer a range of payment options.

One of the most common barriers to treatment is cost, or—to look at it a little differently—affordability. Money does not flow as freely in the new dental economy as it did five or six years ago. Many patients have less income than

see *Business Bite* p. 6

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Business Bite

continued from page 4

before. Others may have the income but lack confidence about their financial future. Some people may have decided to curtail or postpone spending as a matter of principle.

There are many people walking around today with one form or another of financial “baggage” which may determine the success or failure of case presentation. What’s more, though well-scripted dentists or TCs may be able to learn what can motivate someone to want elective treatment, they usually cannot ask about, or accurately guess, someone’s financial status. For the best chance of knocking down a possible financial barrier to treatment, the only reasonable thing to do is to offer *every* payment option to *every* patient.

Aside from accepting the types of dental insurance most common in the practice’s community, a good mix of financing options will include four ways to pay for higher-priced treatment:

- 1) A 5% or 10% discount for payment in full up front
- 2) A half-at-start, half-on-completion plan

- 3) Acceptance of major credit cards
- 4) Outside financing, arranged through the practice between the patient and a reputable finance company

4. Unless the patient clearly says “No,” follow up.

Countless cases are lost because of a lack of follow-up. Perhaps some patients who say “I’ll think about it” or “I’ll get back to you” are just trying to be polite. But many practices have discovered that these patients often really do intend to think more about whether they should accept treatment, or discuss it with a spouse, or look at their budget.

Frequently, these patients can be won over with a well-timed phone call or, in the case of regular patients, a simple question the next time they come in for an appointment. There is no need for this to come across as a high-pressure tactic or “badgering.” With scripting, follow-up contact can create a very positive impression on patients, showing the practice’s concern for their well-being and offering to help them make the right decision. By building value and trust in the minds of

patients, the dentist and team will be perceived as a source of excellent advice and care... not as people trying to sell something. This is why, in many cases, patients actually *thank* the practice for bringing up the subject again.

5. Involve the entire practice team.

Any staff member who has direct contact with patients should be prepared to endorse the doctor’s treatment recommendations. Team training should include familiarizing staff with all services offered, including what procedures are like, why they are performed, and what the resulting benefits are. This working knowledge of treatment options, combined with the ability to talk about how other patients at the practice have benefitted from them, can give team members surprisingly strong influence in patients’ decision-making process.

Team members should also understand how some of the step-by-step systems they use in their work with patients—e.g., scheduling treatment within seven days of patient acceptance—directly affect the practice’s case acceptance rate. If they know not only

what to do but *why*, the staff will perform better.

Many practices have also involved staff members in a more direct and personal way by providing elective services to them for free or on an at-cost basis. When a patient asks a front desk coordinator if implants really are as good as the doctor or TC says, and the coordinator points out her *own* implant and explains why she loves it, the result is often case acceptance.

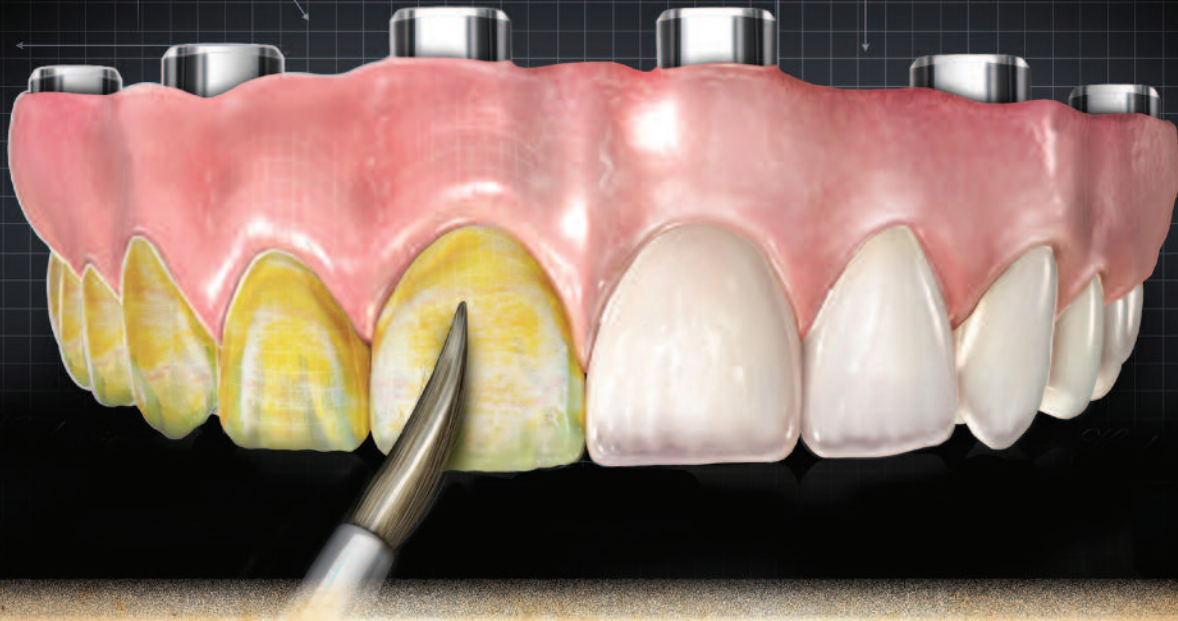
Conclusion

There are more barriers than ever standing between patients and the elective treatments they deserve. To overcome these obstacles and serve their patients better, practices should employ the techniques discussed here. The results will be happier, healthier patients as well as a substantial increase in practice production.

To learn more about growing your practice, attend one of Dr. Roger P. Levin’s up-to-the-minute, results-oriented seminars. Go to www.levingroup.com, click on the link for your specialty in the “Seminars” box, and choose a date and location that’s convenient for you. ▀



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Interview With Dr. Ralph Roberts

Conducted by Dr. David Hochberg, DDS, FAAID, DABOI/ID

DR. HOCHBERG: You were there when the clinical procedures for implant placement were being developed. Give us a little bit of a historical perspective on the early days of implant dentistry. How did you become aware of this treatment option, and why did you embrace this philosophy?

DR. ROBERTS: In my sophomore year, I became aware of a hip implant program at school that used stainless metal. I made some contacts there and I learned how to finish metal. My brother, Harold,

was a dentist and we talked about various ways to solve issues that we saw in dentistry. Harold had visited with **Lenny Linkow**, who showed him one of his implants. We all faced the challenge that the nerve was in the way, and there wasn't much vertical height. Harold and I questioned why we have to always go down through the bone? We needed to rethink this whole situation. We started refabbing metal and made a sled



runner-type thing. It had a curve to it and a post at one end. We realized that with this, we didn't have to deal with the height problem.

We were able to satisfac-

torily place several ramus frames.

DR. HOCHBERG: How did you receive your implant surgical training? How did mentorship work back then?

DR. ROBERTS: The doctors at my dental school who were involved with oral surgery were very open to our learning. If we wanted to go back and tackle a molar extraction or even get involved with a third, they'd come and spend time with us. They were friendly and open to

see [Interview p. 10](#)

President's Message

continued from page 3

system in partnership with Dental Campus®.

In particular, we need to make implant education more accessible to recent graduates of dental schools. Why, you might ask? Recent graduates will be our future members and their education and engagement in implant dentistry is our future.

To the Associate Fellows and Fellows, I congratulate you on your achievements and your commitment to becoming a credentialed member of our academy. You are now one of a group of about a thousand indi-

viduals in the Academy who represent us with a strong foundation in implant dentistry. I wonder if the founders of the Academy would have ever envisioned this? You have achieved a benchmark in your careers. That is just the beginning.

Your elevated status brings with it new responsibilities, to your patients, your community, the Academy and the profession.

What does that represent? It represents your responsibility to continue to learn and broaden your foundation, to speak out and speak up when you encounter other profes-

sionals or government regulators who are not acting in the best interest of the public or the profession. It represents your responsibility to transition from mentee to mentor. You are the future of the field of implant dentistry and of this Academy.

What does that mean? It means that you need to own it. It is now part of how you are defined as a dental professional. Stay active, engaged and excited about implant dentistry. Keep an open mind and help to create the future of the field. Do this in the spirit of those who have come before you. The pace of change in our world is

now exponential, and you need to be at the leading edge of that change! Be part of leading us into the future by being a part of, and remaining engaged in, the Academy. We are all counting on you to help create the future of implant dentistry.

In the words of William Shakespeare:

"We know what we are, but know not what we may be."

Let us work together to see what we can be. Thank you for giving me the opportunity to be part of the leadership of the Academy. It is an honor, and I hope that I can live up to your expectations. ▀



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us. While I don't think I laid a flap for an apical until after I graduated, we were told about it. I felt very comfortable in the school. It gave me good insight so that when I got out of school, laying flaps, extracting molars, and the like, came naturally.

As far as mentors go, Ford Turner in Birmingham, Alabama, would be one. He had just a little, humble office. He was the one that started the Alabama Implant Study Group. We would go to Ford's office, and they'd line up the patients. It seemed like every year, he had me doing the surgery. There was tremendous camaraderie, a learning philosophy, and everybody contributed.

You have to have some skill and overcome some of your questions or doubts. I give the school credit for that. That openness just gave me that extra comfort level to move ahead and do all these things that nobody else had done.

DR. HOCHBERG: You've been associated with the ramus frame and blade-form implants for so many years. Please share with our members just why this modality has been your go-to protocol for so long?

DR. ROBERTS: It's a case of trying to overcome some of the problems that



Dr. Roberts and his wife, Rita, stand next to one of the cars he has restored.

we have in dentistry. It was actually my brother, Harold, who picked up a piece of metal that was left over. It was practically a rail with a foot on it, something like a frame. Harold looked at it, bent the thing around, and said "Do you suppose maybe we can make a frame that would go in the mouth?" It wasn't too long before we actually designed it with an anterior foot. The first frames went into the ascending rami by about 13 mm. The anterior foot was 40 mm on a curve. So, the simplest thing to do was to figure out a way of attaching the ramus blade

to the back of my ramus frame.

One of the original ones has been in service for more than 40 years.

I went on to develop what we call the RA-1. That had 13 mm in just a prong straight back up into the rami. Then we went to the RA-2 and that brought a 30 mm foot, but it brought it forward. We put several of those in and some are still in function. But, we found when running a test at University of Alabama, was that with over 35 pounds of pressure, it started listing toward the lingual. I scrapped that whole idea and went to the

RA-3. That's currently what we have — a balanced foot on the back, 15mm back, 15mm forward, and it doesn't have this off-angle thing that the RA-2 had and it supports very well.

When I do a case like this, I tell the patient before the surgery, that I'm going to give you a facelift, and you're going to look different. You are going to change your clothes. You're going to change your hairdo, and you're going to just really come back to life again. This is typically what happens to all these patients. It's comfortable for them and the amount

of thanks that I get from them is just tremendous. They'll send you things in the mail. They'll come in and tell you how well they feel. It's not just a simple procedure. What's happening when we place one of these in the mouth is very complex.

DR. HOCHBERG: When did you associate with the AAID and what have been some of the benefits you've had from this relationship over the years?

DR. ROBERTS: I think it was around 1970 that I joined the Academy. The AAID was a pretty small group. Over the years it's provided good camaraderie. We've found a lot of top-notch people who have been associated with the AAID. I really don't think that it's just a good-old-boys club. It's an organization that brings out the best in the young dentist. They join with zeal. They want to excel. They want to serve the patients better. They are there to learn. I've found that the camaraderie and the support has been great. It's an organization that shows that you've accomplished something. If people are interested in wanting to advance themselves, this is why they need to go through this organization. The Academy has grown tremendously

since I joined. But, it's still a way for young doctors to find the answer.

When we developed the ramus frame implant, the dental schools could have cared less about it. Nobody talked about implants. Bob James, at Loma Linda, got the program running at the school and became one of the leaders in our organization. Bob and I were very close, and I helped him a lot at the school.

have a 1914 Buick. It's a big touring car. I'm working on some Packards right now, finishing up a 1931 coupe. The car hobby still burns within me.

I enjoy putting things together. That's really what it amounts to. I think that if I didn't have some of this intuition, I wouldn't have done what I've done. I like to see things progress and figure out a way to make things better.

(FDA) looked at my work last summer and reclassified blade implant, that says a lot. I keep wondering why did they do that? I think they probably felt this guy's been doing this so many years and he's got success. We've got to get him into the right classification. It's been neat. I hope the new generation can say that they have accomplished some of these tough tasks and move on to newer and higher ground. I think I have some of the implants that have been in service the longest.

In terms of bone growth, including regrowth of the entire mandible, I couldn't believe it when I first saw it in my patients. I had to look at a lot of x-rays. I'm going to have to write again on the subject because I have seen very consistent growth. Basically, the entire frame stimulates growth in the mandible. I've observed many of them doubled. I just hope that we can share and others will enjoy future advancements that I haven't thought about yet.

DR. HOCHBERG: Dr. Roberts, on behalf of the AAID we want to thank you for your lifelong dedication to implant dentistry and the contributions you have made to so many of our members. ▀

It's an organization that brings out the best in the young dentist.

DR. HOCHBERG: Dr. Roberts, what do you do for fun when you're not treating your patients?

DR. ROBERTS: We have a fairly sizable garden every year, and I do have a little property here with my office and house. I've had a yen for Model T cars. When we were 11, my twin brother and I put together our first Model T and got it running. After finishing school, I settled down and was able to build several early cars. I have a 1912 Rio. It's a Renault Olds model and we

DR. HOCHBERG: Dr. Roberts, do you have any closing thoughts for our organization?

DR. ROBERTS: I would say to the young people coming into our organization: don't hesitate to ask questions. Dig in and learn things. I think most of us older fellows are very willing to share our ideas about what works and what things don't work.

I have to say in closing, that when the Food and Drug Administration

Have You Looked at Proposed Bylaws Changes?

If you haven't reviewed the proposed Bylaws changes, be sure to visit the Members' Section of AAID's website — www.aaid.com. The complete text along with detailed explanations of each proposed change is available online.

In the meantime, here is a summary of the key changes.

This will be voted on at the 2015 Annual Meeting on Saturday, October 24, 2015 in Las Vegas.

Questions? Please contact Sharon Bennett, Executive Director at sbennett@aaid.com.

AMEND ARTICLE II – MISSION AND PURPOSES WHAT THE AMENDMENT DOES:

The amendment is designed to reflect the current purposes of the Academy as they have evolved since the founding of the AAID in 1951. The new purposes would read as follows:

- A) to provide education in implant dentistry to all dentists;
- B) to encourage research in implant dentistry;
- C) to promote a high standard of ethics in professional relations, between dentists and allied care providers, and with the public;

D) to promote implant dentistry techniques and procedures

E) generally to do all acts as are permitted by law, and that are consistent with promoting the welfare of the dental profession and the general public.

AMEND ARTICLE III – MEMBERSHIP WHAT THE AMENDMENT DOES:

1. Much of the current language in the Bylaws is procedural in nature rather than substantive. It is more effective if the procedures are outlined in policies and procedures that are adopted and can be amended by the Board of Trustees as necessary.
2. Creates consistency in the election of Fellows, Associate Fellows, and Academic Associate Fellows
3. Changes the supermajority vote of the Board of Trustees required to elect new credentialed members from 3/4th to 2/3rd in accordance with best practice as recommended by *Sturgis*.
4. Clarifies that Fellow members have the right to vote.
5. Gives the Board of Trustees the right to determine, by policy and

procedure, when newly inducted credentialed members are inducted and when they may cast their votes.

6. Allows for the suspension and permanent expulsion of members after due process.
7. Process and requirements for reinstatement of a credentialed member, including whether re-examination is required, will be covered in policies and procedures.

AMEND ARTICLE IV – DUES, ASSESSMENTS, AND FEES WHAT THE AMENDMENT DOES:

1. Gives the Board of Trustees the right to annually set dues and fee for all members.
2. Limits the annual increase in dues to no more than 10% for voting members without approval by the membership.
3. Changes the “dues year” from starting on December 1 to starting on January 1 to be consistent with the Academy’s fiscal year
4. Increases the amount of assessment that the Board of Trustees can impose without membership approval from \$75 to \$100 and reduces the

vote needed by the Board of Trustees from 3/4th to 2/3rd in accordance with best practice as recommended by *Sturgis*.

AMEND ARTICLE IX – COMMITTEES WHAT THE AMENDMENT DOES:

1. Eliminates the Annual Meeting Committee because it is now part of Education Committee.
2. Gives the Education Committee responsibility for the continuing development of the Academy’s educational efforts.
3. Changed name of Audit and Budget Committee to the Finance Committee.
4. Eliminates the following committees from the Bylaws with expectation that they and other committee will be authorized by policies and procedures:
 - a. Ethics Committee
 - b. Honored Fellow Committee
 - c. Global Committee
 - d. Membership Committee
 - e. Publications Committee
5. Changed from 30 days to 60 days, the date by which the Nominating Committee must submit nominations.

6. Changed from 24 hours to 30 days, the time by which a candidate seeking to run by petition must submit their petition.
7. Changed the number of signatures required from 20 members to 5% of the voting membership, which based on current membership equals approximately 45 members and clarified that signatures would be required rather than just names of members. If no petition candidates, the slate is adopted.

AMEND ARTICLES XIII – Specialty Board of Implant Dentistry AND XIV – American Academy of Implant Dentistry Foundation

WHAT THE AMENDMENT DOES:

1. Deletes both Articles because they pertain to organizations other than AAID

AMEND ARTICLE XV – AMENDMENTS

WHAT THE AMENDMENT DOES:

1. Changes from 3/4th to 2/3rd of attending eligible voting members in good standing as the required supermajority for amending bylaws based on recommendations of *Sturgis*. ▀

CE Reporting Now Means Convenient and Electronic

Beginning at this year's Annual Educational Conference in Las Vegas, you will be able to electronically report the continuing education credits you earn and do it at the time and place that is convenient for you.

No more paper to carry around, complete, and possibly lose. You won't have to worry whether you put the correct copy into the correct CE receptacle at the event.

Report your CE online using your mobile device — smart phone, tablet, laptop,

or even your desktop computer when you return to your office or home. Access the online reporting tool, from the Conference, the airport, or from your home or office.

Don't worry if you don't have a mobile device. We will have computers available at several locations throughout the Conference, as well as staff trained to assist you. In addition to reporting, you will be able to immediately print a receipt verifying your credits. As always,

AAID will report CE credits to AGD, as a courtesy to AGD members.

The Academy will unveil its new CE reporting system at the 2015 Annual Implant Dentistry Educational Conference, October 21 – 24, 2015 in Las Vegas.

Questions? Contact Catherine Elliott, Director of Professional Development at catherine@aaid.com or check www.aaid.com for more information as the Annual Educational Conference draws closer. ▀

New Finding – SSRIs Increase Risk of Implant Failure

Selective serotonin reuptake inhibitors (SSRIs) — such as Celexa, Paxil, Lexapro, Prozac and Zoloft — have become the most widely used drugs for the treatment of depression across the world. Although SSRIs act upon nervous tissue to treat depression, they also affect peripheral tissues, including bone. Research has shown that SSRIs directly affect bone formation by increasing osteoclast differentiation (Battaglino et al., 2004) and inhibiting osteoblast proliferation (Tsapakis et al., 2012). The current study investigated the relationship between SSRIs and the risk of failures in

osseointegrated implants.

A six-year retrospective cohort study, which included 916 dental implants in 490 patients, found a statistically significant increase in risk of dental implant failure in patients being treated with SSRIs compared to non-SSRI users. Although this finding suggests the need for a more careful surgical treatment plan for patients undergoing SSRI therapy, more research is needed with respect to drug dosage, treatment period, and severity of depression. The researchers did not have access to these data points, which could provide further insight into

advanced treatment planning for SSRI users.

The full-text version of the article, "Selective serotonin reuptake inhibitors and the risk of osseointegrated implant failure: a cohort study," is available online at <http://jdr.sagepub.com/content/93/11/1054.full.pdf+html>

Battaglino R, Fu J, Spate U, Ersoy U, Joe M, Sedaghat L, et al. (2004). Serotonin regulates osteoclast differentiation through its transporter. *J Bone Miner Res* 19:1420-1431.

Tsapakis E, Gamie Z, Tran G, Adshear S, Lampard A, Mantalaris A, et al. (2012). The adverse skeletal effects of selective serotonin reuptake inhibitors. *Eur Psychiatry* 27:156-169. ▀

Annual Business Meeting Summary

President **John Minichetti** called the annual members' business meeting to order at 2:10 p.m. on Saturday, November 8, 2014. A quorum was present with 212 Associate Fellows and Fellows officially in attendance.

After introducing the new Associate Fellows and presenting their certificates, Dr. Minichetti and **Dr. Bernee Dunson, A&C** Board Chair, awarded certificates and medallions to the new Fellows.

A moment of silence was observed in memory of seven members who had passed away since the 2013 Annual Business Meeting.

President Minichetti reflected on the just concluded year and reported the following progress on the Academy's Strategic Plan:

1. Restructure the Bylaws and Governance:

Comprehensive bylaw amendments have been drafted and distributed for comment.

2. Increase and Enhance Education: The AAID has added Catherine Elliott as full-time Director of Professional Development.

3. Grow Credentialed Membership: The Academy restructured membership and credentialing staff to provide

more support and opportunities for growth.

4. Achieve Specialty

Status: The AAID has a current the legal effort in Texas and is supporting the newly created American Board of Dental Specialties.

5. Raise Professional and Patient Awareness:

The AAID has expanded its visibility by participating in the ADA program for new dentists and had programs in collaboration with the ADA. In December, the AAID participated in the Greater New York Dental Meeting with booth space, lectures, workshops, and exposure to over 50,000 dentists.

6. Increase overall membership: The Academy instituted the Member Advantage Program offering our members discounts on supplies and services.

Upon a motion duly made and seconded, the members elected the following officers of the Academy by a unanimous voice vote:

President:

John D. Da Silva, DMD, MPH, ScM (by automatic ascension from President-Elect)

President-elect:

Richard Mercurio, DDS

Vice-president:

Shankar Iyer, DDS, MDS

Treasurer:

David Hochberg, DDS

Secretary:

Natalie Wong, DDS

The following members of the 2014 Class of Honored Fellows were introduced:

Jay Elliott, Houston, Texas

Adam Foleck, Norfolk, Virginia

E. Richard Hughes, Sterling, Virginia

Jeffrey Meister, Munster, Indiana

Duane Starr, Portland, Oregon

Roderick Stewart, Hamilton, Ontario, Canada

Natalie Wong, Toronto, Ontario, Canada

Matthew Young, San Francisco, CA

Reports on the accomplishments by various Academy programs, committees, and related organizations were presented.

- **Dr. John Da Silva**, chairman, reported on the Bylaws restructuring that was mentioned in the President's report. The Bylaws committee has worked to rewrite the Bylaws so that they are clear and concise. The changes proposed would
- Move specific details to policies and procedures. Details such as specific credential requirements,

reinstatement details, and non-standing committees would appear in the Policies and Procedures manual.

- Spell out clearly the rights of members — who can and can't vote, hold office, chair committees. It would also give the Board the authority to expel a member for cause with due process.
- Clearly establish that the Board sets member dues but limit credentialed member dues increases to less than 10% without member approval. Members would also need to approve any special assessment in excess of \$100.
- Establish standing committees — those committees essential to AAID — A&C, Bylaws, Education, Executive Committee, Finance, and Nominating. Others would be in the Policies and Procedures.
- Clarify the election process to allow for petition candidates but also allow for time to inform members of any such candidates. And if there are no additional candidates, the slate would be declared elected.

Dr. Da Silva also invited members to become

familiar with the proposed Bylaw rewrite either by picking up the materials in the back of the room or reading them on the members only section of AAID.com.

Dr. Da Silva also introduced the proposed amendment to establish a new membership category "Affiliate Associate Fellow." The proposed category is a non-voting, non-credentialed membership with the same rights and privileges as general members and would be open to individual

who have passed the Part 1 (written) examination of the Associate Fellow membership but have not completed the process.

The amendment was overwhelming approved.

After the vote and thanking Dr. Minichetti for his contributions to the Academy, Dr. Da Silva delivered his inaugural address. A reprint of that speech can be found beginning on page 3 of this issue of the AAID News.

The meeting was adjourned at 3:43 p.m. ▀

Classified

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May | June 2015 Philadelphia, Pennsylvania

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Foundation Grants

continued from page 1

to migrate into the osseous wound and enhance de novo bone formation relative to a traditional cell occlusive barrier membrane.

The objective of this study is to investigate the GBR potential of a MPM in alveolar ridge defects, relative to a similar occlusive barrier. Twenty non-smoking patients who need localized alveolar ridge augmentation prior to implant placement will be included in the study. Patients will be divided into two groups, as follows: occlusive bovine collagen membrane (OM control group, 10 patients) and modified bovine perforated collagen membrane (MPM test group, 10 patients). All sites will be grafted with mineralized mixed cortical/cancellous allograft and, when needed, human cortical bone pins will be used for site stability. A Cone Beam Computed Tomography (CBCT) will be obtained prior to surgery and 6-8 months post treatment from which volumetric width changes will be quantified. A bone biopsy will be obtained at the time of implant placement (~6-8 months) to measure residual graft particles and new bone formation. Dimensional width changes will be assessed at 6-8 months during re-entry for implant placement.

Soft tissue healing will be assessed at 2, 4, 8, 16 weeks and 6 months.

This study can potentially impact current bone augmentation techniques and may lead to the modification of existing commercial membranes that will enhance site development prior to implant placement. The contribution of progenitor cells to the osseous defect might lead to greater bone formation and possible accelerated wound healing.

ABSTRACT FOR HO PROJECT: Implant dentistry has significantly improved with the introduction of titanium implants. In addition to its biocompatibility, resistance to corrosion, and favorable mechanical properties, titanium also permits direct fusion between the dental implant and its surrounding bone through a process known as osseointegration. Despite these favorable properties, there are still several limitations to the modern implant system. Complications, such as periimplantitis, can still arise after an implant surgery, ultimately leading to the failure and removal of costly implants.

In order to resolve this, many studies have aimed to reverse bone loss. Bone Morphogenetic Proteins (BMPs) are well-studied regulators of bone and cartilage development and have been shown to promote bone formation by

inducing osteoblast differentiation. Dexamethasone (DEX) has also been shown to enhance BMP-2 enhanced activity of Alkaline Phosphatase (ALP), which is the byproduct of osteoblast activity. Despite the wide array of bone growth enhancing therapeutic agents and proteins, their rapid clearance by diffusion upon delivery serves as a significant impediment, making a proper delivery system for these bone growth upregulators very critical.

Dental implants encapsulated in nanodiamond-embedded parylene C coating is a very promising and innovative therapeutic delivery system that will add another dimension to implant surfaces. These polymer films have been shown to be an effective mechanism that permits modulation of drug or protein release due to its unique bilayer architecture composed of a thick hermetic layer and thin permeable layer. Parylene C is biocompatible and inert under physiological conditions, making it an excellent medium to sequester Nanodiamonds (NDs) loaded with drugs and growth factors and ultimately facilitate long-term drug release. NOs are 2 to 8 nm carbon byproducts that are biocompatible and excellent for sustained drug delivery. While DEX alone does not significantly stimulate ALP production,

they significantly enhance BMP-2-induced ALP production. Thus, BMP-2 and DEX coupled NO, embedded within a parylene film, will both optimize and prolong the potent functions of BMP-2 and DEX in promoting localized bone growth near implant sites where bone loss commonly occurs.

We propose to successfully load BMP-2 and DEX onto NO surface by physisorption and a cell adhesion motif, Arginine-Glycine-Aspartic acid (RGD), by coupling (Specific Aim 1), fabricate ND-parylene hybrid coating for sustained drug release and localized bone formation (Specific Aim 2), and lastly, perform in vitro studies to determine the effectiveness of BMP-2 and DEX coupled NOs in osteoblast differentiation and proliferation through the detection of ALP activity (Specific Aim 3). Ultimately, NO-BMP-2/DEX embedded in parylene C coating can be an effective vehicle of delivering potent osteoinductive agents in a sustained and localized manner around dental implants.

ABSTRACT FOR KAIGLER PROJECT: Cell therapy holds significant potential for the reconstruction and regeneration of craniofacial defects and deformities. A clinical limitation of cell therapy is that the mode of

see Foundation Grants p. 18

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Per-Ingvar Brånemark Passes Away

Per-Ingvar Brånemark passed away on December 20, 2014, at the age of 85. His discovery and application of osseointegration was unparalleled and is one of the most significant scientific breakthroughs in dentistry since the late 1970s.

According to Wikipedia, Brånemark's discovery of osseointegration revolutionized the realm of implant dentistry and helped get it recognized and incorporated into dental school curricula and training programs.

After studying at Lund

University in Sweden, Brånemark became professor of Anatomy at Gothenburg University in 1969. Brånemark has been awarded many prizes for his work, including the coveted Swedish Society of Medicine's Soederberg Prize in 1992—often referred to as the 'mini-Nobel'—and the Swedish Engineering Academy's equally prestigious medal for technical innovation.

Brånemark has also



been honored with the Harvard School of Dental Medicine Medal for his work on dental implants in the United States and holds more than 30 honorary positions throughout Europe and North America, including the Honorary Fellowship of the Royal Society of Medicine in the UK. In 2003, he received

an honorary doctorate from the European University of Madrid. He was the winner of the European Inventor Award 2011 in the category Lifetime Achievement.

The American Academy of Implant Dentistry honored Brånemark with the prestigious Aaron Gershkoff/Norman Goldberg Award in 2003. ▀

Upcoming Key AAID Dates

FEBRUARY 2015

1 Application Deadline for Associate Fellow Part 2 Exam (2015)

APRIL 2015

24-25 Implant Dentistry in a Digital World
2015 Northeast and Southern Districts Meeting
Baltimore, Maryland

MAY 2015

14-17 Associate Fellow Part 2 (Oral/Case) Exam
Fellow Oral/Case Exam
Chicago, Illinois

JUNE 2015

12-13 2015 Controversies in Dental Implant Treatment Planning
Central and Western Districts Meeting
Chicago, Illinois

OCTOBER 2015

21-24 64TH ANNUAL EDUCATIONAL CONFERENCE
Caesars Palace, Las Vegas, Nevada

Check the AAID Online Calendar using this QR Code for a complete listing of all Key AAID Dates.



Foundation Grants

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delivering cells to the defect is crude and non-specific to the surgical site. Alternatively, an ideal approach would be one that is standardized enough to be reproducible, yet adaptable enough to be patient- and defect-specific. To this end, we have preliminary evidence which suggests that mesenchymal stem cells can be predictably isolated from alveolar bone marrow, using a simple, standardized, reproducible technique. Additionally, we have demonstrated the feasibility of creating preshaped, patient-specific scaffolds through additive manufacturing. Our hypothesis is that craniofacial bone defects can be regenerated through stem cell transplantation on 3-dimensional (3-D) printed scaffolds produced in the morphological dimensions

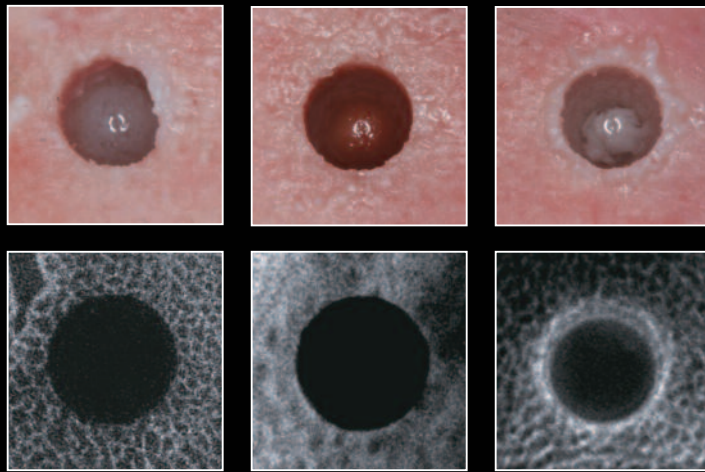
of patient-specific craniofacial defects. To test these hypotheses, the project proposed has three Specific Aims (SAs). In SA 1, we will optimize the physical and mechanical properties of 3-D scaffolds to support cell seeding, attachment, growth, and differentiation of aBMSCs and that will remain stable at the time of placement into clinical bone defects. SA2 will evaluate the preclinical bone regenerative potential of aBMSCs on customized scaffolds using clinically relevant orthotopic model systems. Findings of the proposed study will significantly advance clinical cell therapy approaches for craniofacial regeneration. Additionally, it would serve as an important platform for development of other personalized regenerative approaches using the powerful tool of additive manufacturing. ▀



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2014 Auction Participants

The AAID Foundation raised \$78,420 at its auction held during AAID's 2014 Annual Educational Conference in Orlando in November. The Foundation thanks the following individuals and organizations that donated items for the auction.

Donated Educational Courses & Study Club

ABOI

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John Minichetti, DMD

Richard J. Mercurio, DDS

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AAID Launches Brand-New Member Benefit

One of AAID's strategic objectives is to improve outreach to patients and help connect prospective patients with members. The Academy continues to see an increase in visits to



the consumer website, aaid-implant.org, by patients seeking an implant dentist and information about dental implants in general. Credentialed member practice information was seen nearly 272,000 times in the past 12 months.

To supplement these efforts, AAID has created three new patient brochures about dental implants for members to use in their offices. The **"Missing Teeth?"** brochure can help patients decide whether dental implants are the right choice for them. **"Dental Implant Options"** educates patients on the different types of implant procedures, including the single tooth, multiple teeth and full-arch options. A section on immediate implant placement, mini implants, all-on-four treatment and what to expect when pursuing implant treatment is also included. The third brochure, **"Missing Bone?"** is designed for patients who might need bone augmentation procedures.

Print-ready PDF files of each brochure are available for FREE to members. Simply download them from the shopping cart of the "For Members" section of aaid.com. As a benefit of your AAID membership, you can print and distribute them to your patients. Members can also personalize the brochures to their practices by including address and contact information as well as a photo and a description of the practice. Just complete the form on page 37 and send with the requested files to the headquarters office at info@aaid.com.

Questions?

Contact Lisa Villani at 312-335-1550 extension 226. ▶

Visit www.aaid.com
for the latest news
and information

Implant Dentistry in a Digital World

From digital treatment planning and delivery to patient communication, new technologies are changing the way we practice implant dentistry. The Northeast and Southern Districts are hosting this one-and-one-half day conference April 24 – 25, 2015, in Baltimore, MD.

Earn 12 hours of Continuing Education, interact with colleagues, meet with exhibitors, and learn to navigate dentistry in the new digital world.

Enjoy a special evening honoring **Dr. Leonard Linkow**, considered by many to be the “father of implant dentistry.”

Register by March 2, 2015, and save \$100. A very reasonable hotel rate of \$155 per night single or double (plus tax) has been negotiated by the AAID at the Marriott Inner Harbor at Camden Yards in Baltimore.

More information and registration is available online at www.aaid.com.

The following programs will be presented:

CBCT Implant Planning: Digital Solutions from a Laboratory Perspective

Joe “Ambrose” D’Ambrosia, CDT

Reverse Engineering in Digital Smile Design

Alain Méthot, DMD

Innovations in Digital Implantology

Gilbert Tremblay, DMD, DABOIID

SEO Marketing: How Do I Keep Up and Should I Do More?

Adam Foleck, DMD, FAAID, DABOIID

Technology to Enhance Your Practice

Marty Jablow, DMD

Fixed Implant Prosthetic Considerations

Shankar Iyer, DDS, MDS, FAAID, DABOIID

**A Conversation with Dr. Leonard Linkow
Planning the Rehabilitation of an Edentulous Arch**

Lou Dipede, DMD



Photo courtesy of Visit Baltimore

Digital Platform for Implant Dentistry: From Surgery to Final Restoration

Dr. Dean Vafiadis

Soft Tissue Management in Implant Therapy

John F. Hamrick, DMD, FAAID, DABOIID

Restoring the Edentulous Arch Utilizing Angulated Abutments and CAD-CAM Frameworks

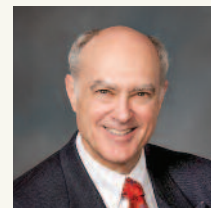
John Minichetti, DMD, FAAID, DABOIID

Protocols to Avoid Complications and Failures with the New Digital Workflow

Scott Ganz, DMD ▶

Dr. Edward Amet honored by ACP

Edward Amet, DDS, FAAID, DABOIID, received the Prosthodontic Private Practice Award during the 2014 American College of Prosthodontists' Annual Awards and President's Dinner on Friday evening, November 7, 2014 in New Orleans, Louisiana. ▶



Dr. Wu Wins Membership Raffle

Patrick Wu, DMD of Richmond, British Columbia, has won a free registration for the Academy's 64th Annual Educational Conference Meeting that will be held in Las Vegas, October 21 – 24, 2015. He won the registration in the drawing that included the 1,591 members who paid their 2015 dues by December 31, 2014. Dr. Wu joined the Academy in 2012 and attended the 2013 New Jersey MaxiCourse®. ▶



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A separate registration form must be completed for each attendee, including office staff, spouse, family members and guests. Please print clearly or type. Any corrections, modifications or additions must be submitted in writing.

CONTACT INFORMATION (Please write legibly.)

Last Name: _____ First Name: _____ Degree(s): _____

Address: _____ City: _____

State: _____ Zip: _____ Country: _____

Phone: _____ Fax: _____ Email: _____

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AGD Member #: (Required if AGD Member registering at AAID Member rates) _____

AAID provides exhibitors with a list of registrants prior to and after the meeting. Check here if you want to be excluded from that list.

Meeting Registration Until March Mania

	By 3/31/15	By 9/15/15	After 9/15/15
____ AAID Associate Fellow/Fellow/Diplomate*	\$1045	\$ 1145	\$1245
____ AAID General Member*	\$1095	\$ 1195	\$1295
____ AGD Member*	\$1095	\$ 1195	\$1295
AGD Member # required			
____ NonMember PLUS! Dentist *	\$1245	\$1345	N/A
[2015 AAID Membership PLUS Registration]			
____ Nonmember*	\$1445	\$1545	\$1645
____ Technician	\$ 395	\$ 395	\$ 445
____ Life & Retired Member	\$ 295	\$ 295	\$ 295
____ Office Staff	\$ 395	\$ 395	\$ 445
Doctor's Name _____			
____ Student	\$ 150	\$ 150	\$ 150
____ Spouse Name _____	\$ 295	\$ 295	\$ 295
____ Guest Name _____	\$ 295	\$ 295	\$ 295

* Includes one (1) President's Celebration ticket

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All refunds are subject to a \$50 administrative fee regardless of when requested or the reason. Requests for refunds must be made in writing and received by September 24, 2015 for a full refund (less the \$50 administrative fee). Between September 25, 2015 and October 1, 2015, a 50% refund (less the \$50 administrative fee) will be given. **Due to advance commitments to the hotel, no refunds will be made after October 1, 2015.**



AMERICAN ACADEMY
OF IMPLANT DENTISTRY

American Academy of Implant Dentistry is an ADA CERP Recognized Provider. ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of Dentistry. American Academy of Implant Dentistry designates this activity for 20 continuing education credits.

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The current term of approval extends from June 1, 2012 to May 31, 2015
 Provider ID# 214696

AAID Membership Ambassadors

AAID Membership Ambassadors know firsthand how membership in the Academy helps dentists establish or expand their expertise in implant dentistry and encourage their colleagues to join the AAID.

We would like to thank the Membership Ambassadors who have referred colleagues as new members

between August 21, 2014 and December 10, 2014.

Thank you **Ashok Patel, DMD**, from Waltham, MA for referring 13 colleagues.

Thank you for referring **two colleagues to the Academy**.

Jay Elliott, DDS, from Houston TX

Thank you for referring a **colleague to the Academy**.

Louie Al-Faraje, DDS, from San Diego, CA
Dr. Byounglae Cho, from Yong-in, South Korea
Vincent DiMento DMD, from Syracuse, NY
Randy Greenberg, DMD, from Wallingford, CT
Peter Kim, DMD, from Burnaby, BC, Canada
Carl Misch, DDS, MDS, from Beverly Hills, MI
Don Preble, DMD, from Altamonte Springs, FL
Dr. Christian Schuh, from Passo Fundo, Brazil

Would you like to be an AAID Membership Ambassador? Simply encourage your colleagues to join the AAID. Offer

your colleagues a discount on their first year's membership dues by having them specify your name in the "How did you learn about the AAID?" section of the membership application. Your colleague saves \$50 on their 2015 dues by simply placing your name on the referral line.

Refer a member by November 1, 2015, and be entered into a drawing for 2016 AAID membership dues up to a \$600 value.

If you would like to request membership applications, contact the Headquarters Office at info@aaid.com or by phone at 312-335-1550. ▶

Congratulations to Craig Cooper, DDS, FAAID, DABOI/ID

Dr. Craig Cooper of Indianapolis, IN, won a drawing for the free 2015 AAID membership dues. He was selected in the drawing of those who referred a new member to the Academy during 2014. Any member who refers a new member is entered into the annual drawing. The more referrals you make, the more entries you receive.

AAID played major role at 2014 GNYDM

The American Academy of Implant Dentistry presented nine programs at the 2014 Greater New York Dental Meeting including the broadcast of a live surgery. Plans are in place to participate again in 2015.

Topics and presented included:

Opportunities and Challenges of Digital Imaging and Treatment Planning
Natalie Y. Wong, DDS, FAAID, DABOI/ID

Treatment Planning for Success

Jaime L. Lozada, DMD, FAAID, DABOI/ID

Soft Tissue Complications around Implants: Management and Prevention

Nick Caplanis, DMD, MS, FAAID, DABOI/ID

Immediate vs. Delayed Socket Placement: What We Know, What We Think We Know, and What We Don't Know

Dennis Tarnow, DDS

Address Complications in the Esthetic Zone

Joseph A. Leonetti, DMD, FAAID, DABOI/ID

John Minichetti, DMD, FAAID, DABOI/ID

Autogenous Grafting Options for Dental Implants and Immediate Tooth Replacement in the Esthetic Zone

Joseph Kan, DDS, AFAAID

Alan S. Herford, DDD, DMD

Jaime L. Lozada, DMD, FAAID, DABOI/ID

Controlled Ridge Splitting as an Alternative to Block Grafting

Suheil Boutros, DDS, MS, DABOI/ID

Solutions for Fixed Implant Prosthodontic Failures

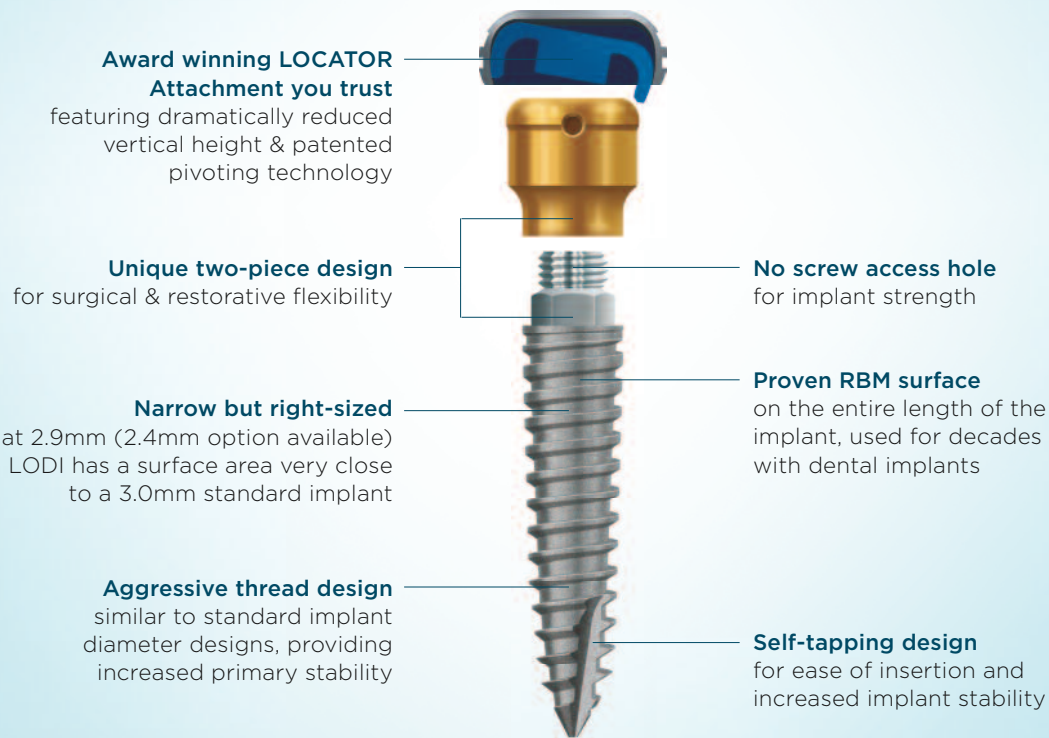
Shankar Iyer, DDS, MDS, FAAID, DABOI/ID

Hands-on Socket Preservation and Bone Grafting

John Minichetti, DMD, FAAID, DABOI/ID ▶

THIS IS NO TEMPORARY IMPLANT

Hundreds of clinicians around the world have realized what sets the **LOCATOR® Overdenture Implant (LODI) System** apart from their past experiences with “mini” implants—sometimes perceived as temporary implants. LODI is a reliable and cost effective narrow diameter overdenture implant that performs like a standard implant.



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NEW!

Industry News

Dental Implants & Prosthetics (Implants, Crowns & Bridges, Dentures, Abutments) Market — Current Trends, Opportunities & Global Forecasts To 2018

The global dental implants and prosthetics market is estimated to be worth \$6.4 billion by 2018.

The global market is segmented by implants, prosthetics, and geography. The dental implants market is classified by materials into titanium and zirconium. Titanium market is further analyzed by stages and by connectors. The prosthetics market covers the crowns and bridges, dentures, and abutments. The crowns and bridges market is further analyzed by materials.

The market is mainly driven by the rising edentulous population, increasing adoption of advanced dentistry in the developed countries, increase in disposable incomes, and increasing awareness of dental care. However, the economic slowdown and limited reimbursement inhibits the growth of the market to a certain extent.

Titanium implants and crowns and bridges will continue to drive and dominate the market. Furthermore, all-ceramics crowns and bridges are also expected to drive the growth of the crowns and bridges market. The intro-

duction of the computer-aided design/computer-aided manufacturing (CAD/CAM) technology has drastically reduced the treatment time. Crowns designed through CAD/CAM often fit better when compared to traditionally designed crowns, and they are also available at lower costs than traditional crowns. These factors will drive the market for all-ceramic crowns across the world.

There is an increasing demand for CAD/CAM all-ceramic restorations due to their superior aesthetics and improved fitting. The CAD/CAM technology has the potential to lower production costs. More than 20% of all prosthetic elements were produced by CAD/CAM in 2012. Though the majority of prosthetic elements are still made manually, the use of CAD/CAM prosthetic elements continues to increase due to the advantages of the CAD/CAM technology over conventional technologies.

By 2018, Europe will continue to drive and dominate the dental implants and prosthetics market. The market share of this region will decrease slightly to 40.1%, primarily due to the increase in demand for dental implants and prosthetics in Asia-Pacific and

in some Latin American countries. The growth of the Asian market will primarily be driven by China and India. This is mainly attributed to the rising disposable incomes, increased focus by major players, and the ongoing development of these economies.

However, low awareness levels and lack of proper distribution channels in this region restrain the growth of this market to a certain extent. The North American



market is expected to grow at a higher pace than Europe mainly due to lower penetration and the high adoption rate of advanced dentistry. However, the high cost of dental solutions as compared to emerging countries inhibits the growth of the North American market to a certain extent.

The major players in this market include Nobel Biocare Holdings AG (Switzerland), Straumann (Switzerland), Dentsply International (U.S.), Zimmer Dental (U.S.), Biomet 3i (U.S.), BioHorizons, Inc. (U.S.), Ivoclar Vivadent AG (Liechtenstein), and 3M Company (U.S.).

Straumann (Switzerland) and Nobel Biocare

(Switzerland) were the leading players, together accounting for around 35% to 40% share in the global dental implants market in 2012. Straumann has a broad product portfolio in the premium segment of the industry and offers a wide range of implants that are priced at multiple levels. The company has a strong network of wholly owned subsidiaries, located in Europe, North America, Asia-Pacific, and South America. The company strategically concentrates on agreements and collaborations with other stakeholders to strengthen its marketing capabilities in the dental implants market. It also aims to improve the process of developing products from single-tooth restorations to edentulous cases through innovation, computerized design, and automated manufacturing of implants and tooth restorative solutions.

Despite the competitive pressure by local players, the key contributors are still expected to retain their leading positions in the global market. This is primarily supported by continuous investments by these companies in research and development and also by their strong global presence. Therefore, the top three companies are expected to maintain their leading positions with around 50% share of the

dental implants industry in the next few years.

First Live Digital Impression for Full-Arch Implant Restoration with the Imetric Chair Side Solution (CSS)



Imetric has successfully launched a revolutionary new optical scanner for taking full-arch digital implant impressions. On November 8, 2014, the first patient case was accomplished live at WhiteCap's Annual Summit in Midway, Utah, in close collaboration with the WhiteCap Institute.

Dr. P.K. Clark (Clinical Director of WhiteCap Institute) moderated the patient surgery in front of 150 dental professionals from all over the country. After the guided insertion of seven implants in the maxilla, the digital impression was taken by Dr. Woods Woolwine (Clinical Director of WhiteCap Institute San Antonio). For this purpose, special Imetric ScanAdapters were placed immediately and their positions captured with the new optical scanner. The complete procedure took less than 45 seconds. The patient was leaving the office functionally and esthetically

restored with a temporary restoration placed right after surgery.

The product will be presented at LabDay and IDS 2015. Updates on this patient case will follow after osseointegration of the implants when the final prosthetic restoration is placed.

For more information, visit www.imetric.com or www.whitecapinstitute.com

ImplanTape Introduces New Product



ImplanTape Inc. introduces a unique, safe and easy way to protect abutment screw heads. The pre-cut, 2" x 1/2" Teflon tape allows for easy insertion prior to the final or temporary restoration. Each card has 20 pre-cut pieces that peel off to save time and the hassle of cutting tape from a roll. Much easier to remove than cotton, Gutta-percha or silcon, the ImplanTape removes in one piece by simply grabbing it with a cotton plier or explorer. Sheets can be sterilized in a dry heat system. They are packaged 200 pieces per kit. Visit us at Implantape.com or call 800-365-2839 to order or request free samples. Priced at \$24.99 per kit.

Summary of Actions Taken by Board of Trustees

November 4, 2014, Orlando, FL

- **Approved** 2015 Committees
- **Contracted for a 20% discount** for AAID members to access Dental Campus online offerings
- **Maintained dues rate** for General Members at \$345
- **Established recent graduate dues** at zero for first three years after graduation, \$100 for 4th year, and \$200 for 5th year, with regular general member dues rate thereafter
- **Retained Allen Press** as publisher of the *Journal of Oral Implantology* for one additional year
- **Approved the 2015 Fiscal Year Budget** with addition of additional \$90,000 for public relations/marketing and \$40,000 additional legal fees for Texas lawsuit

ZEST Anchors Introduces CHAIRSIDE™ — A New and Unique Attachment Processing Material
ZEST Anchors LLC (ZEST), the manufacturer of the trusted LOCATOR® Attachment and LOCATOR Overdenture Implant (LODI) Systems, introduces the company's newest product for overdenture cases — CHAIRSIDE Attachment Processing Material.

ZEST has a long history of producing superior overdenture products and clinicians will find that CHAIRSIDE Attachment Processing Material is no

different. CHAIRSIDE is designed for ease of use and predictability when processing attachment components into overdentures, including ZEST's LOCATOR and SATURNO™ Denture Caps. Clinician input contributed to a formulation that has the most sought after handling characteristics, which requires no primer, and is self-curing — all at a reduced cost per case, compared to the leading brands.

ZEST is convinced that you will quickly realize the benefits CHAIRSIDE will bring to your practice. To find out more, please call 800-262-2310 or visit www.zestanchors.com.



AAID Annual Educational Conference Was Magical

Over 1,500 flocked to Orlando to attend AAID's 63rd Annual Educational Conference and were greeted by the Academy's very own wizard, **Dr. John Minichetti**. The attendees learned the latest about implant dentistry through more than 70 different programs over three-and-one-half days.

Hands-on half-day courses allowed attendees to don gowns and gloves and pick up instruments to learn new techniques on pig jaws. In addition to over 20 different workshops, there were ten concurrent sessions repeated twice on Friday afternoon, giving attendees choice of speakers and topics.

A record number of ven-

dors exhibited their products and services, with nearly 90% of attendees reporting that they purchased or made a decision to purchase as a direct result of the conference.

Although the rooms were full with practicing dental professionals gaining practical implant education, there was still time for all to enjoy themselves. The Welcome Reception and Implant Expo Reception were preludes to the always fun President's Celebration. Members and guests enjoyed photo ops on the red carpet, magicians, and a band to dance away the evening.

For those who missed attending the Main Podium programs,

streaming media can be ordered and watched at time most convenient by visiting AAID's online learning center on the AAID website (www.aaid.com). Photos of the activities and atten-

dees can be also found on AAID's website.

Plan to attend AAID's 64th Annual Implant Dentistry Educational Conference in Las Vegas, Nevada, October 21 – 24, 2015. ▀



Dr. John Minichetti (Center) is joined on the red carpet by others enjoying AAID's President's Celebration.



Hands-on programs are a hallmark of AAID's Annual Implant Dentistry Educational Conference.



Attendees at AAID's Implant World Expo were in a buying mood.

American Academy of Implant Dentistry Announces Presentation Award Winners

The American Academy of Implant Dentistry (AAID) announced the award winners in poster, table clinic, and abstract presentations the recently concluded 63rd Annual Meeting.

POSTERS

1st Place

“Assessment of Dimensional Changes of Grafted Sinus Using CBCT”

Mina Nishimoto, DDS, *et al*
Advanced Education Program in Implant Dentistry School of Dentistry; Loma Linda University

2nd Place

“Osseodensification Increases Primary Implant Stability and Maintains High ISQ Values During First Six Weeks of Healing”

Salah Huwais, *et al*
Private practice, periodontology and implant dentistry, Jackson, Michigan

3rd Place

“Long-Term Radiographic and Clinical Outcomes of Regenerative Approach for Treating Peri-Implantitis: A Systematic Review and Meta-Analysis”

Vahid Khoshkam, *et al*
Resident of Advanced



The winning poster presentation.



Attendees learn the latest research and clinical techniques up close and personally through table clinics.

Periodontology Program;
University of Southern
California

TABLE CLINICS

1st Place

“Comparison of Platelet Rich Fibrin”

Ali Shirali
Associate Professor in
Periodontology
Department; Bezmi'alem
Vakif University

2nd Place

“Histologic and Histophometric”

Alper Gultekin
Research Assistant,
Department of Oral
Implantology, Istanbul
University Faculty of
Dentistry

3rd Place

“Immediate Provisionalization with a CAD-CAM Temporary Abutment and Crown: A

Guided Soft Tissue Healing Technique”
Keerthi Senthil, DDS
Loma Linda University

ABSTRACTS

1st Place

“Dental Implantology in the Era of Intensity-Modulated Radiation Therapy (IMRT) and Dental Dosimetric Contouring (DDC)”

Ryan S. Lee, DDS, MPH,
MHA

Assistant Clinical Professor;
NYU College of Dentistry in
the Dept. of Oral and
Maxillofacial Pathology,
Radiology, and Medicine

2nd Place

“Biomimetic Scaffolds in Combination with Bone Morphogenetic Protein-2 – for Regeneration of a Critical-Sized Defect. An Animal Study”

Jose Reuss
Master of Sciences
Candidate; Complutense
University

3rd Place

“Simplified Minimally Invasive Antral Membrane Elevation Technique: Clinical and Radiographic Results”

Georgios Kotsakis
Resident, Advanced
Education Program in
Periodontology, University
of Minnesota

2014 Associate Fellows



Rabih Abi Nader, BDS, Dubai, United Arab Emirates, received his dental degree from Lebanese University in 1998. He completed the 2013 Asia MaxiCourse®.



Gary Bauman, DDS, MS, Lutherville, MD, received his dental degree from the University of Maryland in 1985 and received his Masters in Science from Towson University.



Tharik Binthiyaz, MDS, Abu Dhabi, United Arab Emirates, received his dental degree from Meenakshi Ammal Dental College (Chennai, India). In 2005 Dr. Binthiyaz received a Specialty Board Certification from the Association of Oral and Maxillofacial Surgeons of India and completed the Asia MaxiCourse® in 2010.



Raymond Cros, DMD, Rancho Mirage, CA, received his dental degree from Temple University in 1998 and is a graduate of the 2013 Loma Linda MaxiCourse®.



Miriam Alhashimi, DDS, Mesa, AZ, received her dental degree from State University of New York at Buffalo in 1998. She completed the Georgia MaxiCourse® in 2011.



Jeffrey Behar, DDS, Towson, MD, earned a dental degree from Georgetown University, in 1988. From 1982-1985 Dr. Behar served as part of the United States Navy in Great Lakes, IL. He was also a participant of the 2009 New York MaxiCourse®.



YunHee Choi, DDS, MS, Seoul, South Korea, received her dental degree from Yonsei University College of Dentistry (Seoul, Korea) in 1998. In 2003 Dr. Choi attended Korea University Graduate School and received her Masters of Science. In 2010, she completed the Korea MaxiCourse®.



Aaron Cruthers, DDS, Racine, WI, received his dental degree from the University of Minnesota in 2000.



Jason Battah, DMD, Montreal, QC, Canada, is a graduate of Universite Laval in 1998. He completed the 2013 Toronto MaxiCourse®.



Kavitha Biji, BDS, Kerala, India, received her dental degree from Royal Dental College, Palakkad in 1998. She completed the Asia MaxiCourse® in 2012.



Jim Delgado, DDS, Albany, OR, received his dental degree from Creighton University in 1998. He is a graduate of the 2009 Oregon MaxiCourse®.



Brian Dillon, DDS, Redmond, WA, received his dental degree from the University of Washington, Seattle in 1998. He completed the Vancouver MaxiCourse® in 2011.



Chie Ee, DMD, Cape May, NJ, received his dental degree from the University of Pennsylvania in 1998. He completed the 2011 New Jersey MaxiCourse®.



Wael El Bokle, BDS, Abu Dhabi, United Arab Emirates, received his dental degree from Ainshams University Faculty of Dentistry (Cairo, Egypt) in 1998. He completed the 2010 Asia MaxiCourse® and received a certification in Endodontics from Cairo University in Egypt.



Meisam Faeghi Nejad, DDS, from Loma Linda, CA earned his dental degree in 2007 from Aiman University of Science and Technology (Dubai, United Arab Emirates). He completed the Advanced Education in Implant Dentistry program at Loma Linda University in 2014.



Hugh Flax, DDS, Atlanta, GA, received his dental degree from Emory University in 1998 and is a graduate of the 2012 Georgia MaxiCourse®.



Kamyar Forghanparast, DDS, Tehran, Iran, received his dental degree from University of California, Los Angeles, (UCLA) in 1998. He completed the 2011 Iran MaxiCourse®.



Iham Gammas, DMD, Boston, MA, received his dental degree from Boston University in 1998. He is a graduate of the 2010 Georgia MaxiCourse®.



Michael Gillis, DDS, Halifax, NS, Canada, received his dental degree from Dalhousie University in 1994 and is a 2011 graduate of the Georgia MaxiCourse®.



Harikrishnan Gopalakrishnan, MDS, Sharjah, United Arab Emirates, received his dental degree from Mangalore University, College of Dental Surgery (Karnataka, India) in 1998. Dr. Gopalakrishnan also received an MDS in Periodontics from Government Dental College, Trivandrum. In 2009, he completed Asia MaxiCourse®.



Christopher Griffin, DMD, Greenwood, SC, received his dental degree from the Medical University of South Carolina in 1998. In 2011, he completed the Georgia MaxiCourse®.



Faisal Hashwani, Dar Es Salam, Tanzania, received his dental degree from Fatima Jinnah Dental College (Karachi, Pakistan) in 1998. He completed the 2010 Asia MaxiCourse®.



Juan Carlos Hernandez, DDS, Duluth, GA, received his dental degree from New York University in 1998. Dr. Hernandez received an Orthodontic Certificate from New York University in 2004 and completed the 2010 Georgia MaxiCourse®.



Matthew Holtan, DDS, Naples, FL, was part of the 1998 graduating class from Marquette University and he completed the Georgia MaxiCourse® in 2012.



Jeffrey Kobernik, DMD, Roseburg, OR, received his dental degree from Oregon Health and Science University in 1998. He completed the Oregon MaxiCourse® in 2011.



William McFatter, III, DDS, Thomasville, GA, received his dental degree from Emory University in 1981. In 1982 Dr. McFatter completed a General Practice Residency at Charlotte Memorial Hospital, and in 2012 he completed the Georgia MaxiCourse®.



Robert Milner, DDS, Mission Viejo, CA, received his dental degree from Marquette University in 1998. He was part of the 2010 Loma Linda MaxiCourse®.



Wally Hui, DDS, Rosemead, CA, received his dental degree from University of Hong Kong in 1998. He completed the 2008 Loma Linda MaxiCourse®.



Chul Kwon, DDS, Incheon, South Korea, received his dental degree from Yonsei University College of Dentistry (Seoul, Korea) in 1998. In 2012, he completed the Korea MaxiCourse®.



Aina Mesquida, DDS, from Palma de Mallorca, Spain, is a 2009 graduate from the Universidad Alfonso X El Sabio (Madrid, Spain). She completed the Advanced Education in Implant Dentistry program at Loma Linda University in 2014.



Hong Ki Min, DDS, Busan, South Korea, received his dental degree from Wonkwang University Dental College (Iksan, Korea) in 1998. He completed the 2011 Korea MaxiCourse®.



Thomas Kaufmann, DMD, PhD, Rostock, Germany, received his dental degree from University of Rostock (Rostock, Germany) in 1997. He earned a degree in Oral Surgery from the German Dental Association in 2004 and in 2008 received a Board Certification from the German Periodontics Association.



Chung Hwan Lee, DDS, MS, PhD, Daegu, South Korea, received his dental degree from Lyceum-North-western University (Dagupan City, Philippines) in 1998 and is a graduate of the 2013 Korea MaxiCourse®.



Polly Michaels, DMD, Spring Hill, FL, received her dental degree from Georgia Regents University (formerly MCG) in 1998 and is a graduate of the 2011 Georgia MaxiCourse®.



Sam Morcos, DDS, Westminster, CA, received his dental degree from Cairo University in 1998. In 2012, he completed the Loma Linda MaxiCourse®.



Vinh Nguyen, DDS, Brossard, QC, Canada, received his dental degree from McGill University in 1998.



Kris Pastro, DMD, Prince George, BC, Canada, received his dental degree from the University of British Columbia in 2001. In 2011, he became a graduate of the Vancouver MaxiCourse®.



Nghia Neal Pham, DDS, San Diego, CA, received his dental degree from Loma Linda University in 1998.



Brian Raskin, DDS, Garden City, NY, received his dental degree from New York University in 1998.



Christopher Reese, DDS, Claremont, NC, is a 1998 graduate of the University of North Carolina, Chapel Hill School of Dentistry. He completed the 2010 Georgia MaxiCourse®.



Nicholas Rodo, DDS, Orchard Park, NY, received his dental degree from State University of New York at Buffalo. In 2009, he completed the New York MaxiCourse®.



Tom Roozendaal, DMD, Duncan, BC, Canada, received his dental degree from the University of British Columbia in 1998. He completed the 2011 Vancouver MaxiCourse®.



Moustapha Saad, DDS, Tyre, Lebanon, received his dental degree from Lebanese University in 1998.



Hazim Sadeddin, DDS, from Arlington, VA earned his dental degree in 2003 from Jordan University of Science and Technology (Irbid, Jordan) and completed the 2009 Georgia MaxiCourse®.



Fatemeh Samani, DDS, Austin, TX, is a graduate from the University of Texas School of Dentistry. She completed the 2012 Las Vegas MaxiCourse®.



William Schlesinger, DDS, New York, NY, received his dental degree from State University of New York at Buffalo in 1998.



Nicholas Seddon, DMD, from West Vancouver, BC, Canada, graduated from the University of British Columbia, Faculty of Dentistry in 2006. He completed the 2011 Vancouver MaxiCourse®.



Keerthi Senthil, DDS, Fontana, CA, received her dental degree from Loma Linda University in 1998.



Dr. Rola Shadid, Tulkarm, Palestine, was a graduate from Jordan University of Science and Technology in 1998 and completed the 2006 Jordan MaxiCourse®.



John Sherman, DDS, Silver City, NM, received his dental degree from the University of Missouri at Kansas City in 1998. He completed the 2011 Las Vegas MaxiCourse®.



Chan Teng Yee, BDS, Kuala Lumpur, Malaysia, received his dental degree from University of Malaya (Kuala Lumpur, Malaysia) in 1998. In 2010, he completed the Asia MaxiCourse®.



Jeffrey Williams, DDS, Allen, TX, is a 1998 graduate of the Baylor College of Dentistry. He completed the 2012 Las Vegas MaxiCourse®.



Kendall Wood, DDS, Corvallis, OR, received his dental degree from Creighton University in 1998. He completed the 2011 Oregon MaxiCourse®.



Anil Rick Soordhar, DDS, from Milton, ON, Canada, received his dental degree at the University of Western Ontario in 2004 and is a 2008 graduate of the Georgia MaxiCourse®.



Shibu Thomas, MDS, Fujairah, United Arab Emirates, received his dental degree from the University of California, Los Angeles (UCLA) in 1998.



Steven Williams, DDS, Allen, TX, received his dental degree from Baylor College of Dentistry in 1998. He completed the 2012 Las Vegas MaxiCourse®.



Peter Zahedi, DMD, San Rafael, CA, received his dental degree from Boston University in 1998, and he completed the 2011 Las Vegas MaxiCourse®.



David Taler, DDS, Carmel, IN, received his dental degree from the University of Maryland in 1998.



Vijayanayagam Thuthikaran, BDS, Colombo, Sri Lanka, received his dental degree from University of Peradeniya (Sri Lanka) in 1998 and completed the Asia MaxiCourse® in 2010.



Byungho Won, Daegu, South Korea, received his dental degree from Kyungpook National University School of Dentistry in 1998 and completed the 2013 Korea MaxiCourse®.



Rana Zogby, DMD, Toronto, ON, Canada, received her dental degree from the University of British Columbia in 1998. She is a graduate of the 2012 Toronto MaxiCourse®. ▶

2014 Fellows



Allen Aptekar, DMD, Maple, ON, Canada, received his dental degree from the University of Saskatchewan in 2006. In 2007, he completed General Practice Residency at the University of Toronto, Sunnybrook Health Sciences Center. Dr. Aptekar became a Diplomate of the American Board of Oral Implantology in 2013.



Ali Fathi-Afshar, DDS, Edmonton, AB, Canada, received his dental degree from the University of Alberta. Dr. Fathi-Afshar earned a Certificate of Advanced Graduate Studies degree from Boston University in 2002 and became a Diplomate of the American Board of Oral Implantology in 2013.



Michael Fioritto, DDS, Mentor, OH, received his dental degree from Georgetown University in 1998. He completed the 2011 Georgia MaxiCourse® and in 2013 became a Diplomate of the American Board of Oral Implantology.



Lee Fitzgerald, DDS, Plano, TX, received his dental degree from the Baylor College of Dentistry in 1985. He completed the 2007 Georgia MaxiCourse® and became a Diplomate of the American Board of Oral Implantology in 2013.



Antoanela Garbacea, DDS, Redlands, CA, received her dental degree from the University of Medicine and Pharmacy (Romania) in 1998. Dr. Garbacea received certificates from Loma Linda University in Implant Dentistry and Prosthodontics. She became a Diplomate of the American Board of Oral Implantology in 2013.



Ira Goldberg, DDS, Succasunna, NJ, received his dental degree from the University of Michigan, in 1995. He did his postdoctoral education in Mountainside Hospital in Montclair, New Jersey. In 2013, Dr. Goldberg became a Diplomate of the American Board of Oral Implantology.



Alvaro Gracia, DMD, Norton, MA, received his dental degree from the Javeriana University (Colombia) in 1988. He went on to further his education in prosthodontics as well as receive his DMD from Boston University. In 2013 Dr. Gracia became a Diplomate of the American Board of Oral Implantology.



Bill Holden, DDS, Edmonton, AB, Canada, received his dental degree from the University of Alberta, in 1991. He completed the 2011 Vancouver MaxiCourse® and became a Diplomate of the American Board of Oral Implantology in 2013.



Koji Ito, DDS, Ise City, Mie-Prif, Japan, received his dental degree from the Aichi-Gakuin University in 1989. Dr. Ito received a Specialty Board Certification from the Japanese Society of Oral Implantology in 2005 and completed the 2009 Korea MaxiCourse®



Akash Lapsi, DDS, Mission Viejo, CA, received his dental degree from the Bharati Vidyapeeth Dental College (Pune, India) in 2002. In 2013, Dr. Lapsi became a Diplomate of the American Board of Oral Implantology.



Stephen Malki, DMD, River Edge, NJ, received his dental degree from the University of Medicine and Dentistry of New Jersey. He completed the 2002 New York MaxiCourse® and became a Diplomate of the American Board of Oral Implantology in 2011.



Dr. Osama Noorwali, Jeddah, Saudi Arabia, received his dental degree from the King Abdul Aziz University in 2001 and is a graduate of the 2011 Toronto MaxiCourse®.



Donald Jayne, DDS, from Seattle, WA, graduated dental school in 1975 from the University of Washington and completed a General Practice Residency at Illinois Masonic Medical Center in Chicago, IL in 1976. He is a 2013 Diplomate of the American Board of Oral Implantology.



Joseph Leonetti, DMD, Paoli, PA, received his dental degree from Tufts University in 1983. Dr. Leonetti completed an Anesthesia Fellowship Program at the Medical College of Pennsylvania in 1984 as well as an Oral Surgery Residency at the New York University Hospital. In 2013, he became a Diplomate of the American Board of Oral Implantology.



John Nikas, DMD, Voorhees, NJ, received his dental degree from the University of Pittsburgh in 1986 and a certificate in periodontology from Temple University in 1998. Dr. Nikas became a Diplomate of the American Board of Oral Implantology in 2008.



Cheryl Pearson, DMD, Lexington, KY, received her dental degree from the University of Kentucky, in 1981 and in 1982 completed a Hospital Residency at Tufts University. She is a graduate of the 2006 Georgia MaxiCourse®.



Linda Ribarich-Boehm, DMD, Oneida, NY, received her dental degree from Tufts University in 1982 and completed postdoctoral education programs at Maimonides Medical Center in Brooklyn, New York in 1984. Dr. Ribarich-Boehm completed the 2005 New York MaxiCourse®. ▸

New Affiliate Associate Fellow Category Created

By an overwhelming vote at the 2014 Annual Business Meeting in Orlando, the membership approved a Bylaw amendment creating a new membership category named Affiliate Associate Fellow.

Any member who has successfully passed the Part 1 written examination for Associate Fellow, but who has not yet completed the credentialing process, is eligible to become an Affiliate Associate Fellow.

Although not a credential and does not convey voting rights, this new membership status gives appropriate recognition for the accomplishments made by eligible members. Affiliate Associate Fellows receive the same member benefits as general members.

Any current AAID member can transfer his or her membership status by filling out the Application to Transfer Membership Status, which is found on the AAID Website at www.aaid.com. No additional payment is needed.

Affiliate Associate Fellows pay the same dues that they would as a general member. ▸



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Membership

NEW MEMBERS

The AAID is pleased to welcome the following new members to the Academy. The following members joined between September 24, 2014 and December 10, 2014. If you joined the Academy recently and your name does not appear, it will be listed in the next newsletter. The list is organized by country, by state and then alphabetically by city. Contact your new colleagues and welcome them to the Academy. You may find their contact information online in the Members' Section of AAID's web site. Scan the QR code to log into the Members' Section.



ARKANSAS

Dr. Adam DeLee
Hot Springs
Dr. Matt Teale
Hot Springs

ARIZONA

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Flagstaff
Dr. Adam Culver
Glendale
Dr. Tyler Ehrick
Glendale
Dr. Chang Kim
Glendale
Dr. Mikhail Korolyov
Glendale
Dr. Manoj Sharma
Litchfield Pk
Dr. Marcin Bednarski
Phoenix
Dr. Don McAdams
Phoenix
Dr. Andrew Anderson
Prescott
Dr. Amy Gavin
Scottsdale

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Alamo
Dr. Frederick Lin
Danville
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Dublin
Ms. Heather Whalen
Dublin
Dr. Jorge Rico
Elk Grove
Jorge Larrondo, DDS
Hemet
Dr. Nael Bachovr
Hillsborough
Eric Carl Appelin, DMD
Monterey
Jensen Lau, DDS
Monterey Park
Dr. Gurvinderjit Bhullar
Rocklin

Manlio Orozco, DDS
San Bernardino
Freddy Zambrano, DDS
San Bernardino

Dr. James Harris
San Diego
Lester Machado, DDS, MD
San Diego

Dr. Ryan Wallrich
San Diego
Dr. Audrey Nguyen
San Jose

Dr. Farhan Sattar
Tustin

David Lawrence Green,
DDS
Twentynine Palms
Dawud Abdul Muhaimin,
DDS
Vacaville
Dr. Dennis Su
Woodland

COLORADO

Dr. Jesse Friedman
Denver

CONNECTICUT

Dayton Cambra, DDS
Danbury
Michael R Egan, DDS
Glastonbury
Zachary Grillo, DMD
South Windsor

FLORIDA

Craig Meskin, DDS
Dania Beach
Dr. Kevin W Snyder
Jacksonville
Daniel Wahba, DDS
Lutz
Tigura Sankar Reddy,
BDS, MDS
Margate
Barry Levine, DMD
Tampa
Dr. Jaime Estrada
Tarpon Springs

German Gaitan Vargas,
DDS
The Villages

Dr. Kathleen Stevens
Yulee

Jason Mach, DMD
Zephyrhills

GEORGIA
Dr. Daniel Harvey
Cumming

HAWAII

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La Grange
Dr. Bryce Miller
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Ashraf Ahmad, DDS
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Cedar Lake

KANSAS

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Basehor

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Boston
Dr. Alessia De Vit
Boston
Gayda Gazi Abulshamat,
BDS
Medford
Luz Marina D. Jutras,
DMD
Methuen
Larry Lin, DMD
Springfield

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Allendale
Dr. Nabil Berry
Dearborn

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Eden Prairie

MISSOURI

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Joplin

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Columbia Falls

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Omaha

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Las Vegas
Dr. Alan S. Bills
Reno

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Raafat Soliman, DMD
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Clark
Eden Seitomer, DMD
Cranbury
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Denville
Brad M. Strober, DMD
Edison
Miloni Shah, DDS
Hamilton
Usha Polavarapu, DDS
Irvington
Omar Karim Armstrong,
DDS
Jersey City
Jared Sluka, DMD
Kinnelon
Olivia Yanni, DMD
Livingston
Vishali Nandiwada, DMD
Manalapan
Michael Cohen, DDS
Morganville

Jayasudha Samudra, DDS
North Brunswick

Dr. Eric L Murias
Northbergen

Niraj Patel, DDS
Orange

Elzbieta Paul, DDS
Piscataway

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DDS
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Dr. Gabriela Jude
Fernandes
Buffalo
Amit K. Dogra, DMD
Flushing
Ryan S. Lee, DDS
New York
Gaurav Mahindra, DDS
New York
Gauri A Savant, DDS
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Old Westbury
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DMD
Schenectady
Ebtihal M. Isleem, BDS
Staten Island

Stanley L. Shih, DDS
Tuckahoe
Adi Alghanem, BDS
Williamsburg

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Monroeville

PUERTO RICO

Juan I. Irizarry, DMD
Caguas

Ramón Colón, DMD
Humacao

Aligna Rodríguez, DMD
Ponce

Ernesto Curbelo, DMD
Trujillo Alto

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Dr. Derek Renfroe
Clarksville

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Dr. Think Luong
Amarillo

Dr. Yong Ho Cho
Dallas

Dr. Myoung Hwang
Houston

Dr. Shirley Parikh
Houston

Dr. Simone Ellis
Pearland

Sathya Mahendrarajah,
DDS

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Dr. Dhanish Patel
Sunnyvale

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Orem

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Bristow

Timothy Perez, DMD
Newport News

Dr. Sonia Dilolli
Reston

Mina Saif, DMD
Winchester

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Bellevue
Dr. Larry Adatto
Seattle

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Dr. Christopher Buege
Altoona

Frank A Caputo, DDS
Cudahy

Matthew Eaton, DDS
Medford

James Gunelson, DDS
Stanley

Peter Lotowski, DMD
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Dr. Christian Schuh
Passo Fundo

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Dr. Sameer Syed
Leduc

Dr. Michael Smith
Raymond

BRITISH COLUMBIA

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Chilliwack

Dr. Alex Wong
Fort St. John

Dr. Emery Bland
Gibsons

Dr. Masoud Saidi
Langley

Dr. Heather Chisholm
Nanaimo

Dr. Gursimran Brar
Prince Rupert

Dr. Eric Chu
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Dr. Kitty Lam
Surrey

Dr. Avtar Virk
Surrey

Dr. Ghadir Alkhamees
Vancouver

Dr. Ali Hashemi
Vancouver

Dr. Amro Latif
Vancouver

Dr. Mike O'Brien
Vancouver

Dr. J. Lisa Rai
Vancouver

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Dr. Mario Silva
Thompson, MB

ONTARIO

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Brampton

Dr. Weychang Shieh
Brampton

Dr. Kamdi Irondi
Brockville

Sinan Victor Hannoudi,
DDS

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Sunny Sehgal, DDS
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Jonas Stefani, DDS
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Eric Bellis, DDS
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Dr. Rejane Correa
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Los Millones, Santo Domingo

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Giza

Dr. Rehab El-Sharkawy
Giza

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BDS

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Hyderabad

Dr. Vijay Shekhar

Dr. Harleen Thukral
Rohtak

Anju Agadi, BDS
Bangalore

Dr. Mohammed Asif
Bangalore

Rasheed M Khan, BDS
Bangalore

Shahul Hameed Sattar,
BDS

Bangalore

Dr. Priya Sridhar
Bangalore

Runa Hemprakash Khale,
BDS

Dadar

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Mysore-

Priyanka Chandrakant
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Vaisai West

Smitha Annie Jacob, BDS
Munnekolala

Varun Acharya, BDS
Chennai

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Hyderabad

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Fuentes, DDS

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Rodriguez
S.M.P

Jhonny Luis Pacahuala
Palomino, DDS

San Borja

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Fard, DDS
Doha

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Alhadlaq

Riyadh

Abedel Hadi Abdallah
Ahmed, BDS

Al-Bukarriah

Shahid Bashir, BDS
Buraidah

Ahmed Mohamed Elsa
Adam, BDS

Buraydah

Dr. Abdelrhman Omer
Elbasher

Qassim

Dr. Fares Hassan Saeed Ali
Abha

Dr. Firas Othman Ali Al
Jabour

Al Hasa

Dr. Mohammed Abid
Hussain

Al Medina Al

Munawara

Dr. Badr Majed Othman
Al-Madinah

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Damman

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Abdulfattah, DDS

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Alsubail, BDS

Jeddah

Dr. Rizwan Ameer

Jeddah

Mona Abdulrahman

Eldeeb, BDS

Jeddah

Ahmed Kazim Hamid

Elsinnary, BDS

Jeddah

Mayada Mohammed Kheir

Kabbashi, DDS

Jeddah

Eyad Abdul Kader, DDS

Jeddah

Dr. Ahmad Walid Koniali

Jeddah

Rana Moh'D Koussayer,
DDS

Jeddah

Ibtihal Hussein Sharif,
DDS

Jeddah

Dr. Rabab Abdulaziz Tayeb

Jeddah

Abir Nadim Zandaki, DDS

Jeddah

Mouhmad Bashar

Abdullah Alkabbani,
DDS

Madinah

Mohammed Burhan

AlKhatib, DDS

Madinah

Nabeel Tamer Hidar, MDS

Makkah

Dr. Abdul Aziz Albaker

Rayadh

see New Members p. 40

AAID Welcomes New Student Members

It's never too early for dental students to become familiar with the practice of implant dentistry. And there is no better place for them to learn than from the leading organization of dental implant experts in the world. AAID's electronic membership, open only to dental students, has been in place for several years and we currently have over 600 dental student members who are entitled to online access to Academy information and resources. We are starting a new practice of identifying them in the AAID News and welcoming them to the Academy. Following is the list of new electronic dental student members who joined between September 24, 2014 and December 10, 2014.

Hans Adams
University of Nebraska
Audrey Aden
University of Nebraska
Jeremiah Alcaza
University of Texas at Houston
Austin Amos
University of Texas at Houston
Austin Anderson
University of Texas at Houston
Mariangela Arata
University of Texas at Houston

Brady Atkins
University of Texas at Houston
Drew Attansio
University of Nebraska
Lauren Auzenne
University of Texas at Houston
John Aylmer
Nova Southeastern University
Kim Barth
University of Nebraska
Chris Bedoya
New York University
Fred Benzenhafer
Nova Southeastern University

Htet Bo
Nova Southeastern University
Robert Brigone
New York University
Tram Bui
University of Texas at Houston
Matthew Bury
University of Nebraska
Kevin Carbonell
Nova Southeastern University
Amandeep Chadda
Nova Southeastern University
Ilene Choal
University of Nebraska

Jennifer Chu
New York University
Xiaoxi Cui
University of Nebraska
Kelly Cundy
Nova Southeastern University
Casey Cutler
University of Nebraska
Jason Dalc
Nova Southeastern University
Erica Dickmeyer
University of Nebraska
Megan Eitemiller
University of Nebraska
Christian Escobar
University of Texas at Houston

New Members

continued from page 39

Abdullah Alfarraj Aldosari, BDS
Riyadh
Ahmed Shihab Al-Mashhadani,
DDS, MSC
Riyadh
Khalid Hussain Mahmoud, BDS
Riyadh
Dr. Mohamad Abduwahab
Mahmood Alkhayyal
Yaser Yaser Ali Almustafa, DDS
Abdulhalim M Gharib, DDS
Dr. Adnan Ali Ishgi

SOUTH KOREA

Chungok Lee, PhD
Kyunggi-Do
Yang Hee June, PhD
Dongdaemon-gu, Seoul
Bok Sung Chul, MD/MS
Gangnam-gu
Dr. Sangwook Park
Icheon-si

Chungok Lee, PhD
Kyunggi-Do
Dr. BonWook Goo
Seoul
Dr. Chulwoo Jang
Seoul
Seungun Jin, DMD
Seoul
Umh Yong Kook, PhD
Seoul
Ki-Hong Kim, DDS
Seo-gu, Incheon
Dr. Jaesung Jo
Sungju Gun
Dr. Jungshan Shin
Whasung

UNITED ARAB EMIRATES

Dr. Maribel Jamel Al Botros
Abu Dhabi
Dr. Marwan Atrouni
Abu Dhabi
Saba Abd. El. Kareem Gad-Alla,
DDS
Abu Dhabi

Dr. Mohammed Awny
AbuAlkass
Abu Dhabi
Dr. Fadi Fouzi Abou Al Fadel
Abu Dhabi
Dr. Pritibha Bhojwani
Abu Dhabi
Dr. Nabil Mounif El Khatib
Abu Dhabi
Dr. Doreen Mathew
Abu Dhabi
Dr. Shaji Joseph Mathew
Abu Dhabi
Dr. Mohamad Bachir
Dubai
Kaizad Gustad Kermani, BDS
Dubai
Dr. Ali Samanian
Dubai
Dr. Tamim Tulimat
Dubai
Dr. Mannzoor Ahamed
Sharjah

Sara Fallahi
Nova Southeastern University
Zhiyong Fan
University of Texas at Houston
Austin Faulk
University of Texas at Houston
Mariah Fields-Cooper
University of Texas at Houston
Brent Ford
Nova Southeastern University
Heather Gonzalez
University of Texas at Houston
Rachit Goyal
Nova Southeastern University

Brain Graves University of Texas at Houston	Richard Lam University of Texas at Houston	Lara Raney University of Texas at Houston	Brianna Starr University of Texas at Houston
Kenneth Gray University of Texas at Houston	Lisa Liou University of Texas at Houston	Marc Rasmusseu Nova Southeastern University	Aaron Stroh University of Nebraska
Dane Griggs University of Nebraska	Tanya Sue Maestes University of Texas at Houston	Olivia Rauschenbach University of Nebraska	Jessica Sung Nova Southeastern University
Andres Marquez Guzman New York University	Trey Miller University of Texas at Houston	Steven Ready University of Nebraska	Kimberlie Temple University of Texas at Houston
Trevor Hart Nova Southeastern University	Baylee Mink University of Nebraska	Adrienne Rhodes University of Texas at Houston	Victoria Tindol University of Texas at Houston
Chris Haskell University of Nebraska	Elizabeth Monacelli University of Nebraska	Nemesro Rodriguez University of Texas at Houston	Phuong Tran University of Texas at Houston
Maggie Hedlund University of Nebraska	Gregory D. Montgomery Creighton University	Jillian Rose Nova Southeastern University	Richard Tran University of Texas at Houston
Jon Hinz University of Nebraska	Geoffrey Morris Nova Southeastern University	Melody Salehi University of Texas at Houston	Thomas Tran University of Texas at Houston
Derek Hoffman University of Nebraska	Samruddhi Nakhwa New York University	Taylor Schaar University of Texas at Houston	Marcelo Uriegas University of Texas at Houston
Lizzie Hungerford University of Nebraska	William Olafson Nova Southeastern University	Azar Shadie Nova Southeastern University	Amalie Vance University of Texas at Houston
George Jabbour University of Texas at Houston	Katelyn Olenich University of Nebraska	Rasha Shammas University of Texas at Houston	Jon Vogel University of Texas at Houston
Nathan Jones Nova Southeastern University	Joshua Park University of Texas at Houston	Jeffrey Shiffman Nova Southeastern University	Katie Walker University of Nebraska
Sami Kawas University of Texas at Houston	Roshni Patel Nova Southeastern University	Caitlin Shultz University of Nebraska	Sarah Woernley University of Texas at Houston
Mona Khalaj Nova Southeastern University	Ellura Pepito University of Texas at Houston	Ahmed Sirage Nova Southeastern University	Katie Womack University of Texas at Houston
Maryam Khazaeizadeh University of Texas at Houston	Hieu Pham University of Texas at Houston	Jose Smillie Nova Southeastern University	Clara Yoo University of Texas at Houston
Zachary Kingsery Nova Southeastern University	Tiffany Pham University of Texas at Houston	Rari Soni Nova Southeastern University	Lianna Zabanal University of Texas at Houston
Diana Kinyua Nova Southeastern University	Jeremy Pope University of Texas at Houston	Jessica Sosa University of Texas at Houston	William Zenga Nova Southeastern University
Russell Koteh Nova Southeastern University	Antonio Quantanilla University of Texas at Houston		

Continuing Education Bite

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 September – June
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 Web site: www.oraaidmaxicourse.com

Loma Linda University/AAID MaxiCourse®

Loma Linda, California
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 Continuing Dental Education
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 Loma Linda, CA 92354
 www.llu.edu/assets/dentistry/documents/cde/
 maxicourse2010.pdf

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October – August
 One week bi-monthly
 Abu Dhabi, United Arab Emirates; New Dehli, India; Bangalore India; Jeddah, Saudi Arabia
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 Web site: www.aaid-asia.org

Korea MaxiCourse®

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 Contact: Dr. Jaehyun Shim
 E-mail: dental-care@hanmail.net
 Web site: www.kdi-aaid.com

Puerto Rico MaxiCourse®

Ten sessions from September through June
 Contact: Miriam Montes, Program Coordinator
 Phone: 787-642-2708
 E-mail: mimontesmock@yahoo.com
 Web site: www.theadii.com

Ti-MAXImplant Maxicourse®

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 Ten 3-day weekends
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 Contact: Chantel Furlong
 E-mail: info@ti-maxicourse.ca
 Web site: www.ti-maxicourse.ca

University of Nevada Las Vegas MaxiCourse®

Contact: John Minichetti, DMD
 Phone: 201-871-3555
 E-mail: drminichetti@englewooddental.com
 Rutgers School of Dental Medicine
 Contact: Janice Gibbs-Reed
 Phone: 973-972-6561
 E-mail: gibbs@umd.nj.edu

Vancouver, British Columbia MaxiCourse®

Contact: Andrew Gillies
 Phone: 604-531-3344
 Email: andrew@implantconnection.ca

Iran ACECR TUMS Branch MaxiCourse®

Contact: Mohammad Ali Mostafavi, BDS, DDS
 Frank LaMar, DDS
 Phone: 585-305-4305
 E-mail: mamostafavi@yahoo.com
 flamar@rochester.rr.com
 Web site: www.jdtums.ir/aaid/

Courses presented by AAID credentialed members*

U.S. Locations

AAID Study Club/Mini Residency in Implant Dentistry

September – June, Bi-weekly
 100 hours CE credit
 Approved by NJ State Board of Dentistry
 Contact: Dr. Shankar Iyer
 E-mail: drsiyer@aol.com
 Web site: www.aaid-asia.org

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Zimmer Dental Training Course
 John C. Minichetti, DMD
 Contact: Lisa McCabe
 Phone: 201-871-3555
 Web site: www.englewooddental.com

Certified Training Course for the Er, Cr;YSGG Laser

Edward Kusek, DDS
 Contact: Kristi Meyer
 Phone: 605-371-3443
 Web site: www.drkusek.com/courses.html

Connecticut Dental Implant Institute

Joel L. Rosenlicht, DMD, Director
 * Advanced Bone Grafting
 * Basic Implant Dentistry
 * Advanced Implant Dentistry
 All courses feature live surgeries and hands-on model workshops Venue: Rosenlicht Oral & Facial Surgery Center, Manchester, CT
 Contact: Michelle Marcil
 Phone: (860) 649-2272
 E-mail: Michelle@jawfixers.com
 Web site: www.JawFixers.com

Fixed Removable Implant Treatment

Carol Phillips, DDS
 Contact: Melissa Martin
 Phone: 800-549-5000

Hands-on Training Institute

Dr. Ken Hebel
 Hands On Implant Training –
 Prosthetics, Surgery and Bone Grafting
 Contact: Kerri Jackson
 Phone: 888-806-4442 or 519-439-5999
 E-mail: info@handsontraining.com
 Web site: www.handsontraining.com
 Programs held throughout the year in Canada, New Jersey, California and Texas

Laser Pocket Reduction & Diode Training for the Dental Professional

Edward Kusek, DDS
 April 17 & 18, 2015
 Contact: Kristi Meyer
 Phone: 605-371-3443
 Web site: www.drkusek.com/courses.html

Live Surgical Prettau Zirconia Implant Bridge Course

Michael Tischler, DDS; Scott Ganz, DMD;
 Claudia Patch, DMD
 Tischler Dental Laboratory
 Woodstock, NY
 Contact: 845-679-2737
 Web site: www.prettauacourse.com

Linkow Advanced Implant Courses

Course Director: Dr. Michael Shulman
 Phone: 201-840-7777
 Contact: Amelia
 Phone: 551-655-1909
 E-mail: info@adiseminars.com
 Web site: www.adiseminars.com

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 E-mail: lisa@implantdentist.org
 Web site: www.midwestimplantinstitute.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

Pikos Implant Institute

Michael A. Pikos, DDS
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 Contemporary Soft Tissue Grafting
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 Advanced Bone Grafting II
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 E-mail: learn@PikosInstitute.com

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Web site: www.sendax-minidentimpl.com

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A Hands-on Learning Series emphasizing the "Hilt Tatum" NIRISAB Philosophy

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Instructors: Dr. Richard Borgner and Dr. Bernee Dunson

- Sinus Augmentation/Manipulation
- Bone Expansion
- Advanced Bone Grafting
- Nerve Lateralization
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- Cadaveric Specimen Course
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Contact: Rebekah Register
Phone: 727-459-4910
E-mail: tatuminfo@aol.com
Web site: tatuminstituteusa.com

University of Nevada, Las Vegas (UNLV)

Division of Continuing Education Courses in Implant Dentistry

Live Implant Surgery Course (3 months)
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Hands-on Maxillary Sinus Augmentation Course (2-day course)
Pig Jaw Surgical Bone Grafting Course (2-day course)
Francis Jones, DDS, PhD (Ca)
Contact: Roxane Santiago
Phone: 702-774-2822

Outside U.S. Locations

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

The D.M. Vassos Dental Implant Centre Introductory & Advanced Surgical & Prosthetic Programs

Dr. D.M. Vassos
Mentor Program – Hands-on Program over six Saturdays
Contact: Rosanna Frey
Phone: 780-488-1240
E-mail: rosanna@dmvassos.com
Web site: www.dmvassos.com

Dr. Samuel Lee's Mini-Residency Implant Program

Live Surgical Training
Dr. Samuel Lee, Director
Variable dates year-round
Locations include: Tecate, Mexico; Dong Yang, China; Santiago, Chile
Contact: Sarah Chung
Phone: 714-308-9413
E-mail: implantseminar@gmail.com
Web site: www.ce4dentist.com/live-surgical-training.html

Leigh Smile Center, Alberta, Canada

"Hands-on" Introductory to Advanced Surgical and Prosthetic Implant Courses with Live Surgery.
Dr. Robert E. Leigh, Director
Year-round, Custom Tailored and 5-DAY MINIRESIDENCY Courses
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Phone: 1-888-877-0737 (Toll Free)
E-mail: coriemanager@gmail.com
Web Sites: www.rockymountainmilecenter.com
www.leighsmilecenter.com

Pacific Implant Institute

Dr. Ron Zokol
Comprehensive Training in Implant Dentistry
September through June
Location: Vancouver, B.C., Canada
Contact: Kim
Phone: 1-800-668-2280
E-mail: kimber@piidontology.com
Web site: www.piidontology.com

AAID Affiliated Study Clubs* California

Bay Area Implant Synergy Study Group

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Florida

Central Florida Dental Implant Study Group

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Mid-Florida Implant Study Group

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New Jersey

Bergen County Implant Study Club

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Lincroft Village Dental Implant Study Group

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New York

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North Carolina

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CANADA

Surrey, British Columbia

Implant Connection I:

Advanced Surgical Group

Ongoing program that is specifically designed for experienced doctors in implantology. This class covers lecture and live surgery.

Implant Connection II: Surgical Mentorship to Incorporate Implants into Your Practice

One-year program that incorporates lecture, lab work, surgical demos and live patient surgery.

Implant Connect: Prosthetic Course

One-year program that will cover patient selection, treatment planning, occlusal considerations and how to incorporate implants into your practice.

E-mail: andrew@implantconnection.ca

Web site: www.implantconnection.ca

* This calendar section is available to any credentialed member of the AAID to post information about implant education courses offered by the member. The member must agree to provide the list of attendees to AAID in exchange for publication of the course in the calendar. Study Club listings are available only to Affiliated AAID Study Clubs. For information about becoming an Affiliated AAID Study Club, contact Catherine Elliott, Director of Professional Development at catherine@aaid.com. ▀



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