

# AAID NEWS

NEW AAID PRESIDENT

# Shane Samy, DMD

## INSIDE

- Preparing for a Partner's Death or Disability
- The Guide Bar Concept
- Summary of 2022 Annual Business Meeting



# Tapered Pro

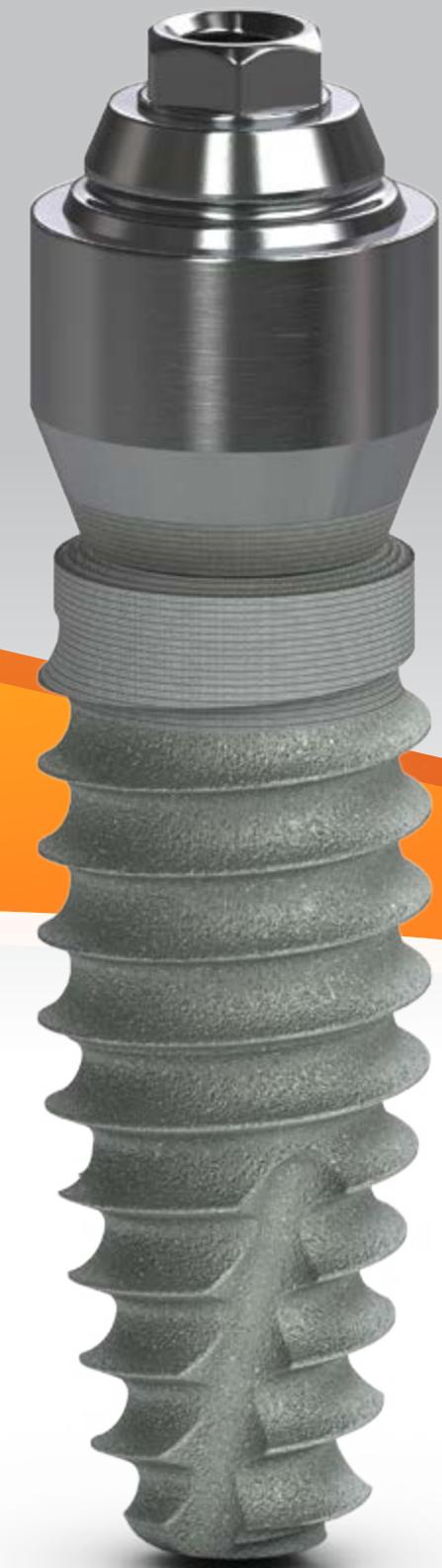
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By Dennis Flanagan,  
DDS, MSc, FAAID, DABOI/ID,  
AAID Editor

## EDITOR'S NOTEBOOK

### I thank the AAID Research Foundation for bestowing the Isaiah Lew Memorial Research Award upon me at the Dallas AAID Annual Conference.

I thank the AAID for providing a platform for my research work. I also thank Dr. Jim Rutkowski for his guidance, encouragement, and constructive criticism. I additionally thank my beautiful wife Martie for her kind and gentle redactions and giving me the time to work on my projects. She has enabled me personally and professionally to succeed for 25 wonderful years.

I think we should investigate the importance of patient bite force capacity. Identifying those patients who can generate high newtons of force may affect prosthetic and occlusal design to prevent an overload. We should measure this capacity on every patient as a baseline physiologic parameter. We need to know which materials and occlusal designs would be most appropriate for a long-term successful outcome.

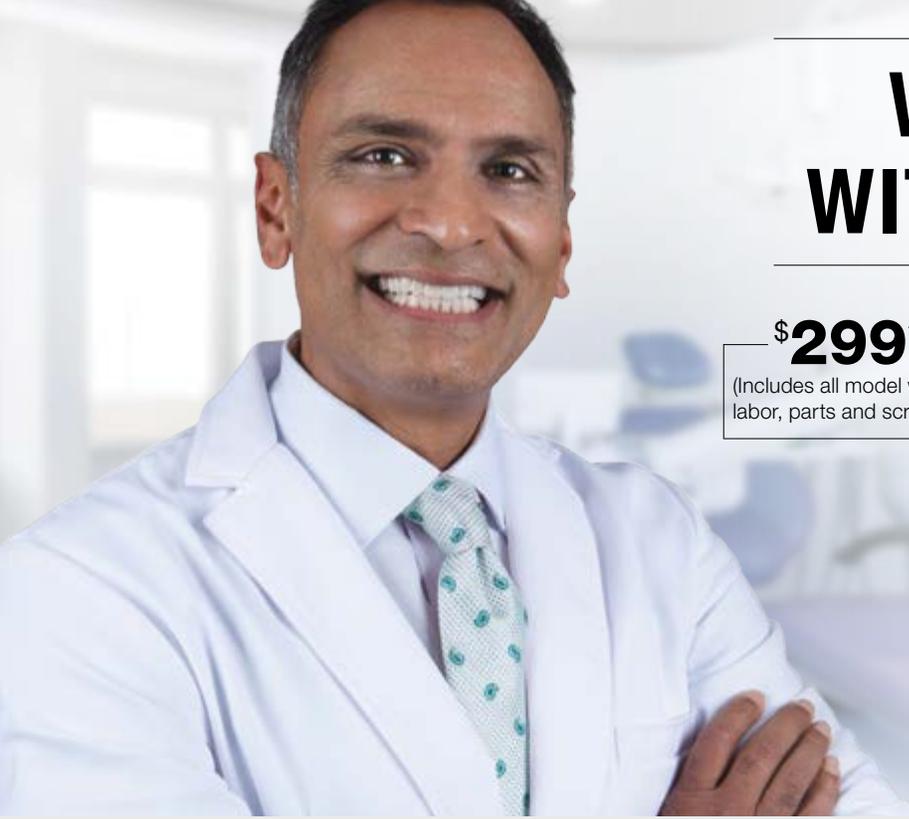
Additionally, I think we need to thoroughly investigate the role of mini implants in our treatments of partial and complete edentulism. Mini implants should not be placed inappropriately because they transfer about twice the load to the bone as standard diameter implants. Nonetheless, they have a place in our armamentarium.

Finally, I think we need to investigate why and how implants can lose bioactivity starting about two weeks after manufacture. Photofunctionalization can renew bioactivity with ultraviolet radiation. Nonetheless, we don't know what wavelength works best nor the amount of exposure time required for appropriate restoration of the bioactivity.

The AAID is us and we certainly are the premier dental implant organization for oral implantology. We provide an educational framework for the advancement and encouragement of our beloved profession.



Dr. Flanagan delivering his remarks at the 2022 AAID Annual Conference President's Celebration.



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COVER  
STORY

NEW AAID PRESIDENT

Shane **Samy** *DMD*

In September, Shane Samy, DMD, was sworn in as the 2022-2023 President of AAID. We had a chance to sit down with Dr. Samy to learn about his professional journey, get his thoughts on the future of the organization, and ask him his guidance for future generations of AAID leaders.

*“My interest in dentistry was initiated by my grandfather who really pushed me to look into the medical field and dentistry caught my eye. I come from a line of engineers; dentistry is like medical engineering where we reconstruct someone’s oral cavity and help them achieve better health.”*



- Tell us about yourself and why you became a dentist.

First and most important, I am proud to be a father to two young beautiful and successful daughters. The dedication and time commitment to our profession takes a lot of time away from our families and friends—without them none of the credentials and accomplishments matter or mean anything if you cannot share with them.

My interest in dentistry was initiated by my grandfather who really pushed me to look into the medical field and dentistry caught my eye. I come from a line of engineers; dentistry is like medical engineering where we reconstruct someone’s oral cavity and help them achieve better health.

Over the years, the relationships that we develop with our patients and when we become part of their extended families by treating their children—and subsequently grandchildren—are what dentistry has evolved towards for me. And this is the true privilege—no materialistic reward can replace the memories created.

*continued on page 8*

## COVER STORY

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Dr. Brian Jackson (left) and Dr. Shane Samy at the 2022 Annual Business Meeting

### **Q: Where did you attend college and dental school? What was your early professional life like? And how did you become AAID President?**

I attended undergraduate school at the University of Utah and went to dental school at Oregon Health Sciences University. After that I jumped headfirst into private practice. I am a product of the Oregon post-graduate system which included a group called the Oregon Implant Research Seminars, which consisted of approximately 50 doctors in Oregon and Washington, including oral surgeons, periodontists, prosthodontists, and general dentists. A few to mention include Bob Nelson, Bob James, Jack Collins, Harold Roberts, Ralph Roberts, Lenny Linkow, Hilt Tatum, Harry Cure, and Tad Hodgert. They were instrumental in helping me develop as a young professional and get involved in implant dentistry. They put on the first Oregon MaxiCourse® in 1994 and 1996, which I attended.

These people not only helped me with professional advancement but also with personal growth in regard to family development, staff development, and friendship development.

What I've realized is each state is different regarding training and education. In Oregon, we didn't have a residency program. Most get involved with the Oregon Academy of General Dentistry, which was the precursor to the national organization. Participation in study clubs and treating live patients under supervision were essential for me to find the specific skills that I wanted to work on.

From there it became a professional career pathway for me, which led to becoming involved in education—a key pillar of the

AAID. I was privileged to be asked to serve on several different committees over the years, and before I knew it, I was serving on the Executive Committee.

### **Q: What do you hope to accomplish during your tenure as AAID President?**

The AAID has so much to hang its hat on. The two that jump out to me the most are credentials and education. I'd like to see the AAID solidify our credential efforts from state to state, as well as support graduate education programs.

This organization has always been an educational, academic pathway to develop our clinicians, and in return serve our patients. I would like to see us take this to the next level by developing innovative educational programs (which we have always done), as well as continue to be the leading trailblazers in implant dentistry.

All of our members continue to hear the key words "education and credentials." I would like to see everyone get involved to help our Academy and our discipline get to the next level.

### **Q: How do you define success for your presidency?**

A successful year as President would show the AAID has created a pathway for supporting graduate education with multiple programs online or coming online. I want to see the AAID members getting back to peer-to-peer learning, lifelong learning, and the sharing of life lessons. No matter what the age, I'd like everyone to demonstrate a willingness to freely share. Levity is important in our culture. I would like to see all of our colleagues smiling, laughing, and having fun

with what we do and yet not take themselves too seriously. I guess at the end of my tenure if I look around and see everyone smiling, laughing, hugging, sharing, and enjoying their time together, I will feel successful with my year as the AAID President

### **Q: What would you say to young dentists trying to start an implant practice?**

Stay with it. The world of implant dentistry is very complex and one of the hardest specialties that we have as there are three distinct disciplines: oral surgery, periodontics, and prosthodontics. You need to not only be familiar with all three of these disciplines as an implant dentist; you must also be proficient in certain skills in each discipline that relate to implant patient care. That's what makes implant dentistry so special. It can be a lifelong journey in learning and obtaining skills that allow you to serve your patients.

### **Q: We know you're all about fostering and strengthening the AAID community. The AAID Annual Conference is a big part of that. What do attendees have to look forward to in Las Vegas?**

Is it too cliché to say, "What happens in Vegas stays in Vegas?" In all seriousness, I would like to see us recapture our culture of helping one another get to the next level and transform our discipline—after all, the theme of the conference is "Trends in Transformation."

The agenda is already coming together and building off a stellar 2022 Annual Conference, we hope to wow attendees again with top-tier education, ample networking, and unique receptions that showcase Las Vegas.



*"I want to see the AAID members getting back to peer-to-peer learning, lifelong learning, and the sharing of life lessons. No matter what the age, I'd like everyone to demonstrate a willingness to freely share."*



By Shawn M Johnson,  
ChFC®, CLU®, CLTC  
Vice President  
Business Development  
Treloar & Heisel, Inc.

# Preparing for a Partner's Death or Disability

Many practice owners minimize the chance of death or disability, but the impact to the practice and the partners can be significant in the unfortunate event that this does happen. Thankfully, a legal vehicle known as a buy/sell agreement can help define the 'what if's' of such scenarios.

A buy/sell agreement, funded with life insurance (or disability buy/sell insurance, or both), is critical for any dental practice that is owned in partnership with others. The agreement establishes concrete steps to take in the event of the death or disability of a partner.

For it to become a functional succession tool, the buy/sell agreement needs to be funded with life and/or disability insurance. Life insurance is used to fund an agreement that is triggered by a partner's death; a disability buy/sell agreement is triggered by a partner's disability and is funded with disability insurance.

"A buy/sell agreement, funded with life insurance (or disability buy/sell insurance, or both), is critical for any dental practice that is owned in partnership with others. The agreement establishes concrete steps to take in the event of the death or disability of a partner."

### Why have an agreement in the first place?

A buy/sell agreement eases the financial stress that would exacerbate an already emotionally trying situation. The agreement is put into place when all partners are alive and well. Each doctor is insured under a separate policy—both life and buy/sell disability insurance.

### Which issues does a buy-sell agreement address?

Here, in short, are several good reasons why you would want to work with an attorney and accountant to establish a buy/sell agreement:

- Establish ground rules for what would happen if a partner becomes disabled or dies
- Establish, in advance, how the practice value will be determined in such an event
- Mitigate the financial issues that may arise—for example, it may eliminate the need for the surviving partner to secure a bank loan in an already stressful time, especially if the practice is losing the gross production of a practicing dentist
- Offer certainty for the continuity of the practice
- Mitigate conflict among surviving family members and partner—because the funds are available and a plan is already in place

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“In the event of a death of a partner, it’s important to have a plan to determine what would happen to the business. Not only will the surviving partner likely not want to be in business with the deceased partner’s spouse or estate, but state laws pertaining to practice ownership may further complicate things.”

## Funding the agreement with life insurance

### **Scenario One: A partner passes away**

In the event of a death of a partner, it’s important to have a plan to determine what would happen to the business. Not only will the surviving partner likely not want to be in business with the deceased partner’s spouse or estate, but state laws pertaining to practice ownership may further complicate things. Likewise, the deceased partner’s heirs may have no interest, ability, or desire to get into running a dental practice.

When life insurance is obtained to fund a buy/sell agreement, it’s obviously done while both partners are alive and can come to agreement on the valuation of the practice, and on a sale price if one of them is no longer alive. Say there’s a partner A and a partner B, who agree on the method of valuation of for the practice. Either both partners acquire life insurance for the said amount and designate each other as beneficiaries, or the business itself becomes the owner and beneficiary of the life insurance proceeds. Say that Partner B dies prematurely, which is most unfortunate for everyone involved. The buy/sell agreement sets forth how much the sale price of the practice will be and what will happen next. The life insurance proceeds on Partner B’s life are used to purchase B’s share of the business, so that partner A can continue, and the business can operate without further (financial) disruption.

But what if a partner doesn’t die? What if a partner is disabled? What happens then? A buy/sell agreement should have in place a provision if a partner is disabled.

## Funding the agreement with disability insurance

### **Scenario Two: A partner becomes disabled**

Again, we go back to our two partners, A and B. This time partner A is disabled in an accident, and it doesn’t look like a return to the practice is likely. But who’s to tell? The buy/sell agreement kicks in and sets forth the ground rules for the buyout. In the agreement it is clearly stated (and previously agreed upon by both partners) that after a fixed period, partner B can buy out partner A, funded in whole or in part with the policy. The time between disability and the ability to purchase the practice varies—it could be a few months and is typically a year. Disability buy/sell typically require that the disability last for 12 months before any benefits are payable. Each practice will come to its own conclusion as to what that needs to be.

Disability cases are not always as clear-cut as when a partner passes away. If a partner dies, you know they are not coming back. A disabled partner, on the other hand, may potentially return to the practice. Or they may think they want to return to the practice, even if it may not be feasible in the long run.

If you own a disability buy/sell on the partners, it is the insurance company that ultimately determines whether the injured/ill partner is totally disabled and unable to return to the practice based on the definition of total disability in the policy.

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By



Danny Domingue, DDS



Cory Glenn, DDS



Michael Strait, DDS



Reid Turpin, DDS

## CLINICALBITE

# The Guide Bar Concept

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This article is the opinion of the authors and does not constitute the endorsement by the American Academy of Implant Dentistry (AAID) or the AAID News.

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This article will show an alternative approach to full-arch guided surgery with immediate loading, which allows you to have a metal reinforced printed/milled temp to deliver on the day of surgery. We would argue it is more than strong enough to serve as a permanent restoration for those patients who can't afford "Cadillac" treatment. This technique is easiest in cases in which all implants are straight up and down, but you can slightly modify the approach to make it work for cases with angled implants, also.

This patient presented to the Interfaith Dental Clinic in Nashville with his current dentition failing from decay and periodontal disease along with numerous infections and two ailing implants. He desired fixed teeth and would have benefitted greatly from full-arch implant therapy, but there were significant budget limitations.

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### Pre-op photos





Figure 1. Pre-op Panorex

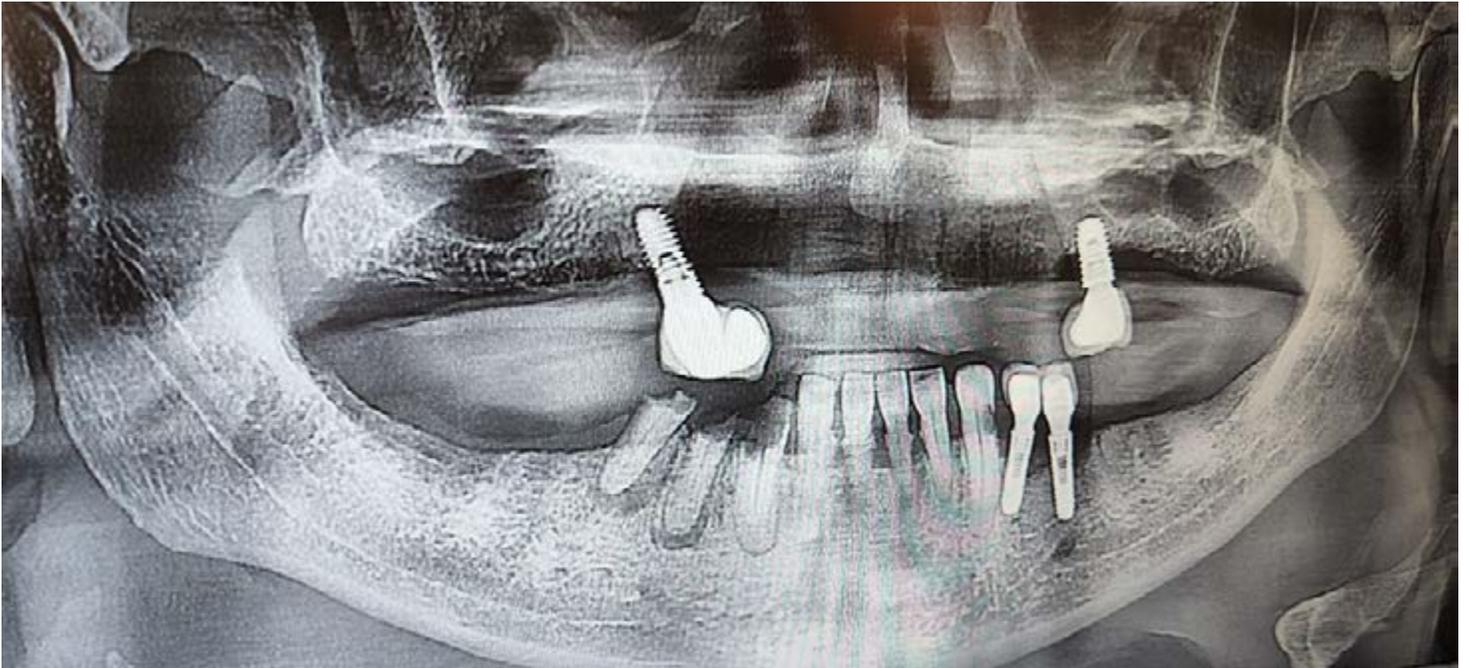


Figure 2. The patient's existing maxillary partial was used to establish the ideal tooth positions for his maxillary arch and the correct vertical dimension of occlusion.

*continued on page 14*

## Clinical Bite

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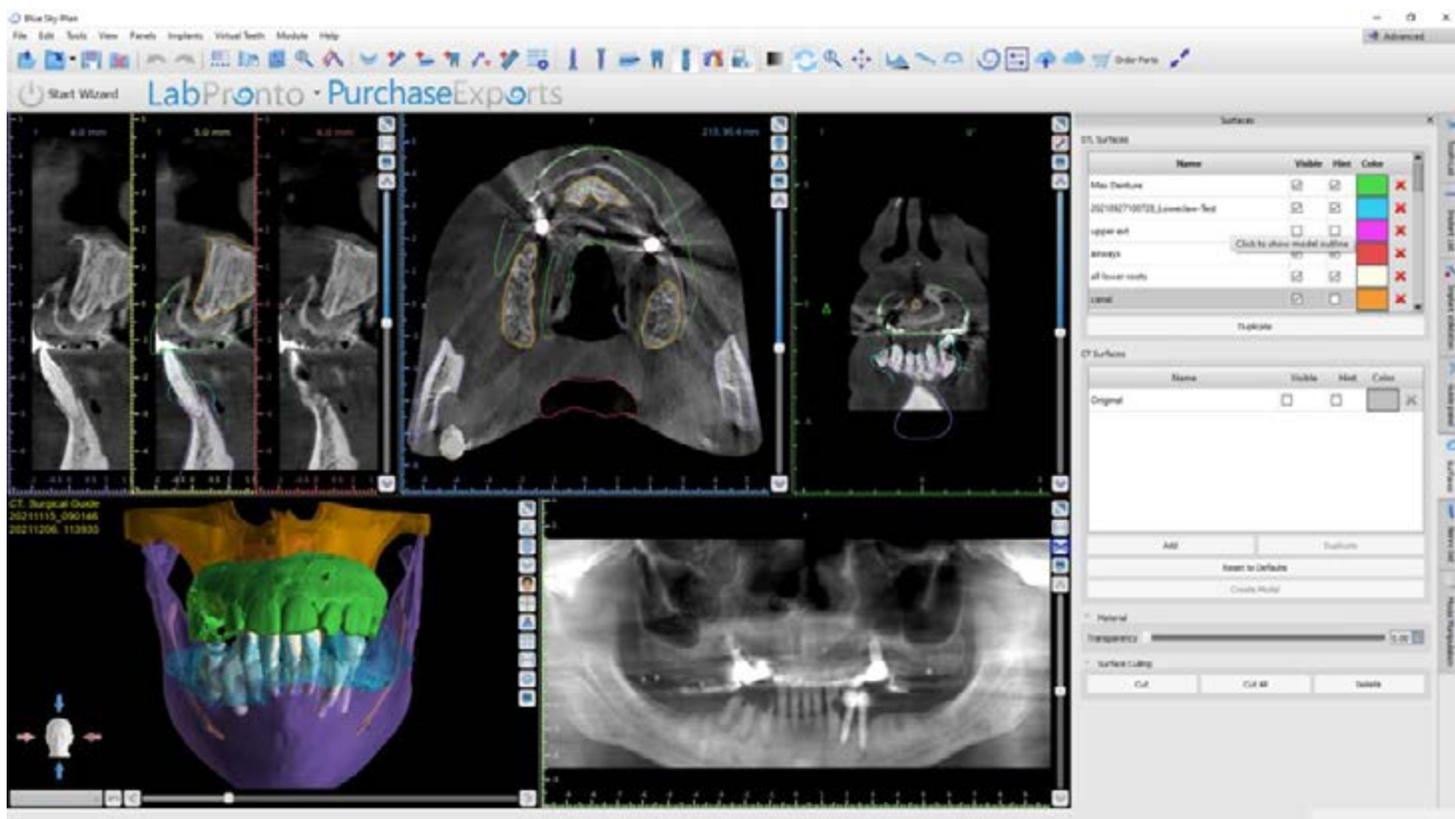
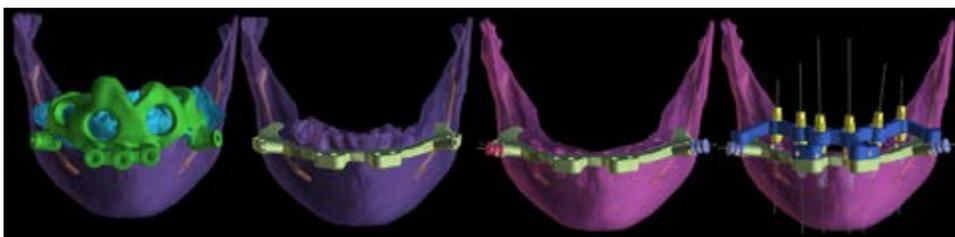
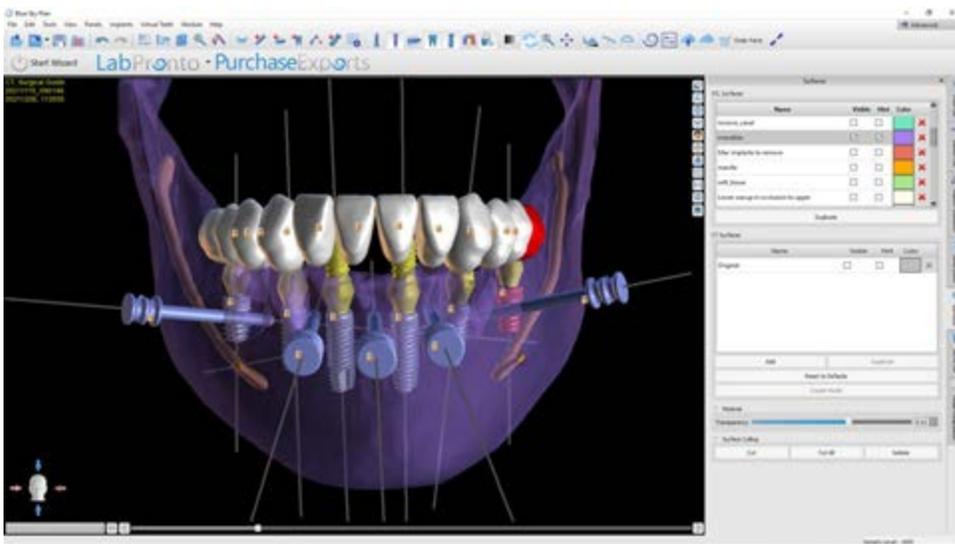
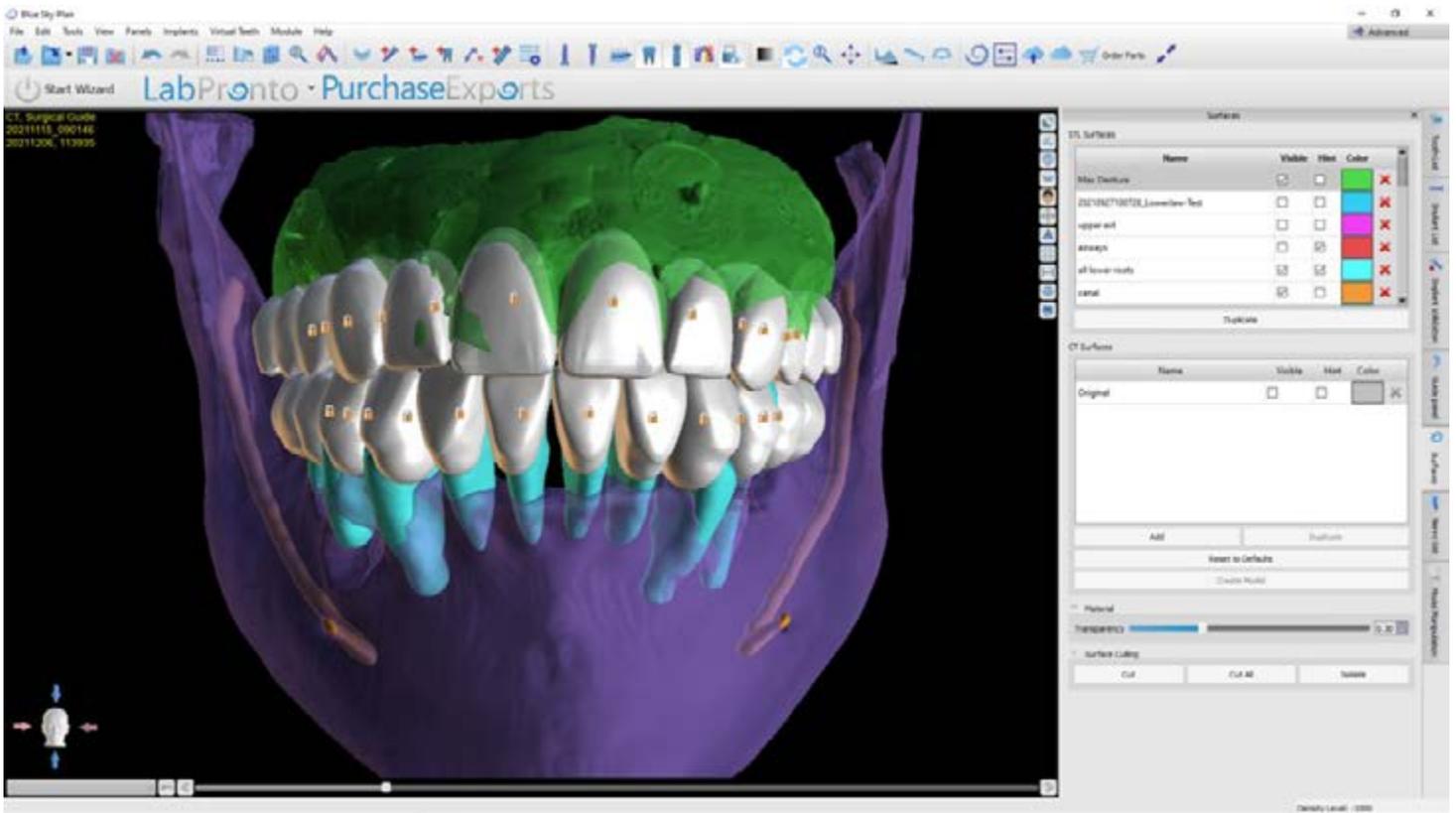


Figure 3. Intraoral and CT scans were obtained using the dual scan protocol. Additionally, the CT was submitted to Diagnocat for bone segmentation to generate STL models of the jaws. All of these data were brought into Blue Sky Plan to position the implants.



While this article focuses on just the mandibular arch, the treatment plan was to treat both arches with five to six implants that would be immediately loaded. An ideal digital wax-up was done in BSB to establish where the final teeth should be on the immediate load restoration.

All the implants were placed with an ideal prosthetic endpoint in mind, with screw access holes emerging lingual to the incisal edges of anterior teeth and through the central grooves of posterior teeth.

With the ideal tooth positions and implant positions established, the next step was to design guides. The design process all happens using Blue Sky Plan and Meshmixer, but the specific steps are beyond the scope of this article.

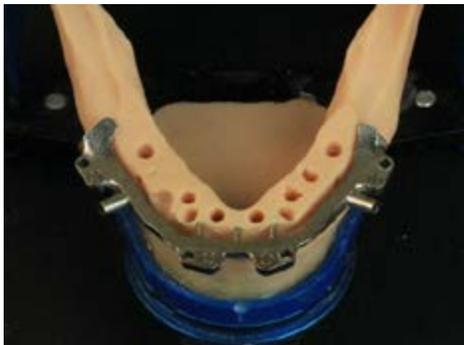
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## Clinical Bite

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### The design process

This particular stackable system is composed of an initial resin printed surgical guide (Sprintray Pro 95 using Surgical Guide II Resin) just for drilling pin holes, and then it is removed and discarded. Since the pin locations are set, it is up to the doctor whether they want to insert the reduction guide before or after extractions. One unique aspect to this approach is that the anterior pins are all placed parallel to one another. This allows the placement of parallel pegs built into the lingual of the reduction guide, which slide directly into the bone and orient the reduction guide into place. Once it's fully against the bone, two posterior pins are inserted locking in the position.



The reduction guide and drill guide were both 3D-printed in chrome cobalt (Oral Arts Dental Lab, Huntsville, AL) and provided

exceptional strength and stability. This system has magnets built into the guides that provide the retention between them.



Then, an immediate load prosthesis was designed to have exactly 3 mm of space between the level of the reduced jaw and the intaglio to give adequate space for healthy tissue. This was 3D-printed on the Sprintray Pro 55 in Saremco Crowntec resin—one of several very strong resins with U.S. Food

and Drug Administration (FDA) approval for fabricating final crowns. After printing and post processing, Anaxgum gingival composite was placed and the entire restoration was sealed using Nanovarnish (Dreve).

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# Practice Consolidation Is Cresting



## It's Time to Understand the Value of Your Practice

### **Silent Partners Buy Part of Your Practice**

Dozens of Invisible Dental Support Organization (IDSO) silent partners, in all 50 states, are paying record values for partial interests in larger practices. Many of them are now very eager to partner with practices which have 50% or more of their collections from IMPLANT related care.

IDSOs purchase 51% to 90% of a practice for cash now at low tax rates. Doctors retain ownership and have significant upside in the equity value, some recently at 10x returns for the doctors over time.

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### **Your Practice Value in Today's Consolidation Frenzy**

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## Clinical Bite

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While we have used these resins alone without reinforcement for immediate load hybrids extensively with great success, we've always felt that in order to serve as a long-term restoration, an internal substructure would greatly increase its longevity.

One way to achieve such a substructure is to incorporate the metal bar of the stackable, magnetic surgical guide into the temp itself. This creates a very precise positioning mechanism for the printed superstructure and greatly increases the overall strength of the restoration. The titanium cylinders can be picked up inside the guide holes once implants have been placed and the restoration can be designed to sit on top of the metal bar and cylinders. One significant advantage of this is that you are only picking up the bar in the mouth, rather than the whole restoration, which makes access much easier, and then the superstructure can be picked up on top of the bar outside of the mouth.



Once this was done, the result was a metal reinforced composite hybrid restoration that could function indefinitely. Furthermore, the fact that it is resin means that even if the patient were to break or chip teeth, it is easily repairable. The only disadvantage in the authors' opinion is that printing is an inherently monochromatic process, so you won't have the multi-shade and translucency of a ceramic restoration. However, the esthetics are acceptable to most patients, especially those with limited budgets just desiring to have teeth again.



Example from another case

One modification to this technique is required when using angled implants because the direction of the drill guide hole will be different than the direction that the titanium cylinder will emerge when using an angled MUA. When this is necessary, a third stackable metal component is printed in chrome cobalt to serve as the bar reinforcement as opposed to using the surgical guide.

## The treatment

All clinical treatment was performed by Dr. Reid Turpin and Dr. Michael Strait. On the day of surgery, the patient was sedated and anesthetized and a full thickness flap was reflected from second molar to second molar. There's no need to perform any lingual reflection.



Before removing any teeth, the pin guide should be seated and pin holes should be drilled using the BSB 2.2 mm pin twist drill. It's critical that you verify complete seating by checking that the teeth are fully seated in the occlusal windows in the guide. This initial step must be performed correctly because all subsequent guides and prosthetic positioning are based on these pin holes.



Once all five pin holes were drilled, the guide could be removed and discarded. The surgeons chose to insert the reduction guide first because it helped visualize how much bone removal could be done around the remaining teeth to make the extractions easier. The guide was positioned by inserting the parallel pegs on the lingual of the reduction guide into the anterior jaw and then pressing it in until the guide fit intimately against the jaw. Once this was done, the pin holes in the posterior aligned with those in the guide, allowing the surgeons to insert the distal pins to lock it in place.



The extractions were performed and the granulation tissue around the infected teeth was removed. Bone reduction was completed with a straight electric handpiece and a large bur.



*continued on page 21*

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**FREEHAND VS. GUIDED:  
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## Clinical Bite

*continued from page 19*

### Completed bone reduction

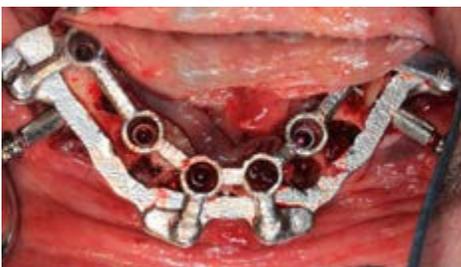


Once bone reduction was complete, the magnetic drill guide could be dropped onto the reduction guide to create the implant osteotomies. The male-female pins are self-aligning and prevent any lateral movement of the drill guide, while the magnets pull the guides into place and provide retention. It should sit flush with no visible gap between the indexing parts.

### The Blue Sky Bio fully guided keyless kit was used to make all osteotomies.



### 6 Blue Sky Biomax implants were placed with very high fixation torque.



At this point, the magnetic drill guide can be removed and the multi-unit abutments can be installed. All abutments were torqued down to 30 ncm. A rubber dam gasket was placed over the multi-unit abutments at this time. The gasket was used to prevent any excess pick-up material from running down around the undercuts on the MUAs, which might cause a lock on.

Once the gasket and MUAs were in place, the magnetic drill guide was placed back on the reduction guide. The titanium temp cylinders were then placed through the surgical guide and screwed into place finger-tight.



One other thing to note is that since all the planning was done digitally, it was possible to know the exact height the titanium cylinders needed to be, and thus it could be completed before surgery in order to ensure that they don't stick up beyond the occlusal surface. Plugs were placed in each screw access hole to prevent the pickup resin from blocking access to the screws.



A dual cure resin (Stellar from Taub Dental) was squirted into the gap between the guide and the cylinders to complete the

pickup. Since Stellar is a dual cure resin, it can be light-cured for 20 seconds to speed up the set time.



Once the material was fully set (2 min), the plugs were removed, the screws loosened, and the entire assembly taken out of the mouth. All remaining steps of the conversion happened on the bench top.



Here you see the results. The surgeons then had the surgical guide with all the cylinders picked up inside of it.

At this point, the surgeons needed to remove any excess resin and fill any voids between the tubes and the cylinders.



*continued on page 22*

## Clinical Bite

*continued from page 21*

The indexing feet and magnetic interfaces could be cut off, as well. Once the indexes were removed, the “guide bar” was completed, which passively and precisely fit into the printed hybrid restoration.



Once this fit was verified, the bar was ready to be picked up inside the temp. Teflon was placed into the screw access holes to prevent them from getting blocked with resin.



Once the material was fully set, the surgeons were ready to create the screw access holes. One common problem with traditional conversions is that large occlusal access openings are needed to pick up the cylinders which weakens the restoration and destroys much of the anatomy. However, with this

technique, no holes were created at all in the occlusal surface. Rather, a small drill was inserted through the apical end of the titanium cylinders, punching precisely through the occlusal exactly where screw access holes should be located.



The same dual cure resin (Stellar-Taub Dental) was placed inside the restoration and the bar was pushed into place. Excess resin was removed with a brush before the material set.



The last step was to fully wrap the bar and create a smooth intaglio surface. Multi-unit analogs were placed onto the cylinders first so that there was no chance of getting resin into the seating surface of the MUA cylinders.



Using a syringe, additional Crowntec resin (Saremco) was squirted over all exposed portions of the bar and then cured (Pro Cure-Sprintray).



Once it was finished curing, the analogs were removed. There were a few small areas of excess resin to trim away, which were removed with a finishing bur. The result is the final immediate load temp with metal reinforcement, ready to deliver.



The temp was taken to the mouth and screwed down with 15n/cm of torque. Note, the flap was trapped underneath the temporary in this picture and we had to go back and loosen it to free the flap back up prior to suturing.



## The full-arch healing abutment concept

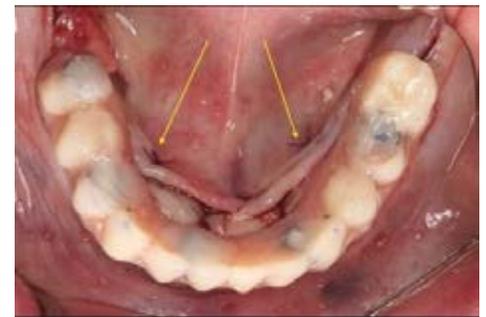
While there are many techniques for suturing immediate load cases, we highly recommend the "full-arch healing abutment concept" published here:

<https://www.dentistrytoday.com/guided-ridge-healing-with-full-arch-custom-prosthetics/>

In this technique, you don't do any suturing until the final temp has been screwed into place. Ideally, PRF should be placed over each implant site to protect the exposed bone and to aid in healing. The temp is then screwed into place, sandwiching the PRF down between the occlusal bone and the intaglio of the temp.

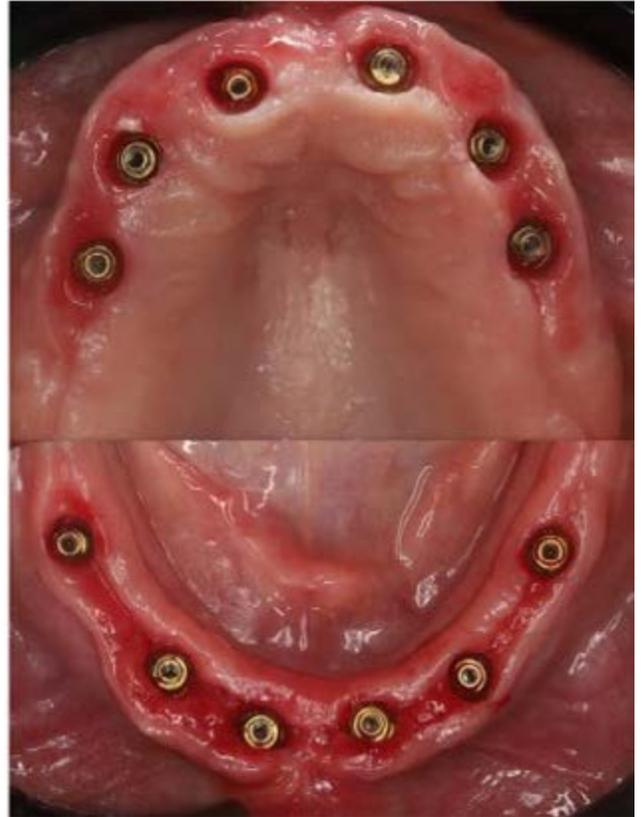
Now, horizontal mattress sutures may be placed, but no effort is made to approximate the buccal and lingual flap edges together. Rather, the goal is to simply pull the flap edges snugly up against the temp itself. This may seem counterintuitive because the

flap edges might be as much as 10 to 12 mm apart from one another. However, if you have an incision in keratinized gingiva, then regardless how far apart you leave those flap edges away from one another, the area in between will granulate in with keratinized gingiva. While it may not look pretty on the day of surgery, the result after healing is a huge gain in keratinized tissue.



*continued on page 24*

# Soft tissue profile generated by the “Full Arch Healing Abutment” Concept



Have a story you'd like to publish in Clinical Bite? Submit your ideas to us at [editor@aaid.com](mailto:editor@aaid.com).



Remember that we went to great lengths to ensure a perfectly contoured, ovate temp that was exactly 3 mm off the bone level. By just approximating the tissue to this temp, the tissue would be forced to heal and take on the shape of the temp, similar to what we typically do on a single tooth implant when placing a healing abutment. In this technique, we're just applying the same principle to a full arch. The temp should be thought of as a "full arch healing abutment." We know of no other way to consistently get such gains in keratinized tissue and create

as cleansable of a foundation for a full arch prosthesis. These two pictures are from different cases, but they show the results that can be accomplished routinely by using this technique.

The upper arch was also completed during this appointment and also immediately loaded. The patient was released after seating the restorations, suturing, and adjusting his occlusion. This is the patient three days after surgery at his post-op visit.

## The results

The patient was extremely happy with the results. Aside from his diagnostic appointments, his entire surgical and restorative phases of treatment were completed in a single visit at a total of \$1,800 for all guides, implants, and prosthetic components. We would argue that the metal reinforced hybrid restoration on his lower arch should provide many years of function and that potential restorative complications will be easily dealt

with. Frankly, we see no downsides to the Guide Bar approach to guided surgery. At a minimum, it allows doctors to provide an incredibly strong and durable immediate load restoration that minimizes the chances of implant complications due to prosthetic breakage. For patients who are financially unable to afford high-end lab prosthetics or for those who cannot devote the extensive time to a traditional lab restoration, this

technique provides them an affordable and effective alternative which could be upgraded at any point in the future if they so desire. There is a huge need within implant dentistry to provide this life-changing treatment to more patients at a lower cost, and the Guide Bar Technique is an excellent way to meet that need.



**Editor’s Note:** Because of busy schedules, you may not have time to read the dozen or so articles in each issue of the *Journal of Oral Implantology*. In this section of *AAID News*, we selected a few articles that have broad applicability to the daily practice and provide a brief summary of key points so you can decide if you wish to read the complete article. The following articles are from Volume 48, Issue 5 (2022).

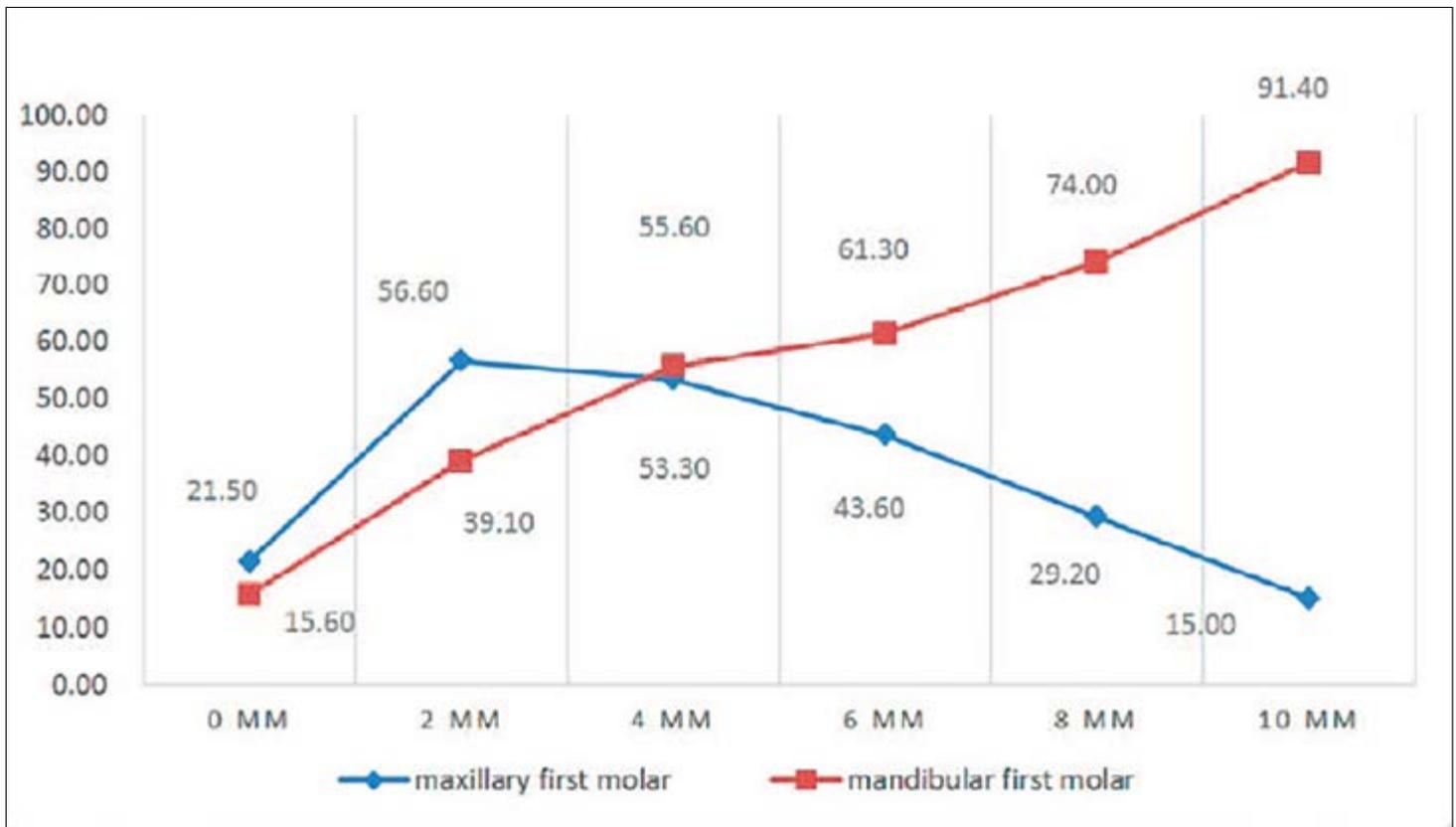


**CLINICAL REPORT**

**Implications of Virtual CBCT-Based Immediate Implant Planning for Maxillary and Mandibular First Molars**

In this study, authors researched the projected ridge-implant dimensions acquired from virtual superimposition of implants on intact first molars emulating immediate implantation in the mandible and maxilla using CBCT.

Li-Qi Zhang, DDS, Deng-Hui Duan, DDS, En-Bo Wang, DDS, Hom-Lay Wang, DDS, PhD, Zheng Liu, PhD, *Journal of Oral Implantology*. 2022;8(5):386-390.



**FIGURE 2.** Area of bone-covered implant surface of maxillary and mandibular first molars at different levels around virtual 4.8-mm x 10-mm implants.

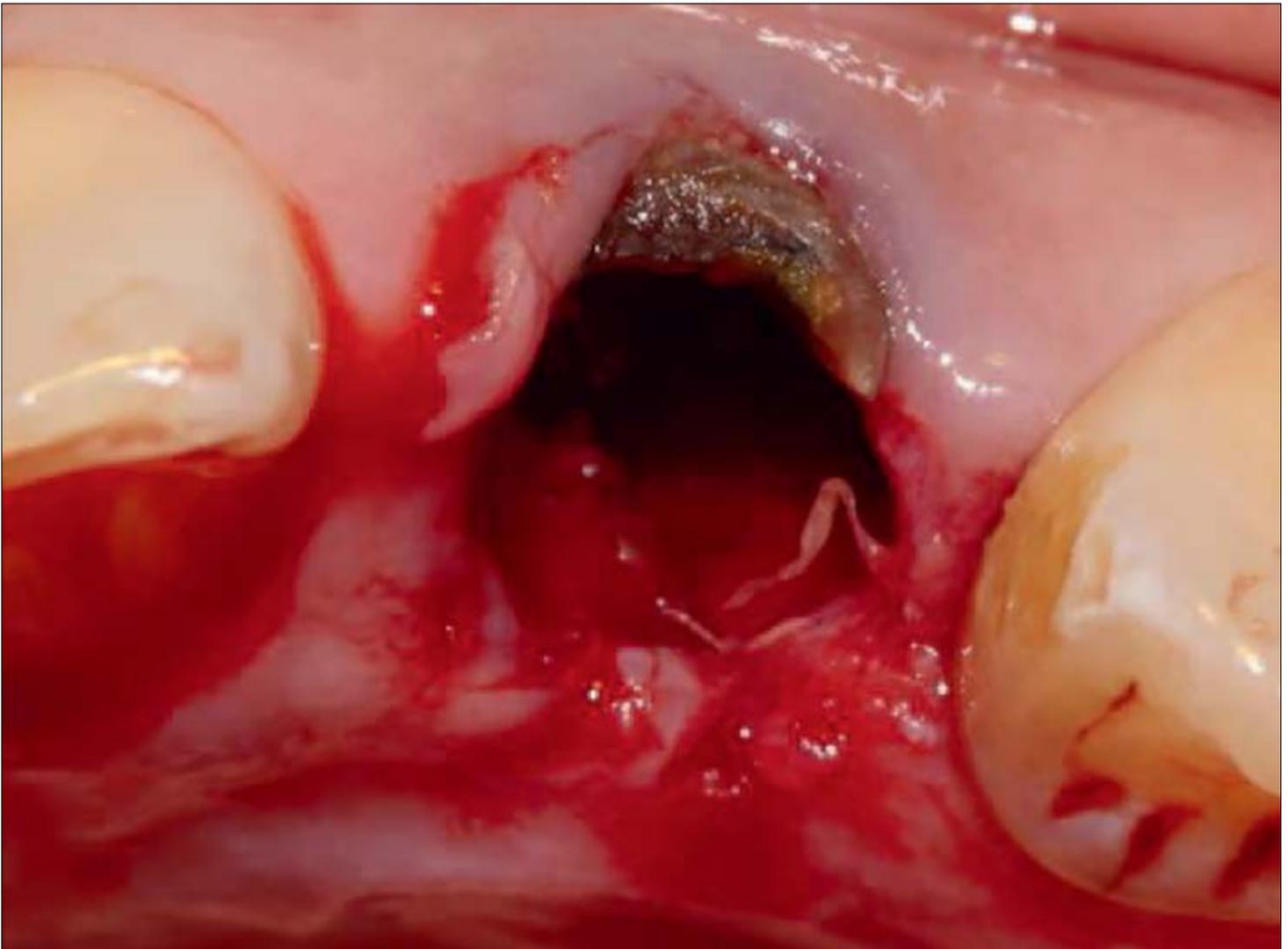
## CASE REPORT

### Management of a Complication With Partial Extraction Therapy: A Clinical Case Letter and Clinical Recommendations

In this case report, researchers discuss a soft-tissue complication encountered with an SST because the loss of bone and how it was managed using an autogenous connective tissue graft.

Aamir Zahid Godil, MDS, Arshi Ilyas Kazi, MDS, Rashmi Hegde, MDS, Saba Lambe, MDS, Mohit Kheur, PhD, MDS, *Journal of Oral Implantology*. 2022;8(5):431-435.

*continued on page 29*



**FIGURE 3.** Sectioned tooth and the shield prior to trimming.

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**CLINICAL ARTICLE**

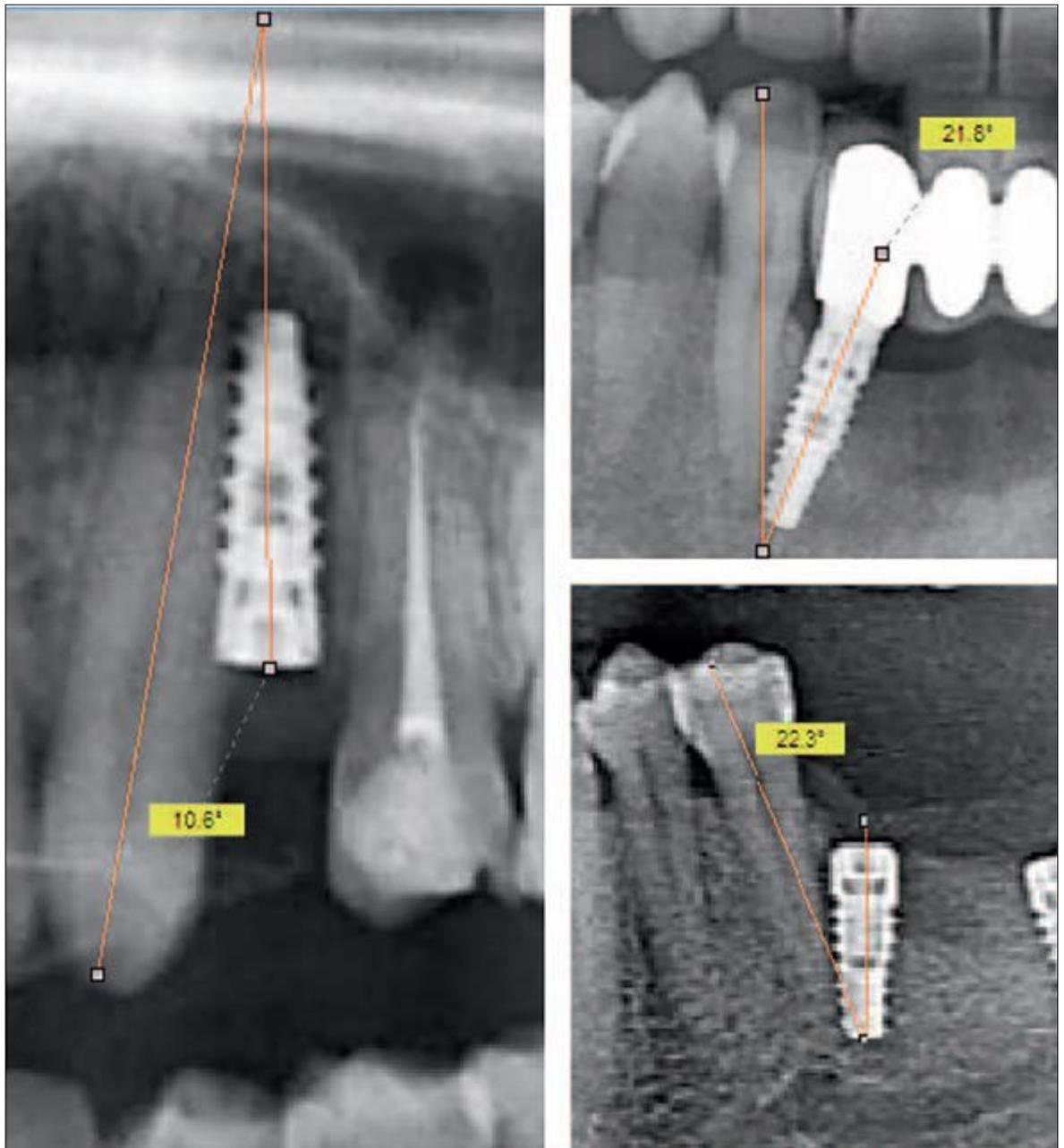
**Survival Rates of Implants That Have Compromised the Adjacent Teeth and the Associated Complications: An Opg Retrospective Study**

Authors conducted this study to evaluate survival rates of implants that compromised adjoining teeth. They also discuss complications associated with these invaded

adjoining teeth and the results of long-term assessment of radiographic characteristics of complications using orthopantomographic images.

Sercan Küçük Kurt, DDS PhD, Nima Moharamnejad, DMD, MD, *Journal of Oral Implantology*. 2022;8(5):375-385.

*continued on page 30*



## JOI Sampler

continued from page 29

### CASE REPORT

#### A Case Report of a 2-Year Follow-Up of Minimally Invasive Surgery in Peri-Implantitis: Peri-Implant Excisional Procedure and Access Surgery

In this case report, authors describe the treatment of peri-implantitis lesions through a minimally invasive surgical procedure using a peri-implant excisional procedure and access surgery (PEAS). Further studies with a bigger sample size were determined to be needed to analyze the reliability and validity of this innovative technique.

Jungwon Lee, DDS, PhD, Jin-Uk Choi, DDS, Jun-Beom Lee, DDS, PhD, In-Chul Rhyu, DDS, PhD, Yong-Moo Lee, DDS, PhD, *Journal of Oral Implantology*. 2022;8(5): 407-411.



### CLINICAL ARTICLE

#### Prevalence of Favorable Anatomy for Palatal Emergence of an Immediate Implant in the Maxillary Central Incisor Post-Extraction Site

Researchers conducted a study to figure out the prevalence of the best anatomy for palatal emergence of an immediate flapless implant in the maxillary central incisor post-extraction site. This was done partly by using 3D implant planning software.

Andoni Jones, DDS, David Chávarri-Prado, DDS, MS, PhD, Markel Diéguez-Pereira, DDS, MS, PhD, Alejandro Estrada-Martínez, DDS, MS, Miguel Beltrán-Guijarro, DDS, MS, Esteban Pérez-Pevida, DDS, MS, PhD, *Journal of Oral Implantology*. 2022;8(5): 399-406.



**FIGURES 1 & 2.** Case 1. Suitable anatomy for palatal emergence of the implant following the rules outlined in this study.

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## CONGRATULATIONS TO THE 2022 AAID Honored Fellows



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DMSc, AFAAID



Rob D'Orazio,  
DDS, FAAID,  
DABOI/ID



Robert Heller,  
DDS, AFAAID



Michael Katzap,  
DDS, FAAID,  
DABOI/ID



Adam Kimowitz,  
DMD, FAAID,  
DABOI/ID



Joseph Leonetti,  
DMD, FAAID,  
DABOI/ID



Donald Provenzale, Jr.  
DDS, FAAID,  
DABOI/ID



Vincent Vella,  
DDS, FAAID,  
DABOI/ID

### AAID Candidates Pass the Associate Fellow Written Exam, Part 1

The AAID encourages members to advance their implant education by becoming credentialed. The Associate Fellow written exam is the first step in this process. The Part 1 Examination is designed to assess knowledge of basic science, “entry-level” knowledge and understanding of implant dentistry principles, and the ability to apply these principles in a clinical situation.

Candidates who pass Part 1 have four years to take the Part 2 (Oral) Examination. This year, 137 candidates from 9 different countries and 37 states passed Part 1 of the Associate Fellow Exam. The AAID can help you with Part 2 by providing you with a credentialing coach. Visit [www.aaid.com/coach](http://www.aaid.com/coach) for more information.

#### Congratulations to the following 137 candidates who have passed the Part 1 examination:

Nasar Abdul Wadood, BDS  
Priyanka Agarwal, BDS  
Edward Ahn, DDS  
Mairy Aiad, BDS  
Reem Al Ameen, DDS  
Yasser Alabdulbagi  
Hajir Aldaod, BDS  
Dania Alfathi, DMD  
Ali Almatrafi, BDS  
Mohammed Alroshaidan, BDS  
Ahmed Alshareef, BDS

Yusur Al-Tekreeti, DDS  
Taylor Anderson, DMD  
Yara Arnouk, DDS  
Oliver Austria, DMD  
Rachel Awad, DDS  
David Azizyan, DMD  
Chadi Bachour, DDS  
DooSu Baik, DDS  
Stefanie Beckley, DMD  
Bibeka Bhattarai-Koirala, DMD

*continued on page 35*

# CONGRATULATIONS TO THE 2022 AAID Fellows



Mohammed Al-Guboori, BDS, MSc



Mohamed Attia, DDS



Matthew Bergman, DMD



Amandeep Bhullar, DMD



Thomas Bramanti, DDS, PhD



Kathleen Casacci, DDS



Yuen Lok Loretta Ching, BDS, MSD



David Domaas, DDS



Randal Elloway, DMD



Ahmed Eltanty, DDS



Mauricio Fonrodona, DDS



Iham Gammas, DMD



Khoana Gjelij, DMD



Philip Gordon, DDS



Kevin Haiar, DDS



Gene Allen Herrera, DDS



Paul Herrera, DDS



Travis Hunsaker, DDS

*continued on page 34*

## Dr. Frank Recker Appointed to American Association of Dental Boards

Long-time dentist and practicing attorney Dr. Frank Recker has been appointed by the American Association of Dental Boards as a Commission on Dental Accreditation Commissioner. Dr. Recker was in training in 2022 and his term runs from 2023-2026.



Dr. Recker practiced general dentistry in Cincinnati for 15 years and served as a member of the Ohio State Dental Board for six years before leaving his dental practice and entering the full-time practice of law.

While practicing as a general dentist, attending law school, and being a member of the Ohio State Dental Board, he represented dentists around the country in a multitude of legal matters. He has also represented several dental organizations, including the American Academy of Implant Dentistry, American Association of Dental Boards, American Society of Dentist Anesthesiologists, American Academy of Oral Medicine, and American Academy of Oral Facial Pain.

*continued on page 34*

## CONGRATULATIONS TO THE 2022 AID Fellows

### Dr. Frank Recker

*continued from page 33*

Dr. Recker lectures throughout the country on all risk management matters, including malpractice, litigation, dental board proceedings, and he has represented dentists before state licensing boards in over 25 states. He is a member of the ADA, AGD, Florida and Ohio Dental Associations, American Association of Dental Boards. He is licensed as a dentist in Ohio and Florida, and admitted to practice law in Ohio, Florida, Kentucky, numerous federal circuit and appellate courts, and the United States Supreme Court.

The Commission on Dental Accreditation (CODA) was established in 1975 and is nationally recognized by the United States Department of Education (USDE) as the sole agency to accredit dental and dental-related education programs conducted at the post-secondary level.

CODA accredits predoctoral dental education programs, advanced dental education programs and allied dental education programs in the United States. The Commission also accredits predoctoral dental education programs internationally. The Commission functions independently and autonomously in matters of developing and approving accreditation standards, making accreditation decisions on educational programs and developing and approving procedures that are used in the accreditation process. It is structured to include an appropriate representation of the communities of interest.



Marko Jeftic,  
DMD



John Jernigan,  
DDS



Charles Kirksey,  
DDS



Elliot Koschitzki,  
DDS



Monika Kumar,  
DDS



Nancy Lee,  
DDS



Chad Lewison,  
DDS



Dean Licenblat,  
BDS



Sunee  
Limmeechokchai,  
DDS, MSD



Gary Login,  
DMD, DMSc



Henry Long,  
DDS



Keith Long,  
DDS



Joseph Miller,  
DMD



Karim Naguib,  
DDS



Eric Nunnally,  
DMD



Tiberiu Oancea,  
DDS

# CONGRATULATIONS TO THE 2022 AAID Fellows



David O'Dowling,  
BDS



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DMD



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DDS, MS



Steven Puffer,  
DMD



Lokesh Rao,  
DDS



Moustapha Saad,  
DDS, MDS



Samantha Siranli,  
DMD, PhD



John Striebel,  
DDS



Kazuma Sugahara,  
DDS, PhD



Siddharth Swarup,  
MDS



Charles Town,  
DDS



Steven Vorholt,  
DDS



Matthew Walton,  
DDS

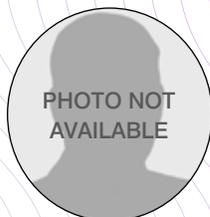


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Eric Wang,  
DDS

## AAID Associate Fellow Candidates Pass Exam

*continued from page 32*

Andrew Bloom, DDS  
David Brumbaugh, DDS  
Hui Ling Cheah, BDS  
Jennifer Chin, DMD  
William Choi, DDS  
Monica Dahiya, DDS  
Riccardo Di Gianfilippo, DDS, MS  
Jordan Dobbin, DDS  
Andrew Donald, DDS  
Alejandro Echeverry, DDS  
Sara Ellaithy, DMD  
Randal Ellis, DMD  
Nada Elsadig, DDS  
Mona Ezzat, MSc,  
Christopher Filler, DMD  
Stephen Fraites, DDS  
Nitin Francis, BDS  
Matt Francisco, DMD  
Benjamin Fruce, DDS  
Alexandre Gaeta, DDS  
Chaitalee Ganatra, DDS  
Yiwei Gao, DDS  
Juana Geldres, DDS  
Ruchi Goyal, DMD  
Kelsey Greene, DDS  
Amrit Pal Grewal, BDS  
Sulochana Gurung, DDS  
Mary Haley, DDS  
Blair Hannaman, DDS  
Ashraf Harhash, DDS  
Leneshia Haynes, DDS  
Jacob Heath, DDS  
Joshua Heimerdinger, DMD  
Jennifer Hinshaw, DMD  
KHOA Hoang, DDS  
Yoochan Hong, DDS  
Kazem Hosny, DDS  
Amanda Hurley, DDS  
Tohidul Islam, DDS

*continued on page 38*



AAID ANNOUNCES

# The 2022 Top Award Recipients

The 2022 Aaron Gershkoff/ Norman Goldberg Memorial Award was presented to **Bernee Dunson, DDS, FAAID, DABOI/ID**, for his achievements in the field of implant dentistry and service to AAID.

The 2022 Isiah Lew Memorial Research Award was presented to **Dennis Flanagan, DDS, MSc, FAAID, DABOI/ID**, for his significant contribution to dental research.

The American Academy of Implant Dentistry (AAID) presented its highest awards at the recently concluded 71<sup>st</sup> Annual Conference in Dallas on Saturday, September 24, 2022.

Dr. Dunson received his dental degree from the University of Southern California in 1991 and completed a general dentistry residency program at Columbia University at Harlem Hospital in NYC. He obtained his oral implantology graduate certificate from Loma Linda University in 1997. Dr. Dunson is the founder and director of the Global Dental Implant Institute in Atlanta. He also is the Director of the Washington D.C. (Mid-Atlantic) MaxiCourse<sup>®</sup> and has lectured at more than ten MaxiCourses around the world. Dr. Dunson has been an AAID member since 1992, became a Fellow in 2009, and earned his ABOI/ID Diplomate in 2008. He served as AAID president in 2020.

Dr. Flanagan is a Diplomate of both the American Board of General Dentistry and the American Board of Oral Implantology/ Implant Dentistry. Dr. Flanagan is an Attending Dentist for the U.S. Olympic Committee and former Chief of Dentistry at Windham Community Memorial Hospital. He has published more than 140 articles in dentistry, holds eight U.S. patents, and has made multiple presentations at national and international dental conferences. Dr. Flanagan is an Honored Fellow of the American Academy of Implant Dentistry and a Diplomate/Fellow of the Academy of Osseointegration and the American Board

*continued on page 37*

For background about each of the awards and the history of past winners, please visit [aaid.com/awards](http://aaid.com/awards).

The following are the Top 4 AAID dentists in 2022.





# Top Award Recipients

*continued from page 36*

## Dr. Flanagan *continued*

of Forensic Dentistry. He is an examining board member of the American Board of General Dentistry and American Board of Oral Implantology/Implant Dentistry and an examiner for the American Academy of Implant Dentistry. He is a senior associate editor for the *Journal of Oral Implantology* and the editor of *AAID News*. He is a Georgetown University School of Dentistry (DDS) graduate and studied oral implantology at Harvard University Dental School (CE) and Goethe Medical University in Frankfurt Germany (MSc). He is an associate professor in dental medicine at Lugano University of Switzerland. Dr. Flanagan has surgically placed and restored more than 11,000 dental implants.

The 2022 Terry Reynolds Trailblazer Award was presented to **John C. Minichetti, DMD, FAAID, DABOI/ID**, for his contributions to fostering inclusion, outreach, and service within the dental community.

Dr. Minichetti has years of experience in cosmetic dentistry, implantology, and prosthetic reconstruction. He graduated from the University of Medicine and Dentistry of New Jersey where he finished first in his class. He then completed a post-doctoral specialized training program at the Mount Sinai Medical Center. He has been the recipient of numerous awards, including those for oral medicine, pharmacology, and oral and maxillofacial surgery. Dr. Minichetti has published many scientific articles, received his fellowship in several academics, and is the director of MaxiCourses in New York and Las Vegas.

The 2022 Paul Johnson Service Award was presented to **Janice J. Wang, DDS, FAAID, DABOI/ID**, for her outstanding service to the AAID.

Dr. Wang has more than 25 years of experience with 21 years dedicated to implant dentistry of all phases and has completed thousands of implant placements. She has helped many patients and colleagues with troubleshooting of vintage or obsolete implant systems, prosthetic complications, and awkward placements. Dr. Wang graduated from the University of the Pacific School of Dentistry and has worked in California in various roles predominantly focused on implant dentistry throughout her career. She currently teaches several courses at a variety of education providers and has often been called upon as an expert witness on implant dentistry.



**AAID Associate Fellow  
Candidates Pass Exam**

*continued from page 35*

Rana Javeria, BDS  
 Kirsten Johnson, DDS  
 Natalya Jones, DMD  
 Kapil Kapoor, BDS  
 Prabhalakshmi Balasubramaniyan, MDS  
 Maryam Keikhosro-Kiani, DMD  
 Benjamin Keller, DDS  
 Kayahan Kosar, DMD  
 Matthew Kowaleski, DMD  
 Peter Krumbhaar, DDS  
 Robert Laing, DDS  
 Priscilla Leary, DDS  
 Joshua Lee, DDS  
 Julia Lee, DDS  
 Chad Louie, DMD  
 Daniel Lyu, DDS  
 Carl Mac Kenzie, DDS  
 Kevin Major, DMD  
 Adria Marcinkowski, DDS  
 Jeffrey McCardle, DDS  
 Jennifer McConathy, DDS  
 Alexa Mendes, DMD  
 John Mendoza, DDS  
 Cara Minichetti, DDS  
 Helena Minye, DDS, MHCM  
 Charuta Modak, DMD  
 Roman Mogilevsky, DMD  
 Shwan Mohammed, DDS  
 Yoodong Moon, DDS  
 Phillip Moorad, DDS  
 Timothy Moriarty, DMD  
 Dilan Munaweera, DDS  
 Frank Nelson, DMD  
 Anthony Nguyen, DDS  
 Mitra Nikpour, DDS  
 Kyle Novotny, DDS  
 Maria Obregon Merlo, DMD  
 Jessica Overmeyer, DDS  
 Gnanavi Packiam, BDS

*continued on page 39*

**CONGRATULATIONS TO THE  
2022 AAID Associate Fellows**



Olajumoke Adedoyin,  
DDS

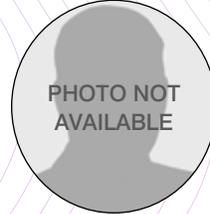


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Duaij Alazemi,  
BchD



Yousef Alhaider,  
MDS



Abdallah  
Al-Harazneh,  
DDS



Hussein Al-Mufti,  
DMD



Nadheer Al-Salami,  
BDS, PGD



Matthew Annese,  
DMD



Scott Brookshire,  
DDS



Theodore Chang,  
DDS



Timothy Chips,  
DMD



Abedin Dadehbeigi,  
DMD



Jeremiah Davis,  
DDS



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DDS



Arnold Do,  
DDS



Rana Faranesh,  
DMD



Cassie Fede,  
DMD

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DDS



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MDS



Mahima Gupta,  
DDS



Masakazu Hasegawa,  
DDS



Daizo Ishiguro,  
DDS



Reem Kidess,  
DDS



Jacob Kieffer,  
DDS



James Kim,  
DDS



Karen Kowalesik,  
DMD



Alexander Krasne,  
DMD



Naren Mikkilineni,  
DMD



Dane Mishler,  
DDS



Shun Mizuno,  
DDS



Hassan Mostafa,  
DDS

## AAID Associate Fellow Candidates Pass Exam

*continued from page 38*

Lincoln Parker, DMD  
 Pegah Pourrahimi, DDS  
 Jeries Qoborsi, DDS  
 Zachary Reagan, DMD  
 Whitney Reiakvam, DDS  
 Natanael Repta, DMD  
 Abraham Robles, DDS  
 Daniel Rodda, DDS  
 Chadi Rosario, DMD  
 Danielle Ruda, DMD  
 Bilal Sajid, DDS  
 Sonia Santoyo, DMD  
 David Schwartz, DMD  
 NIRAJ Shah, DDS  
 Ginu Shaju Daniel, BDS  
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 Saurabh Sharma, DDS  
 Yuchen Sheng, DMD  
 Sean Sherry, DDS  
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 John Stewart Sarria, DDS  
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 Ray Yakowicz, DDS  
 Jubin Zabolian, DMD  
 Periza Zaninovic, DDS  
 Farid Zurmati, DDS

*continued on page 40*

# CONGRATULATIONS TO THE 2022 AAID Associate Fellows

## 2022 AAID Foundation Silent Auction Donors

The AAID Foundation continued its tradition of raising money for AAIDF Grants and programs during the 71st Annual Conference this past September. The Foundation thanks the following organizations who donated items for the silent auction:

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- Glidewell Dental
- Impladent Ltd.



David Anthony Noles,  
DDS



Abhishek Patel,  
DMD



Binal Patel,  
DDS



Steven Regan,  
DDS



Zachary Rifkin,  
DDS



Caleb Robinson,  
DMD



Rajashree Roy,  
MDS



Inessa Safarov,  
DMD



Nathan Schwartz,  
DDS



Amith Shetty,  
BDS



Matt Starley,  
DMD



Jessica  
Stroud-Martin,  
DMD



Mohammed  
Umairuddin,  
BDS, MDS



P. Sofiya Usman,  
BDS, MDS



Jamsheed Yeganegi,  
DMD

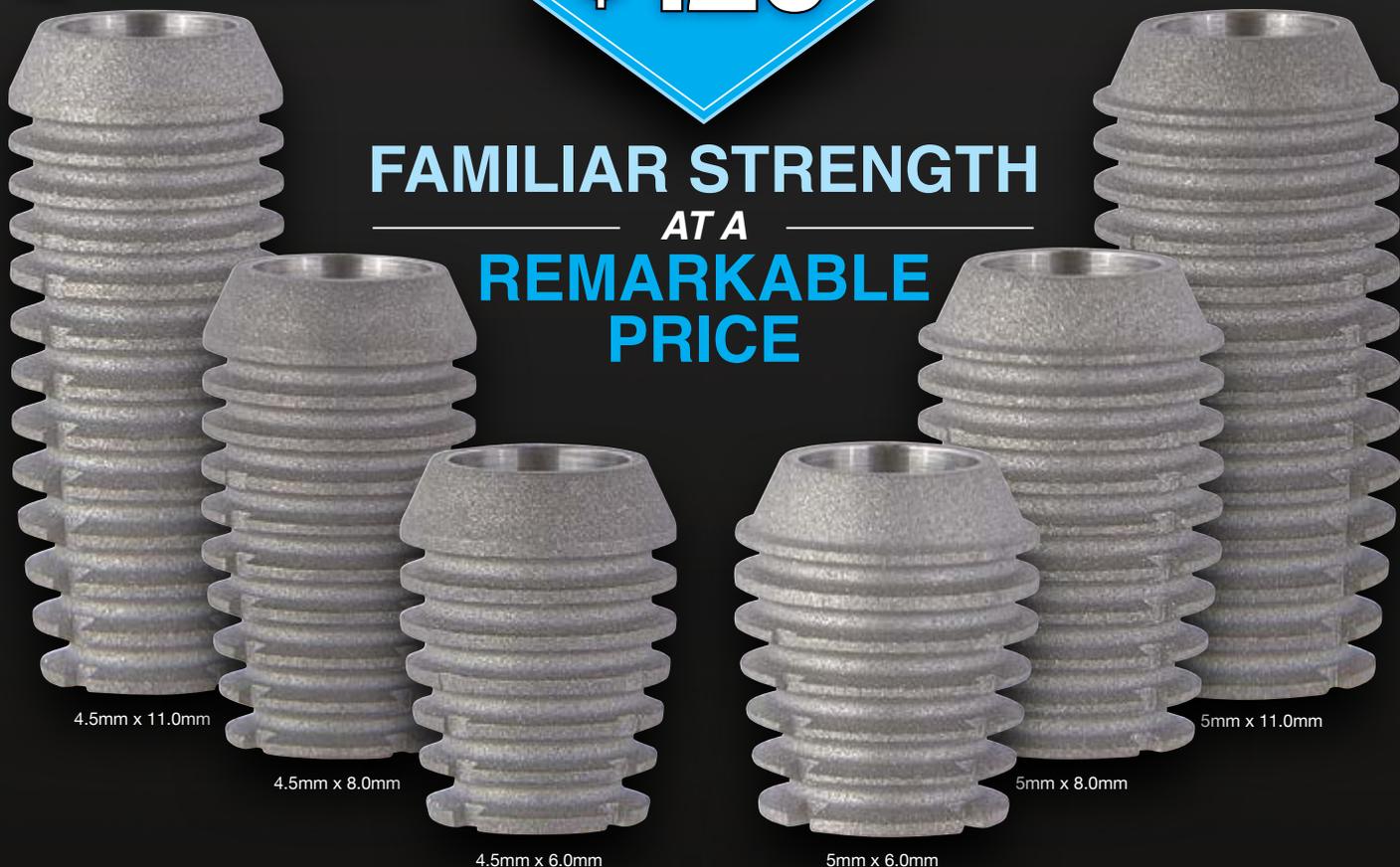




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# Annual Business Meeting



# SUMMARY

*President Dr. Brian Jackson called the 2022 Business meeting of the American Academy of Implant Dentistry (AAID) to order on Saturday, September 24, 2022. A quorum was present, and the meeting was called to order.*

*Following is a summary of the activities, actions, and reports given at the meeting.*

Dr. Jackson introduced the 2021-2022 Board of Trustees:

**2021-2022 Officers:**

- President-Elect Shane Samy
- Vice President Edward Kusek
- Treasurer Matthew Young
- Secretary Donald Provenzale
- Immediate Past President Duke Heller

**2021-2022 Trustees:**

- Central District Trustee: Bill Anderson
- Central District Trustee: Suhail Mati
- Northeast District Trustee: Robert Castracane
- Northeast District Trustee: Mario Silvestri
- Southern District Trustee: Richard Hughes
- Southern District Trustee: Andrew Kelly
- Western District Trustee: Christopher Petrush
- Western District Trustee: Keith Long

**Staff support to the Board:**

- Executive Director: Carolina Hernandez
- Chief Financial Officer: Jamey Richardson
- General Legal Counsel: Nathan J. Breen

Attendees were asked to have a moment of reflection for those who have passed away since the 2021 Annual Business Meeting:

**Associate Fellow Members:**

- Leyva Aguilar Francisco, DDS, Mexico City, Mexico
- Devin Brice, DMD, North Bend, Oregon

**Fellow Member:**

- Clarence Feller, DDS, San Antonio, Texas

In addition, two individuals who have been important to the AAID community for many years:

- Virginia “Ginny” Valen from Impladent
- Joyce Sigmon, an AAID employee for more than 20 years prior to her retirement



(L to R): Doctors Duke Heller, Shane Samy, Brian Jackson, Donald Provenzale, Jr., Matthew Young, and Edward Kusek

**2022 Annual Report:** Dr. Jackson reviewed the Academy's five-year strategic plan. The Board met in early January 2022 to develop the strategic approach to lead the Academy into the future. With the help and support of the membership and the profession, AAID will continue to grow in the future with new opportunities.

**AAID Mission Statement:** While our mission remains largely the same as it should, we have added a vision statement.

**AAID Vision Statement:** The American Academy of Implant Dentistry (AAID) works together to develop a collaborative and inclusive environment. We are focused on developing a patient-centered philosophy around excellence and compassion. Our sole intention is to uplift the profession of implant dentistry and to make it welcoming and accessible to all communities.

**AAID STRATEGIC PLAN:**

- **Clinical Education** – AAID wants to ensure Members understand and successfully apply high-quality implant dentistry techniques that improve patient outcomes.
- **Professional Advocacy** – AAID continues to defend and promote the ABOI and AAID credentials as bona fide designations of clinical competency.
- **Patient Advocacy** – AAID wants patients and our colleagues to be aware of, understand the quality of, and seek out care by credentialed implant dentists.

**Nominating Committee Report:**

Dr. Duke Heller advised that the Nominating Committee met by video conference on May 23, 2022. The Committee has submitted the following Slate of Officers for the 2022-2023 Leadership year:

- President – Shane Samy (automatic from President-Elect)
- President Elect – Ed Kusek
- Vice President – Matt Young
- Treasurer – Don Provenzale
- Secretary – Bill Anderson

Dr. Jackson reported that the nominated committee prepared its report in accordance with the AAID Bylaws, and it was shared with the voting membership. No additional nominations were made by petition for any of the offices; therefore, he declared the slate elected by acclamation. No other nominations were filed by the announced deadline. Therefore, a motion to accept passed by a unanimous voice vote.

*continued on page 44*



(L to R): Doctors Trace Rutherford, Vincent Vella, Donald Provenzale, Jr., Joseph Leonetti, Adam Kimowitz, Michael Katzap, Robert Heller, Rob D’Orazio, and Ninette Banday.

### Annual Business Meeting

*continued from page 43*

#### Introduction of 2022 Honored Fellows:

After briefly reviewing the selection criteria for Honored Fellows, Chair Dr. Trace Rutherford introduced the following members of the 2022 Class of Honored Fellows:

1. Ninette Banday, Abu Dhabi, United Arab Emirates
2. Rob D’Orazio, Lake Orion, Michigan
3. Robert Heller, Lewis Center, Ohio
4. Michael Katzap, Rego Park, New York
5. Adam Kimowitz, Denville, New Jersey
6. Joseph Leonetti, Paoli, Pennsylvania
7. Donald Provenzale, Jr., Downers Grove, Illinois
8. Vincent Vella, Rochester, New York



*continued on page 49*



# SAVE THE DATE

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## 2023 AAID ANNUAL CONFERENCE



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Transformation*

Nov 1 - 4  
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# newmembers

The AAID is pleased to welcome the following new members who joined between August 2, 2022 and November 20, 2022. The list is organized by state, with the new member's city included. International members are listed by country and province (if applicable). If you joined the AAID recently and your name does not appear below, it will be listed in the next issue of *AAID News*.

## PLEASE WELCOME THESE NEW MEMBERS IN YOUR AREA.

### Alabama

Scott Barnett, Pell City  
Bryan Kariya, Huntsville  
Benjamin Kellum, Huntsville

### Arizona

Rigas Kariotoglou, Scottsdale  
Bobby Keyvan-Jafari, Scottsdale  
Jaime Tobon, Cave Creek

### California

Randy Abdou, San Diego  
Robert Drury II, San Diego  
Orest Frangopol, San Clemente  
Kaylee Jamison, San Diego  
Gunjan Joshi, San Rafael  
Jaime Lau, San Carlos  
Sherry Nam, Cupertino  
Sameh Soliman, Jurupa Valley

### Colorado

Cassidy Mennen, Littleton  
Ryan Russ, Colorado Springs  
Tariq Sawaqed, Lakewood  
Nicholas Torrance, Denver

### Connecticut

Soonho Kwon, New Haven

### Florida

Robert Brown, Melbourne  
Jeff Bynum, Winter Haven  
Samuel Cancelliere, Naples  
R. Parker Mitchell, Venice  
James Muir, Tampa

### Georgia

Germain Bempah, Atlanta  
Richard Compton, Summerville  
Hyun Hong, Alpharetta  
Michelle Ireland, Ball Ground  
Daniel Johnson, Athens  
Joseph Lau, Atlanta  
Marc Plaisance, Atlanta  
Anthony Rella, Canton  
Michael Riddlehoover, Martinez  
Sydney Schafer, Augusta  
Kaveh Shokoufi Moghiman, Johns Creek  
Mike Stanley, Cumming  
William Verrillo, Macon

### Idaho

Chase Benson, Hailey

### Illinois

Mohammed Albomter, Chicago  
Janani Gurukkal, Chicago  
Earl Schneider, Glenview  
Kerry Voit, Golf  
Deepa Williams, Elgin

### Indiana

Brandt Finney, Bloomington  
Christopher Hayes, Noblesville

### Iowa

Cary Jackson, Council Bluffs

### Kansas

Brian Kynaston, McPherson

### Kentucky

Jay Cunningham, Paducah

### Massachusetts

Cherry Harika, Burlington

### Maryland

Kolade Akinwande, Waldorf  
Taimour Raja, Bethesda

### Michigan

Baron Grutter, Rockford  
Elias Gutierrez, Berrien Springs  
Hongying Pan, Battle Creek

### Missouri

William Montes, St. Louis

### Nevada

Pouyan Shahrokh, Las Vegas

### New Hampshire

David Chan, Bedford  
Todd Scheffler, Concord

### New Jersey

Mohamed Aboelsaad, North Brunswick

### New York

Huilin Wu, Oakland Gardens

## North Carolina

William Daily, Raleigh  
Ryan Marder, Durham

## Ohio

Ira Levenson, Washington Court House  
Carolyn Molzahn, Lewis Center  
Sabitha Parasa, Columbus

## Oklahoma

Shane Tewis, Tulsa

## Oregon

Haider Aljewari, Bend  
Kenneth Clow, Wilsonville  
Jill Glenn, Estacada  
Tin Le, Happy Valley

## Pennsylvania

John Gilliland, Allentown  
Ajaykumar Patel, Bethlehem

## South Carolina

Robert Gildner, Lexington  
Samuel Holtzclaw, Fountain Inn  
Michael Jimenez, Lexington  
Amar Patel, Yemassee  
Brian Sang, Florence  
Dominika Wisniewska, Greenville  
Gretchen Yarborough, Columbia

## South Dakota

Ryon Reckling, Sioux Falls

## Tennessee

Isaac Brown, Nashville  
Brent Cornette, Rogersville

## Texas

Jessica Baez, Conroe  
Richard Baratta, Sugar Land  
Carroll Butler, Kerrville  
Eric Cornelius, San Antonio  
Daniel Cortez, Houston  
Aaron Haag, Fair Oaks Ranch  
Fawzi Hijazi, San Antonio  
Kyeong Hwan Kim, Carrollton  
Tracy Kirk, Haltom City  
Richard Martin, Lewisville  
Spencer Moon, McKinney  
Chakrapani Nannapaneni, Frisco  
William Nguyen, Plano  
Eberechukwu Njoku, Dallas  
Sebastian Nunez, Houston  
Okeysolom Oradiegwu, El Paso  
An Pham, Houston  
Christopher Roclevitch, Dallas

Ramzi Saman, League City  
Auguste Schwalenberg, Hurst  
Michelle Torres Santos, Lubbock  
Michael Tran, Houston  
Tamer Zayed, Spring

## Utah

Kyle Crandall, St. George  
Robert Palmer, Morgan

## Virginia

Jayme Oliveira Filho, Chesapeake

## Washington

Collin Barker, East Wenatchee  
Patrick Orme, Port Angeles  
Jason Shirley, Port Orchard  
Mark Studeny, Tukwila  
Scott Beattie, Eagle River  
Emily Wojtowicz, Elroy

## CANADA

### Alberta

Taha Jomha, Edmonton

### British Columbia

Harry Ahn, Burnaby  
Gregory Allan, Vancouver  
Katelyn Colwell, Nelson  
Samira Hekmat, Victoria  
Ngan Huynh, Victoria  
Sabrina Longchamps, Nanaimo  
Jaspreet Mangat, Maple Ridge  
Sandy Nghiem, Vancouver  
Mehraban Noshiravan, Burnaby  
Harshdeep Sohi, Delta  
Bogdan Stanisavljevic, Burnaby  
Andrew Sweet, Saanichton  
Bochao Wang, Surrey  
Ian Wong, Vancouver  
Anselm Wong, Vancouver  
Eric Xu, Vancouver  
Han Yu, Abbotsford

### Ontario

Dmitry Horodetsky, Ottawa

## INTERNATIONAL

### Bangladesh

Md. Islam

### Bermuda

Frances Betts

## Costa Rica

Vinicio Prada

## Egypt

Ibrahim Attia

## India

Arnab Adhikari  
Rana Javeria

## Japan

Shintaro Ikeda  
Kouki Mitsui  
Genta Otani  
Hirotosugu Takaoka  
Yoshiyasu Tomida  
Keigo Yoshida

## Qatar

Rami Assad

## Saudi Arabia

Ali Almatrafi  
Alabbas Hamiduddin

## South Korea

Jinwoo Jung  
Youngbin Lee  
Chanwoong Moon

## Switzerland

Etyene Schnurr

## United Arab Emirates

Prabhalakshmi Balasubramanian  
Hassan Hassan

## STUDENT MEMBERS

Ana-Gabriela Benghiac  
Richard Berry  
Jennifer Claussen  
Emily Garfinkel  
Hyunjoon Kim  
Eunho Lee  
Michael Moon  
David Oancea  
Peter Ong  
Tyler Peterson  
Tyler Powell  
Arslan Qureshi  
Chase Thorpe  
Alex Tyurin  
Christian Westermeier  
Daniel White

# IN MEMORIAM

## AAID Family Mourns the Loss of Virginia "Ginny" Valen and Joyce Sigmon

*The AAID family this year is mourning the loss of two beloved women—Virginia "Ginny" Valen, wife of Dr. Maurice Valen, who passed away August 4th; and Joyce Sigmon, a former AAID employee of 20 years, who died on July 24th. Our hearts go out to both families.*

Ginny Valen, wife of AAID Foundation board member Maurice Valen, passed away peacefully on August 4th. Ginny had many interests and talents and was as comfortable sewing costumes for school plays and baking Christmas fudge as she was managing company payroll, organizing surgical seminars for hundreds of doctors, and helping to grow a family business.



She grew up on a farm in Enon Valley, Pennsylvania, about an hour northwest of Pittsburgh. Life on the farm required hard work and dedication, and it instilled in her a sense of responsibility that developed a tremendous work ethic. She had an adventurous spirit, loved having fun outdoors, and enjoyed riding her horses.

In the late 1960s, she successfully landed a job with United Airlines and ended up relocating by LaGuardia Airport in Queens. She lived in a one-bedroom apartment with seven roommates and somehow not only made it work but was able to successfully transition from her life on a farm in Pennsylvania to New York City.

It was here in Queens that she met her future husband Maurice, and the two married in 1972. They celebrated their 50th anniversary less than a week before she passed away.

During these years, Ginny joined Maurice not only in marriage but also in business at Impladent – which under her love and guidance became a family business. Maurice and Ginny were a great team in all aspects of life. She was a vital and indispensable member of the company and had an incredible ability to figure things out despite never having been trained to do so. She managed to learn sophisticated software, prepare sales spreadsheets and income statements, and manage all aspects of the family business.

Ginny is survived by her husband Maurice and their three sons Edward, Gregory, and Andrew. (A special AAID thanks to her family for providing details of her life in a Facebook post).

Joyce was born in Gaston County, North Carolina. She loved living in Chicago, where she resided for more than 40 years. She began working at AAID in 1992 and retired in 2014.



Joyce recounted how she came to work for AAID in an article covering her retirement. "I had never heard of the organization. At the time I was working for the Auxiliary of the American Dental Association," she told AAID News in 2014.

She then revealed that she was recruited to help AAID move from Philadelphia, where an association management firm managed it, to Chicago. Her colleague at the AADA, Joan Bingham, was married to a board member of AAID, and Joan recommended AAID hire

Joyce to help them get started in Chicago. Joyce procured office space in the ADA building on E. Chicago Ave. and AAID was up and running in the Windy City.

Joyce played an influential role in helping AAID find and hire its first executive director, Vincent Shuck. During the early Chicago years of AAID, Joyce served key roles in supporting the Academy's administration, admissions, and credentialing functions.

Upon retirement, Joyce remarked that she had spent her entire life in the service of dentistry. "My first job was as a dental assistant, and I taught dental assisting at North Carolina Community College. I then went back to school to earn my degree in dental auxiliary education at the University of North Carolina at Chapel Hill."

As a senior at UNC, the American Dental Association offered her a job as the new Director of Dental Assisting Education. During her time in Chicago, she was an active member of Fourth Presbyterian Church of Chicago and enjoyed the Chicago Symphony. A lifelong learner, Joyce was a graduate of UNC-Chapel Hill and Loyola University Chicago. Joyce loved traveling and seeing the world, having visited most of the 50 states and many different countries.

Memorials for Joyce may be made to Fourth Presbyterian Church of Chicago, 126 E. Chestnut St., Chicago, IL 60611 ([fourthchurch.org](http://fourthchurch.org)), or to Hospice & Palliative Care of the Charlotte Region, P.O. Box 470408, Charlotte, NC 28247 ([donatehospice.org](http://donatehospice.org)).

## Annual Business Meeting

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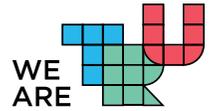
**Report of the Treasurer:** Dr. Matt Young reported 2022 has offered unique challenges. We have seen some positive revenue trends, but a sustained decrease in Membership Dues as well as rising costs create operational challenges. These challenges are made worse by poor performance in financial markets. Dr. Young reminded the membership that years of active support have given the AAID a strong financial base. AAID continues to weather significant challenges. Despite these challenges, our operating reserves remain strong and will ensure a stable foundation to build in the future.

Dr. Edward Kusek, Vice President and Chair of the Legal Oversight Committee, provided the Legal Oversight Report. The AAID has been defending AAID credentials through court cases for several years. Each court case has been a step forward in using our credentials and establishing the ABOI/ID Diplomate as the certifying board for specialists in implant dentistry. This year, the Oregon Dental Board and the Michigan Dental Board reached settlement agreements with AAID.

*continued on page 50*



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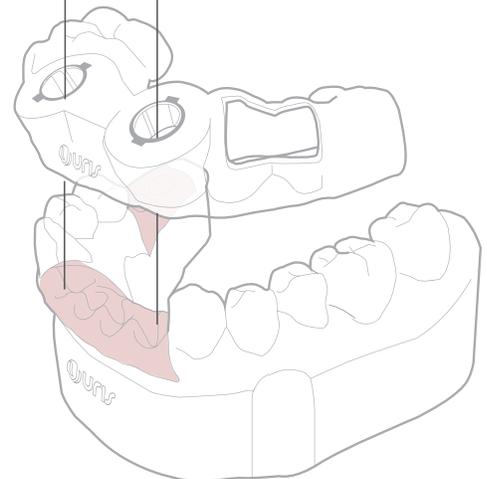
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## Annual Business Meeting

continued from page 49

**Report of ABOI/ID:** ABOI/ID President Dr. Joseph Leonetti presented the ABOI report. 2022 has been a good year for the American Board of Oral Implantology/ Implant dentistry, with the induction of 40 new Diplomates into the ABOI. The ABOI currently has 640 active Diplomates. The ABOI Board of Directors hopes that

new Associate Fellows will continue their professional training to someday achieve Diplomate status with the ABOI.

**Report of the AAID Foundation (AAIDF):** Secretary Randy Rose noted that the Foundation continues its recovery post-pandemic. The Foundation's fundraising

efforts will bring some excitement to the 2022 Annual Conference and continue the work of our organization. The AAIDF Silent Auction has 63 donations from 22 donors. The auction raised almost \$70,000 to support the Foundation.

2022 Associate Fellows and Fellows at the AAID Annual Conference



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 Email: sarah.inglewooddental@gmail.com  
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 Hiroshi Murakami, DDS, PhD, FAAID  
 Koji Ito, DDS, PhD, FAAID  
 Komatsu Shinichi DDS, PhD, FAAID  
 Takashi Saito, DDS, PhD, FAAID  
 Contact: Yasunori Hotta, DDS, PhD, AFAAID  
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 Email: gibbs@sdm.rutgers.edu  
 Phone: 973-972-6561  
 Website: cde.sdm.rutgers.edu/maxicourse/

## San Juan, Puerto Rico AAID MaxiCourse®

San Juan, PR  
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 Assistant Director: Jose Pedroza, DMD, MSC  
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 Email: prmaxicourse@gmail.com  
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 Website: www.theadii.com

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 Phone: 905-235-1006  
 Website: www.timaxinstitute.com

## Vancouver AAID MaxiCourse®

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 Phone: 604-330-9933  
 Website: www.vancouvermaxicourse.com

## Washington, DC AAID MaxiCourse®

Washington, D.C.  
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 Phone: 404-897-1699  
 Website: www.dcmximaxicourse.com

## AAID Active Study Clubs

### UNITED STATES

#### AAID Bergen County Dental Implant Study Group

Location: Englewood, NJ  
 Director: John Minichetti, DMD  
 Contact: Lisa McCabe  
 Phone: 201-926-0619  
 Email: lisapmccabe@gmail.com  
 Website: bit.ly/2rwf9hc

#### Alabama Implant Study Club

Location: Brentwood, TN  
 President: Michael Dagostino, DDS  
 Contact: Sonia Smithson, DDS  
 Phone: 615-337-0008  
 Email: aisdadmin@comcast.net  
 Website: www.alabamaimplant.org

#### Bay Area Implant Synergy Study Group

Location: San Francisco, CA  
 Director: Matthew Young, DDS  
 Phone: 415-392-8611  
 Email: young.mattdds@gmail.com  
 Website: www.youngdentalsf.com

#### Calderon Institute Study Club

Location: Queens, NY / Oceanside, NY  
 Director: Mike E. Calderon, DDS  
 Contact: Andrianna Acosta  
 Phone: 631-328-5050  
 Email: calderoninstitute@gmail.com  
 Website: www.calderoninstitute.com

#### Hawaii Dental Implant Study Club

Location: Honolulu, HI  
 Director: Michael Nishime, DDS  
 Contact: Kendra Wong  
 Phone: 808-732-0291  
 Email: mnishimedds@gmail.com  
 Website: www.advancedrestorativedentistry808.com

#### Hughes Dental Implant Institute and Study Club

Location: Sterling, VA  
 Director: Richard E. Hughes, DDS  
 Contact: Victoria Artola  
 Phone: 703-444-1152  
 Email: dentalimplant201@gmail.com  
 Website: www.erhughesdds.com

#### Implant Study Club of North Carolina

Location: Clemmons, NC  
 Director: Andrew Kelly, DDS  
 Contact: Shirley Kelly  
 Phone: 336-414-3910  
 Email: shirley@dentalofficesolutions.com  
 Website: www.dentalofficesolutions.com

#### Mid-Florida Implant Study Group

Location: Orlando, FL  
 Director: Rajiv Patel, BDS, MDS  
 Contact: Rajiv Patel, BDS, MDS  
 Phone: 386-738-2006  
 Email: drpatel@delandimplants.com  
 Website: www.delandimplants.com

#### SMILE USA® Center for Educational Excellence Study Club

Location: Elizabeth, NJ  
 Director: Shankar Iyer, DDS, MDS  
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 Email: dentalimplant201@gmail.com  
 Website: www.malosmileusaelizabeth.com

### CANADA

#### Vancouver Implant Continuum

Location: Surrey, BC, Canada  
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 Contact: Andrew Gillies  
 Phone: 604-330-9933  
 Email: andrew@implant.ca  
 Website: www.implant.ca

### OTHER INTERNATIONAL

#### Aichi Implant Center

Location: Nagoya, Aichi-Ken, Japan  
 Director: Yasunori Hatta, DDS, PhD  
 Phone: 052-794-8188  
 Email: hotta-dc@ff.ijj4u.or.jp  
 Website: www.hotta-dc.com

#### Beirut AAID Study Club

Location: Beirut, Lebanon  
 Director: Joe Jihad Abdallah, BDS, MScD  
 Phone: 961-174-7650  
 Email: beirutidc@hotmail.com

## Courses presented by AAID credentialed members

### UNITED STATES

#### The Dental Implant Learning Center Basic to Advanced Courses in Implant Dentistry

John C. Minichetti, DMD  
 Contact: Jennifer Yang  
 Phone: 866-586-0521  
 Email: jenn.inglewooddental@gmail.com  
 Website: www.dentalimplantlearningcenter.com/ce-courses/register-online

#### California Implant Institute

Dr. Louie Al-Faraje, Academic Chairman  
 Phone: 858-496-0574  
 Email: master@implanteducation.net  
 Website: www.implanteducation.net

#### Connecticut Dental Implant Institute

Location: Manchester, CT  
 Various Courses available  
 Dr. Joel L. Rosenlicht  
 Contact: Michelle Marcil  
 Email: michelle@jawfixers.com  
 Website: www.jawfixers.com

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## Courses presented by AAID credentialed members

### UNITED STATES

#### East Coast Implant Institute

Location: Manchester, CT  
 Various Courses available  
 Dr. Brian J. Jackson  
 Contact: Jana Selimovic  
 Phone: 315-922-2176  
 Email: education@bostonmaxicourse.com  
 Website: eastcoastimplantinst.com/upcoming-courses/

#### Implants in Black and White

Dr. Daniel Domingue & Dr. Jerome Smith  
 Contact: Maggie Brouillette  
 Phone: 337-235-1523  
 Email: maggie@jeromesmithdds.com  
 Website: www.blackwhiteimplants.weebly.com

#### Introductory Implant Placement 6-Day Dental Implant Course

48 CE in 6 days  
 Dr. Michael Shulman  
 Email: info@shulmandds.com  
 Phone: 201-840-7777  
 Website: www.adiseminars.com

#### Midwest Implant Institute

Drs. Duke & Robert Heller  
 Advanced Courses:  
 (311) Preserve This: Introduction to Extraction, Socket Preservation and PRP  
 (411) The All Inclusive Live Surgical Course  
 (601) Bone Grafting & Sinus Elevation  
 (603) Implant Prosthetics  
 (605) Digging Out of Problems  
 Contact: 614-505-6647  
 Email: samantha@mii1980.com  
 Website: www.midwestimplantinstitute.com

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 Contact: terri@smileusa.com  
 Phone: 908-527-8880  
 Website: www.smileusacourses.co

#### Pikos Implant Institute

Michael A. Pikos, DDS  
 Soft Tissue Grafting Sinus Grafting Alveolar Ridge  
 Strategies: Single Tooth to Full-Arch Fully Guided  
 Full-Arch Immediate Implant Reconstruction  
 Contact: Kali Kampmann  
 Phone: 727-781-0491  
 Email: learn@pikosInstitute.com  
 Website: www.pikosinstitute.com/programs-and-courses/coursecontinuum-overview

#### Stanley Institute for Comprehensive Dentistry

Dr. Robert Stanley  
 Contact: Megan Carr, Interim Director of Continuing  
 Education  
 Email: megan@stanleyinstitute.com  
 Phone: 919-415-0061  
 Website: www.stanleyinstitute.com

#### Train for Success: Live! Dental Implant Continuum

Dr. Joseph A. Leonetti  
 Contact: Scott Lauer  
 Email: scottlauer@implantedco.com  
 Phone: 949-257-5696

#### University Implant Educators Live Patient Surgical Course (All Inclusive) 4 Day Live Patient Surgery Courses

40 CE Hours, San Diego, CA  
 Professor Francis Jones (University of Nevada Las Vegas)  
 Contact: Grace Terrazona  
 Email: info@universityimplanteducators.com  
 Phone: 877-709-6623  
 Website: www.universityimplanteducators.com

### CANADA

#### Pacific Implant and Digital Dentistry Institute

Dr. Ron Zokol  
 Contacts: Barbara Cox & Dr. Faraj Edher  
 Emails: barbara.cox@ddidental.com  
 faraj.edher@ddidental.com  
 Website: www.ddidental.com

#### Toronto Implant Academy Taming The Old Dragons of Implant Prosthetics - 3 Part Virtual Webinar Series

Dr. Emil LA Svoboda  
 Contact: Christine Wade, Communications Officer  
 Phone: 416-432-9800  
 Email: info@reversemargin.com  
 Website: www.reversemargin.com

### OTHER INTERNATIONAL

#### Beirut Implant Dentistry Center

Location: Beirut, Lebanon  
 Drs. Jihad Abdallah & Andre Assaf  
 Contact: Mahia Cheblac  
 Email: beirutids@hotmail.com  
 Phone: 961-1-747650  
 Phone: 961-1-747651  
 Phone: 961-1-747652

#### Cancun Implant Institute: Comprehensive Oral Surgery Training for Modern Dental and Implant Practice

Dr. Joseph Leonetti & Dr. Bart Silverman  
 Emails: Jal3658@aol.com  
 Bsilver293@aol.com  
 Phone: 01-800-757-1202  
 Website: www.cancunimplantinstitute.org

#### Mini-Residency in Implants in Sri Lanka and Malaysia

Dr. Shankar Iyer  
 Contacts: Dr. Prasad Amaratunga, Sri Lanka  
 & Dr. Ahmed Shugey, Malaysia  
 Emails: pgdasrilanka@gmail.com  
 shugey64@gmail.com  
 Website: www.smileusacourses.com

**AAID News Staff**

**Editor**  
**Dennis Flanagan, DDS, MSc, FAAID, DABOI/ID**  
*editor@aaid.com*

**AAID Executive Director**  
**Carolina Hernandez**

**AAID Marketing & Communications Director**  
**Matthew S. Switzer**

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