A lasting solution for denture wearers

Atlas Denture Comfort secures new or existing dentures

Dentists often don’t look forward to having patients with dentures, according to Paul Homoly, DDS, president of Homoly Communications. When asked why, he replied that the procedure leaves both dentist and patient feeling bereft of lasting solutions: there is continuous need for repeated visits to the dentist for adjustments; patients endure discomfort and, worse yet, experience difficulty with everyday functions such as speaking, chewing, smiling or laughing. Even unwanted sounds, such as clicking or whistling, may be heard coming from the dentures.

All of this leaves people wearing conventional dentures feeling insecure and self-conscious. Denture wearers of any age could find themselves changing their daily routine — even choosing to avoid eating or laughing. Even unwanted sounds, such as speaking, chewing, smiling or laughing, may be heard coming from the dentures.

Atlas® Denture Comfort™ is a simple solution that was developed by Dentatus USA. This affordable, one-hour, chairside procedure will soon be the industry standard for securing and retaining either a patient’s new or existing dentures. Atlas Implants, approved for marketing by the FDA, are suitable for retaining lower dentures economically, regardless of the patient’s age.

The Denture Comfort Procedure consists of placing four Atlas narrow-body titanium alloy implants into the edentulous jaw anterior to the mental foramen. Then, Denture Comfort’s cushioning silicone, Tuf-Link®, is expelled into the denture to fit snugly over and around the short, dome-shaped heads of the Atlas implants so that the denture can be securely and confidently retained. The result is a comfortable fit and optimal retention, all without surgery, without bleeding and without bank-breaking expense.

Atlas Denture Comfort is the only system on the market today that eliminates the hardware typically associated with over dentures. The Atlas System uses no O-rings, no housings and no adhesives. The unique Tuf-Link silicone reline provides the retention to the implants for a stress-free denture, easy insertion, retention and removal.

This minimally invasive technique is easy for dentists to learn and implement, and may change the lives of your patients. Check out www.dentatus.com for upcoming hands-on workshops. Included in the tuition are a patient education model, complete patient start-up kit and marketing tools to help you get started.

Air-Flow perio: biofilm removal to the base of the pocket

With the Air-Flow handy perio, EMS is now penetrating into the subgingival area

According to the manufacturer, the innovative Air-Flow® handy perio is the first and only portable perio device that enables safe and effective removal of subgingival biofilm.

Based on the successful Air-Flow handy 2+ series and the Air-Flow Master, which was awarded an innovation prize, this handpiece again provides the dentist with an ergonomic masterpiece that EMS says is ideal for treating patients and enables the complete removal of biofilm.

The transparent dome and the power chamber have come out in pink. In this combination, the white, handy instrument is once again a genuine eye-catcher. Together with the Air-Flow powder perio, the single-use perio nozzle reaches down to the base of the periodontal pocket.

Biofilm impairs the removal of bacteria

Microorganisms establish themselves and multiply. The bacterial community develops its own protection: microbes come off and colonize new areas. In some cases, the body’s immune system is helpless. To prevent the penetration of microbes, the body triggers a bone deterioration process as an “emergency response.”

Because the biofilm protects the bacteria against pharmaceuticals, treatment has been very difficult to date. That is why EMS wants to mount an attack on damaging biofilm as part of subgingival prophylaxis treatment with an application summed up in the words “Air-Flow kills biofilm.” Using this method, dentists can also effectively treat the never-ending increase in the number of cases of peri-implantitis among implant patients and counter the impending loss of implants.

“Air-Flow kills biofilm.” Using this method, dentists can also effectively treat the never-ending increase in the number of cases of peri-implantitis among implant patients and counter the impending loss of implants.
Scottsdale Center for Dentistry selects Isolite dental isolation

Isolite Systems’ award-winning Isolite dental isolation technology has been installed throughout the Scottsdale Center for Dentistry. The 85,000 square-foot, $50 million learning facility is equipped to world-class standards and is widely regarded as one of the premier, most trusted and most respected C.E. centers in the world. The Isolite dryfield illumination tool is the most trusted dental isolation tool that combines the functions of light, suction and retraction into a single device, solving many of the frustrations that dental professionals deal with on a daily basis. Isolite gently holds the patient’s mouth open, keeps the tongue out of the working field, illuminates the oral cavity and guards the patient’s airway — all while continuously evacuating saliva and excess moisture.

The super-soft mouthpiece used with the device makes for a more comfortable experience for the patient and allows dental professionals to complete procedures on average 30 percent faster.

Isolite dental isolation technology will be used in hands-on portions of Spear Education courses and CEREC at the Scottsdale Center for Dentistry’s advanced training courses.

“We are very selective about the equipment in use at the center, and any equipment we choose must align with our mission to provide world-class dental education. Isolite is unique in that it facilitates clinical excellence in dentistry, improves financial productivity of the dental practice and also provides for an improved experience for patients,” said Jeff Roe, executive vice president of the Scottsdale Center for Dentistry.

“Bringing this advancement in dentistry to our course participants is a perfect fit.”

Isolite dental isolation technology was installed throughout the center’s six operatory dental practices of the future and its 10-operatory and 56-lab bench training facility.

The Isolite dryfield illumination has won extensive recognition in the industry, including being named a Dentaltown “Townie Choice Award” winner for five consecutive years, a REALITY 4-star product and winner of the “Dental Excellence Award: Best New Instrument” by DrBicuspid.com.

Isolite Systems will be demonstrating its Isolite and IsoDry dental isolation systems at booth No. 501 during the California Dental Association conference, Sept. 9–11, in San Francisco.

Reducing intraoral injection pain levels

Two independent studies have confirmed the effectiveness of the VibraJet dental needle attachment to block the pain of dental injections.

The first study by Fred Quarnstrom, DDS, et al. dealt with pain level comparisons resulting from usage of the Wand (Milestone Scientific) with those compared to usage of the VibraJet dental needle attachment.

The second study by Queens University statistically measured and compared the amount of pain reduction experienced by patients given block injections of local anesthesia using the VibraJet dental needle attachment with block injections given to subjects using conventional injection methods.

The following excerpt is from the first of these two studies by Quarnstrom:

“A study by Fred Quarnstrom (DDS, FASDA, FCID, FAGD, Diplomate, American Board of Dental Anesthesiology, Diplomate, National Board of Dental Anesthesiology), Sun Hee Bang-Pastore (DDS, Ruth Woldemicel (DMD) and David Chen (DDS) compared the VibraJet® to a computer-controlled injection device to control pain for injection of local anesthesia.

“Nineteen injections were done with the Wand handpiece of the CompuDent™ system by Milestone Scientific and 17 with the VibraJet by VibraJet LLC. Twenty-four were maxillary infiltrations and 12 were mandibular blocks.

“Patients reported the level of pain for the needle piercing their tissue, the injection of solution and their overall evaluation of the injection. No difference was seen for piercing the tissue, injecting the solution or overall report of pain.”

This study’s conclusion stated: “This study tends to indicate there is little difference in the pain perceived by a dental patient when injected using the VibraJet as opposed to injecting with the Wand.”

The second study is from Queens University, Belfast, Ireland, and reveals the following findings.

The study was conducted on 400 patients and showed that VibraJet statistically reduced the amount of “pain from 4.6 to 1.7, which is a pain level never statistically achieved before VibraJet.”

According to the Queen’s University study:

Results: “Subjects receiving the conventional injection methods had a mean pain score of 4.6 (± 0.414) The VibraJet group had a mean pain score of 1.71 (±0.255) (P<0.05). Certain sites had larger decreases in the mean pain score using the VibraJet. These included the upper anterior segment injections and lower right IDB injections.”

Conclusions: “The vibrating syringe attachment resulted in reduced pain levels on receiving intraoral injections.”
Control excess occlusal forces on implants

T-Scan bite analysis protects your dental work

All known published research on articulating paper consistently shows that articulating paper marks do not predictably measure the force or time-sequence of occlusal contacts accurately. The modern implantologist needs a diagnostic device that can reliably determine aberrant occlusal force concentrations and contact time probabilities.

The T-Scan® III system is the only diagnostic device on the market that measures occlusal contact force and occlusal contact sequence. Objective data sets T-Scan apart from traditional occlusal indicators. The invaluable information it provides helps to easily diagnose and assess the balance of a patient's bite. Full-color, 3-D graphics illustrate the forces evolving from first contact through closure, allowing the dentist to prevent general occlusal problems such as pain, gum disease, broken restorations, tooth loss, headaches and TMI disorder.

In implant dentistry, combining the force and timing information helps to control potentially damaging forces. According to Carl E. Misch, “once the final prosthesis is delivered to the patient, many factors that influence marginal bone loss have already occurred.” At this point, he says, “occlusal overload is one factor most in control of the restorative dentist.”

During a complete arch implant prosthetic insertion, computerized occlusal analysis can be used to target regions of excessive force concentrations. This allows you to realign an unbalanced bite that will, under occlusal function, destabilize and torque the prosthesis. In mixed arch dentitions, the T-Scan's time-sequencing capability ensures implant prostheses are loaded fractions of a second after neighboring natural teeth reach complete occlusal contact. Non-simultaneous contact avoids overloading of the segmental implant prosthesis.

Computer-guided occlusal adjustments better preserve the occlusal materials, abutment screws, all-ceramic abutments and the implant-bone interface, which cannot be accomplished with traditional occlusal indicators.

Dr. Chris Stevens published a case report on a patient treated with two implant fixtures. Radiographs revealed significant bone breakdown over time. Once an appropriate occlusal scheme was determined, it became evident that regeneration of the crestal bone was achieved. He concluded that articulating paper did not provide the vital information needed to appropriately prepare his implant prosthesis for long-term success.

To learn more about managing occlusal forces on implants with the T-Scan, join a live webinar, “Implant Preservation by Computerized Bite Analysis,” presented by Dr. Robert Kerstein, on Sept. 14. To register for this webinar, visit www.detroitcub.com.

If you are attending the CDA meeting, stop by booth No. 2135 for more information on T-Scan III bite analysis and to have your own bite scanned. Call (800) Bite-Now or visit the website at www.teksan.com/dental.

References
1. Carl E. Misch, Jon B. Suzuki, Francine Misch, and Martha Bidez; A Positive Correlation Between Occlusal Trauma and Peri-implant Bone Loss: Literature Support; Implant Dentistry/Volume 14, Number 2, 2005
Changing dentistry one injection at a time

The BEST way to start every procedure!

The Science

VibraPulse Pain Blocking Technology sends intermittent micro-sonic oscillations to the brain’s neurological pain sensors, closing the Pain Gate, blocking the pain of the injection.

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- Reduce Personal Stress. Almost 20% of dentists considered changing professions due to the stress of administering injections **
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Monitor the KPIs of your dental practice from your iPhone/iPod

Free app from Sikka Software allows appointments, key performance indicators and real-time benchmarking

iPhone Dental Practice Monitor (iDPM) v2.1 from Sikka Software, available exclusively at the Apple app store, can display appointments, benchmarking and key performance indicators from your practice automatically, and best of all, it’s absolutely free.

This enhanced version further simplifies accessing percentile benchmarking data from more than 6,400 installations of Sikka and key performance indicators for all major dental practice business ratios. You can also view details of the application, partners and breakthrough dental optimization applications.

Enhancements include the ability to automatically read appointments, procedures to be performed and expected production on your iPhone or iPod.

You can also review offline and online key performance indicators and benchmarking numbers in both tabular and graphical form.

Sikka continues to improve this application and plans to add many more capabilities in the future. Desktop Dental Practice Monitor” (available free from www.dentalpracticemonitor.com) should be loaded on any user machine at the practice and appropriate authentication codes activated. All these applications and services are free.

“You don’t have to pay to see your patient appointments, key performance indicators, schedule, benchmarking and production values on your iPhone or iPod mobile device,” said Vijay Sikka, Sikka Software CEO.

With this dental industry appointments and KPI application for iPhone and iPod, Sikka extends its lead as a business optimization solution for the dental industry. In the last six years, Sikka has introduced revolutionary on-demand products for business optimization, clinical benchmarking and fee optimization for the dental industry including its latest, www.FeeOnDemand.com and www.DentalPractice360.com.

iDPM has key capabilities and features including:
• Monitor your current and future two days of appointments and production
• Monitor your practice KPIs with the click of a button
• Online and offline capability
• Review latest percentile (national data) anytime and anywhere

iDPM for iPhone is available as a free download from Apple’s app Store on iPhone and iPod touch.

About Sikka Software
Sikka Software (www.sikkasoft.com) is a market leader for business optimization, business intelligence and business connection products for office-based health-care practitioners worldwide and with more than 6,400 installations, Sikka Software products maximize business profitability, establish clinical benchmarking, improve outcomes, provide optimized fee schedules and marketing campaigns and provide high return on investment through analysis of patients, insurance, supplies and demographics.

Sikka Software products are compatible with most practice management systems and financial systems in the United States and Canada.

A privately held company, Sikka Software is headquartered in Milpitas, Calif., with offices in the United States and India.
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SGS fees go to some of the most highly regarded dental practitioners in the industry to teach our seminars. Our instructors bring years of experience from a variety of dental backgrounds and their presentations are nothing short of outstanding. No, we do not believe our courses will exceed your expectations as we are claiming nothing less. Participant registration fee is paid by SGS only. Registration materials only. If dissatisfaction is not completely satisfied. Full service is required. Credit will only be given to the provider and not the participant. Credit may not be applied to fees, materials or any SGS product or services.
Administering injections: your patient’s first impression

Making a great first impression provides the foundation for building a great relationship. In the dental office, the first impression that patients have when starting a new procedure can often influence a patient’s willingness to proceed with the treatment plan recommended by the dentist. Dr. Steven Goldberg, an NYU graduate who operates a successful practice in Boca Raton, Fla., understands just how valuable the patient’s first impression is to his practice and invented a new dental instrument called the DentalVibe™.

With the knowledge that 18.8 percent of practicing dentists have considered a career change (Simon Study) because of the stress of administering anesthesia, and knowing that more than 50 percent of Americans put off going to the dentist because of fear, Goldberg invented an intra-oral device designed to reduce patient anxiety. The device also offers increased comfort while simultaneously reducing the dentists’ stress level while administering the injection – especially the palatal and block injection.

DentalVibe’s research and development was inspired by the “Gate Control Theory of Pain.” Studies have proven that the brain can only recognize one sensation at a time when it comes to the transmission of pain throughout the body. DentalVibe has incorporated VibraPulse™ technology, which sends a series of pulsed vibrational impulses to the pain sensor in the patient’s brain. The vibrations and pulses close the pain gate, therefore eliminating any opportunity for the pain of the needle penetration or the pain associated with the pressure of anesthesia within the tissue to reach the patient’s pain sensor.

“When I graduated dental school I recognized that I truly wasn’t 100 percent comfortable with the injection process. Although I used different techniques and products through the years, none really provided me with complete confidence or predictability.

“Seven years ago I started investigating alternative solutions, and through the idea and concept stage emerged the early prototype for the DentalVibe,” said Goldberg.

The early design called for the device to be manufactured with a brushed aluminum casing, but soon the look changed to a softer, more patient-friendly design. “I recognized that if the objective was addressing patient anxiety and comfort, then the instrument needed to appear friendly and non-threatening,” said Goldberg.

Eventually the company settled on a design that somewhat resembles a power toothbrush, hoping that patients would recognize DentalVibe as a friendly instrument.

DentalVibe is a perfect partner...
for administering anesthesia as its sleek design works as an oral retractor, allowing for tremendous sightlines and access to the injection site. DentalVibe also incorporates an illumination feature that produces a beam of light into the injection area.

Since launching DentalVibe in February, the company said it has been receiving nothing but high praise from the dental community. According to the company, the early adopters who incorporated DentalVibe into their practices quickly recognized that patients embrace this new technology. Dentists found patients were asking about the DentalVibe as they returned for their next visit and kids were fascinated by the accessory toys that clip on to the end of the instrument for pediatric procedures.

The company said it has received inquiries from more than 90 different countries and had hundreds of dentists gather at its trade show booths in New York and Chicago. “There’s an obvious natural market for this instrument,” said Scott Mahnken, vice president of sales and marketing.

To expand the product’s awareness and to allow dentists to try DentalVibe, the company is offering a limited time in-office clinical trial. Dentists can try DentalVibe risk-free in their own office for 30 days. “We feel that once a dentist tries DentalVibe and witnesses the immediate impact it has on the practice that DentalVibe will be part of the standard of care for each patient,” said Mahnken.

DentalVibe is sold direct to dental offices and is not available through dental product distributors. Each office that purchases a DentalVibe is assigned an in-house dental professional. The dental professional is there to address any clinical or technical questions the office might have.

The learning curve for implementing DentalVibe into the procedure is minimal and most dentists are comfortable with the device within 10–15 minutes. DentalVibe is cordless and can operate on 110V or 220V, and it’s portable so you only need one per office.

Replacement comfort tips are available in two sizes, adult and pediatric, and there’s a selection of animal tops that can be mounted on the end of DentalVibe that are ideal for when you’re treating younger patients.

Imagine rewarding younger patients with a gift for being good patients during the injection process. A few of the pediatric dentists using DentalVibe have reported that kids in their office are asking if they are getting a shot so that they can receive their toy animal gift.

According to the company, one visit to www.dentalvibe.com will show you that DentalVibe is being recognized as a revolutionary new dental instrument. With just a few months presence in the market, the company has attracted the attention of local news media. Several neighborhood dentists have already been featured on the local news and are seeing the benefits of new patient referrals.

DentalVibe is a unique instrument. It was designed to scientifically improve the injection experience for both the patient and the dentist.

What the company didn’t realize is that it would become a “referral machine,” and also reduce cancellations because patients know the injection is no longer an issue, according to company representatives.

One new DentalVibe dentist said: “I was a creature of habit, and initially I was a bit hesitant to try DentalVibe. After using DentalVibe on a few patients, I immediately recognized there was less stress. Later, when I heard a patient sharing the experience with their relative in my waiting room, I knew I made a good decision.”

To learn more about DentalVibe call (877) 505-VIBE (8425) or www.dentalvibe.com.
Curve Dental, developers of web-based dental software, announced the release of CurveEd, a free web-based patient education software available to all dental professionals in August. Accessed at www.curveed.com, the software includes more than 60 professional 3-D videos and can be viewed on a PC, Mac, iPad or iPhone.

“We make dental software a simple experience,” said Jim Pack, CEO of Curve Dental. “Many offices don’t use patient education software because of high licensing costs combined with the heavy chore of installing, training, supporting, upgrading and backing up of additional server-based software. CurveEd solves all those problems.

“It is free, and because it is web-based, CurveEd simplifies the experience for the dental professional; there’s no installation, upgrade or backup worries, and the software is so easy to use there’s no need for expensive training or support. Providing the service at no charge makes it even easier for the dentist, hygienist or dental assistant to put it to use to the benefit of the patient and the practice.”

CurveEd provides more than 60 different dental patient education videos in 3-D in 11 different categories. Each video is professionally narrated, covering a wide range of topics from restorative procedures to cosmetic procedures to endodontics.

Created by a team of dentists, every video is accurate with regard to anatomy and procedure but is tempered with a light narrative and artistic style. Patient education helps dental professionals build trust by providing their patients with an understanding of their current oral health condition and proposed treatment and outcomes.

CurveEd allows the dental team to show patient education videos within the practice or send a web link to their patient via e-mail. When a video link is sent by e-mail, CurveEd tracks which video link was sent to which patient and whether or not the patient opened the e-mail and clicked on the link to the video. Detailed tracking can help the practice build a comprehensive patient history and show proper jurisprudence.

As a web-based application, CurveEd can be used on a PC, Mac, iPad, iPhone and other similar mobile devices. To access the software, navigate to www.curveed.com and create a free account.

Registration requires little more than a name and an e-mail address. Initial registration provides the practice with access to about one-third of the library. By simply referring CurveEd to two colleagues, the dentist or team member will have instant access to the entire library while giving other dental professionals the opportunity to utilize the free service in their practices.

“You’ve been asked many times if the software really is free,” said Pack. “It really is free, which is remarkable given the value it can provide to any practice. A better educated patient base increases treatment plan acceptance ratios, which increases a practice’s productivity. “CurveEd’s mission is twofold: First, to provide a valuable tool that can advance proper oral care and treatment, and second, to give more dentists and staff a personal experience with web-based dental software.”

Curve Dental (888)-910-4376
www.curvedental.com

CurveEd includes 3-D videos addressing all facets of dental care

Free web-based patient education software released

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The future of dentistry lies within a microscope

By Dr. Stephen Johansen

The times they are a changin’. Sometimes it is difficult to determine if something is a fad or if it is the future. When I was in college, I walked by a computer lab filled with students and asked what they were doing. I was told they were using the Internet and sending e-mails. At the time, I saw it as a fad and thought it would never last. I was wrong.

The first time I looked through a microscope to do a dental procedure, I had a very different reaction. I knew this was no fad; this was the future and it would transform the way general dentistry is performed. With time, I will be proven right.

My path to microscope-enhanced dentistry started with lower back pain. After only a few years in practice, I was suffering from musculoskeletal disorders due to poor posture and prolonged static positions. I was faced with either finding a new career or finding a new way to practice. Enter the world of everyday restorative dentistry.

I was accustomed to practicing with 4.5x loupes, but the value of extreme magnification was a whole new world of vision. After a little due diligence, I decided as a general practitioner I would be well served with a scope having three levels of magnification.

More levels are nice, but I found myself using two levels about 90 percent of the time, and I liked the idea of a simple scope without a lot of clutter. Seiler’s IQ microscope with a ceiling mount was the perfect choice.

My posture improved, my health improved and, as a side note, the level of precision I was capable of improved dramatically. You cannot believe what you can see in a microscope while doing restorative dentistry! Sure, everyone knows the value of extreme magnification while doing endodontics, but few know of its value for a GP doing everyday restorative dentistry.

The first time I looked into a microscope I knew there was no going back. I was accustomed to practicing with dead hands. It is a game changer. Seiler’s IQ microscope was a whole new world of vision. After a little due diligence, I decided as a general practitioner I would be well served with a microscope having three levels of magnification.

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Of all the gadgets, bells and whistles I’ve purchased over the years, you could have them all back, but the scope you would get my scope would be to pry it from my dead hands. It is a game changer like no other piece of equipment I own. The future is here. I suggest you peek into a microscope and see it for yourself.

Johansen practices in Sandy, Utah. You may visit him online at www.sjdentistry.com.

Join California Implant Institute

The California Implant Institute was developed in 2001 by Dr. Louie Al-Faraje to provide quality continuing education on the subject of dental implants and related topics using a hands-on approach. As director, Al-Faraje has trained more than 1,000 clinicians in a hands-on, yearly forum of education in implant dentistry.

Al-Faraje holds diplomat status at the American Board of Oral Implantology, fellowship status at the American Academy of Implant Dentistry and fellowship status at the International Congress of Oral Implantologists.

The California Implant Institute offers a one-year comprehensive fellowship program in implant dentistry. This program is made of four sessions designed to provide dentists with practical information that is immediately useful to them, their staff and their patients.

The four sessions combined offer more than 160 hours of lectures, laboratories and simulation and surgical demonstrations.

The goal of the faculty team, which is composed of some of the most respected instructors from the United States and around the world, is to provide you with comprehensive knowledge that will enrich your practice and improve your clinical skills so you can confidently perform predictable, prosthetically driven implant dentistry.

Session one topics
During the first session of this one-year comprehensive hands-on implant training program, the following topics are covered: anatomy, bone physiology, patient evaluation for implant treatment, risk factors, vertical and horizontal spaces of occlusion, bone density, step-by-step implant surgical placement protocols, impression techniques, restorative steps for implant crown and bridge and more.

Session two topics
During session two, computer-guided implant placement and restoration using SimPlant software, immediate-load techniques for single and full-arch cases, biology of osseointegration, miniimplants, bone grafting before, during and after implant placement and pharmacology will be discussed.

Implant prosthodontics for fully edentulous patients, high-water design, bar-overdenture, CAD/CAM designs, etc., will highlight the prosthetic portion of this session.

Session three topics
Advanced implant surgical techniques, such as alveolar ridge expansion with split cortical technique, guided bone regeneration, sinus lift through the osteotomy site and more, are covered in this session.

Hands-on pig jaw workshops using regenerative materials are performed by the class, and there are live surgery demonstrations by faculty. The restorative portion of this session will focus on biomechanical principles, biomaterials and implant occlusion.

Session four topics
This session will focus on sinus lift through the lateral window, ramus block graft and chin block graft as well as the J-Block grafting procedures. PRP and other advanced bone grafting materials such as rh-BMP2/ACS grafts with titanium mesh.

The final graduation examination and certification ceremony will conclude this comprehensive implant training program.

For more information or to register, please contact Jennifer Bettencourt at (858) 696-0574 or visit www.implanteducation.net.
STA: essential for cosmetic dentistry

System works well for P-ASA injections

The STA Injection System, a computer-controlled local anesthetic delivery or C-CLAD (Fig. 1), is not only great for single-tooth anesthesia but is also very useful for administering multiple-tooth anesthesia injections such as the palatal-approach anterior superior alveolar nerve block (P-ASA).

The P-ASA is a single-site palatal injection into the nasopalatine canal (Fig. 2), which can produce bilateral anesthesia to six anterior teeth and the related facial and palatal gingival tissues (Fig. 3) without causing collateral numbness to the patient’s upper lip, face and muscles of facial expression (Fig. 4). Patients have said they really appreciate this.

Using significantly less anesthetic, this easy-to-administer injection can take the place of at least four supraperiosteal buccal infiltrations and a palatal injection.

It is valuable for cosmetic restorative dentistry procedures such as composites, veneers and crowns because you can immediately assess the patient’s smile line when the lip is used as a reference point.

The P-ASA is also useful for endodontic, periodontal and implant procedures. In fact, it is recommended as the primary injection for any or all of the six maxillary anterior teeth.

During administration and postoperatively, the P-ASA is a very comfortable injection for your patients because of the STA computer-controlled flow rate below the patient’s pain threshold, the use of minimal pressure and the ability to easily control the needle using the wand-handpiece.

Check out the simple injection technique for the P-ASA on the STAis4U.com website.

Milestone Scientific asserts it’s easy to do, you’ll like it and so will your patients.

Velopex’s air abrasion unit

There are many uses of the Velopex Aquacut Quattro Fluid Air Abrasion Unit.

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- composite repair
- cavity preparation
- white spot removal
- pre-bonding conditioning of enamel

Stain removal
- fissure cleaning and sealing
- stain removal
- caries removal

Cleaning and polishing
- fissure cleaning and sealing
- carries removal

Etching
- etching
- porcelain repair
- metal bonding
- treating lab work
- pre-bonding conditioning of enamel
- wash and dry

The Aquacut Quattro will give you greater control and flexibility than any other piece of equipment you own. Some of its other benefits include:
- no vibration, turbine noise, heat generation or smell,
- greatly reduced need for local anesthesia,
- a handpiece that creates a fluid curtain around the powder medium,
- a triple-action foot control that speeds treatment by allowing cut, wash and dry operations through the same handpiece,
- no chipping or stress fracturing,
- minimal loss of sound tooth material.