New ways to connect at Midwinter Meeting

Chicago Dental Society adding a lunch bistro and entertainment in exhibit hall

The exhibit hall at the Chicago Dental Society’s Midwinter Meeting has long been a popular draw at the 150-plus-year-old meeting. And this year there are even more reasons to include it as a core component of your Midwinter Meeting experience.

Online registration for the Chicago Dental Society’s Midwinter Meeting is available through Feb. 19. The meeting will be held from Feb. 25–27, at McCormick Place West in downtown Chicago.

Midwinter Bistro

New at this year’s meeting is the Midwinter Bistro, located in the CDS Restaurant on Level 3 and in the exhibit hall. You can reserve your seat online for lunch in the CDS Bistro by visiting www.bistrotickets.com/cds after you preregister for the meeting.

Of course, the 460,000-square-foot exhibit hall also will feature its usual array of the latest in professional products and instruments. Attendees will be able to experience hands-on introductions to equipment and materials, meet with reps knowledgeable about top products and learn more about dentistry’s latest state-of-the-art advancements from more than 600 exhibitors.

Early registration encouraged

CDS members can attend the meeting at no additional charge, but all dental professionals are invited to register. Also, dental professionals from outside the immediate area can join the CDS as associate members to qualify for member registration for the meeting. Early registration is recommended to guarantee your seat in whichever of the numerous courses are of most interest to you. If you register before Jan. 31, your badge and registration materials will be mailed to you; eliminating any need to wait in line to pick up your badge at the meeting. If you register after Jan. 31 but prior to the Feb. 19 deadline, badges will be available for pick-up at McCormick Place West. (Registration deadline for mailed materials for international attendees was Jan. 8).

Exhibits, entertainment and a Virtual Tradeshow Bag

The Midwinter Meeting exhibit hall adds another new twist this year when Ronnie Rice (formerly of Chicago’s own New Colony Six) and Skip Graparis (musician, film actor and comic, who also sang with New Ways to Connect at Midwinter Meeting

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Treats in the exhibit hall
When you visit the exhibit hall, you also can enjoy an ice cream treat courtesy of the CDS. Free-taste ice cream treats will be available on the exhibit floor during all three days of the meeting, starting at 3 p.m. on Thursday, Feb. 25, and Friday, Feb. 26, and starting at 2 p.m. on Saturday, Feb. 27, while supplies last on each day (so be sure to get there on time if you’re set on enjoying a treat).

Innovative continuing education
The CDS member-leadership team reports that it is always looking for ways to improve the Midwinter Meeting. And evidence of that is visible this year in the three new learning tracks that have been added to the meeting. For the first time, the University of Illinois Chicago College of Dentistry, the Southern Illinois University School of Dental Medicine and the Midwestern University College of Dental Medicine will each have their own C.E. tracks at the meeting.

Don’t miss Navi
It’s not all dentistry at the Midwinter Meeting, as confirmed at the ticketed opening session, 5:30 p.m. Thursday. The session features a performance by Navi, described as the No. 1 Michael Jackson impersonator. The performer from the United Kingdom will present his show “King of Pop – the Legend Continues.”

(Source: Chicago Dental Society)
NEW! Visalys® Core –
Secure core build-up for high stability.

Visalys® Core is a fluoride-containing, dual-curing composite, developed for the fabrication of radiopaque core build-ups and core fillings and for cementing root posts. The product incorporates Active-Connect-Technology (ACT), which is unique in the market. This enables the material to bond actively with popularly used light-curing and dual-curing, single-step and multi-step adhesives, without an additional activator. The advantage for users is that it allows them to use the bonding agent they are used to – no matter whether it is a light-curing or dual-curing, a single- or multi-bottle system. Call 877-532-2123 direct to place an order.

Visit us at the Chicago Midwinter Dental Meeting
> Booth #4713
Strong dollar adds to Canadian meeting’s appeal

Pacific Dental Conference also plans for some St. Patrick’s Day activities

The exchange rate at press time had the U.S. dollar worth more than $1.30 Canadian, which according to Pacific Dental Conference organizers, translates to great deals on travel, accommodations and other costs for U.S. residents attending the meeting. But the deals are just the beginning. The real benefits come from the more than 130 speakers and 193 sessions — and an exhibit hall with more than 600 booths. If that’s not enough to get you heading to Vancouver, British Columbia, the meeting also will include a bunch of St. Patrick’s Day fun, including a Celtic Celebration with Tiller’s Folly on March 17.

The PDC, which typically attracts more than 12,500 dental professionals, is from March 17–19 in Vancouver, British Columbia. Online registration is available at www.pdconf.com. For most attendees, C.E. credit is given for general attendance (up to five hours) and individual courses (up to 20 C.E. credits).

(Source: Pacific Dental Conference)

Pediatric dentists heading to the River Walk

American Academy of Pediatric Dentistry scientific session will be from May 26–29 in San Antonio

The fun and history of Alamo City combine with top speakers and high-value C.E. at the American Academy of Pediatric Dentistry (AAPD) 2016 annual session. The event will be held from May 26–29 at the Henry B. Gonzalez Convention Center in San Antonio, Texas. Online registration is open via www.aapd.org, with the cutoff for advanced registration set for April 4. You can use AAPD’s online itinerary planner to find details on the scientific program, social events and other events in San Antonio.

Barbecue, hoedown, carnival rides

The welcome reception on Friday, May 27, will feature a family-friendly fiesta San Antonio style, with barbecue, southern hoedown and carnival rides for the kids. The keynote speaker on Friday, May 27, will be Erik Wahl, an internationally recognized graffiti artist known for his high-energy, inspirational live performances. The best-selling author of the business book “UNThink” uses his on-stage painting as a visual metaphor to communicate his core message: encouraging organizations to achieve greater profitability through innovations and superior levels of performance.

Because attendees must register for the meeting prior to making meeting-block hotel reservations, attendees are encouraged to register early. There are a number of hotels in the AAPD block, including the Marriott Rivercenter (headquarters hotel), the Marriott Riverwalk, the Grand Hyatt San Antonio, the Hilton Palacio del
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New mouthguard gives athletes everywhere something to smile about

Keystone Industries, the U.S.-based company that manufacturers some of the world’s top mouthguard products, has launched the latest product in its Pro-Form Mouthguard line — the PF2 mouthguard.

Unlike laminated mouthguard products that require a dentist to custom fit to the patient, the PF2 mouthguard is a do-it-yourself guard that provides an accurate custom fit without any need to take impressions of the teeth.

No appointment; no impressions

With the elimination of appointments and impressions, the price of this guard is significantly lower than custom-fit mouthguards while still providing high-impact protection, according to the company. The PF2’s unique design also enables it to be re-fit by the user multiple times.

“Being a leader in this field means we need to set the bar high for new products and innovation,” said Michael Prozzillo, vice president of sales for Keystone. “The PF2 will change the way athletes buy mouthguards, but also how the dentist sells them.”

The suggested retail of the PF2 mouthguard is $38. It is available in either black or white. The company reports that there will be bulk purchasing available in the near future, which will include a display piece and literature on the product suited for dental offices.

Multiple color options will also be available soon, similar to the Pro-Form line of color options, according to the company.

Custom fit in less than a minute

“You just won’t be able to get ahold of another mouthguard that can be custom fit in under a minute and provide the same beneficial features,” said Derek Keene, Keystone’s vice president of marketing and product development. “We’re excited to watch PF2 take off and provide significant value to our customers and athletes across the country.”

To keep up to date on the PF2 and Keystone, go to www.keystoneindustries.com. You also can follow the company on all the major social media platforms.

About Keystone Industries

Keystone Industries, a privately held company founded in 1908, has maintained a reputation for producing innovative, high-tech dental products in both the operatory and laboratory realms. The company is committed to providing customers with the finest quality materials while developing products that surpass customer expectations. As this commitment has been met, the company has moved forward with expansion around the globe.

(Source: Keystone Industries)
Wireless and unconnected

Headlight transfers across loupes, frames

LED DayLite WireLess not tied to single pair of loupes or a specific eyeglass frame

Designs for Vision’s new LED DayLite® WireLess™ not only frees you from being tethered to a battery pack, but the simple modular design also uncouples the “WireLess” light from a specific frame or single pair of loupes. Prior technology married a cordless light to one pair of loupes via a cumbersome integration of the batteries and electronics into the frame. The compact design of the DayLite WireLess is independent of any frame/loupes.

The patent-pending design of the LED DayLite WireLess is a new concept: a self-contained headlight that can integrate with various platforms, including your existing loupes, safety eyewear, lightweight headbands and future loupes or eyewear purchases.

The LED DayLite WireLess is not limited to just one pair of loupes or built into a single, specific eyeglass frame. The LED DayLite WireLess can be transferred from one platform to another, expanding your “WireLess” illumination possibilities across all of your eyewear options.

1.4 ounces

The LED DayLite WireLess weighs only 1.4 ounces and, when attached to a pair of loupes, the combined weight is half the weight of integrated cordless lights/loupes. The LED DayLite WireLess produces more than 40,000 lux at high intensity and 27,000 lux at medium intensity. The spot size of the LED DayLite WireLess will illuminate the entire oral cavity. The function of the headlight is controlled via capacitive touch.

The LED DayLite WireLess is powered by a compact, rechargeable lithium-ion power pod. It comes complete with three power pods. The charging cradle enables you to independently recharge two power pods at the same time and clearly displays the progress of each charge cycle. Designs for Vision has been showing the Micro Series together for the first time this winter. The Micro 3.G.E. Scopes use a revolutionary optical design that reduces the size of the prismatic telescope by 50 percent and reduces the weight by 40 percent, while providing an expanded-field full-oral-cavity view at 3.5x magnification. The new Micro 2.5x Scopes are 23 percent smaller and 36 percent lighter than traditional 2.5x telescopes, and enlarge the entire oral cavity at true 2.5x magnification.

The Micro Series is fully customized and uses the proprietary lens coatings for the greatest light transmission. You can “See the Visible Difference™” yourself by visiting the Design for Vision booths, Nos. 2408 and 4621, at the Chicago Dental Society’s Midwinter Meeting.

Or arrange a visit in your office by calling (800) 345-4009 or emailing info@dvimail.com.

MyRay Hyperion X5 gains FDA approval

Cefla Medical Solutions has announced that the MyRay Hyperion X5 has received U.S. Food and Drug Administration approval, making it now available to dental customers in the U.S. Until now, only European dentists have been able to use the X5. The popular MyRay product is poised to join the array of practice solutions available in the U.S. from Cefla Medical Solutions North America, a subsidiary of Europe’s largest dental-chair manufacturer.

Cefla General Manager Massimo Di Russo said, “The X5 helps dentists make an immediate diagnosis, keep patients informed and make the most of every minute of the day as they work to complete and explain procedures.”

The X5 was awarded the 2015 Red Dot Design Award for Product Design by an international panel of independent judges who reviewed it and some 5,000 other products on criteria such as ergonomics, functionality, durability and the degree of innovation.

The company describes the Hyperion X5 as being the first-ever, wall-mounted panoramic imaging system and smallest pan unit ever available. According to the company, a simple user interface enables the X5 to achieve up to 15 high-definition 2-D projections in just a few steps. Installation is described as being quick, involving minimal time and cost.

The X5 was showcased in the Greater New York Dental Meeting exhibit hall at the end of last year. Prospective customers will have two more chances to see it in operation in the first half of 2016. It will be featured in the Chicago Dental Society Midwinter Meeting exhibit hall and at the California Dental Association meeting in May.

(Source: Cefla Medical Solutions)
Small-dimension, cylindrical bone cutter is designed for minimally invasive procedures

Komet also releases a ‘saber-tooth’ cutter

By Komet Staff

Among the specialty products introduced at the most recent International Dental Show in Cologne, Germany, was Komet USA’s H255E cylindrical, small-dimension bone cutter. According to the company, it is designed to maximize cutting performance and is ideally suited for minimally invasive procedures.

With a 1.2-mm diameter and a 6-mm-long blade, the Komet® H255E bone cutter features: exceptionally sharp, cross-cut toothings; large chip spaces; and long cutting edges along its cylindrical working portion, facilitating intuitive, tactile operation, according to the company. The small-dimension instrument is particularly effective for fine and/or linear bone cuts as well as for hemisections, axial bone perforations, crestal opening of the alveolar ridge and apicoectomies. Allowing conservative yet effective preparations and distinguished by its long service life, the H255E is the cylindrically shaped counterpart of the established Komet H254E tapered combination instrument that offers gentle preparation of bone tissue and hard tooth substance.

The H255E bone cutter incorporates a black, identifying color band to indicate its particular sharpness. Also among the Komet instrument innovations featured at the International Dental Show was the H162ST (“saber tooth”) bone cutter, described as “a new generation of oral-surgery instruments.” Applying the knowledge and experience gained from its successful developments in the medical sector to the needs of dentistry, Komet has incorporated the blade geometry of its renowned cranial-surgery instruments into a new tungsten-carbide rotary instrument specifically designed for oral surgery, producing the new ST configuration for proven effectiveness.

The H162ST’s innovative toothing provides the sharpness, cutting behavior and maximal control required for bone cuts during osteotomies, osteoplasty procedures, bone and bone-lid preparations, apicoectomies and hemisections, according to the company.

Quality control starts at micro levels

DENTSPLY Pharmaceutical controls every step from research to distribution

For more than 100 years DENTSPLY International has been supporting dentists worldwide in their profession. The company’s trusted and comprehensive range of anesthetics enables dentists and hygienists to start every procedure right. DENTSPLY Pharmaceutical ensures quality at each step of the product’s journey—from collection of active molecules all the way through to when the packages arrive at your office. Each cartridge is twice sterilized with a sterilizing filter followed by an autoclave method. Cartridges are then visually inspected with an electronic laser for defects and impurities, including but not limited to: cracks, foreign particles, color and density. Each cartridge is mylar-pack labeled to restrain the individual pieces in case of a break — thus avoiding any injuries. Each set of 10 cartridges is then blister packed to avoid breakage. Finally, each cartridge is color coded as per industry standard ADA system.

Ensuring DENTSPLY pharmaceuticals quality starts when collecting active molecules and continues through shipping and beyond. Photo/Provided by DENTSPLY International

About Komet USA

Currently celebrating more than 90 years of successful service in the dental industry, Komet describes itself as a recognized worldwide leader in the production of highly specialized, precise dental carbide burs, dental diamonds, finishers, polishers and a wide selection of other dental rotary instruments and accessories. Komet operates in the United States under the name Komet USA. It sells direct to dental practitioners and dental laboratories, delivering orders quickly and efficiently from its factory, according to the company. The company’s U.S. headquarters is in Rock Hill, S.C.

For more information about Komet USA and to learn more about the H255E bone cutter and the H162ST “saber tooth’ bone cutter, you can telephone (888) 566-3887 or visit Komet online by going to www.kometusa.com.

Photo/Provided by Komet

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A new generation of core buildup material

Fluoride-containing Visalys Core dual-curing composite is for fabrication of radiopaque core buildups, core fillings and cementing root posts

Visalys® Core, the new product from Kettenbach LP (www.kettenbachusa.com), represents the next generation of core buildup materials, according to the company. The most recent addition to the Visalys family is a dual-curing core buildup material with unique Active-Connect Technology (ACT) to ensure a reliable bond with all common adhesives — without an additional activator. This product was unveiled at the 2015 International Dental Show (IDS) in Germany.

Visalys Core is the first core buildup material from Kettenbach. The fluoride-containing, dual-curing composite was developed for the fabrication of radiopaque core buildups and core fillings and for cementing root posts.

According to the company, the Active-Connect Technology, unique in the market, enables the material to bond actively with all common light-curing and dual-curing, single-step and multistep adhesives, without an additional activator. The advantage for users is that it enables them to use the bonding agent they are used to — whether it is light-curing or dual-curing — or a single- or multi-bottle system.

Firm foundation: stable and precise

According to the company, the technology simply provides a firm foundation — stable and precise. The company reports that Visalys Core ensures easy and reliable handling with “excellent positional stability.” At the same time, it exhibits good flowability and low extrusion force. The compressive strength results in a stable monoblock and a secure bond.

Optional light-curing allows the procedure to be continued immediately. Reliable self-curing provides for dependable strength even on the cavity floor and in root canals. Excellent polishing characteristics ensure precise preparation, even without light-curing, the smear layer is minimal. The product is also free of Bisphenol A and its derivatives.

Visalys Core is available in dentin and white shades in a 5 ml double syringe and in a 25 ml cartridge.

A wide variety of other popular destinations are just blocks away in the heart of downtown San Antonio. All the American Academy of Pediatric Dentistry annual session will be from May 26–29 at the Henry B. Gonzalez Convention Center on San Antonio’s highly popular River Walk. Photo/Stuart Dee, provided by the San Antonio Convention & Visitors Bureau of the meeting’s scientific sessions will take place at the Henry B. Gonzalez Convention Center.

Preconference course on esthetic restorations

The preconference course “Esthetic Pediatric Restorative Dentistry” will be presented by Kevin J. Donley, DDS, MS; William F. Waggoner, DDS, MS; Theodore P. Croll, DDS, MS; and Nassir Barghi, DDS on Thursday, May 26. The course will offer the most current esthetic pediatric restorative dentistry techniques with data available to support restorative regimens. Indications and contraindications will be presented. You can learn more about this course and the complete scientific program with the AAPD 2016 Online Itinerary Planner.
Clinically relevant and appropriately sized tips help improve implant maintenance

Extraction instruments combine ergonomics with Scandinavian design

By LM Dental Staff

The clinical challenge: Instruments (tips) intended and used for implant maintenance are too bulky, especially in cases when patients have healthy, tight tissue around the implants. Proposed solution: ErgoMix Mini Implant Instruments from LM Dental. Reasoning supporting the solution: According to LM Dental, practitioners were frustrated with tip sizes of implant hand-instruments. They approached LM with their frustration and shared improvement suggestions. In response, LM, a market-leading instrument manufacturer in Europe, known for being sensitive to practitioners’ needs and passionate about clinical relevance, designed a series of titanium implant instruments with mini-sized tips. These LM ErgoMix implant instruments are made of softer-than-standard titanium alloy that is gentle on implants yet effective for calculus removal. ErgoMix implant instruments also feature replaceable tips and large diameter (12 mm) silicone surfaced handles that, according to the company, improve comfort. The ErgoMix replaceable tip mechanism is engineered so that no tools are needed to change the tips. That means there is no wrench tool to lose – guaranteed. The tips line up perfectly to the handles, making ErgoMix technology the 21st-century version of the outdated cone-socket system, according to the company. The implant series includes four instrument patterns: Mini Gracey 1/2 – anterior (gray); Mini Gracey 11/12 – mesial (orange); Mini Gracey 13/14 – distal (blue); and Mini Universal – universal, all surfaces (red). They are available as a kit, containing one of each instrument and a cassette, or they may be purchased individually.

Extract with confidence: Ergonomics, Scandinavian design

LM Dental’s extraction instruments uniquely combine ergonomics, Scandinavian design and functionality for atraumatic tooth extraction. They feature comfortable, non-slip ErgoTouch handles and are well-balanced and lightweight, according to the company. The instrument blades are made with DuraGradeMax supersteel, the same material LM uses for its periodontal curettes and cutting instruments. Blades stay sharp long and are very durable, according to the company.

LM Dental’s instruments for atraumatic tooth extraction are described as being lightweight, well-balanced and feature comfortable, non-slip ErgoTouch handles.

TwistOut
The company describes the LM-TwistOut elevators (red) as being ideal for tooth extractions in situations where strong force, leverage or torque is needed.

LiftOut
LM-LiftOut luxating instruments (blue) are designed to perform typical extractions atraumatically. The instrument tip is introduced into the periodontal space and slowly advanced toward the apex of the root as the instrument is moved gently back and forth.

SlimLift
LM-SlimLift slim-design luxating instruments (purple) are created for the most atraumatic extractions. The slim profile results in less tissue trauma during the luxating procedure, enabling faster healing. The company describes the Slim-Lifts as being ideal for implant preparations.

LM extraction instruments are supplied in convenient autoclavable casettes that protect both the instrument and the handler during the maintenance cycles.

You can visit booth No. 3415 (LM/Planmeca) in the Chicago Dental Society 2016 Midwinter Meeting exhibit hall, to learn more and to feel the comfortable ErgoTouch-handle technology.

(Source: LM Dental)
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Glidewell Laboratories hires director of clinical affairs

Dr. Neil Park to oversee clinical research and development, advise on training and education for implants and restorative solutions

Glidewell Laboratories, an industry-leading provider of dental products, implant solutions and lab services, has hired Dr. Neil Park as director of clinical affairs, a new position created to oversee the clinical aspects of product research and development. In addition to coordinating the activities of the company’s clinical staff, Park will help guide the company’s training and education efforts to meet the needs of dentists and enhance knowledge and awareness of new techniques, materials and procedures.

After graduating from Temple University School of Dentistry, Park practiced as a general dentist for 12 years before moving on to a successful career in the dental implant industry. This included a 19-year stint with Nobel Biocare during which he managed the company’s continuing education programs and university relationships, and helped bring several key implant systems and restorative solutions to market. As part of this effort, Park was key in developing and implementing a predoctoral implant curriculum in universities throughout North America.

In 2010, Park transitioned from Nobel Biocare to ClearChoice Dental Implant Centers, a major provider of implant treatment in the U.S. There, he led efforts to increase patient acceptance of full-arch implant treatment. Most recently, Park was at the helm of professional development at Zimmer BiometDental, where he oversaw practitioner education programs and managed the company’s relationships with universities and national dental associations. Having joined yet another industry leader in Glidewell Laboratories, Park is ready to aid the company’s efforts to improve treatment outcomes and expand patient access to care.

“Glidewell Laboratories has a unique perspective as a manufacturer of dental implants and prosthetics because of our long history supporting doctors in planning and restoring cases. We have a staff of clinicians that test the effectiveness of techniques, products and treatment protocols,” Park said. “Dentists want to know that their restorations will be durable, esthetic and serve the patient well. Our one-of-a-kind clinical operation allows the opportunity to develop implants and prostheses that accomplish just that and have been verified using licensed dentists and real patients.

“This capability really doesn’t exist anywhere else,” he continued. “We generate a great deal of useful clinical data from a large number of patients, and we utilize that research to guide doctors in their choice of materials and techniques. Doctors want confidence in the restorations they prescribe, and 45 years as a market-leading dental lab has given us a great idea of what materials and implant designs will work well in the hands of dentists.”

In addition to overseeing the clinical aspect of product research, development and evaluation, Park will bring his background in dentist training and education to enhance the company’s efforts to help practitioners incorporate...
DIVERSIFY YOUR OPTIONS.

4% Citanest® Plain DENTAL (prilocaine HCl injection, USP)
4% Citanest® Forte DENTAL with epinephrine 1:200,000 (prilocaine HCl and epinephrine injection, USP)
Book covers techno-clinical aspects of the fixed removable prosthesis

The industry’s first book dedicated to combined restorations and removable prostheses was released in October. Its title: “Techno-clinical aspects of fixed removable prosthesis.”

The book helps illustrate how the combined prosthesis now offers the edentulous or partially edentulous patient comfort that was unthinkable a few years ago. The combined prosthesis is a valuable solution but only if done by experts in the field of clinical dentistry working with dental technicians with in-depth knowledge of clinical anatomy, occlusion, gnathology and dental materials.

The idea for the book came from a desire to provide guidelines to all those who want to learn this branch of dentistry and who want to deepen their knowledge of techniques and protocols. To create the book, a team of dentists and dental technicians skilled in multiple solutions and techniques were invited to contribute. The result is a resource previously unavailable in a single text.

The book involved 27 authors and 23 cases. The introduction was written by three professors from three Italian universities: Siena, Milan and Turin. The book is intended to be read by an international audience. It has been written in Italian, English and Spanish.

The authors are Prof. Andrea Borraccini, University of Siena; Dr. Alessio Casucci and Prof. Gianfranco Gassino, University of Turin; Dr. Massimo Pasi, University of Milan; Dr. Luca Ortensi, Dr. Caterina Perra, Dr. Ugo Torquati Grittì, Dr. Daniele Vrespa, Dr. Gabriele Rosano, Dr. Riccardo Stefanì, Dr. Gerhardo Schiatti, Dr. Mauro Colombo, Dr. Umberto Ferrone, Dr. Eugenio Guidetti, Dr. Marco Montanari, Dr. Massimo Pelrinazzi, Dr. Alessandro Iorio Sicilia-no, D.T. Luca Ruggiero, D.T. Giuliano Bonato, D.T. Armando Buongiovanni, D.T. Carlo Lucchese, D.T. Giuseppe Zuccato, D.T. Salvatore Chimenz, D.T. Rodolfo Colognesi, D.T. Davide Nadalini, D.T. Marco Ortensi and D.T. Giancarlo Riva.

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(Source: Rhein83)

GLIDEWELL, page A12

the latest procedures and technologies. Now that most dental school graduates have received some basic training in diagnosing, treatment planning and restoring implant cases—a development Park fostered during his tenure with Nobel Biocare—Park recognizes that the role of implant manufacturers in continuing education has shifted.

“Glidewell Laboratories understands that the best way to serve dentists is by leveraging technology, innovation and education to improve the results and value they can deliver for patients, and I look forward to contributing to that effort.”

Park will be instrumental to the accelerating rollout of the Hahn™ Tapered Implant System, which was released in 2015 and designed by Dr. Jack Hahn, a pioneer in implantology and developer of the original tapered implant. “Dr. Hahn has been placing and designing implants for quite some time and has seen what has worked and what hasn’t first hand,” Park said. “His latest implant blends clinically proven features and innovations inspired by the four-plus-decades he’s been practicing implant dentistry. I’m excited to help get the word out on how this system can get practitioners even better results.”

Glidewell Laboratories is a privately owned corporation that has more than 45 years of history as a provider of high-quality restorations and implant solutions to dental practitioners nationwide. To view its large selection of clinical videos, C.E. courses, and products and services, visit the Glidewell Laboratories website, www.glidewell-dental.com.
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Flow Dental expands digital imaging line

Flow Dental, long a leading manufacturer of dental film and film accessories, has transformed its product portfolio to include unique products essential to every dental practice that has gone digital.

“We determined that our relevancy in a digital world would hinge on our ability to provide dentists with accessories that improve sensor or PSP [phosphor storage plate] usage and augment procedure work-flow. No pun intended,” said Bill Winters, president of Flow Dental. “Dentists have really responded to our digital products. They recognize the added value we put into each product. They don’t buy our products based on price; they buy based on the benefits to their practice and their patients.”

In today’s PSP market, for example, one in eight phosphor plate users relies on Flow’s Safe’n’Sure line of PSP envelopes. Safe’n’Sure’s three product styles offer time-saving solutions to enhance throughput and productivity, while helping to extend the life and usage of the phosphor plates. A great example of this is Flow’s Safe’n’Sure OPT style (Fig. 1). These PSP covers are designed for plates that include magnets, which account for about 25 percent of the market. Unlike any other product, Flow pre-loads the cardboard insert halfway into the PSP envelope. Not only does this remove a time-consuming step, but it also assures that the plate can never be loaded incorrectly (because the magnet on the plate must line up with the cut-out on the cardboard insert). The OPT has a unique butterfly seam that enables the user to easily remove the plate without touching it — thus prolonging and preserving longevity of the plates.

Flow’s Deluxe Safe’n’Sure line was recently featured in a review by Clinical Research Associates. More than 75 percent of reviewing dentists would recommend it to peers.

In the sensor area, Flow distinguishes itself with its new Snuggies, an adjustable sensor sleeve. Snuggies enables the user to cinch-tight the sleeve around the sensor, regardless of sensor size or thickness. This means the operator no longer must twist the sleeve around the sensor cable to keep it in place. These type of details help office productivity and reduce expensive sensor repairs or replacements.

Other sensor accessories include the Sensible’s adjustable sensor positioner (Figs. 2a, b), which enables the user to move from an anterior to a posterior — even to a bitewing — position all with the same bite block. The bite block can be adjusted to the midline of any sensor, whether horizontally or vertically placed.

Flow Dental is far from finished re-inventing itself. New products also include Perfect Fit, an adjustable intraoral camera sleeve (Fig. 3). Like the Snuggies, Perfect Fit enables the user to cinch-tight the sleeve to create a tight, custom-like fit over either the X-ray sensor or camera. In the case of Snuggies, this ability to create a custom fit, regardless of sensor size, means dentists can keep one product in stock for either their size 0, 1, or 2 X-ray sensors, and they don’t have to worry that the sensor will slip out of the sleeve during use. For cameras, Flow’s Perfect Fit forms a tight, wrinkle-free barrier around the lens. That helps to assure optimum viewing and zero distortion.

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Flow Dental staff said it is excited about the future. “We are proud to be a valued provider of unique and elegant products, and the best is yet to come,” Winters said.

For more information on Flow’s products, visit www.flowdental.com or contact your local dealer.
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As a patient, I expect the best care I can find. As a doctor, I want to deliver the best care possible. That takes us to the power of continuing education, and as doctors we are faced with many choices in continuing education.

As a way to introduce you to the Las Vegas Institute for Advanced Dental Studies, or LVI, I want to outline what LVI is about and what void it fills in your practice. The alumni who have completed programs at LVI were given an independent survey, and unlike the typical surveys, 99.7 percent said they love practicing dentistry, and of those surveyed, 92 percent said they enjoy their profession more since they started their training at LVI. That alone is reason enough to go to LVI and find out more.

**Functional dentistry: Power of physiologic-based occlusion**

While the programs at LVI cover the breadth of dentistry, the most powerful and life-changing program is generally reported as Core I, “Advanced Functional Dentistry: The Power of Physiologic-Based Occlusion.” This program is a three-day course that is designed for doctors and their teams to learn together about the power of getting their patients’ physiology on their side. In this program, doctors can learn how to start the process of taking control of their practice and start to enjoy the full benefits of owning their practice and providing high-quality dentistry.

**Comprehensive care**

Whether he or she works in a solo practice or in a group setting, every doctor can start the process of creating comprehensive care experiences for his or her patients. We will discuss why some cases that doctors are asked by their patients to do are actually dangerous cases to restore cosmetically. We will discover the developmental science behind how unattractive smiles evolve and what cases may need the help of auxiliary health care professionals to get the patient feeling better.

Ad

The impact of musculoskeletal signs and symptoms will be explored and how the supporting soft tissue is the most important diagnostic tool you have — not simply the gingiva, but the entire soft-tissue support of the structures not just in the mouth but also in the rest of the body. A successful restorative practice doesn’t need to be built on insurance reimbursement schedules. An independent business should stand not on the whims and distractions of a fee schedule but rather on the ideal benefits of comprehensive care balanced by the patients’ needs and desires. Dentistry is a challenging and thankless business, but it doesn’t have to be. Through complete and comprehensive diagnosis, there is an amazing world of thank-yous and hugs and tears that our patients bring to us, but only when we can change their lives. The Core I program at LVI is the first step on that journey.

That’s why when you call, we will answer the phone. “LVI, where lives are changing daily!”

Las Vegas Institute for Advanced Dental Studies offers Core I, a three-day course for dentists and their teams. Photo/Provided by Las Vegas Institute for Advanced Dental Studies

**INDUSTRY NEWS**

LVI Core I three-day course enables dentist and team to learn together

By Mark Duncan, DDS, FAGD, LVIF, DICOI, FICCMO, Clinical Director, LVI


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Clinical opinion

Relieved reamers and the 30-degree reciprocating handpiece

By Barry L. Musikant, DMD

As a practicing endodontist and manufacturer of endodontic instrumentation systems, it is fascinating to me to observe the initial evaluation of greater tapered rotary NiTi instrumentation as a paradigm improvement over traditional manual techniques morph into a far more cautious view where more and more evidence documenting its deleterious effects on the dentin is becoming increasingly evident.

To support that observation, research has found a correlation between the use of greater tapered rotating NiTi and the production of dentinal micro-cracks. Research has also found a decrease in resistance to vertical fracture as the taper of the preparations increase, suggesting there is a clear gap between the actual pulpal anatomy that exists and some of the tools being used to cleanse and shape canals for obturation.

At last year’s American Association of Endodontists meeting, the AAE president noted that he has seen a greater number of vertical fractures over the past 20 years, a time consistent with the introduction of greater tapered rotary NiTi instrumentation. His observations were supported by a large number of endodontists present at the meeting.

It is difficult to dismiss the reality that rotation of instruments within curved canals leads to torsional stress and cyclic fatigue, the two factors responsible for instrument separation. To reduce instrument separation, dentists have learned to do the following:

1) Establish straight-line access in the mesio-distal plane.
2) Use a crown-down technique that minimizes instrument engagement along length.
3) Employ heat-treated NiTi that are more resistant to cyclic fatigue.
4) Employ the instruments only once.
5) Create a more instrumented glide path prior to the use of rotary NiTi.
6) Remain centered when negotiating to length.
7) Use the instruments in interrupted rotation rather than continuous rotation.
8) Reduce the dimensions of the final canal preparation.

The above techniques and strategies are employed to reduce the stresses that occur in the instruments as they rotate within the confines of the canal.

Position statement on 3-D imaging

In response to new developments and research indicating the effectiveness of 3-D imaging for endodontic diagnosis and treatment, the American Association of Endodontists and the American Academy of Oral and Maxillofacial Radiology have issued a revised position statement on the use of cone-beam computed tomography in endodontics. The revised statement emphasizes that CBCT should not be used routinely for endodontic diagnosis or screening purposes in the absence of clinical signs and symptoms, and it provides specific recommendations and supporting evidence for when CBCT should be considered the imaging modality of choice. The position statement is consistent with principles of ALARA — keeping patient radiation doses as low as reasonably achievable. It notes that the patient’s history and clinical examination must justify the use of CBCT by demonstrating that the benefits to the patient outweigh the potential risks.

"Endodontists continue to have excellent results with two-dimensional radiography," said AAE President Dr. Terryl A. Propper. "However, limited-field-of-view CBCT does have a place in endodontics when dealing with more complex cases, which are reflected in the position statement. Our goal is to help AAE members and general dentists determine where it fits for them."

The position statement is available at www.aae.org/guidelines.
The emphasis is placed on maintaining the integrity of the instrument with minimal thought given to the impact they have on the integrity of the remaining root structure. Straight-line access is purchased at the expense of removing additional amounts of coronal tooth structure. Crown-down preparations significantly increase the amount of coronal dentin removed so the instruments will contact a reduced amount of canal length at any one time. Heat treatment is a technique that increases the life span of the instrument without a comparable increase in the life span of the dentin, a tissue that is not amenable to technological improvements at present.

The instruments may be used once, but the impact of stress on dentin is cumulative. If newer instruments are employed or not. A single instrument will simply work longer in a canal to achieve its goals of cleansing and shaping an instrument may be used with a multiple sequence technique. Keeping instruments centered in canals that are highly oval, anatomy that is more the rule than the exception, keeps the instruments intact at the expense of compromised cleansing most often in the buccal-lingual plane. The same single file interrupted rotary systems are prone to instrument separation because they are still generating a minimum of 200 full rotations per minute on a single pass in a preparation they are now doing the complete shaping after glide path creation and suffer from the same need to remain centered within the confines of the canal despite the presence of significant buccal and lingual extensions of pulpal tissue.

By instrumenting the canal to smaller tapers, the rotary systems — either continuous or interrupted — remove less tooth structure and are less prone to breakage. However, they are still confined to centered preparations with little or no reaming of the apical area, preventing the emergence of uncontrolled buccal and lingual extensions of tissue.

If we go back to an earlier time prior to the introduction of greater tapered rotary systems, we basically relied on the use of K-files to shape the canals. From the start, these instruments are poorly designed to shape and clean canals. Their main defect in design is the incorporation of 30 predominantly horizontal flutes aligned along the 16 mm of working length.

Horizontal flutes can only shape dentin away with the pull stroke because it is only then that the cutting edges of the flutes are more or less at right angles to the plane of motion, a requirement to which the instruments are not adapted. When using K-files is familiar to most dentists, especially to those who have used the instrument in conjunction with NiTi rotary systems and are defining a pathway that the some- times larger and less flexible reamed instruments will then faithfully follow.

The goal in most situations is to produce an apical preparation of 30 applied to all the walls of the canals, so they round or not. Please realize that this will ultimately produce a larger version of the original canal anatomy rather than the imposition of a large conical shape that bears little to no resemblance to the original anatomy.

For the most part, we do not want to exceed a taper of 04. Such a conservative preparation preserves coronal dentin and in combination with the relaxed reamers allows us to remove tissue from those thin extensions that are off limits to rotary NiTi instrumentation. The system we are defining is based primarily on 02 tapered stainless steel reamed instruments (Fig. 1). After the glide path creation using the relaxed reamers (SafeSides), crown-down preparations are no longer necessary. Rather the final preparation is a simple extension of instrumentation that widens the canal from a 20/02 preparation to a maximum of 35/04 in most situations (Tango Endo, Fig. 2). A final result that requires only two more instruments after the 20/02 preparation has already been achieved.

Given our clinical experience, along with the insights that are being documented from recent research, we can now make the following conclusions regarding the use of this approach to endodontic instrumentation.

1) Instrument separation is virtually eliminated, producing a much more favorable mindset for the dentist.

For those dentists using greater tapered rotary NiTi systems, the goal of the K-files was limited to creating a glide path producing an 02 tapered centered space up to at most a 20 taper. The relaxed reamers also have that function, but with the power of a reciprocating handpiece generating oscillations of 3,000 to 4,000 cycles per minute, the instruments have the added ability to vigorously work the buccal and lingual extensions of highly, sheath-like pulpal anatomy.

One need not be concerned about the reduced flexibility of stainless steel reamed reamers. In their smaller dimensions they are easily flexible enough to negotiate complex curved canals. As the thinner, highly flexible instruments faithfully enlarge the original canal anatomy free of distortions, they are defining a pathway that the somewhat larger and less flexible relaxed reamers will then faithfully follow.

Tell us what you think!

Do you have general comments or criticism you would like to share? Is there a particular topic you would like to see articles about in Endo Tribune? Let us know by emailing Fred Michmershuizen at fmichmershuizen@dental-tribune.com. We look forward to hearing from you! If you would like to make changes to your subscription or add new one, please send us an email at oemus@dental-tribune.com and be sure to include which publication you are referring to. Also, please note that our Endo Tribune cannot assume responsibility for the validity of product claims or advertising copy. The publisher also does not assume responsibility for product names or statements made by advertisers. Opinions expressed by authors are their own and may not reflect those of our Endo Tribune.
2) Dentinal micro-cracks associated with rotary NiTi are not associated with the short amplitudes of motion produced by the 30- to 45-degree reciprocating handpieces. 1-4

3) Lesser tapered preparations reduce the amount of coronal dentin being removed, increasing the resistance of the tooth to the forces that produce vertical fractures. 1-4

4) The thin 02 tapered stainless steel relieved reamers are capable of removing tissue from the often thin buccal and lingual extensions that are not touched by the greater tapered systems and where canal blockages occur when using K-files. 5

5) The recommended relieved reamers will negotiate to the apex with far less resistance than the traditional use of K-files. 6

6) Due to their limited exposure to torsional stress and cyclic fatigue, a result of the 30- to 45-degree reciprocating handpieces, the instruments may be used several times before replacement, yielding dramatic savings. 7

In our endodontic practice, the feeling of security is most important. We seek out ways to produce highly effective predictable results. For us, that means no instrument separation as a cause of concern with the full appreciation that our procedures must primarily maintain the original integrity of the remaining tooth structure as much as possible.

References

New Tango-Endo: It only takes two

With new Tango-Endo, available from Essential Dental Systems (EDS), it only takes two instruments! Tough and reusable Tango-Endo instruments boast a unique, patented flat along the entire length. This flat, according to EDS, allows for faster engagement with less resistance, increased flexibility without sacrificing strength and virtually eliminates instrument separation.

The Tango-Endo system includes its own reciprocating handpiece. The latch-type handpiece is designed to aid in the prevention of binding, and to assist in the preservation of the canals’ unique anatomy. The kit also includes precision machined gutta-percha points, designed for a perfect fit.

“Tango-Endo was simple and easy to use, and I did not find it to have much of a learning curve,” says Dr. Joshua Austin, of Texas. “If you are looking for an endo file system that is simple and safe, Tango-Endo is an excellent choice that is also very cost-effective.”

“I was blown away by how efficient and easy it was to clean and shape the three canals in about 10 minutes,” says Dr. Scott Graham, of Michigan. “The fit of the Tango gutta-percha points was excellent, too. No tip trimming required. I’m excited about [this] new system.”

For more information, visit EDS at booth No. 3319 at the Chicago Midwinter meeting, or go to www.edsdental.com/tangoendo.

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Dr. Frank Spear’s presentation will kick off the AO Annual Meeting

By AO Staff

Dr. Frank Spear will open the Academy of Osseointegration’s (AO) Annual Meeting with his presentation, “Globalization of Training, Education and Comprehensive Collaborative Treatment Planning in Implant Dentistry: Understanding the Risks and Rewards.” Spear has been restoring implants for 30 years and believes technique is one thing but perspective is another.

“When you have been in practice long enough, you start asking different questions about what’s a best practice,” Spear explains. “You get to see what performs well and what doesn’t.” Though most of his cases have worked out well, he admits that, looking back, he might have handled some differently.

Clinicians should consider both the risks and rewards for patients and what’s ahead for them in their life when placing implants. Spear will suggest key questions to ask when weighing risk vs. reward, such as:

• What is the age of the patient?
• What other conditions of the patient’s health should I consider before I place an implant?
• Can I delay this implant and save the tooth for the benefit of a patient’s long-term dental care?
• What can I do to help prolong the life of the restoration I use on top of the implant?
• What’s going to happen next if something fails?

Spear will also cover the globalization of training and education, and comprehensive and collaborative treatment planning.

Using the evolution of implant dentistry over the past three decades, his aim is to identify the best practices today, using the history of the science as a background for their development. “We honestly didn’t know what we were doing in the ’80s — we were learning and flying by the seat of our pants. Technology matured, and we improved in the ’90s and even more in the 2000s. And now we know what works, but we also know what doesn’t work,” Spear explained. “It’s a good timeframe in the history of implants to look back at what we’ve done with a different perspective on it.”

Following Spear’s presentation, clinicians from around the world will present in the opening symposium on the risks and rewards for various topics of concern for today’s dental implant professional. From grafting with growth factors or biologics to not grafting at all, to bone augmentation and even guided surgery, there are pros and cons to many of the decisions and treatments from which dentists choose.

Spear believes the AO Annual Meeting is a great way for clinicians to stay current on the best practices of implant dentistry. He has always enjoyed the learning aspect of the meeting collaborating with the best and brightest clinicians from around the world.

“I enjoy getting to hear really bright people who are doing a lot, especially involved with research,” he said. “They are answering a lot of questions we’ve had for years, but we haven’t had the research answers for them.”

The 31st AO Annual Meeting is set for Feb. 17-20 in San Diego. You can register to attend at www.osseo.org. Follow AO on Facebook and Twitter using #AO2016 to stay up-to-date.
AO session: Protecting young clinicians

By AO Staff

Members of the dental profession are an increasing target for professional negligence lawsuits, and dental implant professionals are no exception. At February’s Academy of Osseointegration (AO) Annual Meeting, Dr. Michael Ragan will address this and more in the Young Clinicians’ Lecture Series. “Reducing the Young Clinicians’ Legal Exposure and Protecting Your License to Practice.”

One important and fundamental action can protect dentists from lawsuits and actions against their license to practice—practitioner-patient communication in the form of informed consent. Ragan—a dentist who has practiced law for more than 25 years, exclusively defending health care professionals—states that nearly 100 percent of lawsuit complaints include a count alleging that the doctor didn’t secure sufficient informed consent.

His presentation will address how comprehensive informed consent can help prevent exposure to a malpractice lawsuit, and also the possible revocation of a clinician’s state license. Additionally, Ragan will address other areas of concern that impact the young clinician, including:

- Employment contracts and office leases
- HIPAA, HITECH and breach of confidentiality
- Cyber liability and social media
- Practice due diligence
- Fraud and abuse, deceptive trade practices
- Corporate practice of dentistry and fee splitting

Delegation of personnel duties Most importantly, he wants attendees to understand that patients need to know—without conflict in their mind—what their alternatives are and what “bad things” can happen as a result of their implant procedure. "A great percentage of claims may not reflect a specific act of negligence," he said. "Most derive from a breakdown of communication."

One common communication problem occurs when the patient is not made aware of possible side effects for the procedure or complications that could have long-term effects. Other times the breakdown occurs when the patients don’t understand their responsibility to the success of the implant. This responsibility can be as simple as oral hygiene requirements or as complicated as the management of a systemic health condition that has consequences for the success of the implant. The responsibility for communication of this vital information to the patient is the clinician’s, and without documentation of its occurrence, the doctor is at risk of a malpractice claim and a possible action against his or her license.

"When you increase the scope of clinical dental practice, there is a concomitant increase in practitioner responsibility," he said. "Informed consent is more than a piece of paper. It’s a process." In addition to his defense law practice based in Miami, Ragan is on the faculty in the Department of Oral and Maxillofacial Surgery at Nova Southeastern College of Dental Medicine, as well as teaching at a number of other schools of dental medicine. Ragan also sits on the board of directors of the Fortress Insurance Company, a subsidiary of OMNIC (the Oral and Maxillofacial Surgeons National Insurance Company).

The board members review thousands of claims every year to evaluate potential defensibility and exposure. While some of the claims they review are frivolous, some have merit. The 31st AO Annual Meeting is set for Feb. 17-20 in San Diego. You can register to attend at www.osseo.org. Follow AO on Facebook and Twitter using #AO2016 to stay up-to-date.

Dr. Dale Miles wants fewer dental implant professionals to get sued

By AO Staff

Dr. Dale Miles cautions dentists not to miss important clues revealed about the patient’s overall health on the cone-beam computed tomography (CBCT) scans. Doing so can result in serious problems for the patient—a lawsuit for the dentist.

“I have been involved in at least four lawsuits in which cone-beam data was vital to either the plaintiff’s or the defendant’s case. The defendant is most often the dentist,” he said. Miles is presenting at the Academy of Osseointegration’s (AO) Annual Meeting in San Diego as part of the ‘Morning with the Masters’ sessions on the program. Miles’ session will address, "Appropriate Interpretations of CBCT Scanning in Implant Dentistry. How to Avoid Missing Vital Information and Anatomy.”

“Morning with the Masters” sessions are designed to provide a more personal interaction with world-renowned experts. The attendance is limited in each session to keep them small.

Many dentists may be at risk for missing important changes in their patient’s scans. Miles hopes to eliminate these risks by sharing information he feels has been lacking. He said cone-beam scans are designed to provide a more personal interaction with world-renowned experts. The attendance is limited in each session to keep them small.

Many dentists may be at risk for missing important changes in their patient’s scans. Miles hopes to eliminate these risks by sharing information he feels has been lacking. He said cone-beam scans are designed to provide a more personal interaction with world-renowned experts. The attendance is limited in each session to keep them small.

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Why students, residents should prioritize AO meeting attendance

By Dr. Scott Recksiedler

Dental students and residents should attend the AO meeting. It's an excellent opportunity to see who is pushing the envelope in implant dentistry for the future. The meeting is also a great way to get caught up on the latest surgical and restorative implant technologies and techniques.

A young dentist needs to be prepared to manage patients' expectations. Discussing the different treatment options with patients and educating them to make the best informed decision is the dentist's responsibility. He or she should be prepared to answer questions about information the patients obtained doing their own research from the Internet.

Fees are affordable on a student budget

The 31st AO Annual Meeting is set for Feb. 17-20 in San Diego. Students and residents can register to attend at http://meetings.osseo.org. Here's a tip for students and residents: If you're not an AO member, it's actually a better deal to become a member (only $95) and get the registration rate for the meeting than to pay non-member registration fees.

Plus, then you receive all of the other member benefits, including a subscription to JOMI and access to the new AO Webinar Series. Go here to become a member: www.osseo.org/NEWmembershipApply.html.

Learn first-hand from leading dental experts

At the AO meeting, students and residents can get a sense of what is currently the standard of care. They also get a better sense of what treatment options are available. Leading dental professionals discuss their clinical decision-making, highlight new surgical/restorative methods and demonstrate today's digital workflows.

For those considering attending the meeting, it's important to have a game plan to maximize your time. I recommend researching beforehand the activities and lectures that will be most beneficial.

The AO provides a number of ways to plan the experience at the event and to make the most of attendees' time. Whether you use your registration packet, the AO meeting website or the AO app, make sure to have a strategy.

Free mobile app for planning

I felt the AO downloadable app was very useful in planning my days at the meeting. There are so many things happening at the same time, I used the AO app to plan my day and make sure I didn't miss anything.

It is great to have family along for the trip, too, if that's an option. My father-in-law is a maxillofacial prosthodontist in San Diego, Harold Gulbransen, DDS. So my wife, son and my parents-in-law all traveled to San Francisco for the last meeting. It was a good excuse to get the family together and give the grandparents some time with their grandson.

Follow AO on Facebook and Twitter using #AOSanDiego to stay up-to-date.

About the author

Dr. Scott Recksiedler is a maxillofacial prosthetics fellow at UCLA School of Dentistry in the division of advanced prosthodontics.
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¹Clinicians Report, TRAC Research, July 2014

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Hansson talks about AO’s TEAM and Lab Tech Program

By AO Staff

The Academy of Osseointegration’s (AO) 2016 Annual Meeting in San Diego isn’t just for dentists. The entire dental team and laboratory technicians will gain a lot of insight into the implant process, but the real winners will be patients. The AO’s TEAM and Laboratory Technician Programs are designed to improve the effectiveness of the entire dental team. Scheduled on Saturday, Feb. 20, the programs promote the team approach to implant dentistry, a concept gaining traction in the implant community.

The TEAM program (formerly the Allied Staff Program) is designed to provide comprehensive information for the entire staff, from the dentist to the implant treatment coordinator to the hygienists, assistants and receptionists. The TEAM Program sessions include:

- “One for the Team: An Interdisciplinary Approach to Regenerative and Implant Therapy,” presented by Amy Kinna-mon, RDH, EFDA, BSASc, from 8:10 a.m. until noon.
- “Peri-implantitis: Prevalence, Etiology and Non-surgical Treatment,” presented by Diane Daubert, RDH, M5, from 1:30 to 4:30 p.m.

Lars Hansson, CDT, FICOI, is most excited about the team concept that is an underlying theme for the Laboratory Technician Program. Hansson believes the program, designed to help clinicians, lab technicians, specialists and the rest of the dental team better communicate and understand each other’s part in the process, will help “bridge the gap” between the team in implant dentistry.

“I want them to see how much easier the process will be and how much more of the treatment they will be part of because today a lot of technicians are afraid of speaking up,” Hansson said. “Being more part of the patient treatment and protocol and the treatment plan inspires a lot of technicians to become better.”

The Laboratory Technician Program sessions include:

- “The Essential ‘Pink’ Interfaces in Implant Dentistry: Restorative Alternatives,” presented by Guilherme Cabral, DDS, CDT, and David Garber, DMD, from 11 a.m. until 2 p.m.
- “One Step Back, 10 Steps Forward (Reverting to the Basics of Dental Technology),” presented by Bill Marais, RDT, DTG, from 10:15 a.m. until noon.
- “The New Gold Standard in Full-Arch Implant Restorations, High-Performance Polymers and the BDT Technique,” presented by Phil Reddington, RDT, MDTA, from 1:15 to 3 p.m.
- “Mastery of White and Pink Esthetics,” presented by Cheryl Pearson, DMD, and Pinhas Adar, MDT, CDT, from 3:15 to 4:45 p.m.

“These meetings are always exciting because you meet peers and people that you’ve looked up to, and that you’re going to learn from. And you listen to people that have far more knowledge than you do. You will get a step closer by going to the meeting,” Hansson said.

For more about the TEAM and Laboratory Technician Programs, visit http://meetings.osseo.org/ and select the Program tab.

*MILES, Page C2
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Symposium speakers to showcase latest in bone-grafting techniques, research

By Osteogenics Biomedical Staff

Osteogenics Biomedical announces the Osteogenics Global Bone Grafting Symposium 2016, unique for its focus on dental bone grafting and treatment planning, to be held March 31–April 2 at the Hyatt Regency Resort & Spa at Gainey Ranch in Scottsdale, Ariz. The symposium will feature presentations by world-renowned speakers, interactive treatment planning sessions with an expert panel, and optional hands-on workshops.

Speakers include Dr. Michael Pikos, Dr. Sascha Jovanovic, Dr. Thomas Wilson, Dr. Gustavo Avila-Ortiz, Dr. Eiji Funakoshi, Dr. Maurice Salama, Dr. Melle Vroom, Dr. Istvan Urban, Dr. Kirk Pasquinielli, Dr. Pier Gallo and Dr. Daniel Cullum.

The 2016 event will mark the seventh Osteogenics Global Bone Grafting Symposium. Since 2008, the symposium has grown from 45 attendees from the United States to a sold-out 500 attendees from 15 countries and 44 of the 50 states in 2014. Strategically capped at 500, this year’s event is expected to sell out again.

“I felt that the caliber of presentations — from the quality of the images, videos and statistical analyses, to the patient manner each presenter shared materials and fielded questions — was among the finest I have enjoyed in my 28 years as a periodontist,” said Dr. Lloyd Nattkemper about the 2014 symposium. “The quality of the presenters, without exception, was in my opinion, the finest available in the world.”

On April 1 and 2, the symposium will feature main-podium lectures and interactive treatment-planning sessions. Optional hands-on workshops will be offered on Thursday, March 31.

Workshop topics include advanced hard- and soft-tissue regenerative techniques in implant therapy, socket grafting and guided bone regeneration in various single-tooth implant scenarios and state of the ridge expansion techniques.

“I like the great selection of speakers. The quality of the materials as well as the clinical results are very impressive, but at the same time with options to apply the techniques to our practice,” said Dr. Bernardo Villela.

“I would recommend this course to periodontists, oral surgeons and general practitioners who have been involved in implantology.”

The Hyatt Regency Resort & Spa at Gainey Ranch is an ideal location due to Scottsdale’s enjoyable spring weather and breathtaking views. Explore the endless wonders of the 27-acre property set amidst the majestic McDowell Mountains. Enjoy breathtaking vistas blended with intriguing Native American culture and amenities, including championship golf, Spa Avania, a 2.5 acre water playground, tennis and Camp Hyatt Kachina. Or attendees can find their own opportunity for adventure just minutes from the resort.

For more information on the Osteogenics 2016 Global Bone Grafting Symposium, visit www.osteogenics.com/courses, or call Andrea Wilson at (806) 796-1923. Tuition for the main symposium on April 1–2 is $950, offering up to 13 C.E. credits. Assistants and office personnel are welcome for $500.
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Immediate, esthetic tooth replacement with the Hahn Tapered Implant and BruxZir Anterior Solid Zirconia

By Timothy F. Kosinski, DDS, MAGD

With more patients seeking dental implant treatment, it’s no surprise that growing numbers of clinicians are providing this service. The increased demand for implant therapy can be attributed in part to the improved predictability brought about by innovations in implant design.

Additionally, due to advancements in all-ceramic restorative materials, providing esthetic results is easier than ever before. By utilizing the most advanced implants and restorative materials, even experienced implantologists have the potential to benefit from an improved clinical workflow and more esthetic results.

The case report that follows demonstrates immediate tooth extraction and placement of a Hahn Tapered Implant (Glidewell Direct; Irvine, Calif.) in the area of a lateral incisor. A temporary bridge, custom implant abutment and a highly esthetic final crown are utilized to facilitate a natural-looking final restoration.

Case report
A 40-year-old male presented with no medical complications and desired a nice smile for his business interactions. His maxillary left lateral incisor had fractured, with the patient’s excessive parafunction likely a contributing factor. Endodontic evaluation had determined that the lateral incisor was untreated.

The patient accepted a treatment plan in which the lateral incisor would be extracted and an implant immediately placed. Designed to achieve the maximum primary stability needed for immediate extraction and implantation cases, a Hahn Tapered Implant was selected for the procedure.

To begin treatment, the non-restorable lateral incisor was extracted atraumatically. Removing the tooth in this manner maintained the facial plate of bone as well as the interseptal bone that helps support the interdental papillae.

A pilot drill was utilized to create the initial osteotomy. Biocare; Yorba Linda, Calif.) was used to complete preparation of the implant site. Note that the Hahn Tapered Implant is compatible with widely used surgical instrumentation.

As the implant was threaded into place, its prominent butress threads engaged the palatal wall firmly. This simplified the effort of preserving the facial plate and positioning the implant in a manner that would foster an aesthetic outcome. The tapered body of the implant eased placement within a maximum amount of bone, and its widened apex helped establish excellent stability.

Radiography confirmed the implant was placed in an optimal position. A transitional bridge was fabricated to minimize speech problems, help support the soft tissue and maintain a natural emergence profile during the healing period. After four months of healing, the temporary bridge was removed, and an open-tray final impression was taken.

An Inclusive Zirconia Custom Abutment made of titanium base was produced by the lab and maintained a natural emergence profile upon delivery. BruxZir Anterior, a monolithic zirconia material specially formulated for the smile zone, was chosen for the final restoration because of its strength and lifelike esthetics.

The crown, which was digitally designed and milled using CAD/CAM technology, exhibited a precise fit. Final radiography illustrated superb bone preservation at the implant site (Fig. 1). Optimal soft-tissue contours were particularly evident around the beveled edge of the Hahn Tapered Implant. The patient expressed that he was very pleased with the final restoration because of its strength and lifelike esthetics.

Conclusion
The high primary stability, optimal positioning of and simplified surgical protocol facilitated by the Hahn Tapered Implant make it ideal for a wide range of indications, including immediate extraction cases and restorations in the smile zone.

When combined with BruxZir Anterior and zirconia hybrid custom abutments, a predictable restoration can be delivered that mimics the esthetics of the tooth being replaced.

Note: See more of this case by visiting www.inclusivemagazine.com.

‘Removing the tooth in this manner maintained the facial plate of bone as well as the interseptal bone that helps support the interdental papillae.’
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888.796.1923
Hans Geiselhöringer appointed new president of Nobel Biocare

By Nobel Biocare Staff

A s of Jan. 1, Hans Geiselhöringer has taken over as president of Nobel Biocare. The appointment was made to strengthen the organization around its strategic goals. Since 2011, Geiselhöringer has served as executive vice president of global research, products and development, shaping a highly competitive product and innovation pipeline. Prior to that he was executive vice president global marketing and products from 2010-2011 and head of NobelProcera and guided surgery from 2008-2010. Geiselhöringer joined Nobel Biocare as head of NobelProcera in 2008 and was appointed a member of the executive committee in 2009. From 2002 to 2009, Geiselhöringer acted as a global speaker for Nobel Biocare, and with this appointment, he becomes the first Nobel Biocare customer and dental expert in the company’s history to take the reigns as its highest ranking executive.

In 1998, he founded DentalX GmbH, a leading dental laboratory chain specializing in implantology, anaplastology, functional and esthetic reconstructions and imaging technologies. Geiselhöringer is a trained dental technician and possesses great technical knowledge of the implant and CAD/CAM industries, as well as deep customer understanding and insights, enabling continuity of innovation at Nobel Biocare. As a renowned expert on dental technologies and materials, he has published/co-published various clinical and research articles. He is also a member of numerous international dental associations and a recognized lecturer at dental conventions throughout the world. “Our focus on the patient remains steadfast and constant. Everything we do will continue to be patient-centered, clinically relevant and evidence based,” Geiselhöringer said. “To strengthen our leadership in implant-based dentistry, we strongly focus on providing integrated digital solutions to improve the customer experience and increase productivity on all levels while ensuring a high level of clinical success and predictability.”

“With our counterparts at Kavo Kerr Group, we have all the pieces in place today, and we are grouping our highly skilled global teams together to form the industry’s new digital dentistry powerhouse. In summary, we at Nobel Biocare will continue our strong commitment to innovation, providing an ongoing pipeline of superior solutions that help more customers treat more patients better.”

About Nobel Biocare

Nobel Biocare is a world leader in the field of innovative implant-based dental restorations. The company’s portfolio offers solutions from single tooth to fully edentulous indications with dental implant systems (including key brands NobelActive®, Bränemark System® and NobelReplace®), a comprehensive range of high-precision individualized prosthetics and CAD/CAM systems (NobelProcera®, diagnostics, treatment planning and guided surgery solutions NobelClinician® and NobelGuide®) and biomaterials (creos™).

Nobel Biocare supports its customers through all phases of professional development, offering world-class training and education along with practice support and patient information materials. The company is headquartered in Zurich, Switzerland. Production takes place at six sites located in the United States, Sweden, Japan and Israel. Products and services are available in more than 80 countries through subsidiaries and distributors.

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B IOLASE enters into development agreement with IPG Photonics

By BIOLASE Staff

B IOLASE, Inc., a global leader in dental lasers, announced recently that it entered into a development and distribution agreement with IPG Photonics Corporation’s medical laser division, IPG Medical.

IPG Photonics Corporation (‘IPG’) pioneered the development and commercialization of optical fiber-based lasers, creating a new generation of lasers with superior performance, reliability and lower cost, according to the company. IPG grew to become one of the world’s largest laser companies, opening up a myriad of applications using its unique fiber and semiconductor lasers.

The development and distribution agreement between BIOLASE and IPG covers several projects in various stages of development, with the expectation that these projects will culminate in commercialized joint dental laser products, accessories or integral system components. The parties will collaborate in the design and development of these new products and applications, with each party contributing their respective technological expertise, knowledge and development resources. BIOLASE will be responsible for U.S. and international registrations of all dental products resulting from the agreement, and will have exclusive worldwide commercial distribution rights for certain products over a multi-year initial term after completion of development.

“We are extremely fortunate to partner with IPG, the world leader in fiber laser technology,” said Harold C. Flynn Jr., president and chief executive officer of BIOLASE. “This partnership brings with it significant opportunity to advance our product designs and our supply chain, ultimately to provide a broader, deeper and more capable portfolio of laser-based solutions to dental practitioners globally. “This will advance efforts to fulfill our purpose, enabling clinicians to repair and restore patient’s dental conditions, while alleviating pain and reducing the anxiety commonly associated with invasive dental procedures,” added Flynn.

“This partnership with BIOLASE fits very well with IPG’s strategic development and desire to build our medical application business. The parties will combine their expertise and capabilities to improve existing and develop new dental laser applications in markets with significant unmet clinical needs. BIOLASE’s established dental channels deepen our distribution capabilities in this area and leverage our patented dental laser technology and platforms,” said Mr. Gregory Altshuler, president of IPG Medical.

About BIOLASE, Inc.

BIOLASE, Inc., is a medical device company that develops, manufactures and markets innovative lasers in dentistry and medicine and also markets and distributes digital imaging equipment, CAD/CAM intraoral scanners and in-office milling machines and 3-D printers. BIOLASE’s products are focused on technologies that advance the practice of dentistry and medicine and offer benefits and value to health-care professionals and their patients.

The company’s proprietary laser products incorporate approximately 250 patented and 100 patent-pending technologies designed to provide biologically clinically superior performance with less pain and faster recovery times. BIOLASE asserts its products provide cutting-edge technology at competitive prices to deliver the best results for dentists and patients.
Salvin Dental Specialties, Inc, Through Its Salvin Regenerative Subsidiary, Has Acquired The Dental Division Of Exactech

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Salvin announces the acquisition of Exactech’s Dental Biologics Assets

By Salvin Dental Specialties Staff

Salvin Dental Specialties, Inc., through its Salvin Regenerative subsidiary, recently announced that it has acquired substantially all of the assets of Exactech Inc.’s dental biologics business.

Salvin Dental Specialties, a privately held company doing business in more than 100 countries, develops, manufactures and markets regenerative biomaterials and surgical instrumentation specifically for implant dentistry.

According to founder and CEO Bob Salvin, Exactech has an exciting dental product line, and this acquisition will provide Salvin with greater product depth as well as additional manufacturing capabilities.

Exactech, Inc., is a publicly traded company that develops and produces joint restoration products for hip, knee, shoulder and spine.

Exclusive of its multi-functional cap. The final result will be a customized restoration made iSy and delivered with minimal effort.

2. Conventional: A conventional treatment workflow can be done with or without the implant base. Submerged healing allows for undisturbed integration throughout the healing process. A gingiva former will sculpt the soft tissue. When ready for impressions, open or closed tray impression copings are available. The final restoration is completed using pre-made abutments with a traditional PFM crown.

3. Combined: The flexibility of iSy is showcased with this final example. Conventional and digital treatment workflows can be combined to provide a customized final result. The pre-mounted implant base with a multifunctional cap is used to take a traditional impression.

The dental lab will scan the iSy scan post within an implant analog or scan the implant base using the second multifunctional cap. The final result will be a customized restoration made iSy and designed to create satisfied patients.

Designed to provide a smoother treatment experience, the iSy system has “simple” built right in to it. iSy is a high-quality implant system made by CAMLOG. The system was developed in Switzerland and is manufactured in Germany. The cornerstone of CAMLOG is its attention to detail, sustainability and the quality development of its products.

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