By Robert Selleck, Staff

Supporters, principals and beneficiaries of National Children's Oral Health Foundation: America's ToothFairy (NCOHF) gathered Thursday evening at the Midwinter Meeting to celebrate a year of successes with the organization’s mission, which is “To eliminate children’s preventable pain and suffering from pediatric dental disease.”

Henk van Duijnhoven, a senior vice president at KaVo Kerr Group and the 2015 Chairman of NCOHF, noted in his opening remarks that the organization had raised more than $14 million since its founding nearly 10 years ago. He said the foundation helped just under 2 million underserved children and their caregivers in 2014; and he then presented an ambitious goal of increasing that number to 3 million to mark the organization’s 10th anniversary year. He urged attendees to, “Think about what action you can take to help move this great cause forward.”

NCOHF board member and long-time supporter Gordon Christensen, DDS, said that unlike many cause-related organizations, NCOHF directs all contributions directly to those being served.

“I don’t know of any greater organization,” he said, encouraging attendees to find more opportunities to “Do good — and do well.”

The comment was an appropriate lead-in to later remarks by NCOHF President and CEO Fern Ingber, who provided details about an evolving cause-marketing program that enables qualifying corporations to more closely link sales of certain products or services to NCOHF support via underwriting agreements tied directly to sales volume.

Ingber also ran through a list of new relationships the organization had entered to increase its reach, explaining that, “We’re looking for partners not only in the dental community but in all segments of society.”

Lauren Kuhn, 2014 Miss Massachusetts and a second-year dental student at Harvard University School of Dentistry, is active with the Harvard University Dental Students United with America’s ToothFairy. (Photos/Robert Selleck, Staff)

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Lauren Kuhn, 2014 Miss Massachusetts and a second-year dental student at Harvard University School of Dentistry, is active with the Harvard University Dental Students United with America’s ToothFairy. (Photos/Robert Selleck, Staff)
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Scenes from Friday

Peter Riess, left, and Gabriela Purrmann of NTI-Kahla GmbH Rotary Instruments (booth No. 728).

Dennis Cone of GC America (booth No. 1507).

Bart Hatch, left, and Brian Nordan of Affiliated Family Dentistry (booth No. 318).

Dennis Cone of GC America (booth No. 1507).

Jessica Heeg, left, and Rachel Barton of Young Dental (booth No. 3420).

From left: Hongsoon Lee, Gill Kim and Harrison Song of Shinhung Co. (booth No. 643).

From left: Ruth Molina, Shabab Rahman, Jenny Rogacova and Christopher Louis of Valplast International Corp. (booth No. 439).

At the Midwinter Meeting, you can learn a lot on the exhibit hall floor. Here, a presentation is in progress at Ivoclar Vivadent (booth No. 1417/1617).

Gregory Prus of Villa Radiology Systems (booth No. 3102).

Meeting attendees stop at Porter Instrument Co. (booth No. 3021) to get more information.

Photos by Fred Michmershuizen, today Staff
If you’ve been to any major dental meeting over the past few years, you’ve no doubt run into him in the exhibit hall. Maybe you even have this week. No, your eyes aren’t deceiving you. It’s Austin Powers! Actually, it’s the Austin Powers impersonator. And he is always fun to talk to, and to take pictures with. He’s become somewhat of a regular presence with Millennium Dental Technologies.

In a lighthearted interview with today, Richard Halpern, the man behind the costume, talks about how he got involved in the dental industry, what he likes most about attending industry meetings and how he takes care of those famous teeth.

You have become a regular with Millennium Dental Technologies. How did you get involved with this company?

A regular client of mine from the British American Business Council recommended me to a woman in the marketing and event department at Millennium Dental Technologies. They were having a “007/Spy” theme for the Townie Meeting a little while back, and it seemed “Austin” would be a perfect match for that theme. I was initially hired just for the party.

What do you like about attending dental shows?

Everyone is very nice and friendly and really gets what I am doing. There are always greetings and requests for photos from the vendors and the attendees. I am happy to oblige.

By now you have certainly developed quite a fan following at these dental conventions. What’s the best fan encounter you have experienced so far?

Some fans have become clients and friends. I would say the best so far has been appearing at the wedding reception of two fellow vendors.

Surely being on the cover of the today show daily must have been another highlight of your career. How are you feeling about the honor?

I absolutely love being on the cover! And under the covers and in the centerfold! Let’s keep that happening, OK? Can’t get enough of that! Yes, it is indeed one of the absolute highlights!

To read the full interview with Richard Halpern, go to www.dental-tribune.com.
These dental-themed artworks are on display at Sapient Dental (booth No. 1143).

Cherie Boles of Lares (booth No. 908).

Meeting attendees listen to an educational presentation Friday afternoon at Invisalign iTero (booth No. 4031).

The new IMS Infinity Series Cassettes for instrument management are on display at Hu-Friedy Mfg. Co. (booth No. 3405).

Judie Leitton of Directa AB (booth No. 2922).

Neil Magneson, left, and Lois Magneson of SharperPractice (booth No. 339).

Nick Hare, left, and Chuck Scvarano of AmicCare (booth No. 4444).

From left: Ed Matthews, Jordan Taub, Mike Donohue and Jim Matthews of TAUB Products (booth No. 1809).
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The federal government imposes certain restrictions on, and pursuant to the Sunshine Act requires public reporting of, transfers of value to a practitioner. This includes promotional programs. This promotion is a reportable event.
You know how those days go — all morning long, it felt like you were struggling to keep on track with the schedule. Your team is frustrated because they haven’t had their full hour lunch more than one day a week in as long as they can remember.

You walked by the sterilization room 15 minutes ago, and it sure sounded like they were complaining to each other because you said to work in that emergency, and they were struggling to figure out how to pick up their kid from daycare on time. Again. You want them to enjoy working here, but you have to be able to pay the bills. And your best assistant asked you again if she can have that raise you have been promising her. Don’t they understand?

Today will be another day of three chairs and patient after patient asking you questions about treatment, all eager to get started with getting their mouth fixed, but yet you still won’t see any of them show up on the schedule. They said they wanted to do the work, but for some reason, they never seem to come back and do it.

They say insurance doesn’t cover it, or they ask for a pre-determination. Too bad they don’t know the pre-determination doesn’t mean much.

Today, you have 27 patients on your schedule and will work your butt off and still not have a chance to pee. It looks like you should be able to be done by 5, but today will finish worse than yesterday.

It feels like half of your patients are crankier than you are, and your team isn’t really talking to you today, and you know when you get home, all you will want to do is go to sleep and wake up on Saturday — except it’s still Tuesday!

It doesn’t make sense — you have taken C.E. courses every time they come to town. The new insurance plan was supposed to make things easier. You bought a bunch of new equipment to save money on taxes — of course now you have to pay for it every month — but why does it seem like the harder you work, the further behind you get? There has to be a simple reason.

Well, it turns out there actually is — and it’s something that you learned when you were about 5! Do unto others. More specifically, build systems in your office so that you can treat your patients the way you would want to be treated — comprehensively and with exceptional information to make good decisions — and produce a consistent experience time after time.

While doing that, add exceptional care — esthetic adhesive excellence like you see in the journals. But how? Well, the answer happens to be the foundation that LVI was built upon — building the excellence in a patient-centered practice. And the programs at LVI have been teaching clinical excellence and communication and business systems for almost 20 years to help doctors do a better job of not only seeing the patient but, more importantly, connecting with them.

Two decades of not only communication but comprehensive diagnosis and clinical excellence. As a result, the doctors at LVI have a statistically higher professional satisfaction and income.

Isn’t it time you go find out what they are doing differently? Yes. Yes, it is — and congratulations on the journey you are about to start.
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Planmeca launches smaller scanner tips

New offering expands ultra-fast intraoral CAD/CAM system for restorative dentistry

By Robert Selleck, today Staff

Among the products making their debut in the Midwinter Meeting exhibit hall are new smaller scanner tips for the Planmeca PlanScan scanner, which is part of the Planmeca CAD/CAM system that includes Planmeca PlanCAD and the Planmeca PlanMill, all exclusively distributed individually or as an entire system by Henry Schein.

The new intraoral scanner tips and entire CAD/CAM scanning-designing-and-milling system have been generating steady traffic in the Planmeca booth (No. 2614). “It’s the worldwide launch, right here in Chicago,” said Planmeca District Manager Brendan Massenheimer, in an interview with today on Friday in the exhibit hall. “The new, smaller tips (available in three sizes) enable easier scanning for a variety of procedures, including use with patients with limited oral mobility.”

Massenheimer said it’s easy for clinicians to go back and forth between the tips as needs change mid-procedure. “It’s a quick, easy interchange,” he said. “There’s no re-setting, which allows the process flow to be smooth throughout the procedure.”

All of the tips are autoclavable and feature a smooth finish to easily glide between cheeks and gums. And each is ergonomically designed to ensure comfortable scanning positions for clinicians. The “blue laser technology” accurately captures hard and soft tissues, restorations, models and impressions. The new tip sizes are labeled as standard, landscape and portrait.

“Standard” is for general scanning procedures and a larger field of view. “Small portrait” is for smaller mouths, compromised dentition, enhanced reach to the posterior or for capturing interproximal areas. “Small landscape” is for procedures needing anterior scanning (such as buccal to lingual and saddle scanning) and easy capture of buccal bite.

A “Smart Tips” feature provides built-in diagnostics.

In the Planmeca booth (No. 2614) on Friday, Heather Hennen, RDA, with Supremia Dentistry in Raleigh, N.C., helps Dr. Geraint Evans (left) of Northamptonshire, U.K., and Dr. David Ash of Briston, U.K., explore features of the Planmeca PlanScan, including the new, smaller intraoral scanner tips launched here in Chicago. (Photo/ Robert Selleck, today Staff)
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See Planmeca at the Chicago Midwinter Meeting
Booth #2602
Solea CO₂ dental laser is four times faster with new cutting spot size

By Robert Selleck, today Staff

At the Convergent Dental booth (No. 4237) in the Midwinter Meeting exhibit hall, you can try out the new extra-coarse cutting 1.25 mm-XC spot size for Solea™, the first FDA-approved, CO₂ 9.3 micron dental laser for hard and soft tissue.

On Thursday, Convergent Dental CEO Michael Cataldo spoke with today about the new cutting pattern, explaining the “extra-coarse” description is a bit of a misnomer. “If you want to back off on the pedal a bit, it’s actually pretty smooth, with lots of control,” Cataldo said, while explaining the advantages of Solea’s computerized controls in general. “It’s not just a straight beam coming out,” Cataldo said. “It’s computer enhanced.”

The new spot size increases Solea’s industry-leading speed by a factor of four, so large amounts of tooth structure can be removed at or above traditional-drill speed. That means you don’t need to choose between the speed with a drill versus the improved patient experience with a laser. Cataldo said a dentist who had just been testing out the new pattern in the booth had completed a crown prep in three minutes and was confident it would have taken just two minutes on a live tooth.

The Solea’s unique 9.3-micron wavelength is highly absorbed in both hydroxyapatite and water, vaporizing tooth structure with speed, precision and a reliable analgesic effect. The 1.25-mm-XC spot size adds a new high-end capability for rapidly removing thick enamel for crown preparations and large fillings.

Cataldo said new patterns will keep being released, and all will be seamlessly integrated into existing Solea set-ups. The 1.25 mm-XC spot size is being offered as a free software upgrade to all current Solea dentists and will be included in all new units.

“We’re constantly innovating and improving, and everything plugs into the existing platform so it’s easy for our customers to upgrade,” Cataldo said.

The software-based platform enables dentists to use Solea’s intuitive touchscreen interface to switch between spot sizes with a finger tap to perform anesthesia-free and blood-free procedures. Even before the addition of the 1.25 mm spot size, Solea dentists had reported performing six or more additional procedures per day because of being able to treat patients without anesthesia and not having to control bleeding.
Your hands will love it!

NEW Preference LIQUID HAND SANITIZER

- Favored 3:1 over the leading liquid sanitizer
- Kills 99.9% of the most common germs
- Dries in less than 10 seconds
- Gloves slide on easily after use
- Moisturizes the skin

Visit Booth #2221 at CDS for a FREE sample!
By Shofu Staff

PRG Barrier Coat effectively treats dental hypersensitivity by providing immediate and long-lasting relief. It is a light-cured, bioactive resin-based varnish with extended protection time of up to six months.

PRG Barrier Coat is unlike any other varnish on the market, incorporating Shofu’s proprietary giomer technology, a “surface pre-reacted glass” filler that releases six beneficial ions shown to inhibit bacterial adhesion. It is characterized by a high fluoride release and rechargability, acid neutralization and anti-plaque benefits.

PRG Barrier Coat was designed with self-adhesive abilities to allow easy application on flat and slanted surfaces. Only a thin protective layer (15 um) is required to block dentinal tubules from external irritants and provides esthetic results. HEMA-free, aceton-free and alcohol free, PRG Barrier Coat has little odor and reduces the occurrence of detrimental effects to intraoral tissue.

PRG Barrier Coat is ideal for exposed root surfaces and a variety of other applications, including orthodontic brackets, hard-to-brush areas, newly erupted molars and white spots. It is not indicated for prevention of tooth sensitivity after tooth preparation for direct and indirect restorations.

PRG Barrier Coat retails at $36.65. As a special incentive, clinicians who purchase PRG at the Chicago Midwinter Meeting will receive a complimentary pack of 12 Dura-Green stones.

New high-performance ultra-gloss kit

The Super-Snap X-Treme Ultra-Gloss Performance Kit incorporates the essential tools for dentists to complete quick, easy, highly esthetic restorations and guarantees to provide patients with the wet, ultra-glossy look they desire.

A four-step, color-coded disk system, the performance kit integrates Super-Snap coarse/medium disks with Super-Snap X-Treme fine/super-fine disks to enable such options as contouring, finishing and polishing with Super-Snap and the new Super-Snap X-treme disks, which are enhanced to provide three times greater gloss. X-Treme disks offer greater thickness for increased durability, flexibility without warping and a 3-D semispherical grit.

Results are further enhanced when polishing with Super-Snap Buff disks and DirectDIA diamond polishing paste. A 20-percent diamond polishing paste and synthetic velvet clothed disks are provided for a lustrous shine.

The new ultra-gloss kit provides 225 disks and more. Retailing at $174.40, the Ultra-Gloss Performance Kit is available with either all standard (12 mm) or all mini (8 mm) disks. Bonus items include a Beautifil Flow Plus 2.2 gm syringe, valued at $38.75, and a six-compartment storage case.

Here in Chicago

To check out the new PRG Barrier Coat and the Super-Snap X-Treme Ultra-Gloss Performance Kit, stop by the Shofu booth, No. 2411. Both products are also available through your local dealer. For more information, contact Shofu Dental at (800) 827-4638.

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The DocPort i.o. intraoral camera features a focus-free design for ease of use and crystal clear imaging. Image acquisition is hassle-free via the easy-touch capture button located on the camera wand, or with optional USB footswitch. Direct computer connection using a standard inexpensive USB cable eliminates costly cable repairs and the camera is supplied with a remote automatic on/off handpiece holder. Easy integration with any dental software platform in both PC and Macintosh environments makes DocPort i.o. the natural choice for quality dental imaging.

James Rosenwald, DDS, FAGD
“I recently bought two DocPort cameras (to replace my older units) and found them so easy to use and so valuable to my practice that I have purchased three more units. I highly recommend this camera.”

Gerald Ross DDS—Tottenham, ON
“I've had cameras costing more than double, but my staff prefers the DocPort over any other because the pictures show incredible detail and it's so easy to use. We've tried a lot of them, but this camera is amazing.”

SharperPractice.com
Celebrating 20 Years of Innovation
By Whip Mix Staff

Your hands will love it. Preference Liquid Hand Sanitizer was developed for use in dental operatories and laboratories. With its unique liquid solution, Preference kills 99.9 percent of the most common germs associated with cross contamination.

Some of the benefits of Preference include that it dries quickly, it is very easy to apply gloves after use, it includes emollients to soften your hands as well as sanitize, it prevents hands from drying and cracking after repeated use, and it’s not sticky, slimy, oily or watery.

Hand sanitizers, including Preference Liquid Hand Sanitizer, are an effective method in reducing and eliminating the spread of germs when hands are not dirty. This includes times in between patients as well as when in between glove changes. It is recommended you wash with soap and water when hands are visibly dirty, upon entering the office and before and after lunch.

Preference Liquid Hand Sanitizer consists of 72 percent ethyl alcohol.  

For alcohol-based sanitizers, the Food and Drug Administration (FDA) recommends a concentration of 60 percent to 95 percent ethanol or isopropyl alcohol for greatest germicidal efficacy. Any sanitizers with less than 60 percent alcohol are not considered effective against most common germs.

Before Preference was launched, 78 dental professionals participated in a blind study to compare the new hand sanitizer against a leading liquid hand sanitizer on the market. Sixty evaluators, or 77 percent, voted Preference as their first choice in the blind study, according to Whip Mix.

After launch, Preference was tested by a panel of 26 dental team members through Contemporary Product Solutions. The quickness of drying was rated as the favorite feature, with 62 percent of team members’ support. Users simply apply Preference Liquid Hand Sanitizer to their hands and rub it around until it dries in less than 10 seconds.

Another feature evaluators liked was Preference’s ability to moisturize their hands without leaving sticky residue. One evaluator stated: “Preference can be used at every chair in a high-volume and fast-paced office.”

All in all, 69 percent of evaluators commented that there wasn’t anything they didn’t like about the product, and 100 percent of evaluators were either extremely likely or very likely to recommend this product to a team member or other professional. On a 5-point diamond scale, Preference was rated a 4.6.

One hygienist summarized her thoughts with: “I absolutely love everything about this product! Preference dries very quickly and makes putting gloves back on a breeze.”

Preference was also recently reviewed by a panel of 12 evaluators through Dental Product Shopper. One evaluator mentioned, “I am very pleased to see this product does not clog as the traditional gel hand sanitizer does,” while another says he liked the, “interesting dispensing nozzle that makes product dispersal on hands much easier.”

Of these evaluators, 100 percent said ease of dispensing was a very important or important factor to consider when purchasing a hand sanitizer. One evaluator said: “I love how quickly this product dries and how smooth my hands feel. It’s very easy to put gloves on after using Preference sanitizer.”

All in all, 10 of the 12 evaluators said Preference was much better or somewhat better than competing products, and nine would definitely or probably purchase the liquid sanitizer in the future. On a 5-point scale, Preference was rated a 4.4.

One evaluator summarized her thoughts with, “I am at a loss to think of anything to improve with this product.”

With many hand sanitizers already on the market, it seemed a challenge to introduce a new one. However, with the reviews above, it was a challenge Whip Mix had to accept. Stop by booth No. 2221 to try it and tell us your preference.
Spot the difference.
Visalys® Temp - for strong and esthetic temporary crowns and bridges.

Stop trying to find the difference. There is none. The new temporary crown and bridge material Visalys® Temp is translucent, fluorescent and available in different shades to match the esthetic look of a natural tooth. Scientific research and extensive market tests prove Visalys® Temp leads to stronger provisionals. Call 877 532 2123 to order or obtain additional information.

www.kettenbach.us
Controlling tissue contours with a prosthetically driven approach to implant dentistry

By Timothy F. Kosinski, DDS, MAGD

With continual improvements in the design and production of implant systems and restorative components, the consistent results, predictability and long-term prognosis offered by implant therapy is making the treatment an increasingly popular technique for replacing missing teeth.

The esthetics, durability and precision customization offered by modern prosthetic components enable clinicians to provide ideal final restorations their patients can depend on.

For the best results and maximum efficiency, implant therapy should be approached comprehensively, with the final result visualized from the outset. Technology has advanced to the point where smile design, emergence profile and margins can be established prior to any surgical intervention, giving clinicians a clear picture of the optimal prosthetic outcome that can be carried through each phase of treatment.

The Inclusive® Tooth Replacement System (Glidewell Laboratories, Newport Beach, Calif.) simplifies this approach by providing everything needed for an implant case in a single package, building toward the final restoration with patient-specific components that begin shaping the patient’s soft-tissue contours immediately following surgery.

Experienced dental technicians use the latest in CAD/CAM technology to design custom abutments that sculpt the gingival contours during the healing phase, setting up a smooth, predictable transition to the final custom abutment and crown.

Until recently, surgical placement of the implant was the primary concern. Improvements in dental implant design have led to better initial stability and less crestal bone loss over time. While positioning and angulation are crucial, achieving the most esthetic final result possible is also now of paramount importance if seeking to meet or exceed patient expectations.

The Inclusive Tooth Replacement System takes significant strides in facilitating the creation of superior, more predictable esthetics. With the optimal emergence profile driving the design process, clinicians now have the necessary tools to manage soft-tissue contours with custom components that approximate the root design and structural anatomy of a natural tooth.

The case that follows illustrates how an all-inclusive, prosthetically driven treatment protocol assists the clinician in achieving an excellent clinical outcome while streamlining the surgical and restorative phases of treatment.

Because the case involves the replacement of a central incisor in the anterior, where creating an ideal emergence profile is especially important, the esthetic benefits of this approach are particularly evident.

Case report

A 55-year-old female presented with a fractured maxillary left central incisor (Fig. 1).

After careful intraoral and radiographic examination, it was determined that an implant could be predictably placed in the bone without complication. The primary goal was for the ultimate emergence profile of the final restoration to match that of the natural tooth in the anterior, where creating an ideal emergence profile is especially important, the esthetic benefits of this approach are particularly evident.

Upon completion of the healing phase, ideal gingival contours were evident (Fig. 3), which made delivery of the final restoration a smooth endeavor that was comfortable for the patient and required no chairside adjustments (Fig. 4).

Conclusion

As demonstrated by the natural margins, soft-tissue contours and emergence profile achieved in this case, a prosthetically driven approach to implant dentistry provides excellent clinical outcomes. Visualizing the final restoration from diagnosis and treatment planning through delivery of the final abutment and crown helps to ensure a predictable result.

The Inclusive Tooth Replacement System simplifies this approach by harnessing patient-specific tissue contouring and an all-inclusive clinical protocol to guide cases toward a functional and esthetic conclusion, with each step of the restorative process setting up the next for success.

Here in Chicago

For more information on the Inclusive Tooth Replacement System, stop by the Glidewell Laboratories booth, No. 4220.

The custom contours of the healing abutment effectively managed proper mesial-distal positioning and equal spacing between the adjacent natural teeth. Once proper angulation was verified, typical implant techniques were used.

Treatment began with the atraumatic extraction of the root. Maintaining the facial plate of bone was critical to facilitating optimal tissue healing and allowing for flapless placement of the dental implant.

Digital radiographs were used before, during and after surgery to ensure ideal implant angulation and depth. A pilot drill established the desired depth, and the apex of the implant was safely and effectively positioned in line with the roots of the adjacent teeth.

Following implant placement, the choice was made to not immediately load the implant with a transitional crown because sufficient primary stability was not achieved.

The custom healing abutment was placed (Fig. 2), and because the tooth being replaced was in the esthetic zone, a removable partial denture was used as a transitional appliance.

The custom contours of the healing abutment effectively managed the patient’s soft tissue. For added esthetics, the maxillary right central incisor crown was replaced following preparation.

Fig. 1 (Photos/Provided by Glidewell Laboratories)
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2015 SHOW SPECIAL VISIT BOOTH 3102
Planmeca ProMax CBCT with CAD/CAM technology: Integrating the digital workflow

By Planmeca Staff

- The combination of cone-beam computed tomography (CBCT) images and CAD/CAM technology is becoming the new standard of care for restorative dentistry.

While CBCT images provide multifaceted details below the gum line, intraoral scans are capable of capturing the highest resolution of data above the gum line. This combination of CBCT and STL data from CAD/CAM sources gives doctors the ability to provide the required information and tissue leveling for a crown down to implant plan. Temporary and final restorative crowns can be milled in-office in a matter of minutes or milled by a lab in as little as 24 hours.

Planmeca’s imaging and CAD/CAM technology have captured this concept with the ProMax 3D family of imaging units and the PlanScan/PlanMill systems, offering doctors the ability to acquire a data set with more detail than ever.

While digital impression systems are realizing a data standardization solution, the digital X-ray, practice management, CBCT and digital treatment-planning systems found in today’s dental practice require the same sort of attention. To truly maximize the efficiencies and cost savings offered by these technologies, interoperability is imperative among these dental systems.

Data standardization, the transfer of the patient’s information, X-rays, CBCT scans, digital impressions and prescription data between the dental office and the dental lab with the simple push of a button, is now possible with Planmeca Romexis open-architecture software and Planmeca Romexis Cloud.

Ultimately, having a common standard that allows the disparate systems used in dental care to function as plug-and-play devices rather than requiring pricy IT solutions will reduce the costs of integrating these new technologies into dental practices and maximize the ROI of the equipment, the company asserts.

Planmeca’s CBCT and CAD/CAM imaging systems, along with open-architecture Planmeca Romexis digital treatment-planning software, are using this idea to improve the efficiency, predictability and cost-effectiveness of dental restorations, making chairside dentistry a good investment for dentists who wish to grow their practice and offer patients the latest in same-day technology.

Here in Chicago

To learn more about the Planmeca ProMax CBCT with CAD/CAM technology, visit booth No. 2614.
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(Images and text from the advertisement)
Toward that end, perhaps the biggest announcement was formalization of NCOHF collaboration with the U.S. Department of Defense, with efforts concentrated within boys and girls clubs on military bases. Other new partnerships include the National Association of School Nurses, the U.S. Hispanic Chamber of Commerce, the American Pharmacist Association and the International Dental Hygienists Association.

Also represented at the event was Students United with America’s ToothFairy, which has chapters in high schools and colleges throughout the country. Lauren Kuhn, a second-year dental student at Harvard Dental School, has been involved with the Harvard University Dental Students United with America’s ToothFairy the entire time she has been at the school. She also happens to be Miss Massachusetts, and she helped promote the evening’s theme with a live performance of “You’re Never Really Dressed Without A Smile,” from the Broadway musical “Annie.”

Emphasizing how committed the student organizations are to the cause, she encouraged attendees to join her in a pledge to ensure no child in need of oral health care is forced to go without.

“Not on our watch,” she encouraged everyone to proclaim with her.