Where was the football huddle first used? Where is the only Leonardo Da Vinci painting located in the Western Hemisphere? What was voted the most walkable city in the United States? Where will you find 40 restaurants with a Zagat score of at least 25 out of 30? Where will you find me October 3 – 6, 2012? That's right — Washington, DC — one of the world's most fascinating cities.

This year's annual meeting promises to be one of the most unique formats for scientific inquiry. Instead of the routine main podium presentations where every speaker just presents one side of the story, our 61st Annual Meeting will feature two world-class experts who will debate their preferred option in implant dentistry.

Imagine being able to witness Carl Misch and his biomechanic approach challenging Palo Malo with his “all-on-four” concept. Hear Michael Pikos advocate for longer implants, while Marco Esposito offers his evidence-based rationale for short implants. Have you wondered if BMPs will become mainstream? Edgard El Chaar and Shankar Iyer will present the debate “Grafting – Plain and Simple vs. Bells and Whistles.” Each speaker will have 30 minutes to present his or her argument, followed by a moderated interchange of responses. You will be able vote your preferences electronically following each session and decide for yourself what will work in your hands and what you will want to change in your practice.

The ten debate topics are:

- **Implant Dimensions**
- **Esthetics**
- **Block Grafts**
- **Vertical Augmentation**
- **Prosthetics**
- **Grafting**
- **Placement**
- **Treatment Options**
- **Treatment Planning**
- **Implant Soft Tissues Esthetics**

In addition to the Main Podium Sessions, there will be three live surgeries, over one dozen hands-on workshops, a symposium presenting new research in implant dentistry, a global
**Impladent Ltd Proudly Introduces An Affordable Alternative**

**OsteoMed®-Xed Bovine Collagen**
- Absorption Time: 4-6 weeks on average
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- Absorption Time: 4-6 weeks on average
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**OsteoGen®, a Non-Ceramic, Osteoconductive Synthetic Bioactive Resorbable Graft**

Arti reports: “What is important is the implant success rate over time, as reported by the Sinus Consensus Conference, a 98% cumulative success rate over 5 years has been found with pure alloplast OsteoGen.” Arti further noted that “OsteoGen® is physically identical and crystallographically equivalent to bone, making it a pure alloplast. The spaces between the crystal clusters facilitate cellular and tissue proliferation within the graft material, thus enhancing faster osteointegration.”

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President’s Message

Larry Bush, DDS
President, American Academy of Implant Dentistry

It is amazing that every AAID Past President I’ve talked to has told me the same thing … the year is going to be over before you know it. As I pen this report for the Summer Newsletter I realize how correct they were. Time has been flying by, but much is being accomplished.

Education continues to be the cornerstone of the AAID. Our first ever Bone Regeneration Symposium was held April 21 and 22 in New York City. Seventy-three dentists attended, and evaluations for the program were very positive. We are considering making this an annual offering. Our annual hands-on “Regeneration and Augmentation Techniques Course” (formerly the Bone Grafting Course) was held March 9 and 10 in Orlando and remains a hit for hands-on training.

Our second District Meeting of the year was held April 21 and 22 in New York City. Seventy-three dentists attended, and evaluations for the program were very positive. We are considering making this an annual offering.

Over half of the doctors who attended had not previously attended an AAID meeting — either a District or Annual meeting. Another 20 doctors who attended were non-members of AAID who, we hope, soon will become members of the Academy.

Congratulations to the officers of the Western and Central Districts for an excellent meeting.

As promised, we are bringing quality education to you through the Academy’s new webinar series. We are presenting at least four webinars during the second half of this year. By the time you receive this issue of AAID News, Nick Caplanis and Jaime Lozada will have delivered webinars on timely and practical topics. Over the next couple of months, John Minichetti and Shankar Iyer will each present a topic of importance to your practice. Watch for the time and dates. And of course if you miss one, don’t fret. The programs are archived so that you can view the webinar anytime at your convenience. Visit AAID’s web site for more information.

The crowning event in implant dentistry remains the AAID Annual Meeting. This year’s Annual Meeting should be one of the liveliest and most provocative AAID meetings ever as the leading experts in different areas will be debating alternative treatment options through their presentations. It is only through the tireless work and creative leadership of Scientific Chair Shankar Iyer and General Chair John Minichetti that this program went from conception to developing the wings to fly. In addition, the meeting program will include three live surgeries, a Research Symposium and a Global Symposium. Matt Young has put together a staff program that you do not want your staff to miss. I want to thank Dr. Iyer, Dr. Minichetti, and Dr. Young for the time and effort they have devoted to this year’s Annual Meeting.

I am pleased to report that the conversion of the membership database has been completed ahead of schedule at Headquarters. Some of the highlights include real-time access by members to registrations, remote access by staff, and a state-of-the-art system that can accommodate our growth.

The new consumer website undertaking has shifted into high gear and is moving forward nicely. The Website Ad Hoc Committee is meeting weekly by teleconference with the AAID staff and the outside experts to discuss and approve designs and content in a timely manner. Our goal is to debut the new consumer website by the summer meeting.

AAID NEWS

Editor David G. Hochberg, DDS
Executive Director Sharon Bennett
Director of Communications Max G. Moses

AAID NEWS is a quarterly publication of the American Academy of Implant Dentistry. Send all correspondence regarding the newsletter to AAID, 211 East Chicago Avenue, Suite 750, Chicago, IL 60611.

Please notify AAID and your postmaster of address changes noting old and new addresses and effective date. Allow 6-8 weeks for an address change.

Advertising copy must conform to the official standards established by the American Dental Association’s Council on Dental Materials and Devices that are advertised must also conform to the standards established by the United States Food & Drug Administration’s Sub-committee on Oral Implants and the American Dental Association’s Council on Dental Materials and Equipment acceptance program.

It is the policy of the American Academy of Implant Dentistry that all potential advertisements submitted by any person or entity for publication in any AAID media must be deemed consistent with the goals and objectives of the AAID and/or ABOI/ID, within the sole and unbridled discretion of the AAID and/or ABOI/ID. Any potential advertisement deemed to be inconsistent with the goals and objectives of the AAID shall be rejected.
President’s Message
continued from page 3

this to the membership at this year’s Annual Meeting.

Your Board of Trustees met in conjunction with the Western/Central District meeting in Vancouver and took action on several items that will have significance to the membership. A complete summary of those action items can be found on page 8. However, I wanted to bring your attention to a couple in particular. The Board endorsed a concept brought to it by the A & C Board to implement oral case testing over the web. A complete plan, including budgets, will be considered by the Board of Trustees at its next meeting.

A new category of membership has been embraced by the Board and the various committees that have studied it. This new category – called Associate Member – will recognize the accomplishment of those who have successfully passed the written Associate Fellow examination. A Bylaws amendment will be voted upon by the membership on October 6 at the Annual Business Meeting. More details about this and other amendments can be found on page 10 of this issue.

Our legal counsel, Dr. Frank Recker, is working directly with the Texas Board of Dentistry’s attorney for a solution to the Texas suit. I am very optimistic with this effort as the AAID remains vigilant in our defense of our members’ right to announce their court recognized bona fide credentials.

I attended the Annual Meeting of the Academy of General Dentistry in Philadelphia and visited with their leadership and many of their members. Developing affiliations with this group and others will be mutually beneficial as the health care delivery system navigates uncharted waters during the next few years.

Few venues for our Annual Meeting have offered more for your spouse and family than Washington, DC. Plan now to bring your family so they can enjoy all the sites of the most recognized city in the world. I look forward to seeing you in Washington, October 3-6, 2012.
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40 YEARS OF REFINING
OVERDENTURE ATTACHMENTS OBSESSIVE,
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For more information download a QR app to scan this code, or visit our new microsite at www.thepivotingdifference.com/AAID.
Introduction
Before the recession of 2008-2010, Implant Treatment Coordinators (ITCs) had an easier job. Patients were more likely to agree to treatment. That is no longer the case.

The slow economy and uncertain future have led many potential implant patients to adopt a wait-and-see attitude regarding large expenditures — including implants. Though cost has always been a major hurdle for implant case acceptance, it has now become a much more significant barrier.

How the ITC Closes Implant Cases
Implants are like a separate division — with its own highly-trained sales people — inside of a small company. Too many surgical practices attempt to handle their implant practice the same way they handle other specialty services. However, there are vast differences between them, especially in a post-recession economy.

The New ITC understands that:

1. Implants are seldom perceived as necessary.
   Many other specialty services address health- and disease-oriented problems that necessitate treatment. Viewed as a more cosmetic option by potential patients, implant treatment is more likely to be postponed or rejected in today’s environment of financial uncertainty. To increase implant production, greater value for treatment must be created.

2. Implants are a highly emotional decision.
   Other specialty services decisions are driven by the fact that the patient needs the service. The implant patient must want an implant. Surgical practices should work with their restorative partners to promote the value of implants to every potential candidate.

   Implant doctors must build strong relationships with restorative doctors and reach out to referrers through a strong referral marketing program. The ITC is vital for:
   - Maintaining established referral relationships
   - Communicating with new restorative practices

4. Dental implant consultations are quite different.
   The ITC plays a crucial role in handling consults. The Levin Group Data Center™ indicates that 65% of patients will need two consults and 15% will need three. The well-trained ITC has the time to concentrate on the consult process and the skills to move patients toward the close by:
   - Developing relationships with patients
   - Building value for treatment
   - Providing all the information needed to create understanding and confidence
   - Motivating patients to accept recommended treatment

Training the New ITC
Consumer psychology, including the spending habits of potential implant patients, has changed dramatically in the post-recession economy. As a result, the new ITC must be a highly trained professional with excellent relationship-building and sales skills. Simply having a team member who explains implant dentistry and then hands over the patient to the front desk staff for scheduling will no longer suffice.

For years, high close rates have misled many implant practices into thinking they’re doing an excellent job of case presentation. But they have usually been closing a high percentage of a very small number of patients. Closing 95% of 100 patients does not necessarily mean implant success. In fact, it may well be better to close 75% of 300 patients than 95% of 100 patients. Too many practices believe that they are doing an excellent job of case presentation without realizing that they are well below their true potential.

The new ITC contributes significantly to the success of the practice when properly trained in key post-recession treatment presentation skills. More potential patients will accept treatment when the ITC focuses on:

1. Creating value for implants. From the very first phone call, the ITC must build value... for the practice, for the doctor and for implants. This process continues during the case presentation and treatment as well.

2. Offer a variety of financial options. The cost of implants is always...

see Business Bite p. 8
Implant Specialist —
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Dr. Richard Juhnke DMD - Union City, MI

“Dutton Dental has always produced excellent restorations for me. I especially enjoy their problem-solving skills on different cases.”

Dr. Larry Seward DDS - Navarre, OH

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330.874.9333
duttondental.com
ddc@duttondental.com
a sticking point. To help make implants more affordable, practices should offer patients a variety of financial options. Levin Group recommends these options:

- **5% discount for payment in full**
- **Half up front and the balance before treatment is completed**
- **Credit cards**
- **Outside financing**
  This last option allows the patient to accept implants without the implant practice serving as the banker. The practice receives payment for its services upfront and has no responsibility for collection. A variety of patient options should be offered to all patients regardless of their perceived financial status. This strategy will significantly increase the level of case acceptance and practice production.

3. **Using an effective follow-up system when a patient doesn’t accept treatment.** Many potential implant patients will accept treatment eventually—if ITCs follow up. By initiating an effective, documented follow-up process when a patient says “No” or “Not yet,” rather than just giving up, the ITC can often be rewarded with an eventual “Yes.”

**Conclusion**

The post-recession ITC is very different from the pre-recession one. The new ITC works to achieve targets and follows clear methods that motivate 90% of referred patients to accept treatment. ITCs who are still operating as they did in the past will find their close rates declining steadily. They need well-honed sales capabilities so they can close the deal when patients visit the office. By retraining your ITC, you can put your practice on the path to post-recession growth.

To learn how to run a more profitable, efficient and satisfying practice, visit the Levin Group Resource Center at www.levingroup.com — a free online resource with tips, videos and other valuable information. You can also connect with Levin Group on Facebook and Twitter (@Levin_Group).

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**Interested in becoming a Credentialed Member of AAID?**

Join over 800 of your colleagues from throughout the world who have successfully attained credentialed member status in the American Academy of Implant Dentistry.

Visit the Credential tab on the AAID website — www.aaid.com — for detailed information about the requirements, the process, study guides, as well as test dates and locations.

Contact Joyce Sigmon at joyce@aaid.com or Latasha Bryant at latasha@aaid.com or by phone at 312.335.1550 if you have questions.

---

**Actions Taken by Board of Trustees**

**June 9, 2012 Vancouver, British Columbia, Canada**

- Co-sponsor WCOI 2013 meeting in Seoul, South Korea
- Established a reserve fund policy requiring funding equal to one year of expenses
- Approved the 2011 Audit and Management Letter
- Retained Ruzicka & Associates to conduct the 2012 Audit
- Re-appointed JP Morgan as Investment Advisors
- Elected Fellows and Associate Fellows to membership as recommended by A & C Board
- Endorsed web conferencing concept for testing by A & C Board
- Required confidentiality statement to be signed by any member associated with development or implementation of AAID credentialing examination process
- Approved Life Membership status for Enrique M. Rivera, DMD
- Set Associate Member dues at same level as General Member dues if Associate Member bylaw provision passes
- Approved new policies and procedures for Gershkoff Award
- Established “Paul Johnson Service Award”
- Recommend to Honored Fellow Committee that award be presented to no more than two individuals per year
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New Membership Category Part of Annual Meeting Vote

By Nicholas Caplanis, DMD, MS, President-elect, AAID

Each Annual Business meeting includes the consideration of Bylaws amendments. This year we’ll be considering three amendments at the Meeting on Saturday, October 6. I’ve described them below. But…one of these amendments — a new membership category — is a significant proposal that perfectly illustrates how AAID’s committees work together to improve our Academy.

The idea for a new member category began in 2008 with the Global Committee when they proposed the concept of a membership category to recognize those individuals who pass the written credentialing exam (Part I) for Associate Fellow but do not go on to complete the case review/presentation exam (Part II). The category is intended to recognize their achievement and encourage them to move on to the next level of membership. It has been estimated that there have been approximately 1000 doctors over the past 10 years that would have qualified as members within this category, if this membership class were already in place. The Board of Trustees approved the concept back in 2008, and subsequent Boards in 2010 and 2011 were also in agreement with the proposal.

This new member idea was then endorsed by both the Membership Committee and the A&C Board. Early on there was agreement among the committees that a new, non-credentialed, non-voting category would be of benefit to our Academy…but there was much discussion about what it should be called. Between 2008 and 2012 a number of names for the new membership category were considered including (but likely not limited to): Associate, Affiliate, Eligible, Affiliate Fellow, Associate Fellow Eligible, Pre-Associate, Sustaining, Candidate, Accomplished, and a number of other suggestions that never made it to debate. Finally, the Membership Committee endorsed the term “Associate Member,” which was also approved by the Board of Trustees.

“Associate Member” is seen as a natural progression of our current membership categories: Associate, Associate Fellow, Fellow. The Membership Committee’s recommendation was shared with the Bylaws Committee for the final review. The Bylaws Committee also considered the recommendation from the A&C Board that the new category be called “Affiliate Member.” But the Bylaws Committee as well as the board of trustees felt that the term “Affiliate” implies a somewhat looser, less aligned relationship. Upon researching the term “Affiliate” with other organizations we found that it’s often used to describe memberships by corporations, suppliers, exhibitors, etc., who have an association with the organization in some form but not necessarily a true membership.

So with this long history behind it, the Bylaws Committee is recommending a new, non-credentialed, non-voting membership called “Associate Member.” Here’s the proposed new section of the Bylaws:

Article III – Membership.
2. Associate Membership.
A) Eligibility. Any licensed dental practitioner shall be eligible for election to the Academy as an Associate Member who successfully completes the written examination (Part I) of the Associate Fellow Membership examination as established by the Admissions & Credentials Board and as approved by the Board of Trustees.
B) Application. An applicant seeking Associate Membership shall file an application for Associate Membership as approved by the Board of Trustees.
C) Rights of Associate Members. An Associate Member shall be exempt from all assessments. An Associate Member shall be entitled to attend all scientific sessions and to receive the Academy’s scientific publications, but shall be ineligible to vote or hold office, although they may serve on committees unless otherwise limited by these Bylaws.

The dues for this new membership would be the same as General Members. The purpose of this membership is to recognize doctors that have passed the Associate Fellow written exam, promote our credentialing process to these individuals and, we hope, increase our membership in the process.

Other Bylaw Amendment Recommendations
While our other Bylaw Amendments don’t have
quite the same history of development, they are still important for consideration by the voting members.

Retired Member
The current Bylaws state that Retired Member is available to any member who has retired from active practice or employment. However, the Membership Committee has discovered that many AAID members are retiring — but not totally. Members have reduced their hours of practice and have also reduced their income. That’s the basis for the Membership Committee’s proposal to expand the eligibility for Retired Member to include:

- Article III – Membership.
- Section 9. Retired Member.
- A) Eligibility
- 2) Or is 65 years of age or older, has continuous voting membership for a minimum of 15 years, and practices 5 or fewer days per month.

This expanded eligibility would reduce dues for these individuals and keep the history and experience that they have brought — and will continue to bring — within the Academy.

Housekeeping, Editorial Amendments
The Bylaws Committee consulted with a registered parliamentarian to help address some long-standing redundancies and inconsistencies in the Bylaws. Other editorial changes are being suggested to bring the Bylaws into better alignment with Sturgis “The Standard Code of Parliamentary Procedure,” which is the parliamentary guide utilized by AAID. A detailed description of these housekeeping changes with explanations from our parliamentarian can be found online. Please see “Note” below.

All three proposed amendments will be discussed at the Annual Business Meeting when they’ll be voted on by the membership. Plan to join us there for that discussion and vote. But…if you have questions now about any of these proposed amendments, just contact AAID’s Executive Director, Sharon Bennett, sbennett@aaid.com or 312-335-1550 with your questions. She’ll be glad to help you or she’ll direct you to one of the members of our Bylaws Committee.

We hope you’ll agree that these proposed amendments will help to move AAID forward by expanding our membership opportunities and clarifying our governing document.

Nick Caplanis, Chairman
Bylaws Committee

AAID Bylaws Committee
Tom Chess
David Gimer
Jaime Lozada
Brian Jackson

NOTE: The current Bylaws with all housekeeping or editorial amendments noted and footnoted, and the complete wording for the two other amendments being proposed, are available for review at www.aaid.com/news_and_publications/72 or by scanning this QR Code.

Upcoming Key AAID Dates

**August 2012**
21 DASK Technique for Sinus Grafting - Webinar

**September 2012**
11 Utilizing Pre-shaped Collagen Membranes to Treat Ridge Deficiencies - Webinar

**October 2012**
3 – 6 61st Annual Meeting of the American Academy of Implant Dentistry
Washington, DC
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AMERICAN ACADEMY OF IMPLANT DENTISTRY

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State: ________________________________________ Zip: ______________________ Country: ______________________________________________
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AGD Member #: (Required if AGD Member registering at AAID Member rates) ____________________________________________________________________

A. Meeting Registration

By 9/10/12 $1095 $1195
AID Fellow*
AID Associate Fellow*
ABOID Diplomate *
AID General Member*
AGD Member* (AGD Member # required)
NonMember PLUS! Dentist*
[Includes Membership in AID through November 30, 2012]
Nonmember* $1495 $1595
Life Member or Retired Member $245 $245
Technician $345 $395
Office Staff $345 $395
Register 3 or more allied staff from same office at $275 each.
Doctor’s Name ____________________________
Student $150 $150
Spouse Name __________________ $245 $245
Guest Name __________________ $245 $245
* Includes one (1) President’s Celebration ticket

B. Workshops

Each Workshop is $99 if registration received by 9/10/12 ($119 after 9/10/12)
W1 Michael Pickos, DDS – Extraction Site Management (Thurs. am)
W2 Stuart Orn-Jones, BDS – Ridge Expansion and Compaction (Thurs. am)
W3 Miguel Stanley, DDS – Bone Augmentation Techniques (Thurs. am)
W4 Jack Krauser, DMD – Implant Placement at Time of Extraction (Thurs. pm)
W5 Stuart Orn-Jones, BDS – Treatment of Inadequate Ridge Height (Thurs. pm)
W6 Edward Kusek, DDS – Laser Implant Dentistry (Thurs. pm)
W7 John Carollo, DMD – Dental Photography (Fri. am)
W8 Fouad Khouy, DMD, PHD, Prof. – Autogenous Bone Graft (Fri. am)
W9 Stuart Orn-Jones, BDS – Ridge Expansion and Compaction (Fri. am)
W10 Edgard El Chiar, DDS – Plastic Periodontal Therapy (Fri. pm)
W11 Jason Lipscomb, DDS – Social Media (Fri. pm)
W12 John Minichetti, DMD, Lawrence Nalit, DDS, Matthew Young, DDS – Bone Allografting (Fri. pm)
W13 Michael Sonick, DMD – Hard Tissue Regeneration (Sat. am)
W14 Tom Mucciolo – Electrifying Presentations (Sat. am)
W15 To Be Announced (Sat. am)

B. Workshops subtotal _______________________

C. Allied Hands-on

Space is limited at the Allied Hands-on program on Friday morning. Please reserve your spot as soon as possible:
Hands-on Prosthetic Training (Fri, 8 am – 9:30 am) No Charge
Hands-on Prosthetic Training (Fri, 10:30 am – Noon) No Charge

C. Allied Hands-on subtotal _______________________

D. Special Events

A & C Roundtable (Thurs.9:30 am - 10:30 am) No Cost but reservation required
A & C Roundtable (Fri. 9:30 am - 10:30 am) No Cost but reservation required
Women Dentists’ Wine & Cheese (Thurs. 6 – 7:30 pm) $245
President’s Celebration (Sat. 6:00 pm) $195

D. Special Events subtotal _______________________

GRAND TOTAL (A+B+C+D) _______________________

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Or register online at www.aaid.com or www.aaid.com.
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Requests for refunds must be made in writing and received by September 20, 2012, for a 100% refund; between September 21 and September 27, 2012, for a 50% refund. Due to advance commitments to the hotel, no refunds will be made after September 27, 2012. A $50 administrative fee will be retained on all refunds regardless of when requested.

Use the group code: AID to get special rates. You may make reservations online at:
For more information, visit www.aaid.com

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2012 New ABOI/ID Diplomate Listing

Billy J. Anderson, DDS
General Practitioner
Findlay, OH USA

Yuval Arazi, DDS
General Practitioner
Fishers, IN USA

Joseph H. Blum, DMD
General Practitioner
Forest Hills, NY USA

Jeffrey A. Cauley, DDS
General Practitioner
Waycross, GA USA

Patrick Chu, DDS
General Practitioner
Toronto, Ontario, Canada

Hasan M. Dbouk, BDS, MSD
General Practitioner
Bellevue, WA USA

Kian Djawdan, DMD
General Practitioner
Annapolis, MD USA

Daniel J. Domingue, DDS
General Practitioner
Lake Charles, LA USA

Zakar L. Elloway, DDS
General Practitioner
Flagstaff, AZ USA

George B. Hall, DMD
Prosthodontist
Augusta, GA USA

Christopher H. Hughes, DMD
General Practitioner
Herrin, IL USA

Ash Kaushesh, DDS
General Practitioner
Lake Havasu City, AZ USA

Trinh N. Lee, DDS
General Practitioner
Mountain View, CA USA

Dimitrios Kilimitzoglou, DDS
General Practitioner
Smithtown, NY USA

Keith R. Lawson, BSC, DDS
General Practitioner
Calgary, Alberta Canada

Suzanna N. Lee, DDS
General Practitioner
Mountain View, CA USA

see Diplomate Listing p. 17
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with Dr. R. Mitchmore, Houston

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Dr. Angela Cameron, Johnson City, TN

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In this New Economy, Blatchford’s Bu$iness of Hygiene is a MUST HAVE!
The AAID Nominating Committee presents the following slate of officers for consideration at the Academy’s 2012 Annual Business Meeting on Saturday, October 6 in Washington, DC during the 61st Annual Meeting.

President — Nicholas Caplanis, DMD, MS
President-Elect — John C. Minichetti, DMD
Vice President — John Da Silva, DMD, MPH, ScM
Treasurer — Richard Mercurio, DDS
Secretary — Shankar Iyer, DDS, MDS

In accordance with Article IX, Section 12 of AAID’s Bylaws, members not nominated by the Nominating Committee may be nominated by petition as follows:

Nothing herein contained shall prevent voting members from nominating a candidate provided that the nomination petition is submitted to the Chairman of the Nominating Committee or that person’s designee for posting at least 24 hours in advance of the election.

A nominee not announced by the Nominating Committee must include the names of at least twenty voting members on the petition.

The Committee shall obtain a disclosure statement from each candidate nominated by the Committee or by petition and provide this information to the voting members.

Meet Dr. Shankar Iyer

A 1987 graduate from Annamalai University, India and 1994 from New York University, Dr. Iyer obtained his MDS in Prosthodontics in 1990 in Bombay (Mumbai), India and a Cert. in Prosthodontics at NYU in 2002. He has lectured extensively on Oral Implantology internationally. He formerly served as a member of the Board of Trustees of the American Academy of Implant Dentistry and maintains a full time dental practice in Elizabeth, New Jersey.

He is an Honored Fellow of the American Academy of Implant Dentistry and a Diplomate, American Board of Oral Implantology / Implant Dentistry. He is the Director, AAID/India MaxiCourse® and a Clinical Assistant Professor, Advanced Education Program in Prosthodontics, New York University.

Don’t forget to visit www.aaid.com for the latest news and updates.
Diplomate Listing
continued from page 14

William Gilbert Lesh, BSN, DMD
General Practitioner
Olympia, WA USA

David D. McFadden, DMD
Prosthodontist
Dallas, TX USA

Sydney Reyes, DDS
General Practitioner
Toronto, Ontario, Canada

Ryan T. Voelkert, DMD, MHS
Periodontist
Greenville, SC USA

Kevin J. Owoc, DMD, MSD
Prosthodontist
Tafford, PA USA

M. Drew Shabo, DDS
General Practitioner
Ooltewah, TN USA

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Dr. Michael A. Pikos has provided continuing education courses for more than 20 years with over 2500 alumni from all 50 states and 32 countries, and is internationally recognized as a leader in implant surgery.

- CT Diagnosis and Treatment Planning
  With Interactive CT Software
  May 3-5, 2012

- Contemporary Soft Tissue Grafting
  For Implant Reconstruction
  February 6-8, 2012
  November 5-7, 2012

- Advanced Bone Grafting I
  June 21-23, 2012
  November 8-10, 2012

- Advanced Bone Grafting II
  November 12-14, 2012


“For the dental surgeon who respects the restorative principles of Dawson, Pankey, Spear, and Kois, and the surgical principles of Marx, Allen, and Mosch...this course is a must. The pursuit of dental implant surgical excellence is thriving at the Pikos Implant Institute.”

Dr. Neil Sullivan, OMS, Annapolis, MD

www.aaid.com Summer 2012
Immediate Smile® bridge gives patients and dentists something to smile about

Immediate Smile® bridge – the name speaks for itself. Materialise Dental's latest technology is helping implantologists bring the most advanced dental procedures to their practices that promise to put smiles on patients' faces the moment they walk out the door.

Today, Materialise Dental's 3D Digital Dentistry is allowing dentists to remove teeth, place implants and fit bridges during same-day surgeries. This technology translates to high patient comfort and fewer visits. Dental professionals are also smiling because the immediate loading procedure is quicker and easier.

Exclusive to Materialise Dental, by combining SimPlant® and SurgiGuide® with CAD/CAM technology (“computer-aided design” and “computer-aided manufacturing”), this workflow is fully digitized.

Simplified and time saving workflow with a fully digital process

Traditionally when patients required a temporary bridge for immediate loading, dentists needed to make an impression or plaster model and bite registration. After that they sent it to the dental laboratory and waited for one to be made.

But now a full digital workflow allows for quick and easy fabrication of a bridge. All information is already available in the SimPlant® planning so no extra preparations are needed. All dentists need to do is order the bridge with SimPlant® and they will receive it together with the SurgiGuide® before the actual surgery takes place.

Temporary restorations before implant surgery without special components

Since the bridge and SurgiGuide® are delivered together before surgery, this allows dentists to perform the surgery and placement of the bridge in a single visit. The unique part of this procedure comes from the fact that the temporary screw-retained restoration is secured using an intuitive and fast procedure without requiring extra expensive or special components. Dentists can stick to their favorite implant brand.

Predictable esthetics even for cases with tooth extractions

Innovative and versatile, this technology can also be used for predictable esthetics even for cases with tooth extractions. If patients still have their natural teeth but they are lost, tooth extractions are simulated with SimPlant®. The bridge is then made based on implant planning and patients' natural teeth.

The Immediate Smile® bridge gives patients the opportunity to switch from "natural teeth" to "teeth on implants" in a single visit.

Cumbersome and time-consuming immediate loading procedures before, during and after surgery are now a thing of the past with Materialise Dental's Immediate Smile® bridge!

For more information visit www.materialisedental.com.

Puros® Cortico-Cancellous Particulate Allograft

Zimmer Dental Offers Best of Both Worlds with Cortical-Cancellous Mix

Zimmer Dental Inc., a leading provider of dental oral rehabilitation products and a subsidiary of Zimmer Holdings, Inc., announces the availability of Puros® Cortico-Cancellous Particulate Allograft, an anatomic-based mixture of
cortical and cancellous bone, designed to provide clinicians with the best of both worlds in an effort to simplify the grafting process.

Composed of 70 percent cortical and 30 percent cancellous bone, Puros Cortico-Cancellous does not require on-site mixing, and retains its osteoconductive properties due to the preservation of the natural bone matrix collagen and mineral composition, trabecular pattern, and original porosity. The particulate mixture’s quick hydration, 5-year shelf life, and room-temperature storage requirement also add to its ease of use, while two available size options are intended to conveniently accommodate various defect dimensions.

Clinicians can feel confident in the safety and performance of Puros Cortico-Cancellous due to the fact that it carries the highly regarded Puros name. Each single donor vial of the bone grafting material has been sterilized and preserved with the proprietary Tutoplast® Process, which assures the highest standard of tissue safety and quality with minimal risk of disease transmission. This process, used for over 40 years and in more than three million procedures, preserves the valuable collagen matrix and tissue integrity while inactivating pathogens, and gently removing unwanted materials such as cells, antigens, and viruses. For more information regarding this regenerative option, contact a Zimmer Dental Sales Consultant or Customer Service at (800) 854-7019, or visit www.zimmerdental.com.

Your Vote
continued from page 1
symposium, and two-and-one-half days of programming specifically designed for allied staff. The scientific program is truly outstanding. We promise that there will never be a dull moment.

Hear it all at this meeting. This will be one meeting that you will not want to miss. It should be one of the liveliest and most provocative AAID scientific programs ever.

Register by September 10, 2012 and save $100.
Successful Implantology — Successful Western and Central Districts Meeting

The Western and Central Districts of the American Academy of Implant Dentistry brought together an outstanding faculty from throughout the United States and Canada to help you achieve success in implant dentistry by preventing, identifying, and handling complications.

They hosted two days of scientific programming that were rated among the best attendees had experienced. Because camaraderie is a cornerstone of AAID, they planned a number of networking opportunities for those in attendance to meet and interact with peers as well as with the exhibitors and sponsors of this meeting.

Nearly half of those doctors in attendance were AAID members who had not previously attended an AAID meeting — either a District or Annual meeting. Another 20 percent were non-members of AAID who we hope will soon become members of the Academy.

Those who were in Vancouver agreed that it is one of the most beautiful cities in the world.

Mark your calendar for the 2013 meeting to be hosted by AAID’s Central and Western Districts. It will be held in Chicago, June 7 – 8, 2013, at the world-famous Palmer House Hotel. The theme will be “Treating Failing Implants at the Speed of Light.”

Networking with peers is one of the hallmarks of AAID meetings.

A packed house learned about successful implantology at the Western-Central Districts meeting in Vancouver.
Layered e.max® Crown
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* Expires February 28, 2012
2012 Annual Meeting Scientific Programs

**Wednesday, October 3, 2012**

**New Trends, Techniques and Technology**

**MORNING 8:00 am – 12:20 pm**

How to Create the Ultimate Internet Marketing Program for Your Practice – From the Top of Google to Dominating Social Media!  
Bryan Edelstein  
TopDentists.com (An Everyday Health Property), Gold Sponsor

**Optimizing Implant Esthetics with Implant Design**  
Natalie Wong, DDS  
BioHorizons, Inc., Diamond Sponsor

**Successful Use of Allogeneic Bone Blocks of Human Vertebra in Augmentation of Atrophied Jaw Bone**  
Mohamed Sharawy, BDS, PhD  
Rocky Mountain Tissue Bank, Gold Sponsor

**Implant Associated Bone Loss and the Black Triangle Disease: Treatment Planning and the Team Approach to Prevention**  
Hessam Nowzari, DDS, PhD  
Dentium, Gold Sponsor

**Immediate/Selective Loading and Failure Avoidance through Osseous Fixation: A New Era in Oral Implantology**  
David D. Dalise, DDS  
OCO Biomedical, Gold Sponsor

**“Simply Smarter” Implantology**  
Gerald A. Niznick, DMD, MSD  
Implant Direct Sybron International, Platinum Sponsor

**The Use of Short Implants in Minimal Available Bone**  
Hisham F. Nasr, DDS, PScD, PhD (ca)  
MegaGen, Gold Sponsor

**Treatment Options for the Terminally Dentate Patient**  
Steven M. Bongard, DDS  
Nobel Biocare, Platinum Sponsor

**Patient-specific Abutments: Providing Customization through Simplicity**  
Mark Montana, DDS  
Dentsply Implants, Platinum Sponsor

**Full Arch One-Piece Metal Free Restorations Over Short Implants**  
Drauseo Speratti, DDS  
Bicon, Gold Sponsor

**The Shift from Classic Bone Regeneration to Bi-Phasic Calcium Sulfate**  
Miguel Stanley, DDS  
MIS Implant Technologies, Presidential Sponsor

**New Advances in Implant Design Challenge Conventional Wisdom**  
Robert Miller, MA, DDS  
Intra-Lock International, Presidential Sponsor

**Wisdom from Periodontics to Implant Esthetics: Realities of Esthetic Outcomes and Limitations in Implant Dentistry**  
Arnold S. Weisgold, DDS

**Wisdom from Implant Treatment Planning through the Last Five Decades**  
Leonard Linkow, DDS

**25 Years Of Immediate Loading — Where Do We Go from Here?**  
Paul Schnitman, DDS

**DEBATE #1**

**Implant Dimensions — Long vs. Short**  
Michael A. Pikos, DDS  
Marco Esposito, DDS

**Concurrent Sessions**

**Allied Staff Programs**

**AFTERNOON: 1:30 pm - 5:30 pm**

**Minimum Wage, Minimum Effort: Creating the Ultimate Staff Driven Practice**  
Mike Massotto

**Lifetime Patient Retention**  
Mike Massotto

**Thursday, October 4, 2012**

**Main Podium Presentations**

**All Day**

**DEBATE #2**

**Esthetics — Ceramics vs. Gingiva**  
Brahm Miller, DDS  
Sonia Leziy, DDS

**DEBATE #3**

**Treatment Planning — Bioengineering vs. Design Engineering**  
Carl Misch, DDS, MDS, PhD (h.c.)  
Paulo Malo, DDS, PhD
DEBATE #4
Treatment Options — Comprehensive vs. Conformative
Maurice Salama, DMD
David Garber, DMD

Facial Esthetics and Implants
Louis J. Malcmacher, DDS

Facial Plastic Surgery, When Botox and Dermal Fillers Aren’t Enough
Leo Keegan, MD

Concurrent Sessions

Hands-On Workshops
MORNING: 8:00 am - Noon
W1: Botox and Dermal Fillers for Every Dental Practice
Louis J. Malcmacher, DDS

W2: A Practical Session on Ridge Expansion and Compaction
Stuart Orton-Jones, BDS

W3: Extraction Site Management for Implant Reconstruction: Hands-on Workshop
Michael Pikos, DDS

W4: Classic Bone Augmentation Techniques and Beyond: The Use of Calcium Sulfate in Bone Grafting
MIS Implant Technologies, Presidential Sponsor
Miguel Stanley, DDS

AFTERNOON: 1:30 pm - 5:30 pm
Intra-Lock International, Presidential Sponsor
Jack T. Krauser, DMD

W6: The Treatment of Inadequate Ridge Height Using the Tatum Ridge Repositioning (Vertical Sectional Osteotomy Procedure)
Stuart Orton-Jones, BDS

W7: Laser Implant Dentistry
Edward R. Kusek, DDS

Live Surgery
MORNING: 10:30 am - Noon
Inter-positional Bone Grafting Surgery
Joel L. Rosenlicht, DMD

AFTERNOON: 4:00 pm - 5:30 pm
Reconstruction of an Atrophic Ridge After rhBMP2 Augmentation
Alan Herford, DDS, MD

Research
MORNING: 8:00 am - 9:30 am
Development and Validation of a New Maxillary Sinus Classification System for Minimally Invasive Surgical Approach
Samuel Lee, DDS

Management of Implants for Success Using Stability Measurements at Insertion
Rita K. Han, DDS, MMSc
Paul Schnitman, DDS

Comparative Insertion Protocols for Mini Dental Implants (MDIs) and Small-Diameter Implants (SDIs) as Critical Implant Survival Elements
Victor I. Sendax, DDS

AFTERNOON: 1:30 pm - 3:00 pm
Atypical Implant Failures and Long-Term Oral Bisphosphonates - More than Osteonecrosis?
Gayathri Subramanian BDS, PhD, DMD

 Allied Staff Programs
MORNING: 8:00 am - Noon
Four Fundamental Keys – Achieving Successes in Your Implant Practice
Brian Jackson, DDS

Changing Our Patient’s Lives with Beautiful Implant Restorations
Natalie Wong, DDS

AFTERNOON: 1:30 pm - 5:30 pm
Attend Debate #4 at the Main Podium Program
It Takes a Team to Place an Implant: Discussion of Roles for the Allied Front, Clinical, and Hygiene
Matthew Young, DDS

Attend Live Surgery

see Scientific Programs p. 24
Scientific Programs
continued from page 23

Friday, October 5, 2012
Main Podium
All Day

DEBATE #5
Grafting - Plain and Simple vs.
Bells and Whistles
Alfred “Duke” Heller, DDS
Edgard El Chaar, DDS

DEBATE #6
Placement - Guided Surgery vs.
Free-hand Skilled Surgeries
David M. Vassos, DDS
Scott Ganz, DMD

DEBATE #7
Implant Soft Tissue Esthetics -
Biometrics vs. Biomimetics
Michael Sonick, DMD
Marius Steigmann, DMD

DEBATE #8
Block grafts - Autogenous vs.
Allogenic
Fouad Khoury, DMD, PhD, Prof.
John Russo, DDS

Concurrent Sessions
Hands-On Workshops
MORNING: 8:00 am - Noon

W8: Dental Photography, How to
Take Great Dental Images:
Essentials in Preparing for Board
Examinations
John Carollo, DMD

W9: Autogenous Bone Graft:
Secure Harvesting and
Augmentation Procedures
Fouad Khoury, DMD, PhD, Prof.

AFTERNOON: 1:30 pm - 5:30 pm
W10: Plastic Periodontal
Therapy: Soft Tissue

W11: Boost Your Practice with
Social Media
Jason Lipscomb, DDS

W12: Bone Allografting for
Implant Dentistry
John Minichetti, DMD
Lawrence Nalitt, DDS
Matthew Young, DDS

Global Symposium
MORNING: 8:00 am - Noon

It’s All About Space
Nitish Surathu, BDS

Advanced Tissue Reconstruction.
Is BMP-2 the New Gold
Standard?
Nicholas Caplanis, DMD, MS

Influence of Implant Macro-
design on the Peri-implant
Tissues
Jihad Abdallah, BDS, MSCD

Make an Impression: Go Digital!
Natalie Wong, DDS

Face to Face Surgery and
Prosthetics
Sergio H. Cacciacane, DDS

A Unique Perspective on
Implants “Screwless &
Cementless”
John Stowell, FDSRCS

AFTERNOON: 1:30 pm - 5:30 pm
Repair of Sinus Membrane
Perforation
Jaekyun Shim, DDS

Predictable Bone Regeneration
with Allografts

Bernee Dunson, DDS

Short Implants - Does Length
Matter?
Paresh Kale, MDS

Approaching Thirty Years with
Implants: Long-term Cases and
Recent Techniques
Yasunori Hotta, DDS, PhD

Live Surgery from Russia

Vertical and Horizontal
3-Dimensional Bone
Reconstruction
Maxim Kopylov, DDS
Sergey Zorin, DDS
Saturday, October 6, 2012

Main Podium
MORNING: 8:00 am - Noon

DEBATE #9
Vertical Augmentation -
Vascularized Osteotomies vs.
Guided Bone Regeneration
Itsvan Urban, DMD, MD
O. Hilt Tatum, Jr., DDS

DEBATE #10
Prosthetics - Glass Ceramics vs.
Metal Ceramics
Christian Stappert, DDS, PhD
Christian Coachman, DDS

Concurrent Sessions
Hands-On Workshops
MORNING: 8:00 am - Noon

W13: Implant Site Development
— Hard Tissue Regeneration
Michael Sonick, DMD

W14: Electrifying Presentations
Tom Mucciolo

W15: To Be Announced
BioHorizons, Inc., Diamond Sponsor
Debating the Options

Ten debates about implant treatment options, with you having the ability to vote electronically to determine the winner of each one, is one of the items that makes this year’s scientific program even more exceptional and outstanding than normal.

Here are summaries of each of the ten debate topics:

**DEBATE #1 Implant Dimensions — Long vs. Short**
Do We Need Bone Augmentation? Does Length Matter?
Implant treatment planning has always relied upon length as a predictor of long term success. Literature is replete with statistics that favored longer implants till 2000. With the advent of short implants and improved surfaces, there is an increasing interest in the use of short implants that can often avoid additional grafting procedures and increased treatment time. What should be the minimal length of an implant to ensure long term success? This debate will explore the controversy of length from an evidence-based model and clinical practice.
- The Versatile Short Implants, Marco Esposito, DDS
- The Rationale for Longer Implants, Michael A. Pikos, DDS

**DEBATE #2 Esthetics — Ceramics vs. Gingiva**
Achieving perfection with implant esthetics can be challenging and generally involves multiple surgical interventions.
Alternatives such as pink ceramics have also been used successfully to treat esthetic blemishes around implants.
If one can prognosticate which approach would be predictable - This would be important to consider in complex treatment planning. The patient can then make the important decision on whether to go through multiple corrective surgeries or simply consider pink ceramics to compensate for the deficiencies.
This debate will discuss important surgical vs restorative choices.
- Soft Tissue Based Esthetics Idealizing Implant Treatment Outcomes: What We Can or Can't Do with the Surgical Phase of Treatment, Sonia Leziy, DDS
- Ceramic Based Esthetics Idealizing Implant Treatment Outcomes. What We Can or Can't Do with the Restorative Approach, Brahmi Miller, DDS

**DEBATE #3 Treatment Planning — Bioengineering vs. Design Engineering**
Full Arch Treatment plans with implants have several options ranging from a few implants to an implant for every tooth being replaced. Philosophies of implant biomechanics, force distribution, cantilevers have all been explored. But there remains the issue — how many implants do we need for a full arch reconstruction?
The number of implants has economical, functional and time considerations that impact on case acceptance and morbidity. This debate will attempt to establish some guidelines for considering options for full arch reconstruction.
- Tilted Implant and Biomechanics — What Makes it Work? Paulo Malo, DDS, PhD
- Key Implant Positions or Biomechanics - What Are the Ideal Parameters, Carl Misch, DDS, MDS, PhD (h.c.)

**DEBATE #4 Treatment Options — Comprehensive vs. Conformative**
Comprehensive care and ideal treatment plans are considered as the first option in treatment planning, but there are several extenuating factors wherein one could consider an optimal plan with an alternate approach. These ideal plans sometimes require a multi-disciplinary approach with protracted treatment time. Optimal plans are innovative, time saving and though sometimes considered experimental or old fashioned provide for some outstanding outcomes.
This debate will discuss strategies to implement comprehensive plans and offer alternate solutions with minimally invasive techniques.
- Do We Really need to Stretch the Limits? David Garber, DMD
- The Comprehensive Approach to Multi-Disciplinary Treatment Planning, Maurice Sulama, DMD

**DEBATE #5 Grafting — Plain and Simple vs. Bells and Whistles**
Management of bone atrophy and prevention of alveolar bone loss have created an entire discipline of bone grafting techniques. This debate explores the treatment options available for grafting procedures from simple inexpensive allografts to the more costly recombinant materials and other additives for bone enhancements.
Some of the traditional materials have been tested over several decades while others have been in use for only a couple of years.
How does one determine what type of graft material would be applicable for managing bone deficiencies? Do we need a combination of materials? If so what is the recommended mix, percentages, use of membranes, types of closures and other variables? The recipe can be so confusing that we fail to understand the mechanism or the rationale behind the pathophysiology of grafting procedures. The debate will address the range of materials in use today and will attempt to create a logical approach in the management of bone preservation and atrophy.

[see Debate p. 26]
Debate
continued from page 25

• Ridge Augmentation Using rh-BMP-2, Myth or Reality? Edgard El Chaar, DDS
• Bone Enhancements - Realities of Additives. Do Materials Make a Difference? Alfred Duke Heller, DDS

DEBATE #6 Placements — Guided Surgery vs. Free-hand Skilled Surgeries
Surgical principles in implant dentistry always relied upon bone sounding and visualization of the anatomical structures to facilitate implant surgery and osteotomy procedures. With the increasing application of Cone Beam radiography and CT Scans, the diagnosis of implant treatment planning has simplified volumetric evaluation of available bone. Sophisticated softwares are now available by many manufacturers to help facilitate implant surgery. Studies have shown that the accuracy level of implant placement has increased with the use of computer guided surgery. Many of the traditional surgeons still feel that guided surgery is applicable only in the presence of an abundance of available bone and that bone manipulation is not feasible with the guides. This debate will clarify the indications, limitations and the reliability of guided surgeries vs. free hand surgeries with intra-oral geometric devices.
• "It's Not the Scan, It's the Plan:" The Definition of Guided Surgery, Scott Ganz, DMD
• Skilled Surgery and the Golden Standard, David M. Vassos, DDS

DEBATE #7 Implant Soft Tissue Esthetics — Biometrics vs Biomimetics
Soft Tissue management has been the nemesis of the esthetic zone. There are several guidelines established by researchers to categorize the risk factors associated with implant esthetics. Implant design, platform switching, microchannels are some of the concepts that have populated the newer implant configurations. There are diametrically opposite considerations when it comes to choice of implant design in the esthetic zone. This debate will analyze the biologic and biomechanical parameters that influence the soft tissue visualizations around implants.
• The Realities of Implant Abutment Junction: Soft Tissue Classical Guidelines, Michael Sonick, DMD
• The Realities of Implant Abutment Junction: Revised Biological Guidelines, Marius Steigmann, DMD

DEBATE #8 Block Grafts - Autogenous vs. Allogenic
Autogenous grafts have been considered the gold standards, nevertheless there is an increasing shift in the utilization of allogenic grafts when it comes to volumetric increase in width and height of atrophic bone. Patients need to know the benefits and risks associated with grafting procedures. Although invasive, many of the long term results have shown favorable outcomes with autogenous sources. Are we now ready to adopt an alternative method to avoid donor site morbidity? Or is the predictability so high that we still need to consider the autogenous option since it is second to none? This debate will compare and contrast the various autogenous methods of harvesting bone and its long term results, with some of the newer allogenic source of particulate and block grafts.
• Autogenous the Gold Standard, Fouad Khoury, DMD, PhD, Prof.
• Allogenic Grafts - The New Gold Standard? John Russo, DDS

DEBATE #9 Vertical Augmentation — Vascularized Osteotomies vs. Guided Bone Regeneration
Vertical alveolar bone augmentation has been the most challenging procedure in implant dentistry. Various techniques from onlay grafting to GBR methods have produced inconsistent results. The debaters on this topic have had many years of success with procedures they have perfected. This session will discuss the merits of particulate grafts materials along with GBR procedures and the advantages of having native bone through vascularized osteotomy techniques for vertical augmentation. The audience will have an opportunity to witness the sequential methods employed in both procedures and evaluate the predictability if they were to replicate it.
• Predictable Vertical Bone Augmentation Technique with Vascularized Osteotomies, O. Hilt Tatum, Jr., DDS
• Vertical Augmentation with Particulate, Itsvan Urban, DMD, MD

DEBATE #10 Prosthetics - Glass Ceramics vs. Metal Ceramics
Prosthetic materials have undergone revolutionary changes from all metallic restorations to all ceramic complete arch reconstructions. The debate will clarify the indications of complex milled zirconia and titanium frameworks and the related material interfaces for long-term integrity and biologic compatibility. Emphasis will be made on the choice of esthetic materials that will be used for fixed implant restorations. The limitations and advantages of newer zirconia framework and crowns will be explored. Will this mean traditional crown and bridge with metal is still the gold standard?
• The Pink Hybrid Restoration. The Prosthetic Solution for Anterior Ridge Defects, Christian Coachman, DDS
• Zirconia Meets Lithium Disilicate - How Reliable Are Esthetic Ceramic Implant Solutions? Christian Stappert, DDS, PhD
Camaraderie and Networking Opportunities

**Continental Breakfasts**
Start each day of the meeting on the right foot with a continental breakfast. This is an excellent opportunity to share information with your peers before attending a scientific program. Continental breakfasts are open only to registered attendees. Badges will be required.

**Networking/Refreshment Opportunities**
Take a break from formal learning to continue discussions with colleagues during the twice-daily refreshment breaks. Examine what is available to the implant dentist at the Implant World Expo in the Exhibit Hall. Enjoy refreshments while sharing information with colleagues and suppliers. Badges will be required.

**Welcome Reception**
**Wednesday, October 3**
All registrants and registered guests are invited to attend the Welcome Reception on Wednesday, October 3 from 5:30 pm – 7:00 pm. This is a wonderful opportunity to reconnect with old friends and make new ones from the implant profession in a relaxed atmosphere while enjoying light appetizers and beverages of your choice. Badges will be required.

**Implant World Expo Lunches — New This Year — 2 Lunches**
**Thursday, October 4 and Friday, October 5**
No need to look for a restaurant, worrying if you will be finished in time for the start of the afternoon education session. Join your colleagues on Thursday, October 4 and Friday, October 5 from Noon until 1:30 pm in the Exhibit Hall for a FREE lunch and visit with the suppliers who help make your practice successful. Every registrant will receive a ticket for lunch.

**District Caucuses Lunch**
**Thursday, October 4**
Meet your fellow members who practice in the same geographic area and enjoy a box lunch while discussing AAID business. This event is open to all AAID members — credentialed or general — although, only credentialed members may cast votes. This is an excellent way to become involved in the workings of the Academy and develop new contacts in the profession. Each District will meet in a different room for lunch and conversation on Thursday, October 4 from Noon until 1:30 pm. There is no cost for this event. Pick up your box lunch in the Exhibit Hall.

**Women Dentists’ Wine and Cheese Gathering**
**Thursday, October 4**
Join your colleagues at AAID’s Women Dentists’ Wine and Cheese Gathering on Thursday, October 4 from 6:00 pm until 7:30 pm. This is a wonderful place to talk with members who share similar challenges and opportunities.

**Implant World Expo Reception**
**Friday, October 5**
Join colleagues and suppliers to the implant profession in the exhibit hall for the Implant World Expo. Over 100 suppliers to the implant dentistry profession will be there. Chat with fellow professionals while enjoying hors d’oeuvres and cocktails. This outstanding event is open to all registered guests (badge required) and will be held from 5:30 pm until 7:00 pm on Friday, October 5. Badges will be required.

**President’s Celebration**
**Saturday, October 6**
Join AAID President, Larry Bush and Mrs. Bush on Saturday evening, October 6, to enjoy an outstanding meal, say a fond farewell to your friends, dance to some great music, and celebrate AAID and everything you have helped it accomplish. The recipients of the Isaiah Lew Memorial Research Award and the Aaron Gershkoff Memorial Award will be introduced and honored. One ticket is included with each dentist’s registration (except for student and life or retired member registrations) and additional tickets can be purchased for $195.
NEW MEMBERS
The AAID is pleased to welcome the following new members to the Academy. If you joined the Academy recently and your name does not appear, it will be listed in the next newsletter. The list is organized by state and then alphabetically by city.
Contact your new colleagues and welcome them to the Academy.

ALABAMA
W. Jason Northcutt, DMD
Robertsdale

ARIZONA
Kevin Beyea, DMD
Scottsdale
Sophan Kay, DMD
Tucson

CALIFORNIA
Thomas K. Moe, DDS
Arcadia
Kamran Hakim, DDS
Bell Gardens
Mher Asatryan, DDS
Burbank
Fred F. Laaly, DDS
Burbank
Kamran Ghoureshyi, DMD
Calexico
R. Douglas Campbell, DMD
Coronado
Lindy Beverly, DDS
Diamond Bar
Soe Hlaing, DDS
El Monte
Mohamad Taisir Albik, DDS
Elk Grove
Nagy R. Elsemary, DDS
Encino
David M. Jones, DDS
Fort Collins
Melineh Arakelian, DDS
Glendale
Dr. Christopher Strandburg
Granite Bay
Huzafaif Maloo, DDS
Highland
Magdy W. Gad, DDS
La Mirada
Kwang Su (Peter) Chung, DDS
Loma Linda
Robert M. Kim, DDS
Loma Linda
Aaron Anthony Santos, DDS
Los Gatos
James T. Wong, DDS
Maywood
Aung Myo Thant, DDS
Monterey Park
Long Phan, DMD
Murrieta
John Cozohanski, DDS
Orange
Hyun O. Kim, DDS
Orange
Sandra Lara, DDS
Porterville
Antoanela Garbeacea, DDS
Redlands
Brian W. Kwong, DDS
Redlands
Theron Lane Vines, Jr., DDS
Redlands
Steven Hou, DDS
Rosemead
Tayar Lamin, DDS
Rowland Heights
Nyi Nyi Win, DDS
Rowland Heights
Bin Hoang, DDS
San Clemente
Gaurav Setia, DDS
San Francisco
Kyaw Kyaw Soe, DDS
San Francisco
Min Lwin, DDS
San Gabriel
Win San Tun, DDS
South Gate
Quan Vo Anh Nguyen, DDS
Stockton
Linda Wells, DDS
Tahachapi
Rick D. Wells, DDS
Tahachapi
Matthew R. Carpenter, DDS
Temecula
Michael E. Bachman, Jr, DDS
Vacaville
Craig Winkelman, DDS
Westlake Village
Sam C. Morales, DDS
Westminster
Pavlina Choykova, DDS
Woodland Hills

CONNECTICUT
Ted Fischer, DMD
Norwich
Michael Joseph Reynolds, DDS
Southport

DELAWARE
Amit Kalavadiya, DMD
Newark

FLORIDA
James George Trantham, IV, DMD
Jacksonville
Cesar Caceres, DMD
Ocala
James Logsdon, DDS
Orlando
Wayne L. Olges, DMD
Orlando
Neil Torgerson, DMD
Tallahassee
Susan LaMar, DMD, MS
Venice
Damanjeet Singh, DDS
West Palm Beach
Dr. Joel Baez
West Park

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Dr. Joel Baez
Atlanta
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Brian Baptist, DDS
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Christopher May, DMD
Chicago
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Russell Fitton, IV, DDS
Palatine
Dennis Wagner, DMD
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Dr. Shlaim S Patel
Roselle

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Harpwell

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Yahya Elizarug, DDS
Boston
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North Reading
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Revere

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Ann Arbor

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Burnsville
Dr. Mallory Jean Gowey
Minneapolis
Nina Thai, DDS
Saint Paul
Derrick J. Veneman, DDS
Saint Paul

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Chesterfield

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Las Vegas
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Las Vegas
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Piscataway
Sean McIntyre, DMD
Soms Point

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Albuquerque
Mathew Petersen, DDS
Las Cruces
Mario Samaniego, DDS
Las Cruces

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Charlotte
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William Turner, DMD
Durham
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Powell
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Jeffrey C. Gourdine, DMD
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Dean Bui, DDS
Colleyville
Farnam Fazlman, DDS
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Houston
W. Kirk Webster, DDS
Humble
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Livingston
Tyler Borg, DDS
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Travis A. Markle, DDS
Tyler

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Burlington

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Arlington
Clissia Bellard, DDS
Fredricksburg

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Nara
Dr. Toshihiko Tominaga
Naruto
Dr. Tomonobu Koharazawa
Tokyo
Dr. Hiromasa Uematsu
Tokyo

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MDS
Melaka, Melaka

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Riyadh

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Seoul
Kim Young-Soo, DDS
Bucheon City
Jeongnam Lee, DDS,MS
Cheongju-si
Chul Kwon, DDS
Cheorwon-gun
Dr. Yoonhyung Cho
Daejeon
Hyoecheol Bae, DDS, PhD
Gwacheon-gi
Junmo Kim, DDS
Gwangmyeong-si
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Gwangmyeong-si
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Jeongnam-si
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Seoul
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Seoul
Dr. Young Dong Lee
Suwon
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TURKEY
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Bursa

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Dubai Media City, Dubai
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“Comprehensive Training Program in Implant Dentistry”
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Web site: www.georgiahealth.edu

Oregon/AAID MaxiCourse®
Medoline, Inc.
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1 weekend per month
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Phone: 800-603-7617
E-mail: oraaaidmaxicourse@gmail.com
Web site: www.oraaaidmaxicourse.com

Loma Linda University/AAID MaxiCourse®
Loma Linda, California
Monthly March through December
Continuing Dental Education
11245 Anderson St.; Suite 120
Loma Linda, CA 92354

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Abu Dhabi, United Arab Emirates; New Dehli, India; Penang, Malaysia
Contact: Dr. Shankar Iyer
E-mail: drsiyer@aol.com
Web site: www.aaid-india.org

Korea MaxiCourse®
Monthly March through December
Contact: Dr. Jaehyun Shim
E-mail: dental-care@hanmail.net
Web site: www.kdi-aaid.com

Puerto Rico MaxiCourse®
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E-mail: mimontesmood@yahoo.com
Web site: www.theadli.com

Toronto Implant MaxiCourse®
September – June
Ten 3-day weekends
Toronto, Ontario, Canada and Aurora, Ontario, Canada
Phone: 905-235-1006
Contact: Ti-Max Education Inc.
E-mail: info@ti-maxcourse.ca
Web site: www.ti-maxcourse.ca

University of Nevada Las Vegas
MaxiCourse®
Contact: John Minichetti, DMD
Phone: 201-871-3555
E-mail: drminichetti@englewooddental.com

University of Medicine and Dentistry of New Jersey, New Jersey Dental School
Contact: Janice Gibbs-Heed
Phone: 973-972-6561
E-mail: gibbs@umdnj.edu

Vancouver, British Columbia MaxiCourse®
Contact: Nicole Wardstrom, CDA
Phone: 604-531-3344
Email: nicole@implantconnection.ca

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E-mail: mamostafavi@yahoo.com
Web site: www.jdtums.ir/aaid/

Courses presented by AAID credentialed members*

U.S. Locations

Advanced Laser Course
Edward Kusek, DDS
November 2 & 3, 2012
18 CE hours
Contact: Kristi Meyer
Phone: 605-371-3443
Web site: www.drkusek.com/courses.html

Basic and Advanced Implant Mini-Residency in Surgery & Pros. and Live Surgery Weekend
Zimmer Dental Training Course
John C. Minichetti, DMD
Contact: Lisa McCabe
Phone: 201-871-3555
Web site: www.englewooddental.com

Bay Area Implant Continuum with Hands-On Training
Matthew R. Young, DDS
120 CE Hours
Bay Area Implant Synergy
San Francisco, CA
Contact: Andy Holt
Phone: 415-392-8611
E-mail: info@drmyoung.com

Iran ACECR TUMS Branch MaxiCourse®
Contact: Mohammad Ali Mostafavi, BDS, DDS
E-mail: mamostafavi@yahoo.com
Web site: www.jdtums.ir/aaid/

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

Fixed Removable Implant Treatment
Carol Phillips, DDS
Contact: Melissa Martin
Phone: 800-549-5000

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

Laser Pocket Reduction & Diode Training for the Dental Professional
Edward Kusek, DDS
October 12 & 13, 2012
14 CE hours
Contact: Kristi Meyer
Phone: 605-371-3443
Web site: www.drkusek.com/courses.html

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

Midwest Implant Institute Externship – Bring Your Own Patients
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E-mail: dukeheller@copper.net
Web site: www.midwestimplantinstitute.com

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San Diego, CA
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Web site: www.implanteducation.net
Pathway Learning Series Swiss Implant line
Carol L. Phillips, DDS, Director
84 CE Units – Six 2-Day Workshops
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Phone: 805-781-8700

Pikos Implant Institute
Michael A. Pikos, DDS
CT Diagnosis and Treatment Planning
Contemporary Soft Tissue Grafting
Advanced Bone Grafting
Advanced Bone Grafting II
Contact: Alison Thiede
Phone: 727-781-0491
E-mail: learn@PikosInstitute.com

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Phone: 800-879-0737 Ext. 128
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Contact: Rebekah Register
Phone: 727-459-4910
Toll free: 888-360-5550
E-mail: tatumimplants@verizon.net

Outside U.S. Locations
Beirut Implant Dentistry Center
CE Courses Survey of Surgical and Prosthetic Implant Care
Drs. Jihad Abdallah & Andre Assaf
Contact: Mahia Cheblac
Phone: +961 1 747650 or +961 1 747651
Fax: +961 1 747652
E-mail: beirutimplant@hotmail.com

The D.M. Vassos Dental Implant Centre
Introductory & Advanced Surgical & Prosthetic Programs
Dr. D.M. Vassos
Mentor Program – Hands on Program over six Saturdays
Contact: Rosanna Frey
Phone: 780-488-1240
E-mail: rosanna@dmvassos.com
Web site: www.dmvassos.com

Leigh Smile Center, Alberta Canada
“Hands-on” Introductory to Advanced Surgical and Prosthetic Implant Courses with Live Surgery.
Dr. Robert E. Leigh, Director
Year-round, Custom Tailored and 5-DAY MINI-RESIDENCY Courses
Contact: Corie Zeise
Phone: 1-888-877-0737 (Toll Free)
E-mail: coriemanager@gmail.com
Web Sites: www.rockymountainsmilecenter.com
www.leighsmilecenter.com

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

Northern California Dental Implant Continuum
Craig A. Schlie, DDS, AFAAID
Phone: 530-244-6054
E-mail: Dr.Schlie@gmail.com

New York
CNY Implant Study Group
Brian Jackson, DDS
Contact: Melanie – Course Coordinator
Phone: 315-724-5141
E-mail: bjiddimplant@aol.com

New York Study Club
Edgard El Chaar, DDS
John Minichetti, DMD
Phone: 212-685-5133
E-mail: info@edgardelchaar.com

CANADA
Surrey, British Columbia
Implant Connection I:
Advanced Surgical Group
Ongoing program that is specifically designed for experienced doctors in implantology. This class covers lecture and live surgery.

Implant Connection II: Surgical Mentorship to Incorporate Implants into Your Practice
One year program that incorporates lecture, lab work, surgical demo’s and live patient surgery.

Implant Connect: Prosthetic course
One year program that will cover patient selection, treatment planning, occlusal considerations and how to incorporate implants into your practice.
E-mail: Nicole@implantconnection.ca
Web site: www.implantconnection.ca

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

www.aaid.com
Summer 2012
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