State of Florida pays nearly $750,000 after AAID wins credential lawsuit in Florida

The American Academy of Implant Dentistry received the final payment from the State of Florida after the successful conclusion of the case styled Francis J. Ducoin, D.D.S., et al. vs. Dr. Ana M. Viamente Ros, in her official capacity as the State Surgeon General, et al. Previously AAID had received $100,000 from the State of Florida, bringing the total to nearly three-quarters of a million dollars that Florida was ordered by the court to pay to AAID to reimburse it for attorney’s fees.

AAID successfully challenged advertising restrictions on AAID members and prevailed in every respect.

The court ruled the advertising restrictions were unconstitutional on many grounds, violating the Florida constitution’s guarantee of the right to be rewarded for industry or professional achievement and First and Fourteenth Amendment rights of free speech as well as equal protection of the law.

“The Florida verdict and fee recovery by AAID sets a strong precedent against interference by other states with the rights of dentists to advertise legitimate professional credentials issued by bona fide authorities,” said AAID Chief Counsel Frank Recker, DDS, JD.

“Haute” Doc
AAID members are more than just excellent dentists. Every member has a personal side that may surprise you. Find out more about this issue’s “haute” doc on page 10.
Introducing the Laser-Lok® 3.0 implant

Laser-Lok 3.0 is the first 3mm implant that incorporates Laser-Lok technology to create a biologic seal and maintain crestal bone on the implant collar. Designed specifically for limited spaces in the esthetic zone, the Laser-Lok 3.0 comes with a broad array of prosthetic options making it the perfect choice for high profile cases.

- Two-piece 3mm design offers restorative flexibility in narrow spaces.
- 3mm threadform shown to be effective when immediately loaded.
- Laser-Lok microchannels create a physical connective tissue attachment (unlike Sharpey fibers).

For more information, contact BioHorizons
Customer Care: 888.246.8338 or shop online at www.biohorizons.com

Thank you very much for the honor of being President this year. We have had a lot going on and continue to make the AAID more successful and prominent in the field of implant dentistry. As stated in the previous issues of AAID News we have forged ahead in relationships with the American Academy of Cosmetic Dentistry (AACD), Academy of General Dentistry (AGD), American Dental Society of Anesthesia (ADSA), and Academy of Laser Dentistry (ALD). These relationships may take a few years to develop, but our goal is to be able to bring to our membership the knowledge and skill necessary to continue to offer the most contemporary options and benefits to our patients.

By the time this issue is in your hands, the Southern District meeting in Jekyll Island will be a fond memory. The Southern District officers deserve a lot of credit, as do all the Districts for the wonderful programs they have presented over the past years and the ones planned for the future. These programs also can take advantage of the speakers and topics offered by our new relationships. For example, District meetings could offer lectures on anesthesia and the latest techniques and monitoring, restorative and treatment planning with know who we are and invite them to attend District as well as our national meetings.

Despite our legal victory in Florida — and the Florida Dental Board’s decision to forego enacting any new rules regarding credential advertising — we need to remain vigilant. Legislation is always a moving target, and issues may develop in the future. This also makes it very necessary to see that answers for each question you are suggesting. Be sure to indicate the answer that you believe is correct.

The Annual Meeting will be upon us sooner than you think. We already have a record-breaking number of pre-registrants. “Navigate Zones of Implant Dentistry: see President’s Message p. 22

Despite our legal victory in Florida ... we need to remain vigilant.

The AGD, and the most up-to-date diagnostic and cosmetic concepts from the AACD.

Our committees have worked hard this year. We appointed a task force that has recommended guidelines for our global initiatives. We are developing more MaxiCourses® and look to increase education and awareness domestically for our continued growth and development. One of our greatest sources to do this is you — our present members. Let your colleagues any group we align ourselves with offers credentials equal to our standards to preserve the value of what we have earned.

The Admissions and Credentials Board regularly reviews and updates our credentialing examinations. If you would like to submit suggested questions to the Test Construction Committee, send them directly to Joyce Sigmon at joyce@aaid.com. They should be in the form of a multiple choice question and include four possible answers for each question you are suggesting. Be sure to indicate the answer that you believe is correct.

The Annual Meeting will be upon us sooner than you think. We already have a record-breaking number of pre-registrants. “Navigate Zones of Implant Dentistry: see President’s Message p. 22

Despite our legal victory in Florida ... we need to remain vigilant.
Introduction

In a difficult economy, implant doctors put their practices at risk if they do not have proven business systems in place. Why? Because good systems help to increase implant production.

Only with efficient systems can implant doctors operate practices that increase production with less stress.

Improving the business systems of your implant practice is a win-win situation for the patient and practice alike. They allow you and your team to provide better care and customer service for the patient while enjoying increased production for the practice. Excellent systems allow you to work smarter rather than harder and endure less stress in the process. While these benefits are extraordinarily important, another benefit matters even more to implant doctors. Excellent systems will allow you to reach financial independence years earlier than you had planned—even in today's economic climate.

Based on more than 25 years’ experience consulting to hundreds of implant practices, Levin Group recommends paying significant attention to the following three systems:

1. Case Presentation
2. Customer Service
3. Patient Financing

1. Case Presentation

Patients need to think of implants as a standard quality of care option, not as an expensive luxury. It is important for you to present the many benefits that implants offer while emphasizing that no other treatment can give the natural lifestyle that implants can.

The following strategies are highly advantageous for all implant case presentations:

• **Work to make your implant presentation exciting.** Fee-for-service procedures like implants have to be presented with a higher level of enthusiasm to motivate the patient. Doctor and staff enthusiasm, effective visuals, clear explanations and a strong recommendation to have implant procedures performed are vital to a fee-for-service case presentation. This is different than simply telling patients that they need a crown on a broken tooth and that insurance could probably cover approximately 50% of it. Recognize patients need a higher level of motivation if they are going to accept a recommendation for implants.

2. **When talking to patients about dental implants, focus on the benefits, not the technical aspects.** After a brief technical explanation, you should make powerful benefit statements such as:

   1. “No more food restrictions will exist for you! You can bite into a crunchy apple, chew your foods easier and avoid uncomfortable digestive problems.”

   2. “When you get an implant, you’ll notice improved confidence as your smile once again becomes full and pleasing.”

   3. “Bone loss that comes with dentures will no longer occur when you have implants.”

2. Customer Service

When patients agree to implant treatment, it is very important that they do not regret that choice. The goal must be for patients to feel that they made an excellent decision to accept implants. Superior customer service will be what makes them decide that it was all worth it when they complete treatment.

• **When talking to patients about dental implants, focus on the benefits, not the technical aspects.** After a brief technical explanation, you should make powerful benefit statements such as:

   1. “No more food restrictions will exist for you! You can bite into a crunchy apple, chew your foods easier and avoid uncomfortable digestive problems.”

   2. “When you get an implant, you’ll notice improved confidence as your smile once again becomes full and pleasing.”

   3. “Bone loss that comes with dentures will no longer occur when you have implants.”

3. Patient Financing

AAID readers are entitled to receive a 50% courtesy discount on a Levin Group Total Success Practice Potential Analysis™, an in-office analysis and report of your unique situation conducted by a Levin Practice Senior Practice Analyst.
seem obvious but remember implants are a new concept for many people. If patients misunderstand something, it will almost certainly derail the case presentation at some point.

- **Give patients a realistic timeframe.** Nothing will sour the treatment process more than patients who have an unrealistic expectation of how quickly the process occurs. Be upfront about the entire process and make certain patients understand that immediate load cases aren’t going to be an option for everyone.

- **Keep them informed.** When patients feel in the dark about anything regarding implant appointments, their trust in the practice and their sense of value for implants is diminished.

- **Don’t let them get lost in the shuffle.** If this is an interdisciplinary case, make certain patients and both offices keep each other informed about all pertinent matters. Both the surgical and restorative offices must be on the same page at every stage of treatment to achieve superior customer service for patients.

3. **Patient Financing**

Don’t pre-judge a patient’s wallet size. Offer the ideal treatment to every patient. Making assumptions about treatment affordability or patients’ ability to make payment arrangements can limit your potential market size.

To make case acceptance easier, Levin Group teaches practices to offer the Four Financial Options™ to patients. These options should be presented to every patient regardless of economic background, age, status or longevity in the practice.

Having these options available can make the difference between marginal implant case acceptance and outstanding implant case acceptance:

- **Cash up front merits 5% off**
  If patients are willing to pay for the entire implant case before treatment commences, they should be offered the chance to reduce their total fee by 5%. This is an excellent opportunity for the practice because it eliminates any concern over collections or administration of the financial account.

  Further, patients who have paid have a strong commitment to the practice and incentive to be pleased with the dentistry because they have already paid for it.

- **Credit Cards**
  Today, few people carry a great deal of cash, preferring instead to charge most of their purchases. Because of the convenience they offer, credit cards are the norm and dental practices interested in high case acceptance rates should be most happy to accept them.

- **Half up front – half before the end**
  What this means is that no case should ever be started without half the payment in advance. Short of this commitment, if patients are not willing to make this commitment, you are very likely to have a collection problem on your hands in slower economic periods, like we are experiencing now, when account receivables increase. By having the patient pay half at the beginning, you are creating a level of commitment for the patient and covering most of your basic costs. Notice also that the second part of this financial option reads “half before the end” and not “half at the end.” Finish the case, knowing it is paid. You don’t want to try to collect later.

- **Patient Financing**
  Levin Group has found this to be the most important financial option for patients. Outside patient financing should be offered to all patients. Once a practice begins to offer all four financial options to every patient, case acceptance and practice production increases almost immediately. The reason is that many potential implant patients do not even think to ask a dental practice whether financing is available. They may ask about payment plans, but they neglect to ask about financing because they simply don’t realize that it is an option.

**Conclusion**

By understanding and incorporating the best management systems, practices can increase implant production. The use of reliable business methods will allow implant doctors to transform their practice as desired.

Effective systems for the three areas discussed above often complement one another. For example, excellent customer service helps to build trust, which leads to greater case acceptance. This combination of factors enables dental practices to enjoy increased implant production even in a climate of slow economic growth.

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**www.aaid.com**
A busy dental office routinely handles many matters that constitute legally protected or privileged information. For example, treatment rendered to a specific patient, conversations with patients, appointment books, insurance claims, patient records, business records of the practice, computer data, employee records and names of patients, among others, constitute information that cannot be freely disclosed to a third party. However, there are many situations in which dental office employees do not understand or appreciate the potential risks of sharing such information without proper authorization.

It is not uncommon for dental staff to talk about a specific “problem” patient at a social gathering outside the office or during a conversation with employees from another practice. Doing so constitutes of breach of the patient privilege if names are mentioned. Similarly, discussing specific patient collection problems or billing issues that identify one or more patients also subjects the practice to legal risk.

Proprietary information protected under most state statutes may include procedures, computer software, or protocols utilized in the dental office for patient collections. Similarly, forms developed and utilized by the practice, marketing methodologies, or “internal” documentation can constitute proprietary information that belongs to the practice and is protected under various state laws.

Dental office employees need to be cognizant of the

An example of a written policy requiring the employee’s signature and acknowledgment follows:
(Note: The following form is for example purposes only. Please consult with your own attorney and state laws before using this form.)

EMPLOYEE CONFIDENTIALITY AGREEMENT

Employee understands that all office documents, lists, patient records, proprietary information, appointment books, computerized print outs of any kind, electronic data, any other information or materials generated within the dental office shall not copied or physically or electronically removed from the dental office of Dr. ______ and constitute confidential and/or proprietary information. The undersigned employee acknowledges and understands that the above materials or data constitute legally protected information and shall not disclose or discuss anything noted above outside of the dental office. Additionally, employee agrees to return to Dr. ______ all confidential and proprietary information which may be in the possession of the Employee, including all electronically stored data, copies or portions thereof, upon termination of employment for any reason.

The parties agree that if the Employee violates, or is perceived to threaten the violation of, any of the terms of this Agreement, Dr. ______ will be irreparably harmed, and that harm cannot be reasonably and adequately compensated by damages in an action at law. Therefore, in the event of such violation or the threat of such violation, Dr. ______ shall be entitled to seek and obtain injunctive relief to prevent or mitigate violations or threatened violations of this Agreement, and Employee agrees to indemnify and hold Dr. ______ harmless from any and all liability, cost and expense, including attorney’s fees, as a result of any such violation or threatened violation of this Agreement.

Dated: ______________________________

Signature: _____________________________
fact that virtually everything they view or discuss within the confines of the office cannot be disclosed, discussed or removed from the office environment. Similarly, copies of any patient identifying information should not be removed from the office, except for specifically authorized purposes, such as making calls to patients regarding scheduling appointments, collection matters, or other treatment related purposes. But such documents must be protected, not shared with any third party and not carelessly discarded.

The precautions taken by dentists to protect such information should include a written acknowledgment by their employees. This would include provisions for seeking judicial relief and an injunction against any unlawful disclosure, use, or removal of patient or proprietary information from the dental office. Unfortunately, there are multiple examples of dental staff having negligently, or sometimes maliciously, removed patient records, billing records, computer data or personnel records from the office. This has too often occurred prior to their imminent discharge, and for purposes of creating legal jeopardy against the employer in retaliation for employment related discipline or termination.

www.aaid.com
Executive Director's Report

AAID: Your GPS to comprehensive dental implant education

By Sharon Bennett

By now you should have received the Preliminary Program for AAID’s 59th Annual Meeting to be held October 20 – 23 in Boston. The cover contains the distinctive GPS device. You can also see that image on page 12 of this issue of AAID News.

As you know, the GPS is the visual chosen to help illustrate the theme of this year’s annual meeting: “Navigate Zones of Implant Dentistry: Complications, Confidence, Comfort.” The meeting offers three and one-half days of comprehensive dental implant education. AAID meetings have become known throughout the profession as one of the best values in implant dentistry. At this AAID scientific conference, we have designed the educational offerings so that you will be able to identify potential complications you face with each case. You will leave the conference with clinically practical information you can use immediately. You will discover the latest trends in implant dentistry and learn about “tomorrow’s challenges” today.

We realize that not everyone learns in the same way. So, we have developed a variety of learning environments at the conference. There will be main podium lectures presented beginning with New Trends, Techniques, and Technologies on Wednesday and continuing through noon on Saturday. If you prefer an intimate learning experience where you are able to interact closely with peers and world-class presenters, you will find the clinical roundtables a welcome addition. Each roundtable will either present a topic not otherwise covered at the conference or will allow you to delve deeper with the presenter of a topic covered during a main podium presentation.

Many of you find that a hands-on approach allows you to learn a new technique. During the meeting, we are offering seven half-day Hands-on Workshops. Each workshop is limited in the number of attendees in order to maximize the opportunity to learn the technique or process being taught. At least 70 percent of the activity in each workshop will be hands-on. World-class experts teach all courses.

Presenters will cover complications and solutions so you can gain confidence and comfort in your practice. Several topics and speakers are grabbed from today’s headlines including:

- Human face transplants
- Next dimension in implant esthetics
- Botox and injectable fillers
- Lasers and facial implants
- Risk management and standard of care in implant dentistry practice
- Platelet rich plasma
- Where will implant dentistry be in three years?
- Join your colleagues in Boston, October 20 – 23, 2010, for AAID’s 59th Annual Scientific Program. We look forward to seeing you there.

Summer 2010

Summary of Actions Taken by Board of Trustees

June 12, 2010

- Accepted 2009 Audit and Management Letter showing a clean opinion from auditors, Ruzicka & Associates
- Approved Ruzicka & Associates engagement as auditors for 2010
- Approved reappointment of JP Morgan as Investment Advisors for 2010
- Adopted policy to cover expenses for president to attend meetings of allied organizations and cover expenses for president’s spouse when spouse has been specifically invited to attend
- Adopted policy to limit the honorarium that Districts should pay speakers at District Meetings to $1,500.
- Elected 67 new Associate Fellow and 12 new Fellows
- Created an ad hoc committee to be named by President Joel Rosenlicht to review the Admissions and Credentialing process
- Decided not to provide pins to Fellows and Associate Fellows at AAID expense
- Selected JW Marriott Desert Ridge Resort and Spa in Phoenix, Arizona as the site for the 2013 Annual Meeting
- Authorized the production on one special issue of Journal of Oral Implantology with costs to be covered by ad revenue
- Increased the size of Journal of Oral Implantology by 20 – 24 pages
- Directed bylaw amendment be proposed to allow the Board of Trustees to determine dues for international credentialed membership outside the US and Canada
- Removed 35 unpaid credentialed members from AAID membership
- Granted Life Membership to Dr. A. Norman Cranin
- Added $5,000 to the budget to fund a study of state dental boards to determine rules regarding advertising of AAID credentials
- Authorized an additional expenditure of $200,000 to cover costs for California legal efforts
Surgical Flexibility. Prosthetic Versatility. Sybron Dependability.

The SybronPRO™ Series Implant System designed to provide immediate stability, preservation of crestal bone, and long-term aesthetics... from a name you can trust.

Sybron - Celebrating over 100 years of dental excellence.

For more information, contact Sybron Implant Solutions today.

SybronPRO™ Series
“Haute” Doc
Duane Starr

Remember the movie where Chevy Chase shouted ‘Wow’ after he saw the Grand Canyon for the first time? Well, that’s how I felt after getting into the alpaca farming business eight years ago,” recalls Duane T. Starr, DMD, who, along with his wife, Valorie, manage an alpaca breeding farm about 20 miles east of Portland in the Columbia gorge — and 30 minutes from his 24-year-old dental practice.

Alpacas? You bet. Resembling a small llama in appearance, alpaca is a domesticated species of South American cameledid that today are found in all 50 U.S. states and Canada. Like for centuries in their native South America, they are bred specifically for their fiber, used for making knitted and woven items such as socks, gloves and sweaters.

“I had no idea anything like this existed years ago, but it was like the first time you see an alpaca in person or on TV or in a magazine,” Duane says. “Something just clicked for me, and I became intrigued and enraptured. Today I feel like I am living a dream.”

Duane owes his love affair with alpacas to several patients who were involved with the animal and encouraged him to take a look, which he did through months of research and visiting alpaca farms in the Portland area, California and Colorado. He admits that his biology major, which brings an interest in breeding, and his wife also played into his fascination with the magical world of alpacas.

“In 2002, we found the perfect countryside farm in Boring, Oregon,” he fondly remembers. “But visiting and tending to our alpacas on the weekend just wasn’t good enough.” So after several months of dividing time in the city and their beloved alpacas an hour away, Duane and Valorie, “bona fide city kids that we were,” moved from their modest Portland home to the six-acre farm which he says is “absolutely perfect for what we wanted in terms of size and layout, such as grazing pastures and a barn. And, as they say, the rest is history as we have been raising and breeding alpaca ever since.

Valorie is fond of joking that her commute to work is only 150 feet out to the barn! And I have a picturesque 30-minute drive to the office, with views of Mt. Hood that I wouldn’t trade for anything.”

As Duane and Valorie’s website at www.starralpaca-farm.com states, there’s never a dull moment at Starr Alpaca Farm despite its location in Boring. “With our fluctuating herd size of 60-80 alpaca grazing about our pastures, we are in the medium-size farm category,” says Duane, noting there are two kinds of alpaca: Huacaya, 85 percent of the animal’s population, and Suri, which are rarer and have special fleece qualities. “Suri are to dreadlocks as Huacaya are to Afros,” Duane says. “The fiber type distinguishes the two breeds, leading to different yarn varieties. We continue to learn a lot about the fiber end of the industry – the heart of the business since alpaca fiber competes with other fibers like cashmere and mohair. You can only show your alpaca for so long. The future is in the fiber and developing a...
sound business model around identifying your market niche, a breeding plan, go-to-market strategy and utilizing the important tax benefits of alpaca ownership.”

Emphasizing that alpaca farming must always be approached as a business, Duane says, “When we began, it was exciting and a bit daunting to see how fast our herd would grow and, today, it’s still a lot of fun to see how our breeding choices are working out. We think our farm is recognized for fine breeding animals and excellent fiber products, and we can hold our own against larger area operations.” Most of Duane’s alpacas are for sale, usually when younger and more often males, for their fleece production. “Stud-quality males can command a five-figure sale price today and, in better economic times, even six figures,” he adds.

Alpaca genetics are complex but the goal is to always breed for better animals. Duane characterizes the color component of the genetics “like a black box.” You can breed alpacas of any of the 26 different colors and the result is usually something unexpected.

“We see our operation much like a cattle farm where we are trying to develop additional products and services beyond the main fiber,” Duane says. The animals are shorn once a year for their fleece. While selling the raw fleece to a spinner is done, it is more profitable to upgrade the material into a highly sought yarn in part, as Duane notes, because there is a resurgence in knitting and crocheting in the U.S. and alpaca yarn is prized by knitters for socks, gloves and other clothing, including socks used by U.S. troops in Afghanistan. “Walking in alpaca socks is like floating on air,” he says.

Duane and Valorie are developing a larger farm store to dovetail with visitor tours they have year around for young and old, as well as a burgeoning composting operation that they want to become more commercial. “Alpacas, to be frank, generate a heck of a lot of waste which we are finding can be a manure to put directly on plants and vegetables, like an organic mulch or fertilizer. We’re eyeing a 26-acre organic raspberry farm next to us as a customer. Maybe someday it will be ‘Dr. Starr’s potting soil’?”

Somewhat surprisingly, Ohio is home to the largest alpaca population in the U.S., followed by Washington and then Oregon. “U.S. alpaca farming grew fast in the 1980s largely through importation,” Duane notes. “While alpacas do better in cooler climates, they are very adaptable, a main reason they’re so appealing to raise.” Alpaca, with about a 20-year life span, are generally 150-200 pounds, with the female most productive from 2 to 16 years.

And alpaca dental needs? “Well, I keep an eye on that, of course,” Duane laughs. “Alpaca have no upper teeth. The upper anterior of their mouth is like a hard palate that the lower anterior protrude against. Males do have fighting teeth in the back and we usually cut them short. We also give them their shots and manage various parasite issues.”

The alpaca demeanor is cat-like, as Duane describes it. “They do things on their own terms but are generally friendly and curious animals. Most make a humming sound, which is usually a comfort noise to let other alpacas know they are present and content. The humming can take on many inflections and meanings. We don’t hear much on our farm but alpacas can make a high-pitched, shrieking sound when in danger. Alpacas ‘cluck’ or ‘click’ to signal friendly or submissive behavior.”

Because they are camels, some alpacas do spit, not maliciously and rarely at humans, but rather in competition for food and directed at other alpacas.

Like other animal pet lovers, Duane has felt the high and low emotions of the alpaca life and death cycle. “We see the miracle of birth which is so fascinating and beautiful, but we also lose babies and the old as part of the process,” he notes. “Then there is always the very difficult time of determining when to put an alpaca down, but, you know, they sort of tell you it is time as they lose their dignity and just kind of wear out.”

And what about alpacas in Duane’s future? “Becoming involved in the alpaca business has been life-changing for me,” he says. “If there is something close to a panacea in life, this is it for me. Hanging out with the animals each day, and working and living on our farm does kind of calm me down and drain away the stress from a hard day at the office. You know, I have a wonderful gig going and I don’t see an end in sight to it.”
NAVIGATE ZONES OF IMPLANT DENTISTRY

Complications
Confidence
Comfort
### A. Meeting Registration subtotal

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<th>AAD Fellow*</th>
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*Includes Membership in AAD through November 30, 2010

- Nonmember*               | $1395 | $1495 |
- Life Member or Retired Member* | $190 | $190 |
- Technician               | $295  | $295  |
- Office Staff             | $295  | $295  |

Register 3 or more allied staff from same office at $225 each.

- Doctor’s Name
  - Student                   | $150  | $150  |
  - Spouse Name              | $190  | $190  |
  - Guest Name               | $190  | $190  |

* Includes one (1) President’s Celebration ticket

### B. Hands-On Workshops

Each Hands-On Workshop is $99 if registration received by 9/20/10 ($119 after 9/20/10)

- H1 At to be announced (Thurs. pm)
- H2 Michael Peleg, DMD – Immediate Placement after Extraction (Thurs. pm)
- H3 Alfred Heller, DDS, MS; Robert Heller, DDS - Piezoelectric Surgery Technique (Thurs. pm)
- H4 At to be announced (Fri. pm)
- H5 James Fennell, DDS - Evidence-Based PRP (Fri. pm)
- H6 Robert J. Miller, DDS - Re-Engineering the Biology of the Osteotomy (Sat. am)
- H7 Pankaj Singh, DDS – Boston Hands-on Workshop (Sat. am)

### C. Clinical Roundtables

Each Clinical Roundtable is $49 if registration received by 9/20/10 ($59 after 9/20/10)

- RT1 Edmund Bedrossian, DDS – Graftless Solution (Thurs. pm)
- RT2 Peter Moy, DMD – Reconstruction of the Mandible: Guided vs. Non-Guided (Thurs. pm)
- RT3 Barry Bartee, DDS, MD – Ridge Preservation (Thurs. pm)
- RT4 Scott Ganz, DMD – Cone Beam Technology (Thurs. pm)
- RT5 Alfred “Duco” Heller, DDS, MS – “Tunnel Grafting Procedure” (Fri. pm)
- RT6 Jamie Lozada, DDS – Lateral and Crestal Bone Plating Antrostomy (Fri. pm)
- RT7 Sonia Lezy, DDS – Ridge Preservation v. Immediate Implant Placement (Fri. pm)
- RT8 Frank Recker, DDS, JD – Standard of Care (Fri. pm)
- RT9 O. Hilt Tatum, Jr., DDS – Bone Manipulation and Expansion (Fri. pm)
- RT10 Yvan Fortin, DMD – Trans-Sinus Malar Process Implants (Fri. pm)
- RT11 Nicholas Caplanis, DDS, MS – Connective Tissue Grafts (Sat. am)
- RT12 Howard Chasen, DMD – Esthetics for Implant Restorations (Sat. am)

### D. Special Events

- A & C Roundtable (Thurs. 7–8 am) No Cost but reservation required
- A & C Roundtable (Fri. 10–11 am) No Cost but reservation required
- ABOI Lunch (Fri. Noon – 1:30 pm) $75
- Women Dentists’ Wine & Cheese (Fri. 6–7 pm) No Cost but reservation required
- President’s Celebration (Sat. 7:00 pm) $195

### METHOD OF PAYMENT

- Check Enclosed
- Visa
- MasterCard
- American Express
- Discover

Card No.: ____________

Exp. Date: ____________ 3 Digit Security Code from Back of Credit Card ____________

Signature: ____________

Send check, payable in US$, and this form to the AAD:
American Academy of Implant Dentistry, c/o Delaware Place Bank, Dept. 350
190 Delaware Place, Chicago, IL 60611

Or register online at www.aaid.com or www.aaid.com.

Or you may fax your form to 312-335-9090.

American Academy of Implant Dentistry • 211 East Chicago Ave., Suite 750
Chicago, IL 60611 • P: 312.335.1550 or 877.335.AAID

Registrations received by October 5, 2010 will be processed prior to the meeting. Anyone wishing to register after October 5, 2010, must do so onsite.

Requests for refunds must be made in writing and received by September 27, 2010 for a 100% refund; between September 28 and October 4, 2010 for a 50% refund. Due to advance commitments to the hotel, no refunds will be made after October 4, 2010. A $50 administrative fee will be retained on all refunds regardless of when requested.

Call the Boston Marriott Copley Place at 1.800.266.9432 or 1.506.474.2009 to make reservations (mention the American Academy of Implant Dentistry for special group rates). Visit https://resweb.passkey.com/go/AAD2010 for more information or make your reservations online through www.aaid.com.
2010 Annual Meeting

MAIN PODIUM PROGRAMS

Thursday, October 21, 2010
8:30 am – 9:00 am
Implant Dentistry – Where Are You Now and Where Do You Want to Be in the Next Three Years?
Gordon J. Christensen, DDS, MSD, PhD

9:00 – 10:00
Graftless Solution: Immediate Loading of the Edentulous Patient with Fixed Prosthesis
Edmond Bedrossian, DDS

11:00 am – Noon
Reconstruction of the Severely Atrophic Mandible: Guided vs. Non-Guided Surgery
Peter K. Moy, DMD

1:30 pm – 3:00 pm
Computer-Guided Implant Placement for the Severely Atrophic Maxilla
Thomas J. Balshi, DDS
Stephen F. Balshi, MBE

4:00 pm – 4:45 pm
Implant Prosthodontics Complications and Their Prevention: Some Practical Pearls
Tony Daher, DDS, MSEd

4:45 pm – 5:00 pm
Relocation and Rehabilitation of Integrated Implants
2009 Annual Meeting Winning Table Clinic Presentation
Gilbert Trembley, BSc, DMD

Friday, October 22, 2010
8:00 am – 9:00 am
Technical and Anatomical Considerations of the First Human Maxillo-Facial Transplant
Daniel Alam, MD

9:00 am – 10:00 am
The Next Dimension in Implant Esthetics: Guidelines for Success
Sonia Leziy, DDS

11:00 am – Noon
Periodontal Complications of Implant Treatment: Avoidable Problems, Emerging Challenges and Management Strategies
Sonia Leziy, DDS

1:30 pm – 3:00 pm
Optimal Facial Esthetics: Rejuvenation with Botox, Injectable Fillers, Laser and Facial Implants
Joe Niamtu, III, DMD

1:30 pm – 3:00 pm
Contribution of CT-Scan Derived 3D Modelization to Reconstructive Procedures and Advanced Implant Techniques
Manuel Chanavaz, MD, DDS, PhD

4:00 pm – 5:30 pm
Understanding the Principles of Esthetics for Implant Restorations
Howard M. Chasolen, DMD

Saturday, October 23, 2010
8:00 am – 9:30 am
Medical Assessment of the Implant Patient
Daniel Becker, DDS

10:30 am – 12:00 noon
Key Elements of Risk Management in the Practice of Implant Dentistry
Frank Recker, DDS, JD

HANDS-ON WORKSHOPS

Seven hands-on workshops will be offered during the course of the meeting in order to provide attendees with a choice of learning experience. Two workshops will be offered on Thursday afternoon and Friday afternoon respectively. Two
additional workshops will be offered on Saturday morning. Each workshop is limited in the number of attendees in order to maximize the opportunity to learn the technique or process being taught. At least 70 percent of the activity in each workshop will be hands-on. All courses are taught by a world-class expert. Because these are limited in attendance and to guarantee that we order enough equipment or materials, reserve your spot early when you register for the annual meeting.

Thursday, October 21, 2010

1:30 pm – 5:00 pm

HA1: In order to provide the latest information in the fast-changing world of implant dentistry, the course title and presenter will be announced nearer to the start of the Annual Meeting.

Presented through a grant from Nobel Biocare

Friday, October 22, 2010

1:30 pm – 3:00 pm

RT1: Graftless Solution: Immediate Loading of the Edentulous Patient with Fixed Prosthesis

Edmund Bedrossian, DDS

Level: 2

Saturday, October 23, 2010

8:00 am - noon

HA6: Re-Engineering the Biology of the Osteotomy

Robert J. Miller, DDS

Presented through a grant from Intra-Lock

HA7: Botox Hands-on Workshop

Pankaj Pal Singh, DDS

CLINICAL ROUNDTABLES

Sixteen Clinical Roundtables will be offered throughout the meeting so you have additional choice of topics and in-depth learning opportunities. Each Clinical Roundtable will be limited to 20 participants. Each is 90 minutes in length. Some topics presented as Main Podium Presentations are covered more in depth as Clinical Roundtables. This gives you the opportunity to interact on an intimate basis with a Main Podium presenter. New topics are also offered as Clinical Roundtables allowing you the chance to delve deeply into a subject with a world-class expert. Because these are limited to only 20 participants, reserve your spot early when you register for the annual meeting.

To maximize your learning experience, the suggested level of implant dentistry experience is listed for each Clinical Roundtable. Following are the possible levels. In order to make the session most useful for all attending, be certain to register only for those Clinical Roundtables that suit your level of implant dentistry experience.

Level 1 – for the practitioner with a new or very early stage implant practice or for general topics understood by all practitioners

Level 2 – for the practitioner with an established implant practice who is competent to handle common implant treatment

Level 3 – the highly experienced and expert practitioner

Thursday, October 21, 2010

1:30 pm – 3:00 pm

RT2: Reconstruction of the Severely Atrophic Mandible: Guided vs. Non-Guided Surgery

Peter K. Moy, DMD

Level: 2

4:00 pm – 5:30 pm

RT3: Techniques and Materials for Ridge Preservation and Implant Site Development

Barry Bartee, DDS, MD

Level: 1
RT4: Cone Beam Technology: “It’s Not the Scan, It’s the Plan”
Scott D. Ganz, DMD
Level: 1

Friday, October 22, 2010
1:30 pm – 3:00 pm
RT5: “Tunnel Grafting Procedure” to Gain Mandibular Bone Width
Alfred “Duke” Heller, DDS, MS
Level: 1

RT6: Lateral and Crestal Bone Planing Antrostomy: Dask™ and Implantium™ System in the Treatment of the Posterior Edentulous Maxilla
Jaime Lozada, DDS
Level: 2

RT#7: Extraction and Ridge Preservation versus Extraction and Immediate Implant Placement: A Treatment Plan and Procedural Blueprint
Sonia Leziy, DDS
Level: 2

4:00 pm – 5:30 pm
RT8: What is the “Standard of Care” in Implant Dentistry?
Frank Recker, DDS, JD
Level: 1

RT9: Bone Manipulation and Expansion
O. Hilt Tatum, Jr., DDS
Level: 1

RT10: The Benefits of Trans-Sinus Malar Process Implants as a Minimally Invasive Alternative to Sinus Grafts for the Highly Resorbed Posterior Maxilla
Yvan Fortin, DMD
Level: 3

Saturday, October 23, 2010
8:00 am – 9:30 am
RT11: Applications for Connective Tissue Grafts to Enhance Peri-implant Esthetics
Nicholas Caplanis, DMD, MS
Level: 2

RT12: Understanding the Principles of Esthetics for Implant Restorations
Howard M. Chasolen, DMD
Level: 1

RT13: Laser Treatment of Peri-Implantitis: State of the Art
Robert Convissar, DDS
Level: 2

10:30 am – Noon
RT14: Understanding How Mini Implants Work
Victor Sendax, DDS
Level: 1

RT15: The Most Predictable Approach to the Totally Edentulous and Atrophied Mandible
Leonard Linkow, DDS, DMSc
Level: 1

RT16: Immediate Replacements and Immediate Loading – Fact versus Fiction
Jack Hahn, DDS
Level: 2

NEW TRENDS, TECHNIQUES AND TECHNOLOGIES

These corporate sponsored courses give you the opportunity to learn about the latest innovations in implant dentistry directly from those developing the newest trends, techniques and technology.

Wednesday, October 20, 2010
8:30 am – 9:00 am
Diagnostic and Clinical Advantages of 3D Cone Beam Imaging
Presented through a grant from PreXion, Gold Sponsor
Daniel McEowen, DDS

9:00 am – 9:30 am
A New Paradigm for Implant-Supported Immediate Load Overdentures
Presented through a grant from Dentsply Tulsa Dental Specialties, Platinum Sponsor
David A. Little, DDS
9:30 am – 10:00 am
New Technologies – How They Contribute to Predictable Implant and Prosthetic Success: Planning Successful Cases Using Digitally Guided Surgery and CAD/CAM Prosthetics
Presented through a grant from Nobel Biocare, Diamond Sponsor
Robert Bagoff, DMD

10:30 am – 11:00 am
The Use of Biphasic Calcium Sulfate to Meet Bone Augmentation Challenges
Presented through a grant from MIS Implants Technologies, Inc., Presidential Sponsor
Amos Yahav, DMD

11:00 am – 11:30 am
Bone Grafting for Optimal Therapy: Following Paradigm Shifts in Dentistry
Presented through a grant from Sybron Implant Solutions, Platinum Sponsor
Robert A. Horowitz, DDS

11:30 am – Noon
Immediate Implants after Extraction and Multiple Contiguous Implants in the Anterior Maxilla – How Does Science Affect Clinical Esthetic Procedures?
Presented through a grant from Neodent, Platinum Sponsor
Carlos dos Reis Pereira Araujo, DMD

1:30 pm – 2:00 pm
Lateral and Crestal Bone Planing Antrostomy: Dask™ and Implantium™ System in the Treatment of the Posterior Edentulous Maxilla
Presented through a grant from DentiumUSA, Gold Sponsor
Jaime Lozada, DDS

2:00 pm – 2:30 pm
Technologies – How They Contribute to Predictable Implant and Prosthetic Success: Soft Tissue Esthetics from the 3rd Generation of Bone Level Implants
Presented through a grant from Nobel Biocare, Diamond Sponsor
Jack Krauser, DMD

ALLIED STAFF OPPORTUNITIES
The Allied Staff Program consists of learning opportunities presented exclusively for allied staff – the key members of the dental team. Allied staff are encouraged to attend Main Podium Programs, Hands-on Workshops and Clinical Roundtables as well.

Thursday, October 21, 2010
8:00 am – 10:00 am
Smile Design and Advanced Provisional Fabrication
Mike Malone, DDS
11:00 am – Noon
Implant Practice Growth Management: Consultations, Case Presentation, Financial Arrangements for Prospective Implant Patients
Cindy Rothenberg, RDH

1:30 pm – 3:00 pm
Implant Treatment Planning Coordination (both within office and referring offices)
Cindy Rothenberg, RDH

4:00 – 5:30
Patient Monitoring during Sedation: Sense and Non-Sense
Daniel Becker, DDS

Friday, October 22, 2010
8:00 am – Noon
Capture the Perfect Smile! Digital Photography Techniques for Patient Documentation
Rita Bauer

Saturday, October 23, 2010
8:00 am – Noon
Women’s Health Issues – It Is a Quality of Life Issue!
Claude Hughes, MD, PhD

CAMARADERIE AND NETWORKING OPPORTUNITIES

Continental Breakfists

Start each day of the meeting off 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.

WELCOME RECEPTION
Wednesday, October 20, 2010

All registrants and registered guests are invited to attend the Welcome Reception on Wednesday, October 20 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.

Implant World Expo Lunch
Thursday, October 21

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 21 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 21

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 21 from Noon until 1:30 pm. There is no cost for this event.

Celebration of Credentials
Thursday, October 21

Celebrate success in implant dentistry as AAID recognizes members who attained the level of Fellow, Associate Fellow, or ABOI/ID Diplomate. Congratulate AAID’s newest credentialed members and learn what it takes to join their ranks. This will occur at the close of the Main Podium Presentations on Thursday, October 21. All registered attendees are invited to attend the Implant World Expo Reception in honor of newly credentialed members and Diplomates.
Implant World Expo Reception in Honor of Newly Credentialed Members and Diplomates Thursday, October 21

Join colleagues and suppliers to the implant profession in the exhibit hall during this grand opening of the Implant World Expo. Over 120 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 Thursday, October 21. Badges will be required.

Women Dentists’ Wine and Cheese Gathering Friday, October 22

Join your colleagues at AAID’s Women Dentists’ Wine and Cheese Gathering on Friday, October 22 from 6:00 pm until 7:30 pm. This is a wonderful place to talk with members who share similar challenges and opportunities.

President’s Celebration Saturday, October 23

You will be impressed and amazed by the entertainment at the President’s Celebration. “The Passing Zone” isn’t just any juggling act, unless you consider juggling chain saws a commonplace activity. Theirs is a high-octane presentation that is full of big laughs, wild stunts, and, oh yes, did we mention there is hilarious audience participation. Join President and Mrs. Rosenlicht on Saturday evening, October 23 to enjoy an outstanding meal, say a fond farewell to your friends, be amused by “The Passing Zone,” dance a little, and help celebrate AAID and everything you have helped it accomplish. One ticket is included with each dentist’s registration (except for student registrations) and additional tickets can be purchased for $195.

The Best Value in Dental Implant Education

The scientific programs keep the attention of the attendees. Poster presentations are an excellent way to learn about the latest research in implant dentistry. Over 120 exhibitors will be present and many offer special AAID discounts.

World-class practitioners and presenters, such as Dr. Carl Misch, are typical of the outstanding faculty at the AAID Annual Meeting.
The AAID Nominating Committee presents the following slate of officers for consideration at the Academy’s 2010 Annual Business Meeting on Saturday, October 23 in Boston during the 59th Annual Meeting.

President—Joseph F. Orrico, DDS
President-Elect—James L. Bush, DDS
Vice President—Nicholas Caplanis, DMD, MS
Treasurer—John C. Minichetti, DMD
Secretary—John Da Silva, DMD, MPH, ScM

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:

3) 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.

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

5) 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.

Check out www.aaid.com to get the most out of your AAID membership.
1-YEAR FELLOWSHIP PROGRAM IN IMPLANT DENTISTRY

California Implant Institute offers 1-year comprehensive fellowship program in implant dentistry. This program is made of 4 sessions (five days each) designed to provide dentists with practical information that is immediately useful to them, their staff and their patients. The four sessions combined, offer over 160 hours of lectures, laboratory sessions and LIVE surgical demonstrations. Whether you’re just starting out, or looking to enhance your existing surgical and prosthetic implant skills, our fellowship program is exactly what you’re looking for.

Sessions:

Session I  April 21-25 2010
          October 13-17 2010
          June 19-23 2011
          August 15-17 2011
          October 20-22 2011

Session II  May 19-23 2010
           Feb 26-27 2011
           May 20-22 2011

Session III  June 23-27 2010
            June 22-26 2011

Session IV  September 22-26 2010
           July 20-24 2011

15-Day Continuous International Fellowship:
In this program our 20-day fellowship is condensed into 15 day continuous program for international doctors; however, U.S. doctors are also welcome to register for this program if desired.
August 9-23 2010
August 9-22 2011

Speakers

Louie Al-Faraje  DDS, DABDI
James Rudikowski  DMD, PhD, DABOI
Suheil Boutros  DDS, Periodontist
Freida Brookshire  DDS, Prosthodontist
Christopher Church  MD, ENT
Sally McKenzie  Practice Management

Over the years, I’ve had the good fortune to attend implant-related CE courses given by some of the most gifted implant experts of our time. In that group of world-class mentors, I include Dr. Louie Al Faraje, who demonstrates a comprehensive knowledge of the didactic elements, yet focuses on the practical aspects of implantology, giving us information we need to help in making daily clinical decisions. He provides a top-quality venue, excellent organization of materials, and a refreshing humility, which encourages attendees to ask questions, and gives them the confidence to extend the range of services they offer to their patients.

Dr Michael R. Clark  Periodontist, San Diego, CA

I would like to simply say: "Well thought, well organized, well managed, well presented, well taught, and finally well done Louie for your superb performance. The whole curriculum using high-tech equipments and materials including: given binders and handouts, related articles, live surgeries, hands-on section of the course, and visual supplements were flawless. You went above and beyond to make sure that everyone learns and take home something and start applying it, by encouraging them continuously." Malekshah Oskoui, DMD, MScD Endodontist, Los Angeles, CA

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President’s Message

complications, confidence, comfort” will allow all our members and others interested in implant dentistry to learn about different levels of treatments. In addition to main podium presentations, this year we offer opportunities to learn through hands-on workshops and intimate clinical roundtables. We also will have an outstanding two-day program for allied staff. There is something available to suit everyone’s individual needs and learning style. And Boston is a great venue for fun. Make sure you’re at this meeting October 20 – 23. Let a colleague—whether a member of the Academy or not—know about this meeting.

We have a very talented and dedicated staff along with wonderful officers, trustees and committee chairmen and members. I want to thank them all for their hard work and efforts on behalf of the Academy.

We always have a need to see new faces. Becoming active in these committees and at the District level is a great way to help the organization as well as a great way to develop professional relationships. Let your Trustee or District Officer know of your interest.

Have a great summer, and I look forward to seeing you in Boston.

Wesley Halpert, DDS, passes away

Wesley Halpert, DDS, a past president of the American Academy of Implant Dentistry, passed away on May 16, 2010, at the age of 88. Dr. Halpert was an Honored Fellow of the AAID and a Diplomate of the ABOI/ID. He also served as chair of the Admissions and Credentials Board of the AAID. Dr. Halpert was a former professor at Columbia College of Dentistry and a Fellow of the International College of Dentists. The AAID Research Foundation has also been notified that Dr. Halpert remembered the AAID with a bequest in his will.
Dr. Michael Sonick is committed to offering the most powerful and thought-provoking continuing education courses to dentists as well as adjunct dental team members. Held at our state-of-the-art facility, Sonick Seminars includes two of the must-know procedures today: esthetic reconstruction with implants and plastic surgery as well as major and minor bone regeneration. We also provide a very unique “over-the-shoulder” experience, which allows the participant to shadow Dr. Sonick intimately, from clinical care to case presentation to practice management.

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DR. HOCHBERG: Tell us how you ended up in academics and research.

DR. DA SILVA: During my fifth year at Harvard Dental School, I chose to pursue an additional degree at the Harvard School of Public Health and received a Masters in Public Health. During that year I had an opportunity to practice in the evenings and on Saturdays, which gave me a better sense of what my skills were and the things I wanted to learn more about. Toward the end of that year, I decided to apply to a graduate program in prosthodontics. At the same time, Harvard began a graduate program in implant dentistry that was going to be a six-year combined prosthodontics and implant dentistry program.

I had a pretty good understanding of dental implants in terms of what we learned as pre-doctoral students, so I was excited as I felt like this was the future of dentistry at the time. I decided to join the program in the combined prosthodontic and implant dentistry program. That was really the beginning of my interest in implant dentistry.

Toward the end of my implant program, I entered a geriatric dentistry fellowship through the Harvard Medical School, and became the dentist for a local nursing home. At the same time I was able to do some research and complete a second masters degree at the School of Public Health. At the end of that program several faculty approached me to stay at Harvard, and I became a full-time member of the faculty in the Department of Dental Care Administration, now the Department of Oral Health Policy and Epidemiology. I was involved in clinical care and research, and learned more about healthcare delivery and the structure of that component in dentistry.Coincidentally, the dental school decided to open a full-fledged faculty practice, and I was part of that provider group as well.

Harvard is a little bit different than most dental schools in that we don’t spend all of our time teaching, just doing research, or providing patient care. We have a mix of all three components, and the clinical faculty is required to practice in the faculty practice as well as manage other responsibilities.

DR. HOCHBERG: Share with the membership a little bit about the research that you and/or your students are involved with and the direction that Harvard is going with these projects.

DR. DA SILVA: I got involved early on with research on substance...
abuse and making students more aware of the prevalence of both patients and other professionals that were substance users or abusers. I also have spent a fair amount of time looking at ways to make sure that students — when they're learning to become dentists — learn more about the important role that a dentist can play in addressing substance use both with their peers and patients. We worked with the guidance counselors in the local high schools in Boston to help them understand ways that they could interview kids and learn more about their habits with tobacco and drugs.

I wrote and edited a book called *The Oxford American Handbook of Clinical Dentistry*. It covers a little bit of everything in dentistry and is one of the texts that are bibles for folks that are dental students or in general practice residency programs.

That's one side of me. The other side has to do with clinical research involving color science and looking at more disciplined ways to measure and assess tooth color. Using computers and spectrophotometers to match tooth color has been an area of interest for me. My colleague, Dr. Shigemi Nagai, and I have worked on developing a spectrophotometer dedicated to dentistry that takes both pictures and acquires spectrophotometric data so that you can actually measure and match a single central incisor crown with this device in terms of color, form and character. We're working with labs to develop ways of creating and reproducing ceramics that are very accurate.

One of the things we studied using the spectrophotometer was to look at the influence of a dental implant in bone on the appearance of the soft tissue overlying the implant; how it changes the soft tissue making it appear more gray than it would be if there were no dental implant present.

Over the past year and a half I have been working with a small group on converting our institution to electronic health records so that we have the ability to access information about all of our patients to answer

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**Pikos Implant Institute**

Dr. Michael A. Pikos has provided continuing education courses for 20 years with over 2300 alumni from 47 states and 32 countries, and is internationally recognized as a leader in implant surgery.

- CT Diagnosis and Treatment Planning with Interactive CT Software October 21-23, 2010
- Contemporary Soft Tissue Grafting for Implant Reconstruction September 16-18, 2010
- Advanced Bone Grafting I October 7-9, 2010
- Advanced Bone Grafting II November 4-6, 2010


"For the dental surgeon who respects the restorative principles of Dawson, Pankey, Spear and Katz, and the surgical principles of Marx, Allen, and Mitch, 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

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www.aaid.com  SUMMER 2010  news | 25
I have many roles and wear many hats in the medical school as well. I’m the medical director of the clinical practice. I manage patient care issues that come to me or need attention in terms of either less optimal outcomes, or questions about the next step or more appropriate ways of handling cases.

I am now the interim Head of Department of Restorative Dentistry and Biomaterials Sciences. We run three advanced graduate clinical programs; one in Implant Dentistry, one in Prosthodontics, and one in Endodontics. We have about 30 graduate students in our department who are enrolled in those programs; 85 to 90 part-time faculty and about 15 full-time faculty are members of the department. It’s the largest department in the dental school, and we’re responsible for about 85 percent of the clinical teaching in the pre-doctoral DMD program.

Bobby Sanford, long-time friend Fia, and Dr. Da Silva in Iceland.
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Interview  
continued from page 26

DR. HOCHBERG: Please share with us a little bit about the Harvard undergraduate experience, the pre-doctoral experience of dental implants and the standalone certificate program for implant dentistry?

DR. DA SILVA: Implant Dentistry, in our curriculum, is a fully integrated component of the predoctoral education. So everything is interwoven. Its major restorative block has some perio, some bone biology, a little bit of everything integrated throughout the predoctoral curriculum. The curriculum progresses from understanding basic physiology and histology, to understanding general pathology as well as that found within the oral cavity, and the pathology that's associated with the dentition versus the soft tissue, versus bone. So as they progress through their education predoctoral students learn more and more about the ways that we can diagnose and treat different conditions of the oral cavity. Implant Dentistry is really part of the continuum of what we expect the general dentist to know today, know about the physiology and histology behind the implant placement, dealing with implant and bone, and the surgical process of placing implants. They learn about the restorative process as well so that the students are able to restore and place dental implants in the predoctoral program.

What we have done is set up a system in which a predoctoral student teams up with a graduate student and an instructor. So we limit the types of cases the undergraduates can place and restore based on the level of case complexity. We avoid having them get into treatments that are potentially too difficult for them to manage. They are welcome to maintain involvement through a team approach in those cases that would otherwise be too difficult for them.

We have graduate students placing implants in the perio program, in the prosth program, the implant program, as well as the oral surgery program.

Our graduate program in implant dentistry is for individuals that have—see Interview p. 30
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Legacy1
$85
Legacy2
$152
Legacy3
$179

Cost Savings
46%
51%
53%

List prices as of April 2010

Gerald Niznick, DMD, MSD, Founder and President of Implant Direct
already completed another graduate program in pros or perio or have been in practice for a while and want to come back and learn about implants on a full time basis, or they’ve gone to a GPR program and want to come and learn about dental implants.

I think our plus is that we want to bring people in that already have some facility with patients, can manage patients on an interpersonal level and already have some facility for treatment planning. They’re going to be more focused on actually surgically placing implants or restoring implants. We also want them to be involved in research. We have several projects going on in the implant program. They work on with director Dr. German Gallucci, or other individuals depending on what their interests.

DR. HOCHBERG: Dr. Da Silva do you have any closing comments?

DR. DA SILVA: I think it’s important for the Academy members to understand that dental schools are really their connection to their profession. Part of what really makes dentistry a profession is that we have a lot of ongoing research and clinical investigation leading to innovations, new treatment and discovery that move the field forward. There is also the potential for the practicing dentist to participate in dental education and to be a volunteer at a dental school, to participate in treatment planning with students and understand how they might use dental implants in practice. Part-time volunteers give students a broader perspective than they might receive from their faculty alone. I think a lot of dental schools, like ours, rely heavily on part-time professionals to come in to spend time with students, both graduates and pre-doctoral students, helping students find their way through the clinical cases to treat patients that have real world problems. I don’t think dental education is as far removed from the practice of dentistry as some might think. I believe there’s a lot more potential for the practicing dentist to come in and be part of educating future dentists.

Interview continued from page 28
Connecticut Dental Implant Institute
Dr. Joel L. Rosenlicht, Director

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Southern District meeting attendees caught the wave of success

Over 130 doctors and staff caught the wave of success at AAID’s Southern District meeting held in June at idyllic Jekyll Island, Georgia. Credentialed members shared marketing and case management tips with the attendees. Cindy Rothenberg, an expert in implant marketing, providing a full day of instruction on how to build and sustain a successful implant practice.

Jekyll Island Resort provided a relaxed atmosphere for attendees.

Tammie Hacker, Dr. Olivia Palmer and Sara May of the AAID Staff enjoyed themselves at AAID’s Southern District Meeting.

Dr. Stephen Swallow (left) along with Dr. and Mrs. Tim Hacker enjoyed the grounds surrounding Jekyll Island Resort.

The Southern District Meeting encouraged camaraderie among those in attendance.
“...I am impressed with its handling, but most importantly, I am impressed with its results.”

Jerald N. Rosenberg, DMD, Periodontist

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AAID 2010 Bylaws Committee Report

PROPOSED AMENDMENT TO ARTICLE IV - DUES
Proposed Amendment: Amend Article IV – Dues, Assessments and Fees to allow the Board of Trustees to determine the level of dues for credentialed members outside the US and Canada.

Rationale: Because many of AAID’s activities are national in scope – specifically our successful legal efforts – members from some countries feel that they are not receiving the same benefits from their membership as US and Canadian members. In addition, those members feel that a $600 annual fee is a substantial expense that is, perhaps, beyond their means.

Currently, the AAID Board of Trustees sets dues levels for all General Members. International General Members from a small number of countries pay reduced dues. However, we do not currently offer a discount to international Credentialed Members.

While the majority of international Credentialed Members would still pay the $600 dues, the Board would be able to consider a different dues level where appropriate. This change would also allow for international Credentialed Members’ dues to be considered in the same way as international General Members’ dues.

ORIGINAL BYLAW
ARTICLE IV - DUES, ASSESSMENTS, AND FEES
Section 1. Dues. The following provisions apply to the payment of dues by the different classes of Academy membership.
A) Fellows. Fellows’ annual dues shall be $600.00, which include publication fees and regional district dues as determined by the Board of Trustees.
B) Associate Fellows. Associate Fellows’ annual dues shall be $600.00, which include publication fees and regional district dues as determined by the Board of Trustees.

AS AMENDED (new language is underlined and italicized)
ARTICLE IV - DUES, ASSESSMENTS, AND FEES
Section 1. Dues. The following provisions apply to the payment of dues by the different classes of Academy membership.
A) Fellows. Fellows’ annual dues shall be $600.00, which include publication fees and regional district dues as determined by the Board of Trustees.
B) Associate Fellows. Associate Fellows’ annual dues shall be $600.00, except Associate Fellows outside the US and Canada whose dues shall be established by the Board of Trustees.

PROPOSED AMENDMENT TO ARTICLE IX - COMMITTEES
Proposed Amendment: Amend Article IX – Committees to include identifying the Journal of Oral Implantology as an official AAID publication.

Rationale: In order to meet requirements established by the United States Postal Service, AAID needs verification in the Bylaws that the Journal of Oral Implantology (JOI) is an official publication of AAID. This Bylaw change would provide that verification.

AS AMENDED (new language is underlined and italicized)
ARTICLE IX - COMMITTEES
Section 13. Publications Committee, in addition to assisting the Editor in Chief of the Journal of Oral Implantology (JOI), an official AAID publication, in the discharge of this person’s official duties, the Publications Committee shall have overall responsibility for the content and format of all Academy official publications and literature, and shall ensure that these materials reflect the policies and professional and ethical standards of the Academy.

Members of the AAID Bylaws Committee included Drs. Joe Orrico; Chairman, Jay Elliott, David Gimer, Jaime Lozada, and Brian Jackson.

Voting will take place on Saturday, October 23, 2010, in Boston, during the Annual Business Meeting from 2:00 pm until 4:00 pm.
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Contact: Dr. Jaehyun Shim
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E-mail: gibbs@umdnj.edu

Escuela Superior de Implantologia de Barcelona
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Phone: +34-93-2444089
E-mail: dr.cacciacane@terra.es

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Carol Phillips, DDS
Contact: Melissa Martin
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Contact: Kerri Jackson
Phone: 888-806-4442 or 519-439-5999
E-mail: info@handsontraining.com
Web site: www.handsontraining.com

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Contact: Cecilia Serbanescu
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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: beirutidc@hotmail.com

**The D.M. Vassos Dental Implant Centre**  
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Contact: Rosanna Frey  
Phone: 780-488-1240  
E-mail: rosanna@dmvassos.com  
Web site: www.dmvassos.com

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E-mail: staff@albertadentalimplants.com  

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Phone: 1-800-668-2280  
E-mail: kimber@pidentistry.com  
Web site: www.pidentistry.com

**AAID Affiliated Study Clubs**

**California**  
Bay Area Implant Synergy Study Group  
San Francisco  
Matthew Young, DDS  
Phone: 415-392-8611  
E-mail: young.mat@yahoo.com  
Web site: www.bayareaimplant叙利亚.htm

**New Jersey**  
Lincroft Village Dental Implant Study Group  
Treatment planning, boney grafting, prosthetics  
Richard J. Mercurio, DDS  
Contact: Martha Gatton  
Phone: 732-842-5005  
E-mail: lincroftimplant@aol.com

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

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Implant Connection II: Surgical mentor-ship 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 creden-tialed 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 publica-tion 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.

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**Bone Grafting Course a success; next course set for February 2011**

The two Bone Grafting Courses presented in 2010 were resounding successes. The rating was 3.91 out of 4.00 among those responding to the question, “Would you recommend the course to others?”  

The cadaver lab section and the small student/staff ratio were pointed out by the participants as real positives of their experience at the Course. “I gained confidence to perform sinus procedures after attending this course,” commented one attendee. Others pointed out the individualized attention they received from instructors who were easily approachable.  

The next Bone Grafting Course will be presented February 17 – 18, 2011, at Touro University Nevada in Henderson, Nevada. Information is available online at www.aaid.com.

Individualized attention and hands-on activities set the Bone Grafting Course apart.
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 last name of the new member. We have also included the city where the member has his or her office. Contact your new colleagues and welcome them to the Academy.

ALABAMA
Jim Porter, DMD
Albertville
Burton Gooch, DDS
El Centro
Tommy McGee, DMD
Scottsboro

ARIZONA
Marcus L. Palermo, DDS
Fountain Hills
Tim Tam
Gilbert
Michael Backer
Glendale
Elizabeth Coleman
Glendale
Kevin Maskell
Glendale
Jennifer Aldawoodi
Mesa
Henry Martinez
Mesa
Azam Khan, DDS
Tucson

CALIFORNIA
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Albany
Maria Virginia Banez-Garcia, DMD
Alhambra
Rommel Toledo, DDS
Alhambra
Moutaz Dabbagh, DDS
Anaheim
Henry Hoang, DDS
Anaheim
Frank Toya
Arcadia
Claver Pio Santos-Escalante, DDS
El Centro
Sireesha Penumetcha, DDS
Elk Grove
Norma Martinez, DDS
Escondido
Eric Kwon, DDS
Foster City
Ken Leung, DDS
Gendale
Nishan Matossian, DDS
Glendale
Bryce Darden, DDS
Glendora
Morteza Mazloom, DDS
Goleta
Oscar Arias, DDS, MS
Indio
Yin Ming Chien, DDS
Joshua Tree
Blake Scott, DDS
La Jolla
Michael Flewelling
Loma Linda
Jason Mashni
Loma Linda
Insook Smith, DDS
Loma Linda
Zachary Carnow, DDS
Los Angeles
Amir Chalak
Los Angeles
Robert Jungman
Los Angeles
Robert A. Milnor, DDS
Mission Viejo
Tammam Shhebar, DDS
Mission Viejo
Nicanor J. Bautista, DMD
Murrieta
Amine Khoury, DDS
Napa
Reynaldo P. Barbon, Jr., DDS
Pasadena
Jerry Liu, DDS
Pleasant Hill
Christopher Petrush, DDS
Pleasant Hill
Mikako Kuga, DDS
Redlands
Suneal Naik, DDS
Riverside
Jongson Pak, DDS
Rowland Heights
Elder Heras, DDS
San Bernardino
Eric Scott Johnson, DDS
San Clemente
Jeffrey A. Bloch, DDS
San Diego
Mohammad Faizan Ali
San Francisco
Nhan Dang
San Francisco
Colby Livingston
San Francisco
Veena Vaidyanathan
San Francisco
Wilson Long, DDS
San Gabriel
Sudahbeh Moavenian,
DDS, MS
San Ramon
Yuri Ausker, DDS
Santa Ana
Sohail Ebrahimi, DDS
Tracy
Ky Nguyen, DDS
Vista
Maxwell Mostafa Nazari
Walnut
Hani M. Radaideh, DDS
Willowa
Anas Alkwadri, DDS
Wilmington
Hassan Fayoumi, DDS
Wilmington

COLORADO
Kip Sterling
Aurora
Galen Geraets, DDS
Fort Collins

CONNECTICUT
Laura Huling
Farmington
Joseph Blondin
New Britain
Kelly Palchik
New Britain

DISTRICT OF COLUMBIA
Jacinta Watkins
Washington

FLORIDA
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Davie

IDAHO
Daniel Malan, DMD
Boise
William E. Crofts, DDS
Jerome

ILLINOIS
Kellen Bosma
Alton
Kevin Kemarly
Alton
Lora Nation
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Muntasar Talib Al Hinai,
DDS, MS
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Lombard
Luke Kahng
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continued from page 38

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Baltimore
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Conrad Parles
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Peter Moreland
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Scott M. Redlinger,
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Erica Ross
Omaha
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AAID Membership
Ambassadors know first-hand how membership in the Academy helps dentists establish or expand their expertise in implant dentistry and encourage their colleagues to join the AAID. The following are the Membership Ambassadors who have referred colleagues as new members between March 16, 2010 and and July 15, 2010:

Thank you for referring three colleagues.
Craig D. Cooper, DDS from Indianapolis, IN

Thank you for referring two colleagues.
William Liang, DMD from Surrey, BC, Canada

Roderick Stewart, DDS from Markham, ON, Canada
Matthew Young, DDS from San Francisco, CA

Thank you for referring one colleague.
Richard M. Benninger, DDS from Medina, OH
Peggy L. Budhu, DDS from Roslyn Estates, NY
Gordon J. Christensen, DDS, MSD, PhD from Provo, UT
Ian Michael Fontenot, DDS from Lafayette, LA
Yasunori Hotta, DDS, PhD from Nagoya, Japan
Shankar S. Iyer, DDS,MDS from Elizabeth, NJ

Michael Katzap, DDS from Rego Park, NY
Heikas Martirosian, CDT from Bellevue, WA
Jeffrey T. Meister, DDS from Munster, IN
Richard Mercurio, DDS from Lincroft, NJ
John C. Minichetti, DMD from Englewood, NJ
Dr. Burhan Wetti from Al Ain, United Arab Emirates

Would you like to be an AAID Membership Ambassador?
Simply encourage your colleagues to join the AAID. Offer your colleagues a discount on their first year’s AAID membership dues if they specify your name in the “How did you learn about the AAID?” member referral section of the membership application.

You colleague saves $50 off their 2010 dues for the remainder of the year ($125, regularly $175) by placing your name on the referral line. Every time your name appears on the referral line, you get enter entered into a drawing for a free AAID membership (up to a $600 value). And remember, that the more members you refer, the more chances you have to win.

If you have questions about the Membership Ambassadors Program or would like to request membership applications, contact Carolina Hernandez in the Headquarters Office at carolina@aaid.com.

Implant ID Cards Available for Patients

Wouldn’t it be great if a patient needing repair on an implant walked into your office with a card letting you know what kind of implant they have and who did the work? Just think of how helpful this information would be.

The AAID implant identification card helps you provide your patients that information. On this card, dentists can record information for their patients about the implants used in their treatment. Then, should the need for a repair by a new dentist arise, the patient can give this information to him or her, allowing treatment to proceed more easily.

Templates for the card can be found online in the For Members section of www.aaid.com. It can be printed on Avery stock cards that are 3.5” x 2”, which can be completed by hand or typed. The templates let your staff easily complete the information and print them in office.
Record setting year for new Associate Fellows

A record number of new Associate Fellows have been elected and will be inducted as voting members at AAID’s 2010 Annual Meeting. Sixty-seven members successfully completed both parts of the rigorous process to earn the Associate Fellow credential in the Academy. In addition, 12 members have earned the Fellow credential in 2010. The American Board of Oral Implantology/Implant Dentistry will award Diplomate status to 21 doctors this year. These credentialing programs continue to grow in part due to the success of the Academy’s legal efforts allowing the doctors who have invested hundreds of hours in additional education and have proven their knowledge and expertise in the field through a demanding examination process to earn the credential.

For information on becoming a credentialed member of AAID, visit www.aaid.com or contact Joyce Sigmon at joyce@aaid.com or by phone at 312.335.1550 or 877.335.2243 toll-free in the U.S.

To obtain information about becoming a Diplomate of ABOI/ID, contact Kathleen Huttner at khuttner@aboi.org or by phone at 888.604.ABOI (2264).  

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