Editor's Notebook

David G. Hochberg, DDS
Editor, AAID News

Education has been and will continue to be the cornerstone of what defines the American Academy of Implant Dentistry.

We strive to be the professional organization that provides practitioners with unbiased and comprehensive dental implant education. However, we are not so naïve to believe that the Academy is the only source of implant education.

This issue of the *AAID News* features an interview with Dr. Neil Park, Vice President of Professional Relations for Nobel Biocare, who has responsibility for educational programs in North America.

### Who Says There’s No Humor in Dentistry?

A clever and funny direct-mail campaign to promote the practice of AAID member Richard Waghalter, DDS, in Houston has won third place in the prestigious Summit International Award competition for direct-marketing. The campaign consisted of a series of six humorous postcards and increased Dr. Waghalter's business by 20 percent.

After years of being persuaded by his tennis partner, advertising agency owner Uri Kelman, to go with a professional marketing campaign to advertise his practice, Dr. Waghalter decided to execute the postcard campaign to help promote dental implants and other treatments and services. The cards were sent every two months to area households with annual incomes above $100,000. One featured Dr. Waghalter's 99-year-old mother who received her

see Humor p. 3

### Executive Director’s Report

By Sharon Bennett

It’s hard to believe that I’ve been serving AAID as Executive Director for six months! The good news is that, thanks to the support and guidance of the AAID leaders, members and staff, I feel like I’ve been here much longer. At least I think that’s good news.

Shortly after I began my work with AAID, I attended a Board of Trustees meeting where we took a strategic look at AAID’s present and future. We came away with projects and activities that will move the Academy to an even higher level of success. Since that meeting, we have made real progress to support that direction.

### Education

Based on the success of the Bone Grafting Course held
“Beyond Boundaries” is more than a couple of words that we decided should be the theme for AAID’s 57th Annual Meeting. “Beyond Boundaries” both literally and figuratively reflects in many ways the history, growth and future of our Academy. Dare I say, “Beyond Boundaries” is the reason for being for the AAID.

Nearly 60 years ago, a group of dentists pushed the boundaries of the conventional wisdom of dentistry of the day. Implant dentistry and the AAID were born. Over the next six decades, AAID and its members have been at the forefront of developing comprehensive implant education and supporting research that continued to expand the depth and breadth of oral implantology.

The 57th Annual Meeting to be held October 29 – November 2, 2008 in San Diego will keep the flame of that spirit of inquiry, investigation and innovation that help push us all beyond our own boundaries.

We will go beyond boundaries in many ways at the 2008 Annual Meeting.

President’s Message
By Jamie Lozada, DDS
President, American Academy of Implant Dentistry

Implant dentistry knows no geographic limitations. Doctors from throughout the world practice in the field and conduct research that expands the possibilities of treatment. Nine different countries are represented among the faculty that will present over three and one half days. Doctors attending the meeting will represent more than a dozen different countries throughout the world helping to make this a world-class event.

Although the experience of attending the meeting in person cannot be duplicated, we are taking the meeting beyond the physical boundaries of the absolutely fabulous Manchester Grand Hyatt Hotel in picture perfect San Diego. We are providing live web casts of most of the scientific programs presented over the three days. You are not even constrained by the boundaries of time zones as we will offer simulated live presentations in addition to the live web casts and, of course, you will be able to access the archived versions of the presentations any-time and from anywhere in the world.

The development of oral implantology as a science and implant dentistry as a practice is based on healthy debate and questioning the boundaries placed by conventional wisdom. The 2008 AAID Annual Meeting not only encourages and showcases that debate, but it also eliminates the boundaries between you and the experts through an audience response system. Top experts in the field will debate current topics of interest in implant dentistry. You will be able to use the audience response system to vote and express your opinion. Even those on the live web cast will have a chance to chime in via e-mail and other interactive means.

This year’s meeting is eliminating the boundaries between the doctor and the teams he or she must rely on to provide outstanding treatment to the patients. Two days of education for the allied staff coupled with a special half-day program for lab technicians are just a couple of examples. A special program for dentists new to the practice of implant dentistry will help expand the rewards of implants beyond the boundaries of AAID members.

And finally, San Diego is renowned as a place that is beyond the boundaries of perfection. You have heard about the perfect weather in San Diego. The reality will take you beyond your expectations. The San Diego Wild Animal Park will astound you. LEGOLAND will stretch your imagination. And of course, what about Torrey Pines Golf Course, where Tiger Woods displayed superhuman effort and grit to win the U.S. Open this summer.

Watch your mail for the preliminary program for the Annual Meeting. You can’t miss it because it also goes beyond the boundaries of the typical dental meeting mailing. This oversize brochure will stand out on your desk.

Whether you regularly attend AAID meetings or if you haven’t recently or ever attended an AAID meeting, expand your own boundaries and register for AAID’s 2008 Annual Meeting.

We look forward to seeing you October 29 through November 2, 2008 in San Diego.

“Top experts in the field will debate current topics of interest in implant dentistry.”
Humor continued from page 1
dental implants when she was 78. “I’ve told several patients who thought they were too old to get implants that my mother got implants at 78 and has enjoyed excellent dental health for the last twenty years,” said Waghalter.

Kelman’s marketing approach uses postcards to communicate frequent messages in clever ways to avoid being bothersome. “Postcards are the cheapest way to get a message out, but the audience has to like the format and want to continue receiving them. You don’t see much humor in dental practice marketing, so we believed there was a great opportunity to differentiate Dr. Waghalter from other practitioners by using humorous postcards,” said Kelman.

Each of the six postcards covered specific elements of Dr. Waghalter’s practice, and the card to promote his implant services showed his mother on one side and offered practice information on the other. Mrs. Waghalter is pictured pointing to a full set of dentures soaking in a cocktail glass. Her quote reads: “Do you want your smile on the rocks?” On the back of the card, she says, “My son the dentist told me 20 years ago (when I was a mere 78!) dental implants were the answer for me. They may be for you, too.

My name is Richard, who can tell you. Although it seems like yesterday when he was “too little man,” it’s really been many years. He had many years of experience teaching new dentists at the University of Texas Dental School. And 37 years in his own practice, perfecting techniques like:

DENTAL IMPLANTS
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Teeth Cleaning
Crowns and Bridges
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Q

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The Summit International Awards organization, www.summitawards.com, hosts a rigorous competition for the Summit Creative Award, Summit Marketing Effectiveness Award and the Summit Emerging Media Award. Applicants from more than 50 countries compete for the awards. Kelman’s firm, Kelman Design of Houston, www.kelman绰design.com, won third place for the Summit Marketing Effectiveness Award for Dr. Waghalter’s postcard marketing campaign.

Dr. Waghalter hasn’t decided yet if he will extend the direct-mail campaign further, but has used the photo of his mother in advertisements in the Yellow Pages. He says his mom enjoys being featured in the ads and hopes more seniors with removable dentures will follow her advice and get implants.
Introduction
Implants have the power to transform any practice. They're the closest replacement to natural teeth, yet many practices struggle with implant case acceptance. I believe implants are poised for a major breakthrough within the next decade. Just look at the demographics...the baby boomer population (anyone born between 1946 and 1964) has hit middle age. Many of them will experience edentulism in the coming years and become prime implant candidates.

With an estimated 100 million potential candidates in the US, implants are a massive untapped source of revenue for most dental practices. Given the numerous distinctive benefits that implants afford edentulous patients, practices should regard implant treatment as a standard of care, not just as a luxury item for the wealthy.

Through informative, motivational case presentations, doctors can build successful implant practices even in today’s slow economy. Implant dentistry enhances not only patient lifestyles, but also practice productivity — truly a win-win situation for the patient and the practice.

Although not every patient can afford them or needs them right now, every single patient should be made aware of implants. Therefore, dentists have an obligation to educate all patients about this treatment option. Avoid screening patients based on your perception of their interest level or ability to pay.

Greater Implant Success
Are you ready for explosive implant growth? Now is the time to update your implant case presentation system. The following action steps can help you take your implant production to the next level:

1. Emphasize Benefits. Simply describing implants does not motivate patients to say “yes” during case presentation. Patients are naturally going to ask, “what are implants going to do for me?” Over-emphasizing the clinical details of recommended treatment is a common issue for doctors. Avoid it. Patients want to know how they will ultimately benefit from having implants placed, and it is up to the doctor and dental team to highlight all the benefits provided by treatment.

   Benefits statements might include the following:
   • “With implants, you won’t have to worry about food restrictions.”
   • “Implants are easy to maintain – you will be able to treat them just like natural teeth.”
   • “There is no extra work involved for you to care for your implants. Regular brushing and flossing along with routine dental examinations are all you need.”
   • “Implants have a very high success rate – higher than most surgical procedures.”
   • “When you get an implant, you’ll notice improved confidence as your smile once again becomes full.”
   • “Implants allow you to regain so much of your former, active lifestyle.”

2. Educate Patients Without Overwhelming Them. Most patients are not fully aware of the numerous benefits of implants. Educating patients should be done both by the dentist and the dental team. As with any other patient communication, conversations about implants should be scripted to deliver concise, clear and consistent messages.

   Begin the educational process early. Don’t wait until patients have lost a tooth before educating them about the benefits of implants. Remember, people don’t plan on losing a tooth, but it happens. Educate patients early. It makes motivating them later easier!
3. Be Enthusiastic.
It is a good idea to begin with the assumption that every patient who is missing a tooth would like implants. Wouldn’t you want implants if you were in their place? Your belief in implants should come across in every case presentation. Your enthusiasm for implants should come across loud and clear and inspire patients to give implants serious consideration. When you emphasize the patient benefits of implants in your presentations, treatment acceptance invariably increases. Many dentists feel that they should simply mention options, and the patient will consequently make the best choice. In reality, it is important to realize that successfully presenting implant cases depends on two components: patient education and motivation. You and your team have to be positive and enthusiastic about the benefits of implant treatment.

4. Use Internal Marketing.
Make sure that supporting educational materials, such as brochures, are available to reinforce what has been discussed about implants. Levin Group believes that brochures alone do not motivate or influence patients. Brochures reinforce what has been discussed and only enhance the patients’ level of motivation. Patient testimonials as well as “before and after” photos are very powerful, particularly with unfamiliar procedures such as implants. If any staff members have dental implants, those individuals can serve as a walking advertisement for implant treatment.

5. Offer Financial Options.
The cost of implants is always a sticking point, especially in the current economy. 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
- Third-party financing
  This last option allows the patient to accept implants without the practice having to play “banker.” The practice receives payment for its services upfront while the patient has the implants placed. A variety of patient insurance does not cover the entire process. It is imperative that the practice offer financing options to address reservations patients may have concerning fees. Third-party financing is a benefit to both the implant patient and the practice. Offering this option makes it that much easier for patients to say “yes” to implants.

Obviously, individuals who simply cannot access funds will reject treatment. Yet many dental practices today often fail to tell a patient that third-party patient financing is available. Why? Some doctors are hesitant to give up a very small portion of the fee as part of the financing arrangement. This is a mistake.

The small portion of the fee that is retained by the financing company is insignificant compared with the return to the practice. This is not a matter of receiving 100% of your fee as opposed to receiving 95% of your fee. This is a matter of receiving 95% of your fee as opposed to receiving none of your fee because the patient will be unable to pay for the implant case.

The great benefit of patient financing is that it frequently allows practices to place implants that it otherwise would not. Financing options make implants more affordable and motivates patients to “yes” to treatment. If your practice offers third-party financing, make sure the patient fully understands the “fine print” so there is no confusion later on about this arrangement.

“If your practice offers third-party financing, make sure the patient fully understands the ‘fine print’ so there is no confusion later on about this arrangement.”

Conclusion
Implants will continue to grow in popularity in the next decade. Educate every patient about the benefits of implants. Make implants the treatment of choice for edentulism. Give your patients financing options for implants, and you’ll be well-positioned to increase implant production exponentially in the years ahead!
Clinical Bite
Study Shows Little Discernable Bone Loss at Implant Sites

Dental implants are 98 percent successful and cause little or no bone loss, according to new research published in the *Journal of Oral Implantology*.

Authors Zeev Ormianer, DMD, and Ady Palty, DMD, reviewed 60 charts of patients who received a total of 267 implants in two private dental practices in Israel and Germany. They found that 98.5 percent of the implants survived, and there was no discernable bone loss in 88 percent of the implant sites. The mean follow-up time was 7.5 years.

The study goal was to determine the level of bone loss over time at the implant sites in the jaw. A key clinical issue was not whether bone loss would occur but how much bone loss should be considered normal and acceptable.

Crestal bone loss was observed in 25 percent of total study subjects and in 12 percent of all surviving implants. Twenty-nine implants exhibited 1 mm of bone loss and three implants lost 2 mm of bone. Low-density maxillary jawbone and more extensive bone remodeling, which were required around implants immediately placed into extraction sockets, were the probable causes of observed bone loss in the study. Implants exhibited excellent long-term outcomes with little or no bone loss.

The study adds to growing body of compelling clinical evidence supporting dental implants as the most successful method for replacing missing or compromised teeth.

The full article can be found in Volume 34, Issue 3 of the *Journal of Oral Implantology* beginning at page 150 or accessed online at www.joionline.org.

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Legal Bite
The Medical History: How Much Is Enough?

By Frank R. Recker, DDS, JD

Editor’s Note: Each issue of the AAID News will include a “Legal Bite” article written by Frank Recker, DDS, JD who is legal counsel for the Academy. Dr. Recker will share his suggestions for dealing with every day experiences that might lead to legal issues for dentists. Dr. Recker can be reached at: 800.224.3529 or by e-mail at recker@ddslaw.com.

Every practicing dentist realizes just how important a patient’s medical history is in order to arrive at a proper diagnosis and safe treatment plan(s) for any patient. This information could affect the decision whether or not to even treat the patient, the choice of anesthesia, choice of materials, the patient’s ability to tolerate certain procedures, and perhaps most importantly, the likelihood of satisfying the patient.

Nonetheless, a practitioner sometimes overlooks something in the medical history that should cause concern, or fails to make further inquiries about conditions or medications noted by the patient. And never assume that a patient has disclosed everything you should know about an existing or past medical condition or medication. A dialog with the patient is an essential ingredient for a complete and accurate history. You can’t expect a patient to tell you that they took Fosamax for the past 10 years if the medical history question only relates to ‘medications currently being taken.’

On many occasions, during the past 20 years defending dentists in a myriad of matters, the patient’s medical history has been at issue. It could relate to a medication listed by the patient that was not explored by the dentist, or a medical condition noted by the patient that should have triggered a medical consultation with a physician, or the failure to ask a relevant question on the history form.

One case related to a patient that did not note serious emotional or mental conditions that would have caused a prudent dental practitioner to proceed very cautiously in treating the patient, if at all. Only when the complicated and expensive treatment began to fail did the dentist realize that a mental/psychological component existed that was leading to the destruction of the dental work. On the other hand, a close review of the medical history revealed no question that specifically asked about such conditions. Suffice it to say that one box on the medical history should specify ‘Mental or emotional conditions treated by counseling and/or medications? If yes, please indicate medications prescribed and name of treating practitioner(s).’ Another question should relate to any current or past ‘substance abuse.’

While some patients may balk at providing such information to a dentist, and may not do so, such failure to disclose would present a defense for the dentist to a malpractice suit or dental board inquiry if such were related to the patient’s dissatisfaction with treatment or the failure of treatment caused by a lack of patient cooperation or psychotropic medications. In fact, many such patients are inherently difficult or impossible to please, which should preclude most dentists from attempting any treatment if they discover the existence of such conditions.

On another topic, patients often list medications or conditions that are not investigated by the dentist. If a patient lists a commonly prescribed heart medication, with or without dosage amounts, a prudent dentist should at least discuss the heart condition in some depth and place the appropriate notations in the patient chart. It does no good, from a defense standpoint, to converse for an hour with a patient but to have little or nothing placed in the patient record about such conditions. Suffice it to say that one box on the medical history should specify ‘Mental or emotional conditions treated by counseling and/or medications? If yes, please indicate medications prescribed and name of treating practitioner(s).’ Another question should relate to any current or past ‘substance abuse.’

... a practitioner sometimes overlooks something in the medical history that should cause concern, or fails to make further inquiries about conditions or medications noted by the patient."
Industry News

CareCredit
CareCredit, North America’s leading patient payment program, is offering a FREE educational audio CD titled “Drop the Shield and Appoint More Patients!” featuring leading experts Dr. Richard Madow and Dr. David Madow.

Each time a patient calls a practice to ask questions or schedule an appointment, it is an opportunity to increase production. Yet so many dental teams put up an imaginary “shield” that prevents them from appointing these potential new patients. In this informative audio program, Dr. Richard Madow and Dr. David Madow share their insights on how practices can eliminate these “shields” with proven communication techniques that can help the team handle this critical conversation.

Using actual recorded telephone calls as examples, the doctors demonstrate the fatal mistakes that many dental teams make on the phone, and what they can do to transform these into opportunities – while minimizing failed appointments.

CareCredit also announces that it has recently secured the exclusive endorsement of two additional state associations, bringing their total support to 46 out of 50 dental associations or their affiliates – a first in the industry. After careful consideration, the Nebraska Dental Association (NDA) and the Oklahoma Dental Association (ODA) selected CareCredit for their members in early 2008.

For more information or to request your complimentary copy of The Madow Brothers’ CD, call CareCredit at 1-800-300-3046 ext. 4519 (if new to CareCredit) or 1-800-859-9975 (if already enrolled) or visit www.carecredit.com.

DentoGen
DentoGen is a new bone graft recently launched by Orthogen. DentoGen is approved for use as a bone graft by itself, in combination with other bone graft materials and as a barrier membrane. DentoGen is medical grade calcium sulfate hemihydrate. It is packaged in a cup in 1 gram quantities and comes with regular set and fast set liquid. It is completely synthetic, biocompatible, biodegradable, osteoconductive, safe, simple to use and non-toxic. Upon implantation in the body, it forms an osseoconductive lattice of biologic apatite that stimulates bone ingrowth into the defect. It is also the only bone graft that possesses hemostatic, angiogenic and barrier membrane properties. Calcium sulfate also has excellent drug delivery characteristics. It is priced very reasonably at $40 per case. Please call 1-877-DentoGen or 973-467-2404 or visit our Web site at www.orthogencorp.com.

You can also e-mail info@orthogencorp.com

Give Kids A Smile
DEXIS® and Henry Schein Dental®, founding corporate sponsors, are proud to assist in boosting the numbers of children who gain care during Give Kids A Smile (GKAS) events. The GKAS program started in 2002 when a handful of dedicated volunteers at a single location in St. Louis treated 400 children. Since its inception, the ADA reports that the program has grown to encompass an impressive total of more than 4.2 million children who have received treatment under the GKAS project. The number of volunteers and sites has grown as well. For 2008, the reported number of children treated is estimated at 475,973, with 46,847 volunteers manning 1884 physical sites.

Henry Schein Dental, along with 50 of its supplier partners, furnishes event sites with $1 million in product donations. DEXIS provides the use of 50 digital X-ray systems and personnel to assist in taking radiographs for Give Kids A Smile events at dental schools. DEXIS has targeted dental schools to encourage the use of these larger facilities with the capability to treat more children.

For more information on the GKAS program, including the latest statistics and information on its background and sponsors, visit www.ada.org. Learn more about DEXIS including the advantages of digital radiography, the company’s latest news, clinical articles, and specifics on the DEXIS sensor and software, at www.dexis.com.

DENTSPLY Tulsa Dental Specialties
DENTSPLY Tulsa Dental Specialties announces the introduction of its EndoActivator System, the newest addition to the established line of patented products and techniques.
### Upcoming key AAID dates

**A U G U S T**
- **4-8**  AAID Associate Fellow Written Exam — Pearson Vue Testing Centers
- **8**  Deadline to apply for AAID December 8-12 Associate Fellow Written Exam

**S E P T E M B E R**
- **12-13**  AAID Central District Meeting — Toronto, Ontario, Canada
- **15**  Early Bird Deadline for AAID 57th Annual Meeting

**O C T O B E R**
- **3**  Deadline to apply for AAID November 2 Associate Fellow Written Exam
- **3-4**  AAID Microsurgery Course — Chicago
- **29-Nov. 2**  AAID 57th Annual Meeting — San Diego, CA

**N O V E M B E R**
- **2**  AAID Associate Fellow Written Exam — San Diego, CA
- **5**  Deadline to apply for AAID December 5 Associate Fellow Written Exam
- **12**  AAID Associate Fellow Written Exam — Loma Linda University

**D E C E M B E R**
- **5**  AAID Associate Fellow Written Exam — Atlanta, GA
- **8-12**  AAID Associate Fellow Written Exam — Pearson Vue Testing Centers
- **12**  AAID Associate Fellow Written Exam — Loma Linda University

### Upcoming District Meetings to be held in 2008

#### The Central District Meeting
- **September 12 – 13, 2008**
- Toronto, Ontario, Canada
- [www.aaidcentraldistrict.com](http://www.aaidcentraldistrict.com)

This year we’re bringing some of what the AAID is known for... to the AAID Central District!! Join our premium speakers as they talk about cutting edge techniques and technologies and stay for the famous Toronto Film Festival.

- **Hilt Tatum, DDS** — “NIRISAB” — Natural Implant Restoration in Stable Alveolar Bone
- **Michael Pikos, DDS** — Digitally Guided Bone Augmentation™ for Esthetic Zone Rehabilitation
- **Hom Lay Wang, DMS MSD** — Sandwich Bone Grafting Technique
- **Pat Allen, DDS PhD** — Soft Tissue Solutions in Implant Therapy

#### Northeast District
- **June 4 - 6, 2009**
- Boston, Massachusetts

Check the AAID Web site at [www.aaid.com](http://www.aaid.com) for more information about both of these outstanding programs.
Bennett
continued from page 1

each summer at Wright State College in Dayton, Ohio, a
second course was added in the winter at Touro University Nevada in Henderson, NV. Both of the courses
offered during 2008 sold out and received rave reviews.

New to the AAID educational programming curriculum is the Advanced Dental Cosmetic Microsurgery Course to be held this fall in Chicago. The course is filling up quickly.

Credentiaing
The Associate Fellow exams are now available in two formats; print which is presented at the Annual Meeting and at the close of each AAID MaxiCourse®, and a new computer-based format to be given at Pearson Vue Testing Centers throughout the US and other countries. As a reminder, the deadline for applying for the printed format is 30 days before scheduled written examination date. However, the application for the computer-based format is four months before the examination dates. The computer-based exam is given over a five-day period so that it is convenient to any schedule. Check the AAID Web site at www.aaid.com for a complete calendar of examination dates, locations and application deadlines. We hope that by expanding accessibility, we can increase participation and expand our credentialed membership.

Public Relations
We recently distributed a news release, “A Bridge to Nowhere” (for a copy, visit the www.aaid.com or see page 26) that recommended implants as the preferred method for replacing missing teeth. The news release contrasted the benefits of implants as opposed to a bridge and also suggested implants as replacements for older bridges. That single release had more than 9 million views in the first week and is being pitched to national publications, radio and television talk shows to continue to reach our target market of consumers who are missing teeth.

Communications
The AAID Web site is being redesigned and revamped and will be debuted within the next month. It will represent AAID in a brighter, fresher way with more public information. Content and ease of finding information you want and need are the two cornerstones of the new Web site.

Districts
The importance of the Districts was evident during the strategic discussion at the AAID Board meeting. We at the AAID Chicago office have been working with the Districts to market their meetings and to assist with registration. But the longer view is that there needs to be a process in place that delineates the roles of the District leadership and the Chicago office staff and details how they can work together for the success of the Districts.

President Jaime Lozada has appointed Dr. Larry Bush to chair a committee that will take a look at the role that the Districts play in AAID, the importance of their meetings, and how the meetings can be run more effectively with the joint efforts of the District leaders and the Chicago staff.

Membership
AAID has been growing at a very healthy pace over the past several years with over 10% average annual increases. However, halfway through this year we have witnessed a slowing of that pace to approximately 3% growth. In order to address that growth slow-down and to provide the best possible membership service, we are dedicating a staff member, Carolina Hernandez, to work exclusively with membership growth, retention and membership services. We hope that by concentrating efforts on membership and membership issues we’ll be better able to address the reasons why people don’t join, or why they join and then leave.

The Implant Leader
AAID has also been working on enhancing our relationships with other dental organizations. In particular, we’ve been working with Academy of General Dentistry and have developed a reciprocal arrangement that will allow AGD members to attend the AAID 2008 Annual Meeting at our member registrations fees. Similarly, AAID members will be able to attend the AGD 2009 Annual Meeting at their member rates.

The Oregon AGD was recently approved to offer an AAID MaxiCourse®, to begin later in 2008. It’s a first step in working with AGD’s constituent societies and in becoming AGD’s implant education source.

Conclusion
As you can see, it’s been only six months...but those have been some pretty busy months. AAID rightly prides itself on being a thriving organization. I am honored to be working with the AAID leadership, volunteers, members and staff to make sure it continues to build on that solid foundation.
The Legal Battlefield: A Historical Review

By Frank Recker, DDS, JD

For over 14 years the AAID has been aggressive in challenging state restrictions on the advertising of its bona fide credentials (Fellow, Associate Fellow; Diplomate, ABOI/ID). Indeed, as a testimonial to the AAID’s commitment, even after deducting almost $700,000 recovered from Florida and California, the AAID has expended over one million dollars in credential recognition legal related expenses. A historical review and update is warranted.

The first effort: Florida
In 1994 the AAID sought and obtained a formal ‘Declaratory Order’ from the Florida Board of Dentistry. That Order concluded that the AAID and ABOI/ID were bona fide organizations that issued credentials in implant dentistry and which could be advertised without restrictions. However, in response to that Order, the Florida Dental Association successfully lobbied the Florida legislature for the enactment of statutory restrictions that prohibited the advertising of our credentials.

The AAID and Dr. Richard Borgner challenged that statute on First Amendment grounds, and in 1998 the US District Court in Tallahassee ruled that the statutory restrictions were unconstitutional (‘Borgner I’). Shortly thereafter, the Florida Dental Association returned to the legislature and again successfully lobbied for the passage of amended restrictions that, while purporting to allow the advertising of the credentials, imposed onerous disclaimers. The

The U.S. Supreme Court responds
The AAID then sought to have this decision reviewed by the U.S. Supreme Court. In December, 2002, the United States Supreme Court denied the AAID’s request for review, but Justices Clarence Thomas and Ruth Ginsburg issued a dissent, stating that they believed the AAID case should be reviewed by the full Court, and that the disclaimers at issue appeared to cross the line of constitutionality. Nonetheless, the decision of the 11th Circuit stands and the mandatory disclaimers imposed by the Florida statute (F.S. 466.0282) have been declared constitutional, under federal law.

A second effort in Florida
Shortly thereafter, in 2003, Dr. Fran DuCoin, a Fellow and Diplomate from Stuart, Florida, filed suit in state court against the Florida Board of Dentistry, alleging that the statute upheld as constitutional by the federal courts violated his rights under the Florida Constitution. Although the trial in his case was finally scheduled to commence in March 2008, it was postponed when the defendants (Florida Board of Dentistry and Department of Health) asked the court to dismiss the suit on technical grounds. In response, Dr. DuCoin recently asked the court to allow him to file an amended complaint, adding two consumers and two additional dentists as plaintiffs.

In addition to his AAID/ABOI/ID credentials, Dr. DuCoin is asserting his right to advertise his AGD credentials and another plaintiff/Florida dentist wishes to assert his right to advertise his credentials in cosmetic dentistry earned from the AACD. The two consumers who seek to be plaintiffs have stated that they wish to join the suit in that they have a right to learn about bona fide credentials earned by dentists in order to assist them in making an informed choice about dental services. They also assert that such infor-
mation about credentials should not be impugned by
disclaimers which state
that the credentials are not
‘bona fide.’ This case will
likely go to trial in late
2008.

AAID opens a “western
front”
On the ‘western front,’ in
1998, the AAID and Dr.
Perry Bingham launched a
judicial challenge of a
California Dental Board
enforcement policy that pro-
hibited the advertisement of
AAID and ABOI/ID creden-
tials. In 2000, the U.S.
District Court in
Sacramento ruled that the
restriction was unconstitu-
tional. Then, in 2002, in an
attempt to circumvent the
Court decision, the
California Dental
Association successfully lob-
bbed for the passage of a
statutory provision that pro-
hibited the advertisement of
credentials unless they were
based upon completion of a
full time, postgraduate edu-
cational program.
The AAID and Dr.
Michael Potts challenged
this 2002 statute in the
same U.S. District Court,
and in 2004 that Court
ruled that this statute was
also unconstitutional. That
decision was appealed by
the State of California to
the 9th Circuit Court of
Appeals based in San
Francisco and briefs sup-
porting the AAID were filed
by the AGD and AACD. In
February 2007 the
Appellate Court reversed
the lower Court decision
and concluded that the
lower Court should have
held a trial to decide
whether or not the con-
sumer surveys conducted
by the California Board of
Dentistry (and partially
paid by the CDA/ADA) had
any merit. Immediately
thereafter, the California
Board of Dentistry and the
Office of the California
Attorney General began
negotiations with the AAID
relative to an amended
statute that would be
acceptable to both sides.
Potential statutory lan-
guage has been agreed
upon by the parties but no
subsequent legislation has
been introduced as of this
date. If the agreed upon
legislation is not introduced
and passed, this case will
likely return to the District
Court for a trial in 2009.

What’s next?
Clearly, the AAID has been
the leader on the legal front
for many years. It has
expended enormous
resources in its efforts to
prohibit any restrictions on
the advertising of AAID
and ABOI/ID credentials in
implant dentistry. Likewise,
our efforts support the
public’s ability to have
‘untainted’ access to our
credentials.

This issue needs a final
resolution by the United
States Supreme Court.
Fortunately, two of those
Justices have already indi-
cated where they stand on
the subject!

New Diplomates of the ABOI/ID

The ABOI/ID is pleased to
announce that nine dentists
became Diplomates of the
American Board of Oral
Implantology/Implant
Dentistry on April 28, 2008,
after passing both Parts I
and II of the ABOI/ID
Certification examination.

William Robert Dapper,
DDS, San Clemente, CA
Bernee C. Dunson, DDS,
Atlanta, GA
Douglas G. Hammond,
DMD, MSD, Huntsville,
AL
Michael Katzap, DDS,
Rego Park, NY
Andrew Wayne Kelly,
DDS, Clemmons, NC
Ioannis (Yianni) Magnis,
DDS, Bakersfield, CA
Nicholas J. Shubin, DDS,
San Juan Capistrano,
CA
Pankaj P. Singh, DDS,
Brookville, NY
Luis Alejandro Torres,
DMD, Vista Circle, FL

To sit for the examina-
tions, these dentists were
required to practice implant
dentistry for at least five
years, to provide implant
services for numerous
patients, and to otherwise
prove their implant
expertise. To earn the title
of Diplomate, they were
obliged to pass Part I,
which consisted of 250
written test questions; and
Part II, which consisted of a
defense of three individual-
ized case reports and of five
standardized cases. For
each station of the Part II
examination, candidates
were evaluated by two
examiners, for a total of
twelve examiners in all.
The examination process
measured the in-depth
knowledge, proficient skills,
and abilities required for
practioners to provide
comprehensive, safe, and
effective oral implant care
for the public.
The ABOI/ID was
founded in 1969 and con-
ducts examinations to
determine the qualifica-
tions and competence of
dentists who voluntarily
apply to the Board for cer-
tification. The Board is
sponsored by the American
Academy of Implant
Dentistry. Dentists inter-
ested in becoming
Diplomates may visit the
ABOI/ID Web site at
www.aboi.org to obtain
more information.

Congratulations to the
new Diplomates who have
now joined the nation’s
elite group of implant
dentists.
Tell us a little bit about your background and your history with Nobel Biocare.
I graduated from dental school in 1979, and practiced general dentistry, first in the US Public Health Service for two years, and then in private practice in Florida for ten years. I joined Nobel Biocare almost 17 years ago, and have worked in several different capacities. Currently, I’m the Vice President of Professional Relations, with responsibility for educational programs in North America.

How would you say that Nobel Biocare is different from other companies in the implant industry?
First, we are the only major company in the industry that is purely a dental company. That means that our sole commitment is to develop products and techniques that will make practicing dentists more successful. Secondly, we have integrated our Procera cad/cam restorative technology with our implant systems to provide a root-to-tooth solution for your patients.

What is Nobel Biocare’s strategy for implant training?
For the past 25 years, most implant training has been sponsored or conducted by implant manufacturers. Nobel Biocare has invested millions of dollars in this effort, and we have developed a global network of educational facilities, where we have trained many thousands of dentists. But now it’s time to move to the next level.

How so?
Training needs to move into the dental schools. While implantology has been taught to post-graduate residents for many years, for the most part there has been little implant training for predoctoral students. Nobel Biocare is taking a leading role to change that.

How can you change what is taught in dental schools?
The schools are already committed to adding implant treatment to the clinical curriculum. Unfortunately, there are often financial barriers to making this change. We support a large number of schools by providing instruments and components — and in some cases cash payments — to enable this curriculum change.

And what are the results of your efforts?
We have had tremendous success in helping dental schools to reach their educational goals. I’m reluctant to start listing schools because I’m sure to omit some strong programs, but I can say with great conviction that in the past few years, thousands of dental school graduates have treatment planned and restored dental implants in programs that are supported by Nobel Biocare.

Can you tell us about one school, as an example, perhaps?
Sure. Loma Linda University, where AAID president Jaime Lozada is Professor and Director of Implant Dentistry, has an outstanding program where predoctoral students receive thorough didactic and simulation training in implant dentistry, and then have the opportunity to treat patients clinically. They also have a unique program where students are directly involved in the creation of cad/cam ceramic crowns.

How does this program benefit AAID members?
Several ways. If your members have referral-based practices, it provides a whole group of new practitioners who are comfortable planning treatment and restoring implants. For the organization itself, it provides a ready source of committed new members. And, of course, for the patients, it provides a higher likelihood that they will have access to the latest implant reconstructive technology.

This is perhaps a bit off our topic, but it’s an issue of concern to some of our members: What exactly is the relationship between Nobel Biocare and Clear Choice dental implant centers?
David, I’m really glad that you asked because there has been a great deal of
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Courses & Instruction For EVERY Level of Experience

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The Science, Research & Application to Clinical Success

- **Implant Prosthodontics - “The Basics”**  
  Fundamentals of Fixed Implant Prosthodontics
- **Implant Prosthodontics - “Advanced”**  
  Advanced & Removable Prosthodontics

- **Implant Surgery - “The Basics”**  
  Fundamentals of Surgery, Soft Tissue Management, Implant Placement, & Simple Bone Grafting
- **Implant Surgery - “Advanced”**  
  Advanced Bone Grafting, Enhanced Surgical Concepts, and Complications Management

- **Applied Head & Neck Anatomy**  
  Lectures & Labs with Cadaver Dissection
- **Implant Practice Management**  
  Learn how to take full advantage of your clinical skills to gain the highest return on your investment.

**Clinical & Portrait Digital Photography**  
Enhance your case presentation success and clinical records with high quality ‘Before & After’ photographs

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**Courses**

There is NO implant educational facility anywhere offering this complete range of specialized implant training. Our modular program allows anyone with any time constraints to complete the entire Master’s Program according to their schedule. See our website for complete description of specific courses. We challenge you to register for the **Orthopaedic Engineering & Treatment Planning Course** regardless of your implant experience. (See our offer below)

**Location**

Vancouver is Canada’s Pacific gem: a combination of spectacular natural setting and all the excitement of a culturally diverse world class city. It offers Canada’s best climate: a benign mix of mild winters and warm summers moderated by Pacific Ocean currents. Pre and post conference destinations - from cruising through island archipelagos to deep powder skiing, and from wine country tours to authentic wilderness experiences, it’s all readily available from your Vancouver base.

**Our Guarantee To You!**

In order to give doctors an understanding of what implant dentistry is capable of achieving, as well as how to evaluate the quality of the surgical and prosthetic results for their patients, we offer a 3-day **Orthopaedic Engineering & Treatment Planning Course** *(Your office team is invited to attend)*  
If you (the doctor) are not 100% satisfied that you received excellent value - we’ll refund 100% of your money! You have absolutely everything to gain, with zero risk.

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For more information contact Phyllis  
1-800-420-1521 or 604-322-3045 (fax)  
info@pidentistry.com

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Pacific Implant Institute  
Dr. Ron Zokol, Director  
555 West 12th Avenue, 470, West Tower  
Vancouver, BC Canada V5Z 3X7
Summary of actions taken by Board of Trustees
June 7, 2008
The Board of Trustees met on July 7, 2008 in San Diego for one of its regularly scheduled meetings. Rather than publish the minutes of the meeting, we are providing the following summary of the key actions taken by the Board of Trustees.

- Established the following policy: Any organization that requests the use of the AAID logo to promote its implant education will be required to include an AAID representative in the implant education planning process.
- Authorized an addition to the budget of $20,000 to hire an education and credentialing assistant for the reminder of fiscal year 2008.
- Accepted the 2007 audit as presented and reappoint the auditing firm of Ruzicka and Associates for the 2008 audit.
- Approved the funding request from the 2008 Annual Meeting Planning Committee for $65,000 to cover the cost of an awards luncheon and an exhibit hall box lunch.
- Authorized the transfer the $13,000 in Restricted Study Club Funds to the AAID Research Foundation Endowment Fund.
- Established a committee to determine the feasibility of District meetings, to establish guidelines in support of the District meetings, and to report back to the Board of Trustees at the October meeting.
- Accepted the recommendations of the A&C Board and elected the Fellows and Associate Fellows who met the requirements for 2008.
- Approved the letter as proposed by the Education Committee expressing AAID’s concern about providing continuing education credits for commercial education.
- Awarded Life Membership status to Dr. Robert Benzel, Dr. Hershel Bernstein, Dr. T.C. Shen, and Dr. Gary Witham.
- Removed from membership, the Credentialed Members whose dues were unpaid as of July 1, 2008.
- Accepted the bylaw amendment to remove the dues amounts for Fellow and Associate Fellow membership classifications.
- Reduced the registration fee for retired credentialed members to equal the existing fee for life credentialed members.
- Decided to hold the spring 2009 Board of Trustees’ meeting on Saturday, May 16, in conjunction with the International Meeting in Acapulco.

Dr. Philip J. Boyne passes away

Philip J. Boyne, DMD, MS, DSc (h.c.), the 2006 recipient of the Isaiah Lew Research Award from the AAID Research Foundation, passed away in June. He obtained his liberal arts education and B.A. degree from Colby College in Waterville, Maine. He entered the U.S. Army in 1943 and was a uniformed student at Tufts University, graduating from the Tufts School of Dental Medicine in January 1947. Dr. Boyne received an M.S. degree from Georgetown University and a D.Sc.(h.c.) from the University of Medicine and Dentistry of New Jersey.

Following service as a house officer at the Bethesda Naval Hospital, he undertook studies at the Navy Research Institute, where he was director of...
dental and craniofacial research. After serving in Vietnam on an aircraft carrier in 1963 and 1964, he returned to Da Nang in early 1968 to begin a study of maxillofacial casualties. Following retirement from the Navy, he was on the faculty at UCLA where he was assistant dean of the School of Dentistry. In 1978, he joined the faculty at Loma Linda University as director of residency training in OMS. His LLU tenure has involved being chief of the OMS service at three hospitals.

During his career, he has been active in the study of bone regeneration, bone grafting, osseous correction of cleft palates and craniofacial anomalies, and the osseous repair of facial bones. More recently, his work has dealt with the clinical application of bone inductor cytokines. Dr. Boyne authored 200 publications in refereed journals and book chapters, and wrote three textbooks on maxillofacial surgery. For his pioneering of a method of cleft palate bone grafting now adopted internationally, he was the recipient of the highest honor given by the American Cleft Palate-Craniofacial Association, the “Honors of the Association,” in 1994. In 1988 he received the Distinguished Alumnus Award from Colby College, and the Distinguished Faculty Award from the Loma Linda University School of Dentistry in 1998.

Dr. Boyne was an examiner on the American Board of Oral and Maxillofacial Surgery for 14 years (1969–1983) and served as president of that board. He also served as president of the American College of Oral and Maxillofacial Surgeons, and president of the American Institute of Oral Biology.

**Education Committee**

**AAID Dental Student Award:**
This year, 50 dental schools in the United States and Canada participated in the AAID’s award program that recognizes undergraduate students. See Academy News p. 24
Primary closure is often hard to obtain and maintain when grafting extraction sites. Releasing incisions are often required, cutting off the blood supply to the flap, disrupting the soft tissue architecture and compromising the keratinized mucosa. Additionally, most membranes are not designed to be left exposed, resulting in premature resorption, infection and failure of grafting procedures when exposed. Until Now.

**Cytoplast® TXT-200 Singles**

- Micro-porosity of <0.3 μm isolates socket from soft tissue cells AND bacteria.
- Textured surface stabilizes the membrane and the flap.
- TXT-200 Singles membranes are actually DESIGNED to be left exposed.
- Following removal at 3-4 weeks, soft tissue completely re-epithelializes across socket margins.

**Offer:** Mention Offer Code AAID808 through August 29th and receive $30 OFF each box of TXT-200 Singles. Regularly $350 / box of 10

**Bonus:** FREE 2nd Day Shipping to first 25 AAID News Readers who order.

Call Toll-Free 1-888-796-1923 to Order Now
“I always know, in advance, the results of my bone grafting when I use Cytoplast® TXT-200 as a membrane. Why bother with other membranes?”  Mark Cohen, DDS / Periodontist

“I had given up on e-PTFE products because of post-operative complications. However, the Cytoplast® textured d-PTFE has eliminated those problems. I love its handling, ease of insertion and removal. I find the Cytoplast® membranes and sutures to be the most cost-effective products available without sacrificing quality of clinical results.”  Jamison Scott, DMD / Periodontist

“The most successful membrane I have used in my 21 year career. No failures to date!”  Russell M. Linman, DDS, MD / Oral & Maxillofacial Surgeon

“I have used many products over the last 18 years for bone grafting alveolar defects. Nothing comes close to giving me predictable, excellent results every time like Cytoplast.”  John M. Sisto, DDS / Oral & Maxillofacial Surgeon

“I love TXT-200! I get consistent results and good bone for ridge / bone preservation to prevent collapse or get ready for implants.”  Robert Tandy, DDS, MS / Periodontist

“Your membranes have definitely increased the predictability of my site preservation procedures. Thanks!”  Steven Daniel, DDS / Periodontist

“I graft over 300 extraction sites per year and have found the Cytoplast® material to be easy to use and cost effective in retaining socket grafting materials during initial healing.”  William Hendrix, DDS / Oral & Maxillofacial Surgeon

“Using Cytoplast® TXT-200 has made my socket preservation technique incredibly easy with remarkable results at a very affordable price.”  Clyde Waggoner, DMD / Oral & Maxillofacial Surgeon

“The only membrane that adapts to all socket preservation procedures without the need for primary closure.”  Luis W. Kim, DDS / Periodontist

“I had reservations about the product until I tried it. We were pleasantly surprised at the P.O. visit to see how effective the Cytoplast® membrane was. We've used it exclusively since that time.”  Norman K. Coleman, DDS / Oral & Maxillofacial Surgeon

“I have used many different GTR materials over the years, and we are constantly evaluating and developing new products. In my practice, the predictability of the textured Cytoplast® membrane – even in challenging clinical situations – continues to impress me.”  Barry Bartee, DDS, MD / Developer of Cytoplast® and TefGen® barrier membranes

“This is a terrific product for when you only need a single tooth ridge preservation. It is easy to place and remove and the cost is reasonable.”  Cheryl Cushman, DDS / Periodontist

“I find the Cytoplast® product line of non-resorbable membranes to be very easy to handle, affordable and most importantly very predictable in their use. I use the GBR-200 / TXT-200 most often for socket grafting and where the potential for exposure is high.”  Joel Rosenlicht, DMD / Oral & Maxillofacial Surgeon

“Cytoplast® is easy to place, painless and easy to remove and increases fixed gingival thickness over the ridge. Primary closure is not needed. Almost 0% complication rate when used properly.”  Frank L. Pavel, DMD / Oral & Maxillofacial Surgeon

“I love it. Easy to use. No infections when membrane exposed.”  Richard Krauss, DMD / Periodontist

“Excellent product. One of the most predictable/reliable products I use.”  Michael Glogauer, DDS, PhD / Periodontist

“Only membrane which can be left exposed and still completely regenerate socket.”  Mark Canter, DDS / Periodontist

“I have used all types of barrier membranes, however, none has enhanced my practice and provided predictable bone regeneration as the Cytoplast® membrane has. The dense PTFE (d-ptfe) of the Cytoplast® membrane does not require primary closure. Thus, for small as well as large grafting procedures this membrane is ideal. This membrane provides an environment that will remain infection-free and allow for excellent bone regeneration. What a great product for the patient and surgeon!”  H. Dexter Barber, DDS / Oral & Maxillofacial Surgeon
A & C Board Holds 2008 Oral/Case Examinations:
The Admissions and Credentials Board met in Chicago April 24 – 27 for its annual business meeting and to consider applicants for Associate Fellow and Fellow membership. Of the 72 applications considered, the A & C Board recommended and the Board of Trustees elected 50 of the applicants to Associate Fellowship and 12 to Fellowship. These 62 members will be recognized at the Annual Meeting, 53 of who will be inducted as new credentialed members.

Review of Examination Materials, Policies and Procedures:
The Board reviewed the application materials for Associate Fellowship and Fellowship and updated them as needed. The updated materials are posted on the AAID Web site in the Education/Credentials section; they are also available from the Headquarters Office upon request.

The Board also revised its policy about the additional time that candidates can request when taking the written part of the Associate Fellowship examination. Those whose primary language is not English and English-speaking candidates who have a previously diagnosed and documented disability such as dyslexia or attention deficit disorder may now request 30 extra minutes at the time of application.

Effective January 1, 2009, the application fee for Associate Fellowship and Fellowship will increase to $950 and the fee to retake the written part of the Associate Fellow examination will increase to $300. The fees to retake the oral/case part of the Associate Fellow and Fellow examinations remain unchanged at $300.

Oral/Case Examination Schedule Announced:
The Board has set the following schedule for the next three annual oral/case examinations, which are held in Chicago.
April 30 – May 3, 2009
April 22 – 25, 2010
April 28 – May 1, 2011 (tentative)

A & C Board Presentations at the 2008 Annual Meeting:
The Board has scheduled three times in the Exhibit Hall when members can talk with some of this year’s new Associate Fellows and view their case reports. In addition to seeing how these new credentialed members interpreted the guidelines for case report preparation, these informal sessions provide an excellent opportunity to talk with them about their examination experience. Board members and staff will also be available to answer questions.

Representatives of the A & C Board will also explain the examination requirements and process at the Lunch and Learn session, Friday, October 31, 12:00 noon – 1:15 p.m.

Begin the Process to Become a Credentialed Member:
General members are urged to take the first step toward Associate Fellowship by applying for the written part of the two-part membership examination. The print format of the written examination will be given three more times this year at the following times and locations:
November 2
San Diego, California
December 6
Atlanta, Georgia
December 12
Loma Linda, California

Applications and fees for these examinations are due in the Headquarters Office at least 30 days before each of these examinations. The week of December 8 – 12, the written examination will also be available in the computer-based format at Pearson Vue Testing Centers, which are located throughout the world. Applications and fees for this examination period are due in the Headquarters Office by August 8, 2008.

For the application and all available materials related to the examination process, visit the Education/Credentials/Associate Fellow section of the AAID Web site – www.aaid.com – or contact Joyce Sigmon in the Headquarters Office.

Stephen Johns, DDS (left) and Arthur Molzan, DDS (right) interview a candidate during one part of the oral examination for Associate Fellowship.
**EndoActivator System**

The EndoActivator System, designed by Drs. Clifford J. Ruddle, Robert H. Sharp and Pierre Machtou, is designed to safely and vigorously agitate irrigation solutions during endodontic treatment for a cost of less than $2.00 per case. Evidence-based endodontics has shown that cavitation and acoustic streaming significantly improves debridement and the disruption of the smear layer and biofilm. Activated fluids promote deep cleaning and disinfection into lateral canals, fins, webs and anastomoses.

All EndoActivator products are available immediately from DENTSPLY Tulsa Dental Specialties. For more information or to place an order, call 1-800-662-1202 or visit www.tulsadentalspecialties.com.

**Interview continued from page 14**

I’ve heard a lot about the All-On-Four technique. How does that fit into your educational strategy?

All-On-Four is a technique for providing a full arch fixed restoration on four implants. This technique, clinically well documented, is part of our group of Graftless Solutions for patients. Graftless solutions? What do you have against bone-grafting?

Absolutely nothing, when it is the best solution for the patient. But techniques like this offer the doctor the opportunity to take maximum advantage of the patient’s available bone to provide a restoration with lower morbidity for the patient. In fact, NobelGuide is the ultimate extension of that philosophy.

NobelGuide – you mean the computer guided surgical planning using the patients CT?

Exactly. By planning the case using a 3D image of the patient’s anatomy, the clinician is in a position to take maximum benefit from the remaining bone.

How does Nobel Biocare view the AAID and our membership?

We view the AAID as a tremendous asset to implant dentistry. No organization has done more to provide training in this field and to develop a meaningful credentialing system. And, in my opinion, this organization has been extremely supportive to general dentists who want to advance their level of training and clinical skill. For this reason, Nobel Biocare has been a major sponsor of AAID meetings in recent years, and has supported the presentation of live surgical procedures at some of the recent meetings. And, of course, we intend to continue our partnership with this fine organization.

BioHorizons

The 2008 BioHorizons Global Symposium drew more than 1,000 attendees from 42 countries to San Diego, California for a 3-day scientific program on today’s most important implant and tissue regeneration topics. Each clinician-moderated session featured a panel discussion of audience-submitted questions that kept participants fully engaged in the program.

Members of the scientific panel and moderators included Drs. Carl E. Misch, Michael A. Pikos, Maurice Salama and Michael Reddy. Featured presenters included Drs. Edward P. Allen, Stuart Froum, Michael McCracken, Craig Misch, Myron Nevins, and Marius Steigmann.

BioHorizons and Dental Technologies, Inc. (DTI) also announced a new Restoration-to-Implant Lifetime Warranty covering implants, abutments and restorations when fabricated by a participating DTI Laboratory. This unique offer, made possible by the recent merger of BioHorizons and DTI, brings incredible value and practice building potential to the entire implant team.

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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. We have changed the way we are presenting the names of new members. 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
David S. Falconer, DDS
Birmingham
Brandon D. Chambless, DMD
Madison
David Malcolm Fry, DMD
Montgomery

Arizona
Eugene I. Kim, DMD
Phoenix

California
Kelly Eunjung Hong, DDS
Apple Valley
Manuel A. DeLeon, DDS
Arlete

Robert A. Cerveny, DDS
Encino
Naik Premal, BDS
Fontana
Cho Pahn Song, DDS
Hacienda Heights
Daniel J. Chung, DDS
Irvine
Andrew Dinh, DMD
Irvine

Lars Bjorn Jonsson, DDS
Laguna Hills
Thomas MacKinnon, DDS
Laguna Hills
Jaime I. Hernandez, DDS
Los Angeles
Richard My Q. Ta, DDS
Milpitas
Essam Ibrahim, DDS
Moreno Valley

Majdi Oubeid, DDS
Moreno Valley
Mahmoud M. Salem, DDS
Moreno Valley
H. Bronson Bassir, DDS
Newport Beach
Huy Cao Nguyen, DDS
Panorama City
Vixiane Sengsouvanh, DDS
Rancho Murieta

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Rosemead
Tae Chung, DDS
San Diego
Nghia M. Pham, DDS
San Diego
Vinh Tran, DDS
San Diego
Samuel S. Wong, DDS
San Francisco
Vin Le, DDS
San Marcos
Laurent Vien, DDS
Stockton
Gladys K. Gesicho, BDS
Turlock
Gary L. Thiele, DDS
Turlock
Samira Houshiar, DDS
Tustin
Ping Mary He, DDS
Union City
Kelekalani Scheel, DDS
Union City
Arshjot Ahuja
Walnut
Huy Huu Do, DDS
Westminster
COLORADO
Jill Sumner, DMD
Aurora
Ryan Saunders, DDS
Boulder
Michael Freimuth, DDS
Wheatridge
Todd Herring, DDS
Windsor
CONNECTICUT
Camillo Fontana, DMD
Fairfield
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Michael J. Gioia, Jr., DMD
Boca Raton
Aaron Leavitt, DMD
Bradenton
Sangiv I. Patel, DDS
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Dashiell Carr Hodson, DDS
Miami
Robert Alexander Busto, DDS
Miami
North Lauderdale
Nguyen V. Nguyen, DDS
Orlando
GEORGIA
T. Lance Collier, DMD
Augusta
B.J. Lee, DDS
Duluth
Myriam C. Miras, DMD
Duluth
Chad D. Collins, DMD
Eatonton
Azita Agharahimi
Mansouri, DMD
Lawrenceville
Michael M. Kiyani, DMD
Marietta
Chris Huynh, DDS
McDonough
Maher Naji, DDS
Peachtree City
Renee B. Parrish, DMD
Thomasville
Helen N. Sempira, DDS
Tucker
Ron L. Shiver, DMD
Valdosta
ILLINOIS
Raneem Sheblak, DDS
Burbank
Rick Leppo, DMD
East Moline
Gabriella Mara Paolucci, DDS
Joliet
INDIANA
Malcolm C. George, DDS
Noblesville
IOWA
Lindsay Compton, DDS
Jefferson
KENTUCKY
Diane Jenkins
Lexington
LOUISIANA
Nelson P. Daly, DDS
Baton Rouge
Michael Marcello, DDS
Mathews
Clay C. Couvillon, DDS
Saint Francisville
MASSACHUSETTS
Wasseem Al Attar, DDS
Bedford
OREGON
Angela L. Blizzard, DDS
Beaverton
Peter Raven, DDS
Springfield
Bao Pham, DMD
Tigard
MINNESOTA
Peter J. McDonald, DDS
East Grand Forks
Stella Kitzenberg, DDS,DMD,MS
Edina
NEVADA
Babak Ershaghi, DDS
Las Vegas
David M. Reeves, DDS
Reno
NEW HAMPSHIRE
Sean P. Drower, DMD
Keene
NEW JERSEY
Joseph Thomas Buzzanco, DMD
Red Bank
Timothy Pfister, DDS
Utica
NEW YORK
Michael W. Davis, DMD
Andrews
David A. Wagner, DMD
Columbus
Timothy Spilliards, DMD
Sylvania
Anna Elizabeth Gladwell, DDS
Wake Forest
OHIO
Edward H. Rugh, DDS,MS
Beavercreek
James R. Welland, DDS
Cincinnati
Bradley Nyle Holman, DMD
Cleveland Heights
David J. Striebel, DDS
Dayton
OKLAHOMA
Parnam Mohanna, DDS
Tulsa
Michael Steffen, DMD
Tulsa
PENDSNSLYVANIA
Michael J. Spence, DMD
Harrisburg
SOUTH CAROLINA
Arian Ray, DDS
Sumter
Thorpe A. Jacob, DMD
Woodruff
TENNESSEE
Brian Jason Wilkinson, DDS
Chattanooga
Scott J. Self, DDS
Dyersburg
Manish Rana, DDS
Monterey
Henry L. Young, DDS
Old Hickory
Todd E. Ealy, DDS
Ooltewah
TEXAS
Thuan Nguyen, DMD
Arlington
William Laurence Oliver, DDS
Colleyville
Chang Yeal Kim, DDS
Houston
Firoz I. Lalani, DMD,MS
Houston
Joey deGraffenried, DDS
Plano
Thomas Novakk, DDS
Weatherford
VIRGINIA
Joel S. Smith, DDS
Lexington
James L. Stanley, DDS
Lynchburg
WASHINGTON
Julian Infante, DDS
Bellevue
L. Blaine Kennington, DDS
Longview
WISCONSIN
Richard J. Salm, DDS
Green Bay
Thomas W. Katz, DDS
Waupun
CANADA
ALBERTA
Bhishaj J. Sadasivaiah, DDS
Calgary
ONTARIO
Charles Weingarten, DDS
Aurora
Geeta V. Gautham, DDS
Brampton
Russelh Grower, DDS
Hamilton
Chander Bhatti, DDS
Toronto
Arlene Caringal, DMD
Toronto
SIMON G.Y. Lin, DDS
Toronto
INDIA
MAHARASHTRA
Nitin Dattatray Barve, BDS
Pune
TAMIL NADU
Sanju Thomas Abraham, DDS
Coimbatore
JAPAN
Tomohiro Shigematsu, DDS
Osaka
SAUDI ARABIA
Ali Saad T. Al-Ghamdi, DDS
Jeddah
SOUTH KOREA
Joo Ho Han, DDS
Seoul
Seung Yun Yi
Seoul
SPAN
Pedro M. Guitián Lema, MD,PhD,DDS
Vigo
UNITED KINGDOM
Bettie Lenore Bronkhorst
Plymouth
Stephen Larcombe, BDS
Winchester
dental students for their interest in implant dentistry, both academically and clinically. Three postgraduate implant dentistry programs also presented a similar AAID award.

Each dental school and postgraduate implant dentistry program selects its award recipient, using the school’s established procedures for such student awards.

The Academy presented each award recipient with a Certificate of Recognition, a year’s free membership in the AAID and a complimentary registration at the 2008 AAID Annual Meeting.

“We are delighted with the increasing number of dental schools that participate in the recognition of outstanding students in the discipline of implant dentistry. They represent the future of implant dentistry and we welcome them as members of the AAID,” said Jaime Lozada, DDS, MS, president.

This was the fourth year that the AAID offered this award to all of the dental schools in the US and Canada. The number of participating dental schools has increased each year from 36 in 2005, 44 in 2006, 46 in 2007 to 50 in 2008.

New MaxiCourse® Approved:
In May, the Education Committee approved the Oregon Academy of General Dentistry as a sponsor of an AAID MaxiCourse®. The classes will be held in Portland, beginning in late September. In addition to the didactic classes, the program includes an optional 10-day clinical training module at the Oregon Health and Science University. S. Shane Samy, DMD, is the director of the program.

Recognition as a Provider of Continuing Dental Education:
Both the American Dental Association’s CERP and the Academy of General Dentistry’s PACE programs have renewed the Academy’s recognition as a provider of continuing dental education for a four-year period that ends in 2012.

Microsurgery Course Scheduled in Chicago:
Advanced Dental Cosmetic Microsurgery, the Academy’s newest course, will be presented October 3-4 at the American Dental Association Building in Chicago.

Yu-Chan Pan, MD, the course director, has had extensive experience in teaching microsurgery courses for physicians and dentists, both nationally and internationally. Serge Dibart, DMD, and Ming Fong-Su, DMD, both of whom are faculty members in the Department of Periodontology, Boston University School of Dental Medicine, will assist Dr. Pan during the laboratory sessions.

The course brochure is posted on the AAID Web site. Course tuition is $695 for members and $995 for non-members. The registration deadline is September 5.

Microsurgery Instruments, Inc. is the course sponsor.

Legal Bite
continued from page 8

the discussion! A plaintiff’s attorney, or dental board, will argue that if it isn’t written down, ‘it didn’t happen.’ And, if there is any question or doubt in a dental practitioner’s mind, obtain a medical consultation from the treating physician before commencing any treatment.

Remember, it’s the patient’s obligation to truthfully answer the medical history questionnaire, but it’s the dentist’s burden to understand and investigate any positive responses, and to evaluate and assess this information when contemplating whether or not to treat, or formulating treatment plans. In short, when it comes to the patient’s medical history, you can’t have too much, but can easily have too little.

Check out www.aaid.com to get the most out of your AAID membership.
Imitations make for good entertainment, but when it comes to the long-term stability of a dental implant, you want the king. Four years ago, OCO Biomedical led market innovation with the original Dual Stabilization® Dental Implant System that incorporates an auger/bull-nose tip that actually locks into and condenses bone around the apex while mini/Cortic-O Threads™ lock into cortical bone and stabilize the top of the implant. This dual locking system eliminates any fulcrum point for movement and gives you a solid, stable platform to work from. The result: rockin’ solid implants with off-the-charts, market-proven performance!

To learn more about the Dual Stabilization® Dental Implant System or how our one-day training program can improve your profitability, call 800.228.0477.

One-day training program dates: June 27 • July 11 • July 18 • August 8 • August 15 • September 12
Aging dental bridges are a maintenance headache and a recipe for oral-health disaster. They are difficult to floss, often decay, and require replacement with longer bridges. According to the American Academy of Implant Dentistry (AAID), these bridges to nowhere should be replaced with permanent dental implants.

“Many of us have had the same bridges in our mouths for twenty years or more. They were put in at a time when bridgework was considered to be the norm for replacing missing or compromised teeth,” said Olivia Palmer, DMD of Charleston, SC, an associate fellow of AAID and diplomate of the American Board of Oral Implantology.

“An old bridge is basically worthless for preserving good dental health. In essence, it’s a bridge to nowhere,” Palmer said. “So why keep a bridge to nowhere? For most patients, implants are a much better treatment alternative because they preserve the bone of the jaw, can be flossed easily, do not decay, and function just like natural teeth. Also, to get implants you don’t have to sacrifice healthy teeth, which is required with bridgework,” she added.

According to AAID President Jaime Lozada, DDS, director, graduate program, implant dentistry, Loma Linda University, in the last decade prosthodontic treatment planning has changed dramatically because of the acceptance of dental implants as a viable long-term option for replacing missing teeth.

“Why consider higher-risk procedures when dental implants are more predictable and a better alternative,” he said.

Palmer explained that bridges generally fail after 5-10 years as patients have trouble flossing them. “Because these bridges link missing tooth spaces to adjacent teeth, many patients find it very difficult to floss the bridge. Therefore, root surfaces below and around bridgework often decay, if not kept meticulously clean by flossing. It is impossible to repair this marginal decay, so the entire bridge must be replaced,” she explained.

Palmer added that, as a result, teeth supporting the old bridge often are lost, requiring insertion of longer bridges that further compromise dentition.

Today highly precise computer guided dental implant surgery has made the procedure faster, highly predictable, long-lasting and 97 percent successful, which is far superior to outcomes with bridges. Palmer, therefore, advises anyone with one or more missing teeth who might consider having a first bridge inserted or replacing an old one to weigh the benefits of implants before getting treatment.

“Many Baby Boomers are coping with dental problems associated with advancing age, and for most that means replacing aging bridgework,” said Palmer. “With an estimated two of three Americans having at least one missing tooth, implants are becoming the preferred tooth-replacement option. Implant surgery is one of the safest, most precise and predictable procedures in dentistry,” she said.

AAID can help consumers find a local credentialed implant dentist at www.aaid.com. AAID is based in Chicago and has more than 3,500 members. It is the oldest organization dedicated to maintaining the highest standards of implant dentistry by supporting research and education to advance comprehensive implant knowledge.
Continuing Education Bite

AAID MaxiCourses®
22nd Annual MCG/AAID MaxiCourse®
“Comprehensive Training Program in Implant Dentistry”
Monthly March through December
Contact: Lynn Thigpen
Phone: 800-221-6437 or 706-721-3967
E-mail: lthigpen@mcg.edu
Web site: www.mcg.edu/ce

20th Annual Implant MaxiCourse®-NYC
Dr. A. Norman Cranin
September 2008 – June 2009
1 weekend per month
Contact: Ethel Bruck
Phone: 718-983-1157
E-mail: ebaebi@aol.com
Web site: www.dentalimplantcourse.com

OAGD/AAID MaxiCourse® 2008
Oregon Academy of General Dentistry
OHSU School of Dentistry
September 2008 – June 2009
1 weekend per month
Contact: Bernie
Phone: 503-228-6266
E-mail: oagd@teleport.com

Loma Linda University/AAID MaxiCourse®
Loma Linda California
Monthly March through December
1 weekend per month
Continuing Dental Education
11245 Anderson St.; Suite 120
Loma Linda, CA 92354
www.llu.edu/llu/dentistry/cde/courses/annualstudyclub

5th Annual MaxiCourse® on Oral Implantology (India)
August 2008 – July 2009
1 weekend per month
New Delhi, India
Contact: Dr. Shankar Iyer
E-mail: drsiyer@aol.com
Web site: www.aaid-india.org

Annual MaxiCourse® on Oral Implantology (South Korea)
Monthly March through December
Contact: Dr. Jaehyun Shim
E-mail: dental-care@hannail.net
Web site: www.kdi-aaid.com

Courses presented by AAID credentialed members®

U.S. Locations
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.englwooddental.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

The D.M. Vassos Dental Implant Centre Introductory & Advanced Surgical & Prosthetic Programs
Dr. D.M. Vassos
Mentor Program – Hands on Program over six Saturdays
 Begins Fall 2008
Contact: Rosanna Frey
Phone: 780-488-1240
E-mail: rosanna@dmvassos.com
Web site: www.dmvassos.com

Linkow Advanced Implant Courses Online
Contact: Cecilia Serbanescu
Fax: 201-592-0798
E-mail: implants@linkow.com
Web site: www.linkow.com

Mini-Residency in Implant Dentistry Featuring Hands on Workshops & Live Surgeries
Louie Al-Faraje, DDS
Location: San Diego, CA & Mahwah, NJ
Phone: 858-496-0574
E-mail: accessidental@ mindspring.com
Web site: www.implanteducation.net

Midwest Implant Institute
Externship – Bring your own Patients
Drs. Duke & Robert Heller
Contact: 614-885-1215
E-mail: dukeheller@cooper.net
Web site: www.midwestimplant institute.com

Pathway Learning Series
Swiss Implants, Inc.
Carol L. Phillips, DDS, Director
84 CE Units – Six 2-Day Workshops
Contact: Julie Hansen
Phone: 805-781-8700

Pikos Implant Institute
Michael A. Pikos, DDS
Advanced Bone Grafting, Advanced Bone Grafting II, Contact: Alison Thiede
Phone: 727-781-0491
E-mail: learn@PikosInstitute.com

A Two and a Half Day Course “Where YOU Do Everything”
Date: August 22-24 (Fri -Sun) 2008.
Presented by: Stuart Orton-Jones
B.D.S. L.D.S. R.C.S.
Venue: Memphis Tennessee USA, The Medical Education and Research Institute (Specialized Dissection Institute)
Contact: Course Secretary: Jonelle Bucklin.
Telephone: (001) 720 323 4586
Email: jbucklin@rmtb.org
Web: www.sojinstitute.co.uk

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Fax: 212-753-9064
E-mail: via@sendaxminidentimpl.com
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Tatum Institute USA
Clearwater, FL
Implant Surgery and Implant Prosthetics Bone Expansion, Sinus Augmentation, and Comprehensive Dentistry
Contact: Rebekah Register
Phone: 727-459-4910
tatum@sendaxminidentimpl.com

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: beirutidc@hotmail.com

see Calendar p. 35
AAID 57th Annual Meeting

early bird registration form

SAVE $100 OFF REGISTRATION FEES until September 15, 2008, ONLY
Manchester Grand Hyatt, San Diego October 29 – November 2, 2008

A separate registration form must be completed for each paying attendee.
Please print clearly or type. Any corrections, modifications or additions must be submitted in writing. Each Dentist, including spouses or other family members who are dentists, may not register as a spouse or guest. All dentists, including non-practicing dentists, must register in the appropriate dentist category.

Call the Manchester Grand Hyatt at 800.233.1234 to make reservations. or 619.232.1234 for hotel information.
Visit Manchester.Grand.Hyatt.com to make reservations online.

Meeting code: G-DENT

Member Bring a New Member — AND SAVE!

If through the efforts of an AAID dentist member, a non-member dentist registers for the meeting at the AAID Plus Rate, the AAID member will receive a $195 rebate on their registration fee. The following rules apply:

- Life members, retired members and students are not eligible for a rebate.
- Only one rebate per AAID member.
- AAID member registration and that of the non-member must be received by the pre-registration deadline of October 15, 2008.
- If more than one AAID member lists a non-member dentist, the rebate will be given only to the AAID member whose registration was received first.
- The $195 will be given as a rebate within 60 days following the close of the 57th Annual Meeting.
- No rebate will be given should either or both the AAID member and/or the non-member cancel their registration or request a refund.
- The name of both the AAID member and the new Non-member must be included in this section of the registration form.

Write the name of the new member you are bringing in the appropriate section of the registration form.

### aaid early bird registration form 2008

#### Your Contact Information

<table>
<thead>
<tr>
<th>Last name</th>
<th>First name</th>
<th>Degree(s)</th>
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<table>
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<tr>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
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<th>Phone</th>
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<tr>
<th>AGID Member #</th>
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<table>
<thead>
<tr>
<th>A. Meeting Registration</th>
<th>By 9/15/08</th>
<th>After 9/15/08</th>
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</thead>
<tbody>
<tr>
<td>AID Fellow*</td>
<td>$995</td>
<td>$995</td>
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<tr>
<td>AID Associate Fellow*</td>
<td>$945</td>
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<tr>
<td>AID General Member*</td>
<td>$945</td>
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<tr>
<td>AID Member*</td>
<td>$945</td>
<td>$945</td>
</tr>
</tbody>
</table>

| AGID Member # required | $1,095 | $1,195 |
| Non-member PLUS Dentist* | $1,195 | |

| Includes Membership in AAID through November 30, 2008 |
| Nonmember* | $1,195 | $1,195 |
| Life Member or Retired Member* | $1,195 | $1,195 |
| Nonmember* | $1,195 | $1,195 |
| Life Member or Retired Member* | $1,195 | $1,195 |

| B. Special Events Subtotal | $80 | $80 |
| Lunch & Learn Sessions (Fri. 1:00 pm) | $80 | $80 |
| President’s Celebration (Sat. 7:00 pm) | $80 | $80 |

| C. Limited Attendance Workshops |
| Workshops 1 | $50 | $50 |
| Workshops 2 | $50 | $50 |
| Workshops 3 | $50 | $50 |
| Workshops 4 | $50 | $50 |
| Workshops 5 | $50 | $50 |
| Workshops 6 | $50 | $50 |

| B. Special Events Subtotal | $80 | |

| D. Grand Total (A+B+C) | $80 | $80 |

Name of New Member I’m bringing:

AID provides exhibitors with a list of registrants prior to and after the meeting. Check here if you want to be excluded from this list.

### Webcast Registration Information

Visit www.softconfereence.com/AAID to register.
Fee is only $495 for the entire Webcast. See page 24 and 25.

### Registrations received by October 15, 2008 will be processed prior to the meeting. Anyone wishing to register after October 15, must do so onsite.

### Method of Payment

- [ ] Check Enclosed
- [ ] Mastercard
- [ ] Discover

Signature: __________________________
Card: __________________________

3 Digit Security Code from back of credit card: __________________________

Send check, payable in US$, and this form to the AID:
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 you may fax your form to 312-335-9900.
American Academy of Implant Dentistry • 211 East Chicago Ave., Suite 750
Chicago, IL 60611 • Pt: 312-335-1550 or 877-335-AID

Promo Code: PRELIMPROGRAM
57th Annual Meeting
Beyond Boundaries: Beauty, Function, Predictability

SCHEDULE AT A GLANCE

[All information contained in the Preliminary Program is current as of June 16, 2008.]

Tuesday
October 28
1:00 pm - 8:00 pm
Registration

Wednesday
October 29
7:00 am – 6:00 pm
Registration
7:00 am – 8:00 am
Continental Breakfast
8:15 am – 5:30 pm
Welcome
New Trends, Techniques, Technology sponsored programs
10:00 am - 10:30 am
Refreshment Break
Noon – 1:30 pm
Mock Board Review and Examination Lunch
(Separate fee required)
3:00 pm – 3:30 pm
Refreshment Break
5:30 pm – 7:00 pm
International Welcome Reception

Thursday
October 30
7:00 am – 6:00 pm
Registration
7:00 am – 7:50 am
District Caucus
Breakfasts
(Open to all credentialed members at no cost)
7:00 am – 8:00 am
Continental Breakfast
8:00 am – 5:30 pm
Welcome
Main Podium Programs
8:00 am – 10:00 am
How to Prepare Applications for Parts I and II of the ABOI/ID Certification Examination
8:30 am – 12:30 pm
Laboratory Technician Program
8:00 am – 12:00 noon
Allied Staff Program
9:30 am – 7:00 pm
Exhibits Open
10:00 am – 11:00 am
Refreshment Break in Exhibit Hall
Noon – 1:15 pm
Lunch & Learn Sessions
(Separate fee required)
1:30 pm - 5:30 pm
Limited Attendance Workshops
(Separate fee required)
3:30 pm – 4:30 pm
Refreshment Break in Exhibit Hall
5:30 pm – 7:00 pm
Implant World Expo Gala Reception

Friday
October 31
7:00 am – 6:00 pm
Registration
7:00 am – 8:00 am
Continental Breakfast
7:00 am – 8:00 am
ABOI/ID Breakfast
(Separate fee required)
8:00 am – 5:30 pm
Main Podium Programs
INCLUDES LIVE SURGERY
9:30 am – 5:00 pm
Exhibits Open
10:00 am – 11:00 am
Refreshment Break in Exhibit Hall
Noon – 1:15 pm
Lunch & Learn Sessions
(Separate fee required)
1:30 pm - 5:30 pm
Limited Attendance Workshops
(Separate fee required)
3:30 pm – 4:30 pm
Refreshment Break in Exhibit Hall
5:30 pm – 7:00 pm
Implant World Expo Gala Reception

Saturday
November 1
7:00 am – 3:00 pm
Registration
7:00 am – 8:00 am
Women Dentists’ Program
7:00 am – 8:00 am
Continental Breakfast
8:00 am – Noon
Main Podium Programs

Sunday
November 2
8:00 am – 1:00 pm
Associate Fellow Written Examination
(Application and fee due October 3, 2008)
Post Annual Meeting Sessions
8:00 am – Noon
Achieving True Restoratively Driven Implant Dentistry through Three Dimensional Interactive Treatment Planning with SimPlant®
(Separate registration required)
8:00 am – 3:00 pm
“NIRISAB” Made Possible Using Bone Expansion
(Separate registration required)
MAIN PODIUM SESSIONS
Thursday October 30
“Breaking the Barriers in Implant Surgery”

Loading Protocols for Grafted Bone: Immediate, Early and Delayed
Craig M. Misch, DDS, MDS
8:15 am – 9:15 am
AGD Subject Code 315

Radical Vertical Bone Augmentation
Istvan Urban DMD, MD
9:15 am – 10:00 am
AGD Subject Code 692

Computer Aided Technology for Implant Prosthodontics
Scott D. Ganz, DMD
4:30 pm – 5:30 pm
AGD Subject Code 735

Evaluation of One Year Outcomes: You be the Judge. Live Surgery Demonstration
(Includes Audience participation through Audience Response Keypads)
Surgeon: Joseph Y. K. Kan, DDS, MS
11:00 am – 12:00 noon
AGD Subject Code 492

Friday October 31
“Live Broadcasts from Loma Linda University”

Pre-recorded Sinus Graft Surgery Using rhBMP-2 including Subsequent Implant Placement and a Sinus Membrane Repair Demonstration
Moderator: Don Clem, DDS
8:00 am – 9:00 am
AGD Subject Code 692

“Confronting the Challenging Issues of Innovation”
Note: Audience Response System in use during interactive periods throughout afternoon.

Mini Implants - the Saving Grace or Fall from Grace
Todd Shatkin, DDS
1:30 pm – 2:00 pm
AGD Subject Code 691

Justification for Ridge Modification to Accommodate Conventional Size Implants
Matteo Chiapasco, MD
2:00 pm - 2:30 pm
AGD Subject Code 692

Saturday November 1
“Thinking Beyond Boundaries”

Can Dentists Feel How Much Torque They Are Exerting on Implant Components?
Bill Holden, BSc, DDS
2007 Winning Table Clinic Presentation
8:00 am – 8:20 am
AGD Subject Code 610

Clinical and Histologic Evaluation of BMP-2 in Maxillary Sinus Grafts
see Annual Meeting p. 32
Annual Meeting
continued from page 31

Gill Triplett, DDS
8:20 am – 9:00 am
AGD Subject Code 692

The Zygomatic Implant.
A Graftless Solution for
the Edentulous Patient
Edmund Bedrossian, DDS
9:00 am – 10:00 am
AGD Subject Code 691

Extraordinary
Orthodontic Movements
Utilizing Implants
Frank Celenza DDS
11:00 am – 12:00 noon
AGD Subject Code 376

LUNCH AND
LEARN SESSIONS
Lunch and Learn Sessions
are limited to eight partici-
pants at each table. The cost
is $80 ($95 after September
15, 2008).

A Lunch and Learn pro-
vides an up close and
personal opportunity to
interact with a world class
expert on a topic. Ask ques-
tions, interact with your
peers, and learn from the
best. These sessions fill up
quickly so be certain to reg-
ister early and indicate
your top four choices.

Friday
October 31
Noon – 1:15 pm

LL1 Predictable
Immediate Post-extrac-
tion Function

LL2 Extraordinary
Orthodontic Movements
Utilizing Implants
Frank Celenza DDS AGD
Subject Code 370

LL3 Alveolar Ridge
Modification Techniques
to Accommodate
Standard Sized
Endosseous Implants
Matteo Chiapasco, MD AGD
Subject Code 315

LL4 The Art and Science
of Communicating
Treatment Plans to Gain
Patient Acceptance
Craig Cooper, DDS AGD
Subject Code 738

LL5 The Economic
Success of Implementing
Implants
Mazen Dahger, DMD AGD
Subject Code 552
Presented by a grant from
Dentsply

LL6 Defining New
Paradigms through 3-D
Diagnosis and
Treatment Planning:
Tools of Empowerment
Scott Ganz, DMD AGD
Subject Code 735

LL7 Natural
Transgingival
Emergence for Esthetic
Implant Rehabilitions
German Galluci, DMD AGD
Subject Code 690

LL8 Ask Me Anything!
...about...ICAT,
Immediate Implants,
Single Stage Surgery,
Immediate
Temporization, Ridge
Expansion, Restorative
Techniques...or Your
Choice of Topic!
Kim Gowey, DDS AGD
Subject Code 730

LL9 Let’s Talk About
Graft Materials
Joel Rosenlicht, DMD AGD
Subject Code 315

LL10 Mini Dental
Implants: Q&A – All You
Really Wanted to Know
About MDIs from an
Authoritative Resource.
Come Prepared to Joust!
Victor Sendax, DDS AGD
Subject Code 690

LL11 Mini’s for Lunch
Todd Shatkin, DDS AGD
Subject Code 690

LL12 De-Mystifying
Bone Grafting for All
Dennis Thompson, DDS, MS
AGD Subject Code 692
Presented by a grant from
Dentsply

LL13 Soft Tissue
Reconstructions After
Severe Vertical and
Horizontal
Augmentation
Istvan Urban, DMD, MD
AGD Subject Code 492

LL14 Constantly
Repairing Implant
Overdavtures? Keys for
Success
Natalie Wong, DDS AGD
Subject Code 672

LL15 On Becoming an
ABOI/ID Diplomate
James Rutkowski, DMD

LL16 On Becoming an
ABOI/ID Diplomate
Walter Chitwood, DDS

LL17 On Becoming an
ABOI/ID Diplomate
H. Dexter Barber, DDS

LL18 On Becoming an
AAID Fellow or
Associate Fellow
Admissions and Credentials
Committee Board Member

LL19 On Becoming an
AAID Fellow or
Associate Fellow
Admissions and Credentials
Committee Board Member

LL20 On Becoming an
AAID Fellow or
Associate Fellow
Admissions and Credentials
Committee Board Member

Limited
Attendance
Workshops
These Workshops are offered
on Thursday, Friday and
Saturday. The cost is $95
($115 after September 15,
2008). A Limited
Attendance Workshop exam-
ines a subject in depth and
provides you direct access to
the presenter. These pro-
grams fill up quickly so be
certain to register early.
They are limited to up to 50
participants.
Thursday  
October 30

1:30 pm – 5:30 pm
(Each program will include a refreshment break from 3:30 pm until 4:30 pm)

LA1: Computer Guided Surgery: The New Millennium in Surgical Techniques
Michael Klein, DDS
AGD Subject Code 734

LA2: Third Generation Implant Design: Hands-on Training Course the NobelActive™ Implant
James Cherry, DDS
Presented by a grant from Nobel Biocare
AGD Subject Code 691

LA3: Course of Action: Implementing Implants
David Little, DDS
Presented by a grant from Dentsply
AGD Subject Code 738

LA4: Keystone Dental EasyGuide™ Computer Hands-On Workshop
Brian Young, DDS, MS
AGD Subject Code 735

LA5: Hands-on Training Course NobelReplace™ Tapered Implants
Todd Engel, DDS
Presented through a grant from Nobel Biocare
AGD Subject Code 691

LA6: Laser-textured Microsurface for Enhanced Two-Stage and Single-Stage Implant Designs with Hands-on Exercise
Jack Krauser, DMD
Presented through a grant from Biohorizons
AGD Subject Code 010

Laboryatory Technician Program

Thursday  
October 30

This special program is co-sponsored by the California Dental Lab Association and is approved for three hours of CE credit by the National Board for Certification in Dental Laboratory Technology. The cost is $79 ($49 for members of the California Dental Lab Association) and includes admission to the Implant World Expo on Thursday, October 30. Laboratory Technicians who wish to attend the entire conference including the Laboratory Technician program, all other Main Podium and New Trends programs as well as all networking events open to all attendees may do so for a total fee of $225.

LA7: Advanced Computer Guided Surgery: Prescription for Success in Challenging Cases
Mazen Dagher, DMD
This workshop is provided by a grant from Dentsply
AGD Subject Code 730

LA8: New Trends for Optimizing Results in Advanced Oral Implantology
Matteo Chiapasco, MD
AGD Subject Code 691

LA9: Mini Dental Implants: MDI Clinical Update: How to Provide Affordable, Minimally Invasive and Immediately Functional Implant Access for both Medically Compromised as well as Medically Stable Patients.
Victor Sendax, DDS
AGD Subject Code 691

Esthetics in Three Dimensions: Simple, Fast, Predictable
Renzio Casellini, MDT
11:00 am – 12:30 pm
AGD Subject Code 614

FOR ALLIED STAFF

The Allied Staff Program consists of two full days on Thursday and Friday with two half-day programs presented exclusively for allied staff – the key members of the dental team.

Friday  
October 31

1:30 pm – 5:30 pm
(Each program will include a refreshment break from 2:45 pm until 3:45 pm)

LA4: Keystone Dental EasyGuide™ Computer Hands-On Workshop
Brian Young, DDS, MS
AGD Subject Code 735

LA5: Hands-on Training Course NobelReplace™ Tapered Implants
Todd Engel, DDS
Presented through a grant from Nobel Biocare
AGD Subject Code 691

LA6: Laser-textured Microsurface for Enhanced Two-Stage and Single-Stage Implant Designs with Hands-on Exercise
Jack Krauser, DMD
Presented through a grant from Biohorizons
AGD Subject Code 010

Saturday  
November 1

8:00 am – 12:00 noon
(Each program will include a refreshment break from 10:00 am until 11:00 am)

LA8: New Trends for Optimizing Results in Advanced Oral Implantology
Matteo Chiapasco, MD
AGD Subject Code 691

LA9: Mini Dental Implants: MDI Clinical Update: How to Provide Affordable, Minimally Invasive and Immediately Functional Implant Access for both Medically Compromised as well as Medically Stable Patients.
Victor Sendax, DDS
AGD Subject Code 691

Esthetics in Three Dimensions: Simple, Fast, Predictable
Renzio Casellini, MDT
11:00 am – 12:30 pm
AGD Subject Code 614

FOR ALLIED STAFF

The Allied Staff Program consists of two full days on Thursday and Friday with two half-day programs presented exclusively for allied staff – the key members of the dental team.

Thursday  
October 30

How to Take Your Implant Practice to the Next Level
David Schwab, Ph.D.
8:00 am – 12:00 pm
(Includes a Refreshment Break from 10:00 am until 11:00 am)

Cutting Edge Ceramics for Natural Teeth and Implants
Edward McLaren, DDS
1:30 pm – 2:30 pm

Zirconium Oxide in Implant Restorations
Alejandro James, DDS, MDS
2:30 pm – 3:30 pm

Computer Aided Technology for Implant Prosthodontics
Scott D. Ganz, DMD
4:30 pm – 5:30 pm

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Friday
October 31

“Live Broadcasts from Loma Linda University”

Pre-recorded Sinus Graft Surgery Using rhBMP-2 including Subsequent Implant Placement and a Sinus Membrane Repair Demonstration
Moderator: Don Clem, DDS
8:00 am – 9:00 am

Radical Vertical Bone Augmentation – LIVE SURGERY DEMONSTRATION
Surgeon: Istvan Urban DMD, MD
9:00 am – 10:00 am

RhBMP in Implant Dentistry - LIVE SURGERY DEMONSTRATION
Surgeon: Alan Herford, DDS, MD
9:00 am – 10:00 am

Surgical Biotype Transformation during Immediate Implant Placement in the Esthetic Zone with Evaluation of One Year Outcomes: You Be the Judge. - LIVE SURGERY DEMONSTRATION
Surgeon: Joseph Y. K. Kan, DDS, MS
11:00 am – 12:00 pm

Ask Me about Implants! Everything You Need to Know about Developing an Exceptional Implant Practice!
Ms. Joy Millis, CSP
1:30 pm – 5:30 pm
(Includes a Refreshment Break from 2:45 pm until 3:45 pm)

PROGRAM FOR DENTISTS NEW TO IMPLANTS

Regardless of your experience in dentistry, adding implant dentistry to your practice presents many challenges. What are the various implant systems and how to choose those for your practice? How to select cases that will be successful? What are the surgical and restoration concerns? Where to obtain the best training? This hands-on course is more than an introduction. It is a mentoring opportunity that will help you make the right decision about adding implants to your practice. The cost of $95 ($115 after September 15, 2008) includes admission to the Implant World Expo on Thursday afternoon.

Thursday October 30
1:30 pm – 5:30 pm
(This program will include a refreshment break from 3:30 pm until 4:30 pm)

Implant Mentorship
Aladdin Al-Ardah, DDS and Natalie Wong, DDS
AGD Subject Code 690
This hands-on course is for general dentists as well as specialists who are beginning to incorporate implant dentistry within their practice. Basic implant surgery will be presented including case selection for the novice implant surgeon, basic implant treatment planning, radiographic interpretation including computerized tomography, aseptic surgical technique, ridge mapping, implant selection, principles of incision design, and suturing techniques and a hands on exercise using models to successfully place endosseous root form dental implants.

Basic Implant Prosthodontics will also be discussed including diagnostic wax-ups, radiographic and surgical template fabrication, principles of prosthesis design, impression techniques, abutment selection, basic laboratory procedures and prescriptions, for both completely edentulous as well as partially edentulous patients.

This course will also present the participant with vital educational guidelines to promote a lifetime of learning in unbiased environments, explain the difference between Academy-sponsored versus corporate-sponsored courses, and introduce principles of evidence-based therapy and critical review of the scientific literature.

NEW TRENDS, TECHNIQUES & TECHNOLOGY

Wednesday October 29

Integration of Cone Beam Technology into the Private Dental Practice. Use and Benefits of CBCT Scanning
Daniel McEowen, DDS
8:30 am – 9:00 am
Presented through a grant from Prexion Inc.
AGD Subject Code 734

Third Generation Implant Design: The NobelActive Implant
James Cherry, DDS
9:00 am – 9:30 am
Presented through a grant from Nobel Biocare
AGD Subject Code 691

A New Paradigm for Implant Supported Immediate Load Overdentures
David Little, DDS
9:30 am – 10:00 am
Presented through a grant from Dentsply
AGD Subject Code 671

Enhancing Implant Treatment Planning with the i-CAT® 3-D Dental Imaging System
Joel Rosenlicht, DMD
10:30 am – 11:00 am
Presented through a grant from Imaging Sciences
AGD Subject Code 738

Implant Site Development – Using Advanced Techniques and Technologies for Esthetic Ridge Preservation
Barry Bartee, DDS, MD
11:00 am – 11:30 am
Presented through a grant from Sybron Implant Solutions
AGD Subject Code 492

EasyGuide™ Virtual Dental Implant Planning and Predictable Surgical Outcomes
Brian Young, DDS, MS
11:30 am – 12:00 noon
Presented through a grant from Keystone Dental
AGD Subject Code 735

Indications and Restorative Considerations For The Use Of One-Piece Dental Implants
Nachum Samet, DMD
1:30 pm – 2:00 pm
Presented through a grant from MIS Implants
AGD Subject Code 691

The Emergency Implant Office Procedure
Jaime Lozada, DDS
2:00 pm – 2:30 pm
Presented through a grant from Nobel Biocare
AGD Subject Code 314

Predictable Use of Short Implants
Jihad Abdallah, BDS, MDS
2:30 pm – 3:00 pm
Presented through a grant from Bicon
AGD Subject Code 692

Computerized Implant Dentistry: The Future is Now
Dean Vafiadis, DDS
3:30 pm – 4:00 pm
Presented through a grant from AstraTech
AGD Subject Code 612

Connective Tissue Attachment to Dental Implants: Is It Possible?
Jack T. Krauser, DMD
4:00 pm – 4:30 pm
Presented through a grant from Biohorizons
AGD Subject Code 010

Computer Guided Treatment and the Immediately Loaded Prosthesis
David Guichet, DDS
4:30 pm – 5:00 pm
Presented through a grant from BTI
AGD Subject Code 691

Ridge Expansion and Vertical Bone Growth in Posterior Area with Short Implants
Anthony Terrana, DMD
5:00 pm – 5:30 pm
Presented through a grant from Biohorizons
AGD Subject Code 692

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Implant 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: Anita Leigh
Phone: 1-888-877-0737 (Toll Free)
E-mail: staff@albertadentalimplants.com
Web Sites:
www.implantsmilecenter.com
www.albertadentalimplants.com

Pacific Implant Institute
Dr. Ron Zokol
Comprehensive Training in Implant Dentistry
September through June
Location: Vancouver, B.C. Canada
Contact: Phyllis Vineberg
Phone: 1-800-668-2280

E-Mail: phyllis@piidentistry.com
Web site: www.piidentistry.com

Study Clubs*
New Jersey
Lincroft Village Dental Implant Study Group
Treatment planning, bonegrafting, prosthetics
Richard J. Mercurio, DDS
Contact: Martha Doucette
Phone: 732-842-5005
E-mail: lvdimplant-group.com

New York
CNY Implant Study Group
May 7, 2008 – Utica College
“Implant Prosthodontics: Fixed Impression Techniques for Basic and Complex Cases”
Speaker: Matthew R. Young, DDS
September 13, 2008 – Verona, NY
“Implant Surgical Session”
Speaker: Brian Jackson, DDS
September 17, 2008 – Utica College
“Laser Welded Technology – Live Demonstration”
Speaker: Paul Giovannone, CDT
Contact: Melanie – Course Coordinator
Phone: 315-724-5141
E-mail: bjddsimplant@aol.com

* 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 listing.

For more details about the Annual Meeting, visit www.aaid2008.com
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