A virtual CDA

Dentists have a few days left, through Sept. 13, to apply for pandemic relief grants through the Department of Health and Human Services’ Enhanced Provider Relief Fund Payment Portal. Created by the CARES Act and the Paycheck Protection Program and Health Care Enhancement Act, the $75 billion Provider Relief Fund is intended to help health care providers suffering economic losses because of the COVID-19 pandemic. The fund provides eligible dentists a reimbursement of approximately 2 percent of annual reported patient revenue.

The HHS has now extended the deadline for the general distribution funding three times, with the previous deadline having been set for Aug. 28.

Determining eligibility
All dentists with a tax identification number are eligible for Provider Relief Funds. For more information, see RELIEF, page A3.
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The American Dental Association (ADA) has announced that the U.S. Food & Drug Administration has awarded a three-year, $1.5 million grant to the ADA Science & Research Institute (ADASRI), in collaboration with the University of Pittsburgh, to develop a clinical practice guideline for the management of acute pain in dentistry with a focus on the role of opioids.

“The ADA has long been committed to providing the best possible information about managing acute pain for patients, including focusing on further defining the role of opioids in dentistry,” said Marcelo Araujo, DDS, MS, PhD, chief executive officer, ADA Science & Research Institute. “This project will improve clinician and patient access to the evidence and recommendations for all dental specialties and will serve key stakeholder groups throughout guideline development.”

ADASRI will work with the University of Pittsburgh to develop, disseminate, implement and evaluate a national clinical practice guideline for the management of acute pain in dentistry. Alonso Carrasco-Labra, DDS, MSc, PhD, senior director of ADASRI Evidence Synthesis & Translation Research, and Deborah Polk, PhD, assistant professor of dental public health in the School of Dental Medicine at the University of Pittsburgh, will serve as the project’s co-principal investigators.

“As a part of the recently founded ADA Science & Research Institute, I believe that this project reflects the strong commitment of ADASRI to conduct research on topics of great importance for the public and the dental profession,” said Carrasco-Labra. “This award aligns with ADA’s strong commitment toward optimal, evidence-based management of acute pain in dentistry, including the use of opioids.”

This is the first grant awarded to ADASRI’s Evidence Synthesis & Translation Research team since the official launch of ADASRI in January. This award adds to the growing list of ADASRI grant awards for 2020, which also includes three National Institutes of Health grants awarded to the ADASRI Innovation & Technology Research team.

About the ADA Science & Research Institute
ADASRI was created in January as an LLC subsidiary of the American Dental Association to oversee and manage all ADA science and research programs. ADASRI comprises three departments — Evidence Synthesis & Translation Research, Innovation & Technology Research, and Research & Laboratories — whose collective mission is “improving lives through oral health, science and research.”

(Source: American Dental Association)
Using imagination, techniques and skill

By Dr. David L Hoexter, BA, DMD, FACD, FICD, Editor in Chief, Dental Tribune

A patient is reaching out for your expertise by presenting his dental problems as seen in Fig. 1. Where does the practitioner begin?

Imagine the ending before you begin. Listen to the patient’s desires before you start. What might be the factors influencing the desires and the goals for that patient to ask for guidance for esthetic oral improvement? What are the influencing factors affecting the practitioner to achieve the desired goals? Does the practitioner have the technical practicalities or even the correct information about techniques utilized today?

In this particular patient, in this specific area, when did the patient realize the need for improvement? How long did the area in question appear as it does? How does the patient hope the final result might appear? Does the area cause the patient any pain or annoyance?

The practitioner must consider what possible techniques he knows to achieve health plus esthetic appearance plus function. Esthetic desires differ with culture, socioeconomic factors and social pressures, to name a few. Of course, expertise helps!

The patient described in this article was referred to my office for esthetics. He was concerned about the appearance of the upper left anteriors and, especially, how to consider options available to correct a very obvious approximal UL cuspid recession. The patient felt that it made him feel old (long in the tooth) and afraid of its physical longevity. The tooth was not sensitive to temperature changes.

Some possible thoughts to correct the area were brought out by a previous dentist. These were to crown the cuspid and change the ceramic coloring at the gingival level to appear pinkish, as possible gingival, which would take away the pressure of a long, white appearance. Even though the patient was getting married shortly, I told him this option would not be good enough because the tooth would not appear natural enough.

In previous cases I have published in a series titled “Barriers of success,” I described the utilization of the Guided Tissue Regeneration (GTR) techniques. In this series, I utilized several different types of barrier materials to regenerate connective tissue attaching to a previously exposed root surface. This resulted in a healthy, physiologic and cosmetic improvement.

With the use of a barrier, true reattachment resulted, as compared to other techniques of root coverage that resulted in a long junctional epithelium adherence and not a true reattachment. The initial tissue image might appear fine, but recession would reoccur. If a crown were to be placed on a re-adhered area, margins of the crown would be vulnerable to exposure visually with root recession reoccurring.

The barrier utilized in this GTR technique is a connective tissue membrane. It is a sterilized membrane, unlike popular nonsterilized membranes. The membrane utilized in this treatment was a Tranzgraft (Integuply) type.

After the root coverage GTR technique was done initially to his #11, the patient was so favorably surprised his labial recession could be covered that he requested his maxillary central #9, which also had some recession, might be covered as well. I agreed and did it with this GTR technique. The patient was participating and very appreciative. He was more aware now of the visage and physical possibilities than he had before commencing and is now participating in his esthetic treatments, knowing the wide range of possibilities.

Temporary restorative coverage after healing of the periodontic procedures permits the patient and the restorative dentist to physically see the achievements and how to improve toward the desired goal. The interproximal areas need more time to heal initially and be maintained. After the proper time, the final prosthesis is fabricated and inserted.

The patient is now enthusiastic toward his oral hygiene maintenance necessary to maintain his oral health while preserving the final prosthesis. Avoiding future recession, he keeps up his gingival health with good oral hygiene, especially where there previously was extreme recession.

The patient is now a believer and aware of the possibilities of results. He is now aware of oral esthetic possibilities and goals. While reading magazines, he now looks at photos of different smiles and the esthetic possibilities they contain. He has referred his mother and his new bride to my office to get the best possible oral esthetic and healthy smile.

Different achievements can be gotten only when honest and true techniques are utilized. A team of dentists with expertise in different phases, working together, encouraging input with the patient, can make the difference and a smile.
Easy Dental upgrade available through Henry Schein One

By Henry Schein Dental Staff

Henry Schein One has announced the availability of Easy Dental® 12.2, the latest upgrade of the Easy Dental practice management system. The new upgrade features a simplified patient module, making it easier for dental office managers to view and manage patient records and insurance information, according to the company.

Designed with practice organization and efficiency in mind, Easy Dental 12.2 expands the intuitive user interface elements, enabling dental teams to see more patient information in a single view without clicking through menus. For example, the patient banner now features a comprehensive display of the patient’s history, medical alerts and future appointments without any additional clicks.

In addition, users are no longer required to switch between the schedule and patient module when creating a new patient file, helping to reduce human error and expedite administrative procedures, according to the company.

"Henry Schein One is committed to creating and improving practice management solutions that help office administrators manage patient records more efficiently and enable dental professionals to focus on delivering quality patient care," said Kevin Bunker, president, North American Dental Practice Solutions.

"With ongoing upgrades to our dental practice management software, such as Easy Dental 12.2, customers can rely on us to help automate their standard operating procedures into one seamless workflow.”

In addition to a simplified interface, the patient module in Easy Dental 12.2 features a dedicated insurance tab that shows outstanding claims, primary insurance and secondary insurance in a single view.

To learn more

For more information about Easy Dental 12.2, visit www.easydental.com/12.2.
Protect yourself against aerosols

By Designs for Vision Staff

In today’s world, it is especially important to make sure you have the proper eyewear. To that end, Designs for Vision is offering a variety of new product lines.

Design for Vision’s new Aerosol Protection Loupes create a seal around your eyes to protect against aerosols. These loupes are available with 2.5x, 3.0x and 3.5x magnifications and come in two frame styles.

The company is also offering the LoupeSaver™ Face Shield. The product is made from optical grade plastic and has a flat panel design that reduces optical aberrations.

The shield can be clipped to loupes, with no headband needed, allowing a headlight to be placed inside or outside of the shield.

In addition to these products, Designs for Vision has launched several new product lines in the past months, including the new patented Panoramic Field Loupes (US pat. 8928975B2).

According to the company, the Panoramic Loupes represent the most significant advancement in telescope design in more than 100 years. The viewable areas are twice as large as prismatic expanded-field designed loupes and up to five times greater than Galilean loupes.

Panoramic Field loupes provide unprecedented field of view, clarity, definition and color, the company asserts.

Designs for Vision has also added the Micro 3.0EF to the award-winning Micro Series Loupes. The Micro 3.0EF has a field of view of 100 mm and weighs less than 70 grams. The Micro Series also includes REALITY 5 Star rated Micro 3.5EF Scopes and Micro 4.5EF Scopes.

These scopes use a revolutionary optical design that reduces the size of the prismatic telescope by 50 percent and reduces the weight by 40 percent while providing an expanded field view of the oral cavity.

If you want the lightest 3.0x magnification, get the new 3.0x Galilean loupes. According to the company, the lightweight Galilean design enables clinicians to step up in magnification while retaining an expansive 70 mm field of view.

Designs for Vision is also introducing patented (US pat. 8,851,709 & RE46,463) hands-free infrared technology with the WireLess IR HDi and the Micro IR HDi headlights. The patented IR feature enables practitioners to operate a headlight without touching the system. The IR headlights use a built-in infrared signal to enable the user to turn the light on or off simply and safely, according to the company. Onboard biometrics sense the position of the headlight to filter out unintended signals while working.

Designs for Vision’s WireLess™ headlamps free practitioners from being tethered to a battery pack. The modular designs decouple the headlights from any frame/loupes.

You can see the Visible Difference® yourself by visiting Designs for Vision at www.designsforvision.com. The company is taking appointments for virtual meetings, and you can also find information on selecting an N95 mask that accommodates eyewear as well as nose pad adjustments to fit properly over the mask and information on disinfection procedures for loupes and headlamps.
AAOMS to hold its first-ever virtual annual meeting this October

By The American Association of Oral and Maxillofacial Surgeons Staff

In light of the COVID-19 pandemic, the American Association of Oral and Maxillofacial Surgeons (AAOMS) is offering the 2020 Virtual AAOMS Annual Meeting from Oct. 1 to 10. The meeting combines the educational content of the association’s 102nd Annual Meeting, Scientific Sessions and Exhibition and the annual Dental Implant Conference.

The meeting’s live and on-demand educational sessions will provide greater flexibility for attendees to learn about the latest research in the specialty of oral and maxillofacial surgery (OMS). A community-oriented platform will foster interaction between attendees and speakers.

Held in conjunction with the International Association of Oral and Maxillofacial Surgeons, the meeting will feature several international speakers and focus on the theme of the “Digital Workforce: Improving Efficiency and Safety for our Patients.” Oral and maxillofacial surgeons, faculty, residents and allied staff are expected to attend.

Anthony S. Fauci, MD — director of the National Institute of Allergy and Infectious Diseases since 1984 — will speak during the meeting’s President’s Event.

He has served as a key advisor to six U.S. Presidents on AIDS and other health issues, including COVID-19.

This virtual meeting replaces the AAOMS Annual Meeting originally scheduled for Oct. 5 to 10 in San Antonio, Texas, and the Dental Implant Conference slated for Dec. 3 to 5 in Chicago. Similar to previous in-person AAOMS Annual Meetings, the educational content will present clinical tracks that cover the scope of OMS practice: anesthesia, cosmetic, dentoalveolar, orthognathic, pathology, pediatrics and cleft, reconstruction/nerve, temporomandibular joint, and trauma. Sessions also will address timely topics to help enhance the OMS practice.

To attend

For more information or to register, head to AAOMS.org/AnnualMeeting.

The Dental Implant Program will review enhanced dental implant content with four live sessions, three on-demand sessions and interaction opportunities. In addition, a virtual exhibit hall will display the most advanced products and services available in the OMS specialty.

“With respect for the safety of our members and their staff during the COVID-19 pandemic, AAOMS decided to shift to a virtual format for its two annual fall meetings,” said AAOMS President Victor L. Nannini, DDS, FACS.

“For more than 100 years, our members have expected the annual meeting to offer outstanding educational sessions to advance knowledge, provide opportunities for dialogue and showcase the latest products. We are pleased to still be able to hold our annual premier events, now in a virtual format that is expected to provide convenience and value to our members with consideration for their evolving needs.”

Registration is open to AAOMS members, OMS residents, professional allied staff and non-members. More information is available at AAOMS.org/AnnualMeeting.

AAID celebrates Dental Implant Awareness Month

By American Academy of Implant Dentistry Staff

September is Dental Implant Awareness Month, sponsored by the American Academy of Implant Dentistry (AAID). This year’s theme, “Healthy Mouth, Healthy You!” focuses on the health benefits of dental implants.

“Dental Implant Awareness Month is a great opportunity to raise awareness about dental implants as a healthy replacement for missing teeth,” said AAID President Bernee Dunson, DDS, FAAID, DABOI/ID. “Many people know that implants bring back beautiful smiles, but the life-changing benefits go beyond aesthetics. It’s important for people to understand that they help restore overall health.”

To kick off the month, the AAID launched a new public awareness campaign including an article and video to bring visibility to the long-term health consequences of missing teeth and the reasons why implants are a preferred replacement option.

When an individual loses one or more teeth, it causes other issues that may not be noticeable right away. The article and video provide an overview of the benefits — including how they help preserve bone structure, prevent gum disease, restore healthy eating habits and bring back confidence.

Dental implants are more than an investment in oral health but also in physical and mental health according to the AAID. When performed by a skilled implant specialist, it is one of the safest, most precise and predictable procedures.

To learn more

For more information on the AAID and Dental Implant Awareness Month, visit www.aaid.com.
Join the largest educational network in dentistry!

www.DTStudyClub.com