In response to recent news reports questioning whether scientific research supports oral health benefits associated with flossing, the American Dental Association is advising dental professionals and their patients that when it comes to flossing, a lack of strong evidence doesn’t equate to a lack of effectiveness. The association is advocating that dentists are in the best position to advise their patients on oral hygiene practices because they know their patients’ oral health status and health history.

Extensive global news coverage followed an Associated Press investigative report that addressed why flossing was no longer included in the latest U.S. Dietary Guidelines. Some accounts implied the government had changed its stance on flossing. In response, the ADA noted that the change reflected the Dietary Guidelines Advisory Committee’s decision to focus on food and nutrient intake (i.e., added sugar) in the updated guidelines. According to the ADA, the guidelines have no bearing on the long-standing recommendation from the Surgeon General, the CDC and other health agencies to clean between teeth daily. The U.S. Department of Health and Human Services reaffirmed the importance of flossing in an Aug. 4 response to a clarification request from the ADA, stating:

“Flossing is an important oral hygiene practice. Tooth decay and gum disease can develop when plaque is allowed to build up on teeth and along the gum line. Professional cleaning, tooth brushing and cleaning between teeth (flossing and the use of other tools such as interdental brushes) have been shown to disrupt and remove plaque. At HHS, NIH’s National Institute of Dental and Craniofacial Research, CDC’s Division of Oral Health and Healthy People 2020 have additional information and resources about efforts to improve oral health.”

In response to news coverage about the lack of scientific research on the benefits of daily flossing, the ADA is stressing the importance of interdental cleaners such as floss for oral health.

In response to news coverage about the lack of scientific research on the benefits of daily flossing, the ADA is stressing the importance of interdental cleaners such as floss for oral health.
Referrals Simplified
Securely and easily send electronic referrals

Send Referral

RecordLinc

Save time & stay compliant
Streamline communication among dental colleagues

Call: 415.749.1444
Visit: RecordLinc.com

PATIENT PORTAL   REFERRALS   SCHEDULING   INTEGRATION   MESSAGING   eFORMS
address and improve oral health.”

According to the ADA, interdental cleaners such as floss are an essential part of taking care of teeth and gums. Cleaning between teeth removes plaque that can lead to cavities or gum disease from the areas where a toothbrush can’t reach. Interdental cleaning is proven to help remove debris between teeth that can contribute to plaque buildup.

Individuals advised to consult with their dentists on flossing

The ADA reports that there are more than 500 bacterial species in plaque; some are good and some are bad for oral hygiene. Together with food debris, water and other components, plaque buildup around the teeth and on the gum line will contribute to disease in teeth and gums. Whether individuals use floss or another interdental cleaner is a personal preference, but it’s important to understand, according to the ADA, the proper technique for each tool so that it is effective. Patients are advised to talk to their dentists about how to use interdental cleaners to ensure efficacy.

The ADA continues to recommend brushing for two minutes twice a day with a fluoride toothpaste, cleaning between teeth once a day with an interdental cleaner and regular dental visits as advised by the individual’s dentist.

The Health and Human Services statement also acknowledged that while dental floss — along with brushing teeth and using fluoridated water — was mentioned in past editions of the guidelines (in both 2005 and 2010), “it was most likely identified as a supporting recommendation along with brushing teeth, with the primary emphasis being on the nutrition-based recommendation to reduce added sugars.”

Brushing and flossing have never been an integral part of the dietary guidelines, which are designed primarily to provide evidence-based food and beverage recommendations for U.S. citizens. The Health and Human Services statement said, “Since neither the 2010 nor 2015 Advisory Committees (for the guidelines) reviewed evidence on brushing and flossing teeth, the authors of the current edition decided not to carry forward the information on brushing and flossing included in past editions of the guidelines. By doing so, they were not implying that this is not an important oral hygiene practice.”

ADA members practitioners can direct their patients to the ADA consumer website www.MouthHealthy.org for more information about flossing.

(Source: American Dental Association)
Office management leaders to meet Sept. 15–18

12th annual session will be held at the Boca Raton Resort & Club

The American Association of Dental Office Management (AADOM) will welcome dentists, practice leaders and administrators to the Boca Raton Resort & Club for three days of management-based learning. The 12th annual session will be held Sept. 15–18 and will feature courses in leadership, medical billing, manager-doctor relationships and dental insurance. Donna Cutting, CSP, AADOM’s keynote speaker, will present “Red-Carpet Diem! Seize the Opportunity for Customer Service.” Attendees will learn how providing world-class customer service creates an experience for patients that will keep them loyal to you and your practice.

Other sessions will touch on topics such as medical billing, hygiene department productivity, treatment planning, leadership and dental insurance. The roster includes well-known speakers such as Dr. David Rice, Rachel Wall, Christine Taxin, Anastasia Turchetta, Dayna Johnson and Teresa Duncan. Software workshops to maximize production will be taught for users of both Eaglesoft and Dentrix software systems. The popular “Forum Live!” brings hundreds of dental practice administrators and business managers together to exchange ideas and share best practices for diverse topics such as moving to a paperless office, compliance and hiring/termination scenarios. These courses are approved for nine C.E. credits (including toward the AADOM Fellowship Program). AADOM is an AGD-approved C.E. provider.

AADOM will also announce the winner of the 2016 Practice Manager of the Year, as well as induct the newest class of fellows into the AADOM Fellowship Program. AADOM is once again hosting the Dental Spouse Business Network (DSBN) for dental spouses and life partners.

For more details about the annual session and more information you can visit www.aadomconference.com.

(Source: AADOM)
Choose wisely. Choose Oraqix.
(lidocaine and prilocaine periodontal gel) 2.5%/2.5%
Crosstex acquires Accutron

Cantel Medical Corp, a company that develops and manufactures products for the medical device reprocessing industry, announced the acquisition of Accutron Inc., an industry-leading manufacturer of ‘conscious sedation’ nitrous oxide delivery systems and nasal masks.

Crosstex acquires Accutron

The acquisition, which is subject to certain closing conditions, is expected to close in the next 30 to 60 days, the company stated.

Crosstex manufactures a wide array of infection prevention and compliance products for the global health care industry. Founded in 1995 in Hauppauge, NY, Crosstex is a recognized leader in products used for waterline treatment, biological monitoring, sterility assurance packaging and personal protection equipment. Sold in more than 100 countries, the products distributed to medical, dental and veterinary practices and facilities include the award-winning (five consecutive years) Secure Fit technology face masks, DentaPure waterline treatment cartridges and Liquid Ultra, Sure-Check sterilization pouches with internal/external multiparameter indicators, Tyvek pouches with 510K approval, SteamPlus Type 5 chemical integrators, ConFirm and PassPort Plus in-office and mail-in biological indicators and Rapicide OPA/28 high level disinfectant.

For more information, visit the Cantel website at www.cantelmedical.com.

This article contains forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995. These statements involve a number of risks and uncertainties, including, without limitation, the risks detailed in Cantel's filings and reports with the Securities and Exchange Commission. Such forward-looking statements are only predictions, and actual events or results may differ materially from those projected or anticipated.

(Source: Crosstex)
Henry Schein 2016 program will improve kids’ access to health care

Now in its 10th year, initiative confirms vital role of community health centers and expands access to care for thousands of children and their caregivers

Henry Schein Inc. has launched its 2016 Healthy Lifestyles, Healthy Communities (HLHC) program, which expands access to health care, prevention and wellness for underserved communities by providing free medical and dental screenings at community events throughout the country.

Created 10 years ago in partnership with the National Association of Community Health Centers (NACHC), the HLHC program expects to serve approximately 8,700 children and their caregivers with free medical and oral health services at 14 health fairs through this fall. Each event is held in conjunction with a local community health center.

HLHC is a flagship initiative of Henry Schein Cares, the company’s global corporate social responsibility program. The company supports each HLHC event with a $5,000 in-kind donation and a $5,000 cash grant from the Henry Schein Cares Foundation Inc., a 501 (c)(3) organization that works to expand access to care globally.

Since HLHC’s inception, the company and the foundation have provided supplies and financial assistance combined in support of nearly 95 health fairs. According to the NACHC, community health centers play a key role in the nation’s health care system by providing continuous primary and preventive care, reducing the risk of new health care problems and saving the health care system $24 billion per year.

HLHC is annually cosponsored by state and local community health organizations and supported by Henry Schein’s supplier partners. At each HLHC event, local physicians, nurses, dentists, and community volunteers screen for a range of health issues — including hypertension, asthma, diabetes, obesity and poor oral health — and associated risk factors that commonly affect children. In addition, each participant receives educational materials about ways to prevent and treat these problems, as well as assistance in finding a local community health center where they can access care regularly.

Community health centers play a vital role throughout the country, providing excellent care to people who would oth-
Quality control starts at micro levels

For more than 100 years DENTSPLY International has been supporting dentists worldwide in their profession.

The company’s trusted and comprehensive range of anesthetics enables dentists and hygienists to start every procedure right. DENTSPLY Pharmaceuticals’ quality starts when collecting active molecules and continues through shipping and beyond. 

Ensuring DENTSPLY Pharmaceuticals’ quality starts when collecting active molecules and continues through shipping and beyond. Photo/Provided by DENTSPLY International

Each cartridge is twice sterilized with a sterilizing filter followed by an autoclave method. Cartridges are then visually inspected with an electronic laser for defects and impurities, including but not limited to cracks, foreign particles, color and density. Each cartridge is mylar-pack labeled to restrain the individual pieces in case of a break — thus avoiding any injuries. Each set of 10 cartridges is then blister packed to avoid breakage. Finally, each cartridge is color coded as per industry standard ADA system.

(Source: DENTSPLY Pharmaceutical)

Cement designed for dentist and technician

A new composite cement “OT CEM” has been released by the Rhein83’s research laboratories. Designed for bonding attachments directly in the mouth or in the laboratory, OT CEM is a self- and photo-curing cement for permanent metal-to-metal bonding of attachments in prosthetic implant solutions.

Radiopaque with a highly workable processing and curing time, OT CEM is recommended for cementing the reconstructive concave sphere; the solid reconstructive sphere; and the threaded sleeves for the threaded attachments OT CAP – OT EQUATOR.

The package includes a two-component syringe of 5 ml and 10 self-mixing tips.

For more information you can contact American Recovery in New Rochelle, N.Y., by telephone at (914) 632-3800 or by email at info@american-recovery.com.

(Source: Rhein83)
Implant magazine has Q&As, clinical techniques, more

Glidewell Laboratories, an industry-leading provider of dental products, implant solutions and lab services, has released the latest issue of Inclusive™ magazine, its multimedia publication on implant dentistry. The publication is available in print and across multiple digital platforms. The digital edition of the new issue, Volume 7, Issue 2, as well as past issues of the quarterly magazine, can be viewed from all popular desktop, tablet and smartphone platforms at inclusivemagazine.com.

The featured Implant Q&A spotlights Dr. Stephen Chu, a prominent leader in the field of prosthodontics and adjunct clinical professor and former director of esthetic education at New York University College of Dentistry. Read the article and watch the exclusive video interview to hear Chu’s thoughts on a range of topics, including the path that led him to specialize in prosthodontics, the state of CAD/CAM dentistry and digital impression systems, the benefits of immediate implant placement and provisionalization, and what implant doctors can learn from dental technicians.

The new issue also features articles spotlighting the monolithic zirconia full-arch implant restoration, the latest prosthetic innovation to support the level of care practitioners can provide edentulous patients. In the article, Dr. Daniel Galindo explores how this treatment option helps overcome challenges related to bruxism and other parafunctional activities. Dr. Siamak Abai’s article outlines the all-CAD restorative protocol through which full-arch BruxZir® prostheses can now be produced, eliminating the need for a wax setup and improving communications with the lab.

Dr. Vladimir Jovic’s article explains how edentulous implant patients can benefit from the use of an occlusal guard. Intraoral scanners can help doctors streamline the restorative phase of treatment, reduce dental lab fees and provide patients with a precisely fitting restoration in less time. A collaborative article by Drs. Abai, Timothy Kosinski and Paresh Patel illustrates this process with three different scanners, achieving predictable, highly accurate results in each instance.

The latest issue includes two Q&As that highlight the opportunities implant therapy offers the modern dental practice. One features Dr. David Hochberg, who recounts his experience learning to place implants more than 30 years ago and emphasizes the much-improved resources available to today’s practitioners. In the first of a three-part series, practice management consultant Dr. David Schwab describes strategies for enhancing communications with patients and increasing case acceptance.

Other articles feature an assortment of clinical techniques and treatment protocols. Implant pioneer Dr. Jack Hahn shares a clinical tip in which the “book” approach is used to access and graft a facial bone defect adjacent to an anterior extraction site. An article by Dr. Raymond Choi illustrates how small-diameter implants are an excellent treatment option for edentulous patients who cannot receive conventional-sized implants due to financial, anatomical or medical reasons. Dr. Ara Nazarian’s latest article demonstrates how a cementable full-arch BruxZir restoration over custom abutments offers a solution for cases in which bone anatomy precludes a screw-retained prosthesis.

After reading the articles, viewing the case photos and watching the videos, readers have the opportunity to take free interactive C.E. tests through the Glidewell Education Center. Participants can earn free C.E. credits through the Academy of General Dentistry Program Approval for Continuing Education (PACE) program for each test they complete and pass.

Inclusive magazine is published by Glidewell Laboratories and President/CEO Jim Glidewell, CDT. Each issue of Inclusive seeks to highlight the many aspects of dental implants from clinical and laboratory perspectives, featuring case studies, clinical techniques, and practice management tools in both article and video format.

To view the Inclusive magazine digital edition from your desktop computer or favorite mobile device and to sign up for a free subscription to the print version, visit inclusivemagazine.com. For more information about Inclusive magazine, call (800) 521-0576 or e-mail inclusivemagazine@glidewelldental.com.

(Source: Glidewell Laboratories)
Running a successful dental practice calls on not just your expertise in dentistry but also on your leadership abilities. Being an effective leader will help you focus your staff and your partners on creating and maintaining the kind of dental practice that you can be proud of.

The following eight areas of focus can help practice owners and other dental professionals develop and strengthen leadership skills:

1. **Promote creativity.** When employees are encouraged to express their creativity, they stretch their limits.1
   
   Foster this by setting staff goals and supporting employees as they work toward those achievements.

2. **Display your passion.** If employees see that you care about your work and your practice, they’ll be more likely to care too.2
   
   Let your passion inspire others, and they, in turn, will inspire you.

3. **Listen.** If you don’t know what’s happening in your practice or among your workers, you can’t fix problems or address concerns. Ask questions, check in on staff members in different areas of your practice and find out what’s going on. The more you know, the better you’ll be able to reach your workers and address their needs.3

4. **Be honest.** If things have gone wrong or are less than perfect in your practice, own up to it and look for ways to improve. Effective leaders don’t deny weaknesses and mistakes; they learn from them.4

5. **Communicate.** People who work with you need to know what direction things are headed. Be sure employees are informed about changes and developments in the practice, particularly those that affect them.

6. **Be a role model.** If you’re asking people to work longer hours, don’t clock out early. If you want staff to abide by a new workflow practice, be sure you’re taking part.5 Build trust by practicing what you preach, and employees may be increasingly receptive to your leadership.

7. **Be positive.** People will likely be more agreeable if they feel your guidance will lead to something good. Be confident about the direction your practice is taking.

8. **Be open.** Every day you have the opportunity to learn something new, either from your surroundings, what you read, what you observe or the people you work with. Being a leader means continuing to grow and change so you can take your practice with you on the journey.

References
1. www.psychology.about.com/od/leadership/tp/become-a-better-leader.htm
2. Ibid.
3. www.investopedia.com/articles/pf/leadership-skills.asp
4. www.makeithappennow.org/advice/how-to-develop-your-leadership-skills-and-techniques/
5. www.psychology.about.com/od/leadership/tp/become-a-better-leader.htm

Any third-party trademarks referenced in this article are owned by and are the registered trademarks of their respective third-party owners. There is no affiliation, sponsorship or endorsement relationship between PNC or its affiliates and any such third party.

(Source: PNC Financial Services Group)
Two-in-one endodontic irrigation solution earns industry praise

Evaluated by 25 Dental Advisor consultants in 424 uses, Irritrol receives a 91 percent clinical rating (4.5 out of 5)

Irritrol, a two-in-one endodontic irrigation solution with a proven disinfection rate of 99.99 percent, was evaluated by 25 Dental Advisor consultants in 424 uses. This endodontic irrigating solution received a 91 percent clinical rating (4.5 out of 5 stars).

Irritrol is a single-step, endodontic irrigation solution formulated for use as a final rinse after sodium hypochlorite (NaOCl). Irritrol contains chlorhexadine (CHX) and EDTA to disinfect the root canal and remove the smear layer.

The majority of consultants who evaluated the product would recommend and/or switch to Irritrol. Comments from consultants include:

- “During irrigation with Irritrol, an amazing amount of debris is eliminated from the canal. I could see it bubble out.”
- “The green color makes it easy to identify and differentiate from other irrigating solutions.”
- “Simplicity of using our two favorite irrigation products with one solution.”
- “No waiting period for solution to work.”

The consultants who reviewed this irrigation solution rated the product highly in categories such as efficiency, ease of use, color and integration into their endodontic procedures.

A full Irritrol product review was published in the April 2016 Issue of The Dental Advisor, and it can be found online at www.dentaladvisor.com/irritrol.

(Source: EDS)
Place an order with HENRY SCHEIN at the ACP ANNUAL SESSION and get...

5% OFF!
Your order of $300 or more!

October 5–8, 2016
San Diego, California
Manchester Grand Hyatt

7% OFF!
Your order of $500 or more!

10% OFF!
Your order of $750 or more!

Visit us at Booth #501

Merchandise may be combined from the monthly flyer and the Henry Schein Dental Supplies Catalog to achieve minimum order. Special Instructions for Aruba® Users: If using Aruba® Windows, henryscheindental.com, Aruba Touch-Tone or the Henry Schein iPad® App, please enter the promo code into the comments section of your order. Some offers in this flyer are not available to government, institutional, and contract accounts. Discount excludes equipment and technology. Please check with your Henry Schein Sales Consultant for more information.
American Academy of Periodontology to hold its 102nd annual meeting at San Diego Convention Center

By AAP Staff

The American Academy of Periodontology (AAP) will hold its 102nd annual meeting from Sept. 10–13, at the San Diego Convention Center in San Diego, Calif. This year’s event is presented in collaboration with the Japanese Society of Periodontology and the Japanese Academy of Clinical Periodontology.

The 2016 meeting provides more than 26 continuing education credits from an array of multidisciplinary courses relevant to those at all levels of the dental profession, from student to seasoned specialist. Sessions include hands-on workshops and state-of-the-art practical courses on diagnosis and treatment methods, the latest technologies, clinical applications and practice management.

“This year’s annual session will welcome thousands of dental professionals from around the world, and we’re pleased to provide attendees with the opportunity to hear from periodontal thought leaders and innovators,” said Wayne A. Aldredge, DMD, president of the AAP. “All dental professionals are encouraged to join us in San Diego.”

Highlights of the AAP 102nd Annual Meeting include the following:

• Opening general session. Named one of U.S. News and World Report’s 14 pioneers of medical progress, Anthony Atala, MD, will share his insights on tissue engineering and clinical applications in regenerative medicine in “Technology and Innovation: Regenerative Medicine and 3-D Printing.” Atala’s work has been heralded twice by Time magazine, first in 2007 as one of the top 10 medical breakthroughs of the year and again in 2013 as one of the five discoveries that will change the future of organ transplants.

• Student/new periodontist series: These focused sessions are geared specifically toward those just beginning a career in periodontics, with topics highlighting pearls and pitfalls of residency, immediate implant placement and osseous surgery.

• Dental hygiene symposium: This interactive course will elevate the registered dental hygienist as a key partner in comprehensive periodontal care. Attendees can earn four continuing education credits during lectures on such topics as the use of lasers in periodontics, the detection of peri-implant disease and regenerative periodontics.

• CBCT Boot Camp: This intensive course will provide a comprehensive review of the concepts of imaging for implants, including image manipulation to produce clinically correct cross-sections and a systematic review of a CBCT volume.

To register for the AAP 102nd Annual Meeting or for more information, visit www.perio.org/meetings, call (800) 282-4867, ext. 3213, or e-mail meetings@perio.org.

JOI offers updated glossary

AAID announces launch of updated ‘JOI Glossary of Terms’

By AAID Staff

The American Academy of Implant Dentistry (AAID) and Allen Press are proud to announce the publication of the “JOI Glossary of Terms, 2016 Edition,” a specialized collection of words, phrases and definitions used in general dentistry, implantology and oral surgery.

Updated with more than 1,500 terms, it’s the largest and most comprehensive edition of the glossary yet, the AAID asserts. The glossary is a publication of the Journal of Oral Implantology (JOI), which is co-published by AAID and Allen Press.

For the first time, the glossary will be freely available in a digital flipbook format, which is enabled with HTML5 and easily accessible through a PC, tablet or smartphone device. The glossary features an intuitive user interface along with search functionality, bookmarking and a web-based mobile app.

The “JOI Glossary of Terms, 2016 Edition” was developed by Journal of Oral Implantology Editor in Chief, Dr. James Rutkowski, and a team of JOI associate editors and contributors from the past two years.

“The goal of the JOI Glossary of Terms’ has always been to educate. Whether you are a first-year dental student or have been practicing dental implantology for 20 years, the glossary is a wonderful professional resource tool,” Rutkowski said. “It is our hope that the expanded 2016 edition of the glossary reaches new audiences and continues to drive professional growth for both AAID and the dental community.

Past editions of the JOI glossary were published in print and mainly distributed to AAID members, students and at AAID conferences and educational events. The new digital flipbook format was developed with the goal of enhancing the glossary’s audience as well as improving content dissemination and ease of use.

The “JOI Glossary of Terms, 2016 Edition” can be accessed at joionline.org.
ADA now accepting applications for 2016 John W. Stanford New Investigator Award

By ADA Staff

The American Dental Association announced recently that it is now accepting applications for the John W. Stanford New Investigator Award. The award was created to highlight the crucial role that dental standards play in patient health and safety, and in the efficacy of dental products. It aims to encourage more dentists and dental students to conduct standards-based research and participate in standards development.

ADA dental student members, ADA members who earned their dental degree no later than 2011 and ADA members pursuing an additional degree or specialty are invited to apply. All submissions must include one of the following:

• An original standards-related research report completed within the 2015-2016 academic year but not published
• A standards-related article published within the 2015-2016 academic year
• A standards-related extended abstract developed within the 2015-2016 academic year

All submissions must include a statement in 250 words or less about how the research incorporates current dental standards and/or contributes to the development of dental standards. All application materials can be found at ADA.org/dentalstandards.

Applications are due by Oct. 1, and the winner will be notified in December. The winner will receive domestic airfare and a two-night hotel stay to present their paper at the ADA Standards meeting in San Francisco next March. They will also be announced in an ADA publication.

About the American Dental Association

The not-for-profit ADA is the nation’s largest dental association, representing more than 158,000 dentist members. The premier source of oral-health information, the ADA has advocated for the public’s health and promoted the art and science of dentistry since 1859. The ADA’s state-of-the-art research facilities develop and test dental products and materials that have advanced the practice of dentistry and made the patient experience more positive. The ADA Seal of Acceptance long has been a valuable and respected guide to consumer dental care products. For more information about the ADA, visit ada.org.

OSADA ENAC OE-F15

PIEZOELECTRIC ULTRASONIC SYSTEM WITH EXTENDED POWER

APPLICATIONS INCLUDE (BUT ARE NOT LIMITED TO):

- Osseotomy (bone dissection)
- Osseous expansion
- Osteoplasties (bone tissue collection cortical and medullary)
- Implant preparations
- Atraumatic extractions
- Excisions of bone torus
- Sinus window opening
- Sinus membrane separations
- Smoothing margins of bone and alveolar ridge
- Cleaning deep sockets
- Endodontic and periodontic procedures

OSADA ENAC OE-F15 UNIT DELIVERS:

- Powerful, safe bone-cutting
- Fine, precise cutting results
- Tips that cut bone faster with minimal injury
- Built-in peristaltic pump that minimizes temperature increases
- Autoclavable irrigation accessories, handpiece hose assembly and handpiece holder
- Waterproof, detachable foot switch
- LED light that illuminates surgical area
- All tips are interchangeable with ENAC OE-W10 unit, however ENAC OE-F15 unit with extended power provides highly efficient results with surgical tips in bone cutting

Osada’s NEW 180° Serrated Bone-Cutting Tip

ST125

OSADA, INC. • 3000 S. Robertson Blvd., Suite 130 • Los Angeles, CA 90034 • WWW.OSADAUSA.COM
800-426-7232 or 310-841-2220 • Email: info@osadausa.com

Published by Tribune America LLC
All rights reserved.
$475* Bundle includes

- Hahn™ Tapered Implant
- Hahn™ Tapered Implant Titanium Healing Abutment and Impression Coping or Scanning Abutment
- Choose from a BruxZir® Screw-Retained Implant Crown or BruxZir Solid Zirconia Crown with Inclusive® Custom Implant Abutment

BruxZir Solid Zirconia, the world’s most prescribed zirconia restoration, now comes as a complete tooth replacement solution. For about the same price as a crown and custom abutment, everything needed to replace a missing tooth is included. The bundle provides convenience and predictable treatment costs, and reduces the need to keep a supply of implants and prosthetic components on hand.

*Price does not include shipping or applicable taxes. Inclusive® is a registered trademark of Glidewell Laboratories. Hahn Tapered Implant is a trademark of Prismatic Dentalcraft, Inc. Price is valid only in the U.S.

For more information
888-786-2177
glidewelldental.com

Hahn Implants and components are manufactured in our Irvine, California, facility.

GLIDEWELL DIRECT
CLINICAL AND LABORATORY PRODUCTS
The Academy of Osseointegration (AO) has announced the recipients of the 2016 Outstanding Dental Student in Implant Dentistry Award. More than 50 students from dental schools across the country will receive the award, which honors their commitment to the field of implant dentistry.

Each student will receive a free year of AO membership, a complimentary subscription to the “International Journal of Oral & Maxillofacial Implants (JOMI),” a certificate and $500. Additionally, each will receive free registration for AO’s 32nd Annual Meeting set for March 15-18, in Orlando, Fla.

Recipients of the 2016 Outstanding Dental Student in Implant Dentistry are:

- Carter D. Beckham, University of Louisville, School of Dentistry
- Vanessa Bikhazi, New York University, College of Dentistry
- Jonathan P. Bishop, Tufts University, School of Medicine
- Emily K. Boothby, Ohio State University, College of Dentistry
- Michael Britting, University of Nevada, Las Vegas School of Dental Medicine
- Arielle K. Castine, University of Michigan, School of Dentistry
- Derek Chenet, Columbia University, College of Dental Medicine
- Isaac Chiniz, Stony Brook University, School of Dental Medicine
- Holly M. Clark, Indiana University, School of Dentistry
- Andrew Correaes, Loma Linda University, School of Dentistry
- Michael K. Cvechle, University of North Carolina at Chapel Hill School of Dentistry
- Rashi P. Dave, University of Pittsburgh, School of Dental Medicine
- Steven J. Van De Graaff, Creighton University, School of Dentistry
- Navnot S. Dhillon, University at Buffalo, School of Dental Medicine
- Colin F. Don, University of Southern California, Herman Ostrow School of Dentistry
- Brittany E. Eagan, Case Western Reserve University, School of Dental Medicine
- Mikala Gaffke, Marquette University, School of Dentistry
- Napoleon Gaither, Meharry Medical College, School of Dentistry
- Stephanie R. Ganter, Texas A&M University, School of Dental Medicine
- Neha Grewal, University of Connecticut, School of Dental Medicine
- Pavel Y. Ivashchuk, University of Maryland, School of Dentistry
- Erica J. Jasa, University of Nebraska Medical Center, College of Dentistry
- Jonathan J. Jelmini, University of California, San Francisco, School of Dentistry
- Kevin C. Kaiser, University of Missouri, Kansas City School of Dentistry
- Philip Kaplan, Howard University College of Dentistry
- Garrett F. Kever, Louisiana State University, School of Dentistry
- Grant T. King, University of Tennessee Health Science Center, College of Dentistry
- Kasey M. Kirchner, Southern Illinois University, School of Dental Medicine
- George K. Koch, III, Harvard School of Dental Medicine
- Deanna S. Lee, University of the Pacific, Arthur A. Dugoni School of Dentistry
- Ellen B. Lee, University of Mississippi, School of Dentistry
- Austin L. Lyman, Temple University, Kornberg School of Dentistry
- Cory McMahan, West Virginia University, School of Dentistry
- Brin L. MacMillan, University of Detroit Mercy, School of Dentistry
- Kitatuka McIntosh-Falcon, University of Puerto Rico, School of Dental Medicine, Medical Sciences Campus
- Edmund P. Monsef, A.T. Still University, Arizona School of Dentistry & Oral Health
- Alexander M. Munaretto, University of Illinois at Chicago, School of Dentistry
- Robert H. Painter, IV, Medical University of South Carolina, James B. Edwards College of Dental Medicine
- Ed G. Pantzlaff, University of Iowa, College of Dentistry and Dental Clinics
- Joel Pinter, Rutgers University, School of Dental Medicine
- Michelle J. Peters, Virginia Commonwealth University, School of Dentistry
- Steven C. Petrutz, University of California, Los Angeles, School of Dentistry
- Ashwin Ravisanakt, University of Kentucky, College of Dentistry
- Jennifer Ryan, Augusta University, The Dental College of Georgia
- Reza H. Shouhiastari, University of Pennsylvania, School of Dental Medicine
- Caroline A. Olsen Smith, University of Washington, School of Dentistry
- Justin R. Smith, University of Florida, College of Dentistry, Gainesville
- Alexander Soneson, Oregon Health & Sciences University, School of Dentistry
- Jason M. Tartagni, Nova Southeastern University, College of Dental Medicine
- Kyle P. Trobough, University of Texas Health Sciences Center at San Antonio Dental School
- Justin M. Young, University of Oklahoma, College of Dentistry
- Lizzna G. Zabanal, University of Texas, School of Dentistry at Houston
- Li Zhong, Boston University, Henry Goldman School of Dental Medicine

By Academy of Osseointegration Staff

Academy of Osseointegration announces its 2016 outstanding students in implant dentistry
OUR WORLD IS NOT FLAT

NEITHER IS THE ANATOMY OF YOUR IMPLANT PATIENTS

Your world is already full of clinical challenges so why work harder because of conventional thinking? Instead of augmenting sloped ridges to accommodate flat-top implants, it’s time to discover a simpler solution by using an implant that follows the bone.

Because sloped-ridge situations call for anatomically designed sloped implants.

**OsseoSpeed™ Profile EV**
It’s time to challenge conventional thinking
At symposium, Nobel Biocare unveils new innovations to enhance restorative workflow

By Nobel Biocare Staff

Nobel Biocare recently welcomed dental professionals from around the world to the iconic Waldorf Astoria hotel in New York City for the Nobel Biocare Global Symposium 2016.

The program for the sellout event included lectures, hands-on training and master classes from the world’s leading experts in implant dentistry. Under the banner “Where Innovation Comes to Life,” Nobel Biocare unveiled a number of innovative new products and solutions at the event. According to the company, each is designed to help dental professionals treat more patients better, and many are so unique they are either patent protected or in the patent process.

Enhancing workflows for shorter time-to-teeth

The Nobel Biocare Global Symposium showcased the role that digital technology plays in increasing the efficiency and accuracy of diagnostics, treatment planning and guided surgery. Attendees were able to visit a digitally enabled practice exhibit featuring current technology as well as potential future innovations designed to increase integration, collaboration and efficiency. Participants could see how Nobel Biocare’s leading integrated workflow can accelerate, combine or even eliminate treatment steps, the company asserts.

Nobel Biocare is also advancing the restorative workflow in terms of components. An important new addition to Nobel Biocare’s assortment of components is the On1 concept. This modular solution bridges the gap between the surgical and prosthetic workflows. The On1 Base connects to the implant at surgery and then remains in place throughout the healing process, prosthetic work and then the lifetime of the restoration. This leaves the soft tissue undisturbed without compromising on restorative flexibility, leaving the biological seal it creates in place for optimized healing, according to Nobel.

As the On1 Base is seated at implant placement, the concept offers the surgeon peace of mind that only precision-engineered Nobel Biocare components are used with the implant, removing risks associated with using third-party abutments. It also eliminates the risk that non-biocompatible, unclean or reused components come into contact with the soft tissue.

For a restorative clinician, the On1 Base allows for an improved patient experience, as the discomfort previously associated with the removal of healing abutments can be completely avoided. With two height options available, there is the flexibility to change the On1 Base should the thickness of the soft tissue require it in the short or long term — an option not available with tissue-level implants, the company states.

Nobel Biocare also presented the evolution of the NobelProcera at the symposium. This includes the launch of the new NobelProcera Crown, the first in a series of options in a new high-translucency multilayered full-contour zirconia material. This new material possesses exceptional properties, combining high strength and durability with excellent esthetics, the company asserts.

Nobel states it is now easier than ever to obtain precision-engineered NobelProcera restorations. One route is via the new NobelDesign CAD software, which offers dental technicians powerful CAD tools with an intuitive and adaptive interface. Another access point is NobelProcera Scan and Design Services.

Advancing edentulous solutions

As a leader in edentulous treatment and the company behind the revolutionary All-on-4® treatment concept, Nobel Biocare is committed to further advancing the standard of care for edentulous patients.

NobelSpeedy, the original and widely documented implant for the All-on-4 treatment concept, is now available in more lengths and diameters for increased surgical flexibility. With new shorter 7 mm, longer 20, 22 and 25 mm implants and a wider 5 mm implant variant, this expanded range is designed to further help clinicians utilize a graftless approach and achieve cortical anchorage where bone quality and quantity are limited, allowing more patients to benefit from the proven advantages of the All-on-4 treatment concept.

For more information about the Nobel Biocare Global Symposium 2016, visit nobelbiocare.com/global-symposium-2016.
I Once Drilled Blind, But Now I See

Without Navident

same surgeon, same jaw

With Navident

Using the CBCT image as a map, Navident guides surgeons just like a GPS guides drivers. The dental surgeon plans where implants should be placed in the image. Navident, dynamically tracking the drill and the patient’s jaw, provides guidance and visual feedback to ensure the implants are placed according to plan.

Why? Because a Millimeter Matters! Dental surgery is among the most precise surgeries performed today. While neurosurgery requires operational accuracy for success, dental surgery has an even smaller margin of error for ideal position, depth and angulation of implant placement.

Precision and Safety
Confidence and Reduced Anxiety
Minimally Invasive Osteotomy
Attract Patients and Referrals

Please visit us at booth

#401 - AAP Annual Meeting
#1141 - AAOMS Annual Meeting

As of time of printing awaiting 510(k) approval for sale in US

1-844-NAVIDENT
628-4336
www.claronav.com
info@claronav.com
Osteogenics secures North American distribution of Resorba dental sutures

By Osteogenics Staff

Osteogenics Biomedical, a leader in the development of innovative dental bone grafting products, recently announced the acquisition of exclusive North American distribution rights for the premium German dental suture brand, Resorba.

While most sutures in dentistry are simply repositioned from medicine, Resorba, a major suture manufacturer in Germany since 1931, created a division exclusively for dentistry. Resorba combines unique materials with specialty dental needles to create products better suited for dental surgery.

Among its unique product offering is its best-selling dental suture, Glycolon™, an absorbable suture with a monofilament construction comprised of polyglycolic acid (PGA) and polycaprolactone (PCL). The monofilament structure provides excellent handling properties, does not wick bacteria and allows foratraumatic passage through tissue. Glycolon maintains 50 percent of its tensile strength for 11 to 13 days.

Resorba dental suture needles are manufactured from premium tempered 300-series stainless steel. Select configurations are also available with a black needle that provides increased contrast in the mouth for enhanced visualization.

“Following the success of our own Cytoplast™ PTFE suture line, expansion of our suture portfolio was a long-term goal,” said Osteogenics president, Shane Shuttlesworth. “Resorba’s focus on unique, premium products designed for dentistry fits perfectly within our product portfolio philosophy.”

For more information on the complete line of Resorba dental sutures, visit osteogenics.com/resorbasutures, or contact a customer service specialist at (888) 796-1923.

About Osteogenics Biomedical

Headquartered in Lubbock, Texas, Osteogenics Biomedical is a leader in the development of innovative dental bone grafting products serving periodontists, oral and maxillofacial surgeons and clinicians throughout the world who are involved with regenerative and implant dentistry. Osteogenics offers a complete line of bone grafting products including enCore® Combination and Mineralized Allografts, Cytoplast PTFE membranes, Cytoplast collagen membranes, Vitala™ porcine pericardium collagen membranes, Cytoplast PTFE suture, NovaBone® bone graft putty, the Pro-fix™ Precision Fixation System and Resorba® dental sutures.

‘Resorba’s focus on unique, premium products designed for dentistry fits perfectly within our product portfolio philosophy.’
Let our new products tackle your toughest procedure

IA-400
Mini LED +
Piezomed

Now available from your dental supplier or via wh.com/na
Visit us at the AAP in Booths 1921 and 940. We will also be at the AADMS meeting in booth 844.
By i-CAT Staff

Building on the success of its i-CAT FLX cone-beam 3-D imaging technology, i-CAT, a brand of the KaVo Kerr Group, launches the i-CAT FLX V-Series, the industry’s first fully upgradable solution. This system offers three fields of view (FOV), enhanced low-dose and ultra-low-dose 3-D imaging and dedicated 2-D traditional panoramic capabilities at a price point starting at under $90,000.

The i-CAT FLX V-Series enables clinicians to support current or incorporate new treatment offerings, such as airway analysis, with an imaging solution that can grow as their practice evolves, according to the company.

Features include:

- A solution that can grow as a practice’s diagnosis and treatment offerings expand. i-CAT FLX V-Series provides the option of upgrading the field-of-view based on the types of procedures performed today and in the future, such as:
  - i-CAT FLX V8 – 8 cm x 8 cm, 2-D Pan
  - i-CAT FLX V10 – 10 cm x 16 cm, 2-D Pan
  - i-CAT FLX V16 – 17 cm x 23 cm, 2-D Pan
- Enhanced low-dose and ultra-low-dose scanning, which is easily achieved using i-CAT QuickScan and QuickScan+ protocols, allowing practitioners to take complete 3-D images at a radiation dose comparable to a 2-D panoramic image.

- The i-PAN™ feature allows technicians to take a quick 2-D pan using the same high-quality sensor that is used to acquire 3-D scans. Coupled with software used to enhance overall 2-D image quality, clinicians can use their i-CAT FLX V-Series for both 2-D and 3-D imaging.
- Utilizing i-CAT PureScan™ technology and full-size sensor, i-CAT FLX V-Series scanners utilize full-beam scanning and maximizes the use of the large sensor to capture a 3-D scan. This provides more anatomical information without compromising image quality compared to other smaller sensors.

“The i-CAT FLX V-Series enables practitioners to upgrade 2-D and 3-D technology at their own pace without buying a new 3-D CBCT or other imaging machine,” said Richard Matty, marketing director for i-CAT. “At any time, if practitioners want to add implants, airway analysis and treatment planning, orthodontic care, oral surgery or other capabilities, they can do so with a simple software upgrade. They can also offer 3-D imaging to other practices or health-care providers, thereby potentially expanding their practice.”

The i-CAT FLX V-series is available only through the company’s exclusive distributor, Henry Schein Dental. The i-CAT FLX V-Series will be presented at several upcoming industry events, including the ICIO Summer Implant Symposium in San Diego, Calif., and CDA in San Francisco, from Sept. 8-10. In addition, the i-CAT FLX V-Series was pre-launched in mid-July with two webinars, which can be viewed online via the link below.

For more information about the i-CAT FLX V-series, including a product brochure, access to either webinar or to schedule a demos, visit http://info.i-cat.com/dt_flx.
• AlloSculpt Demineralized Allograft Putty
• AlloSculpt-3D Demineralized Cortical Allograft Putty With Cortical Cancellous Chips
• Resorbable Hydrogel Carrier Resists Irrigation To Keep Graft In Place
• Rapid Mixing With Either Autogenous Blood Or Included Buffer Solution

Salvin Dental Has Acquired Exactech Dental Biologics
If You Have Been Using Exactech Opticure®, Order Salvin AlloSculpt®
If You Have Been Using Exactech Opticure®+ccc, Order Salvin AlloSculpt-3D®
They Are Exactly The Same Products

Salvin Dental Specialties, Inc
Toll Free US & Canada 800-535-6566 • www.salvin.com
© 2016 Salvin Dental Specialties, Inc. All Rights Reserved.
Manage your perio patients with the minimally invasive REPAIR™ Laser Protocols!

+ Gain access and increase surgical visibility
+ Remove calculus
+ Perform open or closed laser crown lengthening

Can other perio lasers do that?

YOU’RE INVITED TO THE BIOLASE LASER RECEPTION

Share an evening with fellow periodontists including Dr. Samuel B. Low, Past-President of the AAP.

September 9th, 7:15pm-9:30pm
Marriott Marquis San Diego Marina
333 W. Harbor Drive, San Diego, CA 92101

RSVP at: go.biolase.com/AAP2016

Visit Booth #1719 at the AAP to see what is new in Waterlase Dentistry research!