AAS heads to Las Vegas for Winter Conference

Members encouraged to invite restorative colleagues

By Sierra Rendon, Managing Editor

T

he American Association of Orthodontists will host its 2014 Winter Conference from Feb. 7–9 at Caesars Palace in Las Vegas.

The focus of the event will be “Adult Treatment: A Clinical Conference for Orthodontists and Restorative Dentists.”

AAO members are encouraged to invite restorative dentistry colleagues to attend and join the exploration of how the specialties can collaborate to produce outstanding clinical results.

The team aspect of the event is just the beginning, according to organizers, as there will be a comprehensive set of presentations from recognized clinical experts, covering topics ranging from new treatments in adult esthetics to sleep apnea to breakthrough orthodontic and restorative materials as well as computer-assisted diagnostics and treatment.

Attendees will hear perspectives about the clinical and medico-legal risks inherent in adult treatment, and an update on the most current considerations in the management of TMD. Methodologies to change the speed and quality of treatment through changes in patient physiology will be discussed with focus on both accelerated osteogenic orthodontics and vibratory stimulation of tooth movement, organizers said.

This AAO Winter Conference is dedicated to Dr. Vince Kokich. Kokich served as the AAO’s Winter Conference co-chair and worked to develop the scientific program prior to his passing.

This meeting is dedicated to Kokich in memory of his many contributions to dentistry and specifically to interdisciplinary treatment as featured in this program.

Registration is open and hotel reservations may be made at www.aaoinfo.org. Restorative dentists may also register at www.aaoinfo.org. Use the “Meetings & Events” section pull-down to access information about the conference and to register.

This AAO Winter Conference is dedicated to Dr. Vince Kokich. He served as the conference co-chair and developed the scientific program prior to his passing.
How to improve our diagnostic acumen: Teach it to our residents

Part I

By Dennis J. Tartakow, DMD, MED, ED, PhD, Editor in Chief

Are orthodontists responsible for examining the occlusion, teeth and gingiva? Yes, for sure, training and understanding not just to straighten teeth, correct malocclusions or improve skeletal discrepancies of the jaws but to ensure that any and all pathology in the head and neck is identified, documented, treated or referred for treatment.

After many years of clinical practice and teaching, it occurred to me that many of our residents are missing certain aspects of their orthodontic training. Nothing is a better teacher than personal experience, however, what we do and how we do it in practice often reflects what we teach our educators and mentors in postgraduate residency programs.

The following are examples of issues and guidelines that are seldom, if ever, mentioned in our teaching, they are subjects that go beyond the routine in the diagnostic process and examination.

1. Documentation is the most glaring problem that is often overlooked in resident training, mostly because it is assumed that the residents know how to write and what to write in all correspondences, diagnostic letters and patient charts, but do they? Most do not! We must prepare them to speak before a panel of experts to write and what to write in all correspondences, diagnostic letters and patient charts, but do they? Most do not! We must prepare them to speak before a panel of experts to write and what to write in all correspondences, diagnostic letters and patient charts, but do they? Most do not! We must prepare them to speak before a panel of experts to write and what to write in all correspondences, diagnostic letters and patient charts, but do they? Most do not!

2. Cephalometric radiographs can provide much more diagnostic information than measuring lines and angles by looking beyond the teeth. As a broad scan, it can be used to find pathology other than dental disease. Not too long ago, a recently graduated orthodontic resident came to me beaming, stating that because of his diagnostic lectures, he spotted a carotid artery calcification on a routine cephalometric radiograph of a new 24-year-old patient. Presenting with no familial or personal medical history of high cholesterol or heart disease, this calcification was never diagnosed and unexplained to the patient. According to the vascular surgeon who removed the calcification, this pick up saved the patient’s life.

A cephalometric radiograph can help in diagnosing cervical vertebral problems, disc disease and other spinal abnormalities. Tonsil and adenoid enlargements that contribute to airway impingement, open-mouth breathing, high palatal vaults, open-bites, etc. can also be identified on a cephalometric radiograph. The list goes on, but such pick-ups can be found only if the doctor takes the time to examine the X-ray in greater detail.

3. Submental vertex radiographs (SMV) and posterior-anterior X-rays (PA) can and do show expansive lesions of the mandible whereas the panorex and cephalometric X-rays often do not.

Such was the case of an 18-year-old female patient who had an asymptomatic mandibular swelling and was eventually diagnosed as fibrous dysplasia. The diagnosis of fibrous dysplasia in a patient raises important questions for the orthodontist such as: (a) can a patient with fibrous dysplasia be treated with orthodontics, or (b) what are the contraindications to moving teeth in the presence of fibrous dysplasia? A rare finding indeed, but both of these views are extremely valuable tools that can facilitate early diagnosis of other pathology, especially those caused by benign and malignant disease processes. The SMV and PA are omnipotent in diagnosing skeletal midline discrepancy.

Midline deviations are often misdiagnosed and labeled as a dental problem, when in fact there is an underlying skeletal asymmetry in the maxilla, mandible or both. Midline issues and diagnoses can easily be confirmed by using these two radiographs that beautifully demonstrate when the left and right mandibular corpi are unequal in length.

How often do we blame a cephalometric radiograph with non-superimposed posterior-anterior views on technique, when in fact (a) the PA view identifies the length of the mandibular rami to be unequal in length, and (b) the SMV view identifies the length of the mandibular corpi to be unequal in length.

Consequences of missing this astute diagnosis can have daunting and dire treatment results. Besides, attempting to move a maxillary or mandibular dental midline may be like shoveling sand back into the ocean when the tide is coming in... a sure miscalculation that will result in relapse. These additional views can prevent misdiagnosis, poor treatment results and explain or even lead to understanding the etiology of a patient’s malocclusion. Is it skeletal, dental or both?

NOTE: Part II of this article will publish in the next edition of Ortho Tribune.

Obituary: Dr. Howard Sacks

Dr. Howard Sacks, a member of the Ortho Tribune’s Editorial Review Board, passed away on Oct. 20, 2023.

Dr. Sacks was a graduate of Queens College, University of Pennsylvania, School of Dental Medicine and Albert Einstein Medical Center Orthodontic Residency program and practiced orthodontics in Miami, Fla., since 1977. He is survived by his wife, Dr. Arlene Sacks, daughter Mara Sacks DeWrell, son Merritt Sacks and three grandchildren.
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GLAO and MSO combine for 2014 Annual Session in Chicago

By MSO staff

GLAO and MSO will host a joint 2014 Annual Session in Chicago this year. Photo/WWW.SXC.HU

The Great Lakes Association of Orthodontists and Midwestern Society of Orthodontists are combining efforts for a joint 2014 Annual Session to be held Sept. 11-13 at the Hilton in downtown Chicago.

The program features a premier scientific program and staff program. Doctor lectures will be presented by Drs. Roberto Justus, Katherine Vig, Thomas Cangialosi, Eustáquio Araujo and Patrick Turley and a special presentation by Paul Zuelke. The staff program includes a high-energy presentation by Bruce Manchion, CEO of Universal Training Concepts Inc., on Friday and a combined presentation on Saturday with Paul Zuelke, president and founder of Zuelke & Associates Inc., and LeeAnn Pensiche, president and founder of Pensiche & Associates.

The newly redesigned Hilton Chicago is located on Michigan Avenue across the street from Grant Park, overlooking the lake with easy access to the cultural museum area of downtown Chicago. The Hilton Chicago has a storied past hosting every U.S. president since Harry Truman.

Go to www.msortho.org for a schedule of events and exhibitor prospectus. Registration and hotel reservation information will be mailed to GLAO and MSO members, as well as being available on the website, by early summer.

The Great Lakes Association of Orthodontists and Midwestern Society of Orthodontists are separate constituent organizations of the American Association of Orthodontists (AAO). Together they represent more than 2,700 orthodontists in Indiana, Michigan, Ohio, Pennsylvania (west of the Alleghenies), Missouri, Illinois, Iowa, Wisconsin, Minnesota, Nebraska, South Dakota, North Dakota and the Canadian provinces of Manitoba and Ontario.

The last GLAO-MSO combined annual session held together in Chicago in 2004 attracted 591 doctors and 768 staff.

For additional information, go to www.msortho.org or contact the MSO office by phone at (636) 922-5551, e-mail msortho@charter.net or send mail to 3260 Upper Bottom Road, St. Charles, Mo 63303.
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ClearCorrect appoints new CTO in preparation for product releases

ClearCorrect, LLC, announced recently that orthodontist Dr. James Mah, DDS, MSc, DMSc, has been appointed as its new chief technology officer to help develop improved treatment protocols, training resources and brand-new products to be unveiled this year.

“We’re out to make innovative products that dentists and orthodontists love, products that are both effective and affordable. There’s no one more qualified to lead that effort than Dr. Mah,” said Jarrett Pumphrey, ClearCorrect CEO. “With his extensive clinical experience and his deep knowledge of advanced dental technologies, he’s a tremendous addition to our team, and we’re excited to have him.”

Mah is a practicing orthodontist as well as a clinical professor and the program director in orthodontics at the University of Nevada, Las Vegas. He has pioneered research and developments in 3-D imaging and modeling in orthodontics for the purposes of diagnosis, treatment planning and therapeutics as well as anthropology and forensics. He is also involved in the research and development of 3-D facial imaging devices, intra-oral scanners, CAD/CAM applications in dentistry and cone-beam CT scanners.

Mah commented on his new position as chief technology officer. “ClearCorrect delivers innovative solutions to the dental community, and I’m proud to join the team. Together, we’re improving ClearCorrect’s already-great products while also working on new releases for 2014 that we’re pretty excited about sharing with our providers.”

OrthoAccel Technologies expands its senior management team

OrthoAccel Technologies Inc. announced two new additions to its senior management team: Jeff Layton as the company’s new chief operations officer and Doug Bukaty as vice president of sales. Both executives have distinguished careers that include management positions at Fortune 500 companies.

As chief operations officer, Layton oversees OrthoAccel’s product engineering, design, development and manufacturing as well as supply chain, quality assurance and customer service.

Most recently, he was the vice president of operations for Xtreme Power, a manufacturer of renewable energy storage systems. Layton’s 25-year career also includes management positions at Dell, where he was the director of power and reliability engineering, and at 3M, where he was the operations manager for the company’s dental products division.

A graduate of the U.S. Naval Academy, Layton was a nuclear submarine engineering operations officer in the United States Navy.

At the leader of OrthoAccel’s sales division, Bukaty oversees all aspects of business development and revenue growth. He comes to the company from Saranova, a private, equity-backed specialty medical distribution business where he served as vice president of sales for Round Tree Medical.

Bukaty has more than a decade of corporate experience in the orthodontic industry with past sales positions at Align Technology and Johnson & Johnson’s “A” Company Orthodontics. A graduate of the University of Kansas, Bukaty also completed professional development programs at Northwestern University’s Kellogg School of Management.

“Jeff Layton and Doug Bukaty are great additions to OrthoAccel’s senior management team, and we know that their strong records of success in operations and sales will help fuel our next level of growth as the leader in accelerated orthodontics,” said Mike Lowe, president and CEO of OrthoAccel Technologies, Inc. “The company manufactures AcceleDent®, the only FDA-cleared, Class II medical device that has been proven to accelerate orthodontic treatment up to 50 percent.”

Lowe added, “These executives join OrthoAccel at a time of tremendous momentum as our AcceleDent product is now offered in more than 1,000 orthodontic offices in North America with plenty of opportunity for continued growth.”

Orthodontists and staff members who are interested in learning more about AcceleDent, or how to offer the technology at their practice, can locate an OrthoAccel sales representative at www.acceledent.com/orthodontists or by calling (866) 866-4919.

About OrthoAccel Technologies Inc.

Based in Houston, Texas, OrthoAccel Technologies, Inc. is a privately owned medical device company engaged in the development, manufacturing and marketing of products to enhance dental care and orthodontic treatment.

OrthoAccel developed and sells AcceleDent Aura, the first FDA-cleared clinical approach to safely accelerate orthodontic tooth movement by applying gentle micropulses via SoftPulse Technology® as a complement to existing orthodontic treatment.

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The content craze: How to do it the right way

By Angela Weber, OrthoSynetics

Content marketing has become a big thing in recent years, and this promotional technique is only poised to get bigger. When done right, content marketing is quite effective, and it doesn’t need to cost much — just an investment of a couple hours each week or so. Because of its growing importance and low barriers for entry, any orthodontic practice looking to rev up its marketing should consider adopting content marketing to bring in new patients and strengthen relationships with existing ones.

But what is content marketing anyway? It basically is about the creation of articles or entertainment that a business’ customers care about, and this content will directly or indirectly lead to sales. As a marketing tactic, it’s nothing new. The Michelin Guide, which is well known for its prestigious ranking of restaurants, first began in 1900 to provide suggested destinations for motorists who presumably would use Michelin tires to travel. “The Guinness Book of World Records” was created to settle bar bets and spur conversations in pubs where, you guessed it, Guinness was served. It’s been a long-standing practice for airlines to publish in-flight magazines that subtly promote destinations they fly to.

Like so much else, content marketing has moved online, and the current nature of the Internet has allowed it to flourish. (Content marketing can take different forms, but to keep things simple for now, just think of it as an ongoing blog post on your practice’s website.) Here are five reasons to participate in content marketing:

- **Boost search traffic to your site** — Search engines give higher rankings to sites that (a) are updated and fresh and (b) provide users with the information they are looking for. Content marketing satisfies on both counts and has replaced dubious search-engine optimization tricks like keyword stuffing.
- **Increase social media activity** — Content marketing is not social media marketing, but social media enhances your content’s visibility. When you post links to your blog on your practice’s Facebook page or Twitter feed, you’ll give your followers something to respond to while strengthening those networks.
- **Establish expertise** — People online are searching for answers to their questions, including orthodontic ones. Why shouldn’t you be the one who has the answers? Show what you know. Your content can be useful and in demand.
- **Show your practice’s personality** — Unique content created by you and your staff will allow patients to get to know you better, in turn deepening relationships and boosting referrals.
- **Create differentiation** — If a prospective patient were choosing between orthodontists and saw your site overflowing with personality and activity and another site that was bland and static, the scales would definitely tilt to your practice’s favor.

**Get with the plan**

The difference between social media marketing and online content marketing is that in the former the focus is on creating activity in the social networks themselves, while in the latter your practice’s website is the hub (with social media helping to direct people there). There is some overlap, of course. Some content, like videos or photos, can work well both on a social network and on your own site. In the end, strong content marketing can serve as fantastic fuel for social-network engagement.

Because of the interplay between these online marketing strategies, it might seem a little unclear as to how to put it all together. That’s why before embarking upon a content marketing push, it’s best to start with a plan.

- **Figure out your goals** — Take a look at the five reasons above to participate in content marketing. Which ones do you find the most important? Is there another goal that’s not listed? Decide what you want to achieve first. Then find a way to quantify success. Depending on your goals, that might mean doubled web traffic, a 50 percent increase in referrals, or something else.
- **Research and gather general ideas for content** — One good place to start brainstorming is to ask your employees to make a list of the questions they hear frequently asked. What do people want to know? Think about the conversations you yourself have with patients every day, and use that to generate ideas. And certainly don’t forget to ask some of your patients directly. What sort of content do they say they would be interested in?

- **Decide what content to create** — The content you create will depend on your goals and your research. If you’re going for expertise and authority, you might want to create articles to answer the questions people have, write patient case studies and offer orthodontic tips. If you’re going for a more personal approach, your content would likely more center around first-person blog posts and informal videos of what day-to-day life is like in your practice.

- **Plan a content schedule** — The hardest thing about content marketing is generating quality content on a consistent basis. While a robust content marketing campaign is ideal, posting items to your blog just a few times a month is sufficient to see the benefits. Determine what your office can realistically handle, and make sure to calibrate your goals accordingly.
- **Delegate content creation** — Will you create the content yourself, will one staff member do it, or will it be a team effort? Figure out who in your office will create the content and add the task to their list of duties. You may find some staff members will find this endeavor particularly interesting to do.
- **Decide on distribution** — Uploading content to your website and leaving it at that is OK, but to reap greater benefits, you should take advantage of social networks. The problem is there are so many of them. So poll your target audience (during the research stage) and find out which social networks they use the most. Studies also show there are more effective times than others to post for optimal engagement.

Don’t expect thousands of Internet users to come flooding to the first article you post on your blog. Content marketing is not a quick fix for anything. But even if you have posted just two items a month, by the end of the year, you’ll have 24 new pieces of material on your website. That content will be enough to draw attention from search engines, strengthen patient relationships and differentiate you from competitors. Content marketing requires sustained effort but rewards it, too.

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Thinking outside the metal box: Why wait?

By Coretta E. Morning, 3M Unitek
U.S. Marketing Manager, and
Alice M. Hill, 3M Unitek U.S. Marketing Communications Supervisor

During the course of the last decade, the patient pendulum has shifted from “Do I have to wear braces?” to wanting to show off those braces via a “selfie” (also known as a self portrait with a camera at arm’s distance) that is posted to the Internet via a social media site. With this pendulum shift, there is a much stronger desire to show off a smile, face, body or unique personality, and more importantly, to describe the experience. It is a newfound freedom that all generations are taking advantage of.

What’s interesting about this new method of sharing data shows that 67 percent of consumers read online business reviews and 70 percent will trust a business review that has 6 to 10 reviews. Further, when an online review is read, 58 percent of readers say that the positive customer reviews will affect their decision making (http://socialmediatoday.com/dougslasky/561225/infographic-why-do-people-write-online-reviews).

Dentists today offer their adult patients tooth-colored fillings, tooth whitening, veneers and caps. Dermatologists offer skin resurfacing and peels, plus Botox™ to combat wrinkles. Plastic surgeons offer no end of surgical and non-surgical body and face enhancements.

The common thread among these practitioners is the proactive and aggressive approach to discussing esthetics with the patient. In July 2011, a Los Angeles Times article offered that orthodontic technology had advanced right alongside that of cosmetic procedures and that there are now options that provide that “esthetic look” while in treatment, especially for adult patients who are now “opening wide” for braces (Mascarelli, Amanda Leigh. Focus on Dental Health; Braces Grow Up: Los Angeles Times, July 4, 2011, Home Edition, E-3).

These are the cosmetic specialties, including orthodontics, that are being impacted by the wave of patrons who want to be seen and heard. A visit to www.healthgrades.com, or a review of your competitors’ websites, will illustrate how positive testimonials and/or referrals are a part of the equation to being successful, helping esthetic services gain ground in consumer health services. The other part of that equation is setting your practice apart by offering a differentiated product.

Historically, the metal bracket has been the bracket of choice, primarily because of functionality, durability and overall legacy of dependability. However, ceramic and lingual brackets now interest patients of all ages and especially the ones who also want fashion and discretion. And because it is this generation of consumer that will provide a testimony of their orthodontic experience, who will take that selfie of their smile and tweet or send a message via Facebook, an orthodontic office with esthetic choices can capitalize on an opportunity to differentiate themselves via the latest social media vehicle.

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- “The Source” at 3MMarketingSource.com is your one-stop site for professional, customizable marketing tools that will help differentiate and grow your practice. Use these Clarity and Incognito branded resources to elevate your practice, attract new patients and build your referral network.

- “PaintYourSmile.com” is the newest tool from 3M Unitek for the orthodontic office. This interactive website application allows users to upload their own picture and add Clarity ADVANCED Ceramic Braces or Victory Series™ Low-Profile Braces to their smile. Then they can personalize the braces with colorful Alastik™ Ligatures and send the image via e-mail, Twitter and Facebook to friends and family. The website app has also been optimized for mobile and tablet use.

The 17th Annual 3M Unitek Summit will address the shift to esthetic orthodontics and discuss how you can win in orthodontics. Now offered in two great locations, you can enjoy the desert or the city while unlocking the secrets to winning the patient game and “thinking outside the metal box.” For more information, contact your 3M Unitek sales representative at (800) 423-4588.

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The top 5 ways to reinvent your practice in 2014

By Mark S. Sanchez, DDS, founder and CEO of tops Software

If you’re prone to making New Year’s resolutions, you may have vowed to lose weight or exercise more often. But here are some other resolutions I think we should make to run your practice more efficiently and profitably. Have a more rewarding year. Reinvent the way you work.

But here are five things you can try this year.

Hire an ‘A’ team
As a practicing orthodontist, I know that having the right people can make or break any business, including an orthodontic practice. But how do you find those people? How do you keep them and motivate them? I recommend the book “Who” by Geoff Smart and Randy Street. The book has simple, easy-to-follow steps that will help you hire the best people for your practice. In fact, I have used the concepts in this book to attract and retain “A” players at tops Software.

If you’re wondering how well this method works, perhaps I should mention that our customers regularly make comments such as the following. “The whole tops team has the best attitude of any company we deal with, nothing is ever a problem!” I rest my case.

Start using checklists (if you’re not already)
I am a big fan of “The Checklist Manifesto” by Atul Gawande. A checklist is a simple tool that can help manage complex processes. My favorite quote from the book is this: “[C]hecklists seem able to defend any one, even the experienced, against failure in many more tasks than we realized. They provide a kind of cognitive net. They catch mental flaws inherent in all of us — flaws of memory and attention and thoughtlessness. And because they do, they raise wide, unexpected possibilities.”

If you’ve had surgery lately, the nurses and doctors in the O.R. have most likely used a checklist. Airlines use checklists, as do restaurants. Our team at tops uses checklists for all kinds of processes, whether it’s converting a new customer, preparing for a meeting or creating a print piece. You can use checklists in your own practice in countless ways to manage your practices profitability and efficiently.

As a result, we often don’t understand what tools we need until we’ve already been practicing for some time. Take practice management software, for example. Until now, all of the orthodontic practice management systems — topsOrtho included — have done the basic things. They’ve gotten better over time, but they are still doing the basic things. They’re not really management tools, they’re just reporting tools. They’re not active, they’re passive. As a result, consultants haven’t been able to get the information they need, and reporting has been a painful and inefficient process for the staff members in a practice. No system has really come close to what it’s supposed to do.

However, we believe that we’ve cracked the code of patient tracking. Our secret blend of data, folded neatly into a seven-dimensional matrix, D7 Matrix™ analytics — reveals each practice in a new light. With D7 Matrix, we’ve found the perfect balance between complexity and simplicity. In just a few clicks, doctors, their staff members and their consultants can create a multidimensional analysis. If you want a snapshot of where your patients are in their treatment, how many new starts you have — whatever analysis you want to create — you can do it in one or two clicks.

In the hands of a skilled treatment coordinator, D7 Matrix is like having a Navy SEAL on staff to carry out the most important missions. If your software doesn’t offer this, you can’t truly see what is happening in your practice.

Beware of the hype
During the past few years, cloud computing has made lots of headlines — both in orthodontic publications and elsewhere. Cloud computing allows large companies like Amazon to buy on-demand processing power during peak seasons so they can process more orders. For them, it’s like buying electricity. Instead of building their own generators, they just connect to the power company.

It saves these companies hundreds of millions to be able to connect to the Internet and process more orders during peak times (like holidays), rather than buying their own equipment to handle that peak traffic — equipment that would just sit idle the rest of the year. This concept is called elasticity.

However, small businesses (including the vast majority of orthodontic practices) really don’t need that kind of elasticity. They don’t need public clouds (hosted servers). In fact, using hosted servers can actually prove more expensive than purchasing a server, as many companies have found.

Beyond the cost factor, chief technology officers agree that database-type programs — which need really high performance, in terms of reading and writing to memory — really belong on a private cloud: a server that a private organization can own and keep on its own premises that can be operated across various office locations by multiple users.

Our flagship product, topsOrtho™, has been using private/hybrid cloud architecture for almost a decade — long before the word cloud became a marketing term. Our private cloud allows users to have remote access to their data and automatic updates, without the cost and security concerns of a public cloud.

Align yourself with others whose values mesh with yours
We built our software to run on Apple computers because the hardware is phenomenal, and we feel confident encouraging our customers to buy other Apple products. We also work with several other companies in orthodontics that we feel comfortable recommending to our customers.

Likewise, you should develop alliances with others whose work you admire. These can include referring dentists and other health-care professionals with whom you might collaborate for more complex cases, not to mention financial advisors, attorneys and IT consultants. These are people who can affect your professional reputation, and they should be trusted colleagues. Like tops, these colleagues should be driven to elevate your practice.

So this year, resolve to run your practice more efficiently and profitably. Have a more rewarding year. Reinvent the way you work.

Reference
1) Metz C. Why some startups say the cloud is a waste of money. Available at: http://www.wired.com/wiredenterprise/2013/08/memcpu-and-amazon/ Published Aug. 15, 2013.

About the author
MARK S. SANCHEZ, DDS, is the founder, CEO and chief developer of tops Software. He practices in one of Atlanta’s leading orthodontic offices and says he is the only programmer of orthodontic practice management software who actually uses such a product on a daily basis. Sanchez developed his programming skills while pursuing a doctorate in physics at Georgia Tech. He earned his dental degree and certificate in orthodontics from Emory University.

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Ortho Classic Inc. has announced the launch of its new online store. The company’s entire product line has been added to the new online store.

Products such as brackets, buccal tubes, elastomeric, wires, adhesives, instruments and auxiliary supplies are now just a click away. The store’s simple-to-use navigation includes such features as part number look-up, related product suggestions, mobile device compatibility and table information sorting.

An Ortho Classic spokesperson said: “We hope the new online store makes ordering OC products more convenient than ever. We’ve been working on this store for a very long time and wanted to make sure it was intuitive to use and worked efficiently.”

Ortho Classic’s new online store offers free domestic shipping on all orders of $250 or more. Ortho Classic manufactures the majority of its products at its 60,000-square-foot, high-tech facility in McMinnville, Ore.

For more information, contact Ortho Classic at (866) 752-0065 or visit www.orthoclassic.com.

Ortho Classic announces joint H4 Forum with OrthoVOICE

Ortho Classic Inc. has announced that it has teamed with OrthoVOICE and will be holding its annual H4 Forum during the days prior to the opening party for OrthoVOICE.

“The idea of combining our event with OrthoVOICE just made sense. Their event is very doctor-friendly and informative, plus it’s held in a great location,” said Ortho Classic Marketing Director Eric Ackerman.

Both events will take place at the Planet Hollywood Resort and Casino in Las Vegas. The H4 Forum will run Sept. 17–18 and lead directly into OrthoVOICE and its opening party on the evening of Sept. 18. OrthoVOICE will then continue through Sept. 20 with the opening of its exhibit hall and group of seminars.

Both events will offer C.E. credits with 10 credits coming directly from the H4 Forum seminars. Speaking at this year’s H4 Forum will be industry-leading clinicians Dr. Thomas Pitts and Dr. Duncan Brown, along with several other presenters.

Presentations will cover everything from new clinical techniques to treatment insights. Both events are affordable with big savings when purchased together, according to organizers. In addition, Ortho Classic will be giving a free H4 starter kit to doctors who purchase tickets to both events.

For more information, contact Ortho Classic at (866) 752-0065 or visit www.orthoclassic.com.
Board standard results through Avex Suite

Achieving finishes that adhere to the standards set by the American Board of Orthodontics has proved challenging for many orthodontists in the past.

One reason for this is most conventional bracket systems have oversized and/or irregular slots. These brackets also lack universal in/out dimensions, they require extensive compensating wire bends and, ultimately, they provide unpredictable results.

The Avex Suite solves these issues by offering brackets and buccal tubes manufactured to extremely precise specifications. Created by Dr. Richard P. McLaughlin and Dr. John C. Bennett through Opal Orthodontics, the Avex Suite helps orthodontists achieve more effective and more stable treatment outcomes than ever before seen.

CNC Precision Technology and Avex Suite

Every stainless-steel bracket and buccal tube in the Avex Suite is machined using precise computer numerical controlled (CNC) technology. This proprietary manufacturing process yields revolutionary appliances that offer fewer unwanted debonds, the tightest tolerances in the industry, true torque in the base and extremely precise slot sizes.

This is important, as “the accuracy of the arch wire slot significantly reduces the need for arch wire bending,” McLaughlin said.

The system also features universal in/out dimensions, which make Avex MX metal brackets and Avex CX esthetic brackets interchangeable — an industry first.

The McLaughlin Bennett System 4.0

Because of Opal Orthodontics’ unique CNC machining process, McLaughlin and Bennett were able to refine prescriptions they had previously collaborated on to create the new McLaughlin Bennett System 4.0.

In this new prescription, McLaughlin and Bennett changed angulations and made additional adjustments to enable fully expressed torque, optimize in/out dimensions, provide proper tip control and improve the finishing phase of treatment by reducing necessary arch wire bending.

For maximum predictability, the McLaughlin Bennett System 4.0 also integrates the precision of VIA Wires™ arch wires and proper wire sequencing. The Avex Suite is the only system of orthodontic appliances that adheres to all of the prescription’s rigid and specific standards, designed to produce predictable, board-standard results quickly and efficiently, Opal Orthodontics asserts.

Conclusion

The brackets and buccal tubes in the Avex Suite represent the next generation in orthodontic treatment. With preadjusted torque and universal in/out dimensions, the Avex Suite is designed to achieve ideal occlusion and offer efficient treatment options with ceramic CX and CXI brackets, stainless-steel MX bracket and BX buccal tubes.

In short, the Avex Suite aims to deliver precise, predictable, patient-centered outcomes with board-standard results.

‘The accuracy of the arch wire slot significantly reduces the need for arch wire bending.’
YOU TREAT TO BOARD STANDARDS.
Avex Suite MAKES IT FASTER AND EASIER.*

With accurate, CNC-machined slots, Avex brackets help you achieve beautiful, board-standard finishes with less wire bending.

Research has shown that most brackets have oversized slots.* Avex brackets are made using a proprietary CNC process that provides more accuracy than any other bracket.

Call 888.863.5883 to learn more.

* Not yet verified by peer-reviewed research. Faster and easier refers to fewer wire bends and improved in/out.


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Scottsdale, Arizona
3MUnitek.Cvent.com/Scottsdale

June 6-7, 2014
Renaissance Chicago Downtown Hotel
1 West Wacker Drive
Chicago, Illinois
3MUnitek.Cvent.com/Chicago

17th Annual 3M Unitek Summit

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