WINTER 2013











Photos of the New Dentist Leadership Conference





Inside 2013 Valley Forge Dental Conference Information March 6-7-8





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VALLEY FORGE DENTAL JOURNAL

Dr. Harold Crossley talking with

conference attendees at the October Fall

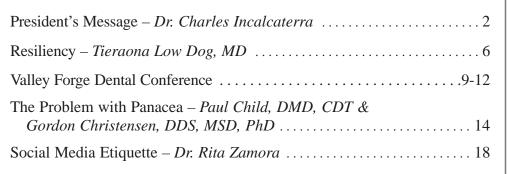
CE Event.

WINTER 2013



Dr. Charles Kosteva introduces his friend and speaker, Dr. Harold Crossley during the October 10 VFDC Fall CE Course.

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ON THE COVER... Photos from November 10th, New Dentist Leadership Conference at the Sands Hotel in Bethlehem. See Page 5 for article.



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The Journal is published three times a year: Winter, Spring & Fall. The opinions expressed in the Journal are those of the authors and do not necessarily reflect those of the Association, nor does the appearance of advertisements imply endorsement by the Association.



President's Message

Dr. Charles Incalcaterra, D.M.D. cjidmd@ptd.net

Ah, **yes**, **winter is upon us.** The fall election is a distant memory, and the busy holiday season is history. Now we face the snow, cold, ice and lifelessness of the next couple of months. Unless you love winter sports, can it be any worse?

But wait – after winter comes spring, a time of renewal for the earth. Buds will be emerging in the trees, flowers will be blooming, birds will be returning and the days will grow longer and warmer. And even better, the Valley Forge Dental Conference will be here!

2013 is a license renewal year for Pennsylvania dentists, and what better way to get those last minute CE requirements fulfilled than to travel the short distance to Valley Forge? This year's lineup of speakers is terrific and there is something for everyone.

The theme of this year's program is "Jazz Up Your Practice". I love music and grew up listening to portable transistor radios in the early 1960s. The genre that I enjoy the most is Classic Rock (which some people now call "oldies" – yuck). Technology evolved over the years from vinyl records to eight track tapes, cassettes, CDs, and now digital music (with vinyl making a come back!). But the music of the late 60s and early 70s continues to be strong. I'm really surprised at how many young people (like my three sons) know so many bands and songs from that era. It just proves to me how timeless these songs and artists have become.

Just as technology changed, my musical interests also grew. True classical music (Mozart, Bach, etc.) drew my attention for a while, and 90s grunge rock also appealed to me. My youngest son, Daniel, had a band for a while that played mostly blues, so I started to gravitate towards that style of music as well. It took me a little while to figure out that a lot of those great Classic Rock bands of the 60s and 70s played a good deal of blues music. The Doors, The Allman Brothers and Eric Clapton are just some of the groups that played that style. So when it came time to choose a theme for this year's Valley Forge Conference, I wanted to focus on music. "Jazz Up Your Practice" combines the element of a musical theme with our desire to make your practice the best it can be.

Like each individual member of a musical group, all of our team members in our offices play a vital part in making our practices succeed. There is not one course in this year's line-up that your assistant, hygienist, or front desk staff shouldn't attend. Every course is designed to make you and your team more productive and successful so you can provide the best care for your patients. On Wednesday we have Dr. Howard Glazer speaking about materials and techniques. We are continuing our New Dentist member benefit by offering this course at 50% off our regular fee. Immediately afterwards, all New Dentist members are invited to a special reception from 4:00 PM to 5:30 PM. Also on Wednesday we have Dr. John Suzuki speaking on periodontics and implants, and Dr. Henry Lee will speak on forensics. All attendees of Dr. Lee's course will receive his book, "Cracking Cases, The Science of Solving Crimes" which he will autograph in the exhibit hall.

Thursday starts out with Dr. Ed Feinberg on the management of difficult restorative cases. Dr. Scott DeRossi offers two halfday courses on non-odontogenic pain and on oral medicine. And Dr. Kirk Behrendt will present a full day lecture on practice management – especially important in these tough economic times. Thursday is also the start of our two-day lecture and hands-on series on Botox Training and Dermal Fillers by the American Academy of Facial Esthetics. This was a very popular program last year and we are pleased to present it again. On Thursday, we are offering a two-day lecture and hands-on course in Nitrous Oxide Single Dose Sedation by DOCS Education.

On Friday, Dr. Tieraona Low Dog presents two half-day programs on Health and Well Being (AM session) and Nutrition for the Dental Team (PM session). You techies out there will love hearing Dr. Paul Child speak on new technologies and techniques to use in your practice. And we wrap up the day with a marketing course on using Social Media by Dr. Rita Zamora. This was a popular topic at our New Dentist Conference in November, so we expect a good crowd for this course as well.

The best and most economical way to see most of these great programs (with the exception of the two two-day courses) is to purchase our 3-Day Patriot Pass. New this year we are offering a 2-Day Patriot Pass which provides a great discount as well. You can choose which of the two days you would like to attend and still see some great speakers. Take advantage of these special savings as a member of organized dentistry.

Finally, I would like to invite everyone to our President's Cajun Jazz Party on Thursday night beginning at 6:00 PM in the newly renovated Valley Forge Tavern Restaurant in the Radisson Hotel. There will be jazz musicians and Cajun food for all to enjoy. I promise to keep the comments to a minimum and the enjoyment to the maximum as we celebrate a great year for our Society and welcome in our new officers and directors for 2013. Spring is just around the corner - I hope to see you there!

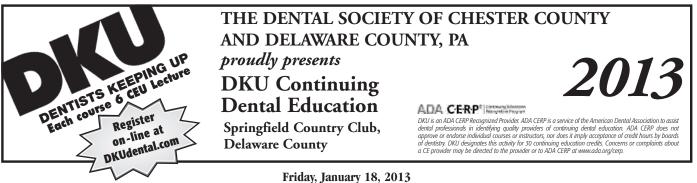


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Edward McLaren, DDS, MDC – Los Angeles, CA – "Estbetics and Materials: What? Where? When?" In the search for the ultimate in esthetic restorative dentistry many new materials and techniques have been introduced to the profession. More than ever today's practitioner is faced with the difficult task of evaluating these new materials and techniques and making appropriate decisions for their clinical use. This presentation will clarify the esthetic requirements of a material and dispel some of the confusion regarding the optical properties necessary for esthetic success. The presentation will cover the current research about the efficacy and clinical success of new materials. Topics covered include: How material physical properties relate to clinical success and failure; When to use a "Etchable" ceramic restoration; When to do no-prep veneers; When to veneer vs. when to crown; Zirconia based ceramics; Digital Dentistry; When, why, and how to remove tooth structure for various types of materials and differing clinical conditions; When to inlay vs. onlay; and Clinical management of several clinical cases. Dr. McLaren is a Prosthodontist, Professor and director of Post Graduate Esthetic Dentistry at the UCIA school of Dentistry. He is the director of the UCIA Center for Esthetic Dentistry, He is also the founder and director of the UCIA Master Dental Ceramist program. Dr. McLaren maintains a private practice limited to prosthodontics and esthetic dentistry in which he does all of his own ceramics. This course is co-sponsored by an educational grant from Dodd Dental Lab and Bonadent Dental Lab.

Friday, April 5, 2013

Stephen Chu, DMD, MSD, CDT – New York, NY – "The Latest Advances & Techniques to Maximize Anterior Implant Estbetics" Implant dentistry is continuously evolving into a more predictable form of therapy. New and innovative techniques specifically immediate implant protocols now allow for shorten treatment times with predictable outcomes. These new techniques and therapies continue to raise questions and concerns regarding the pros and cons of each. The question is when to employ the correct treatment at the appropriate time to achieve the most predictable outcome. Secondly, a significant part of treatment therapy revolves around correction of aesthetic defects due to poor treatment planning, placement, and abutment fabrication.Surgical, orthodontic, and restorative treatment planning options and techniques to address these aesthetic deficiencies will be presented. After this presentation, the attendee should be able to: Know the potential of hard and soft tissue correction around aesthetically challenged anterior implants; Know when a prosthetic restorative solution is the best treatment plan option; understand the one abutment-one time philosophy; understand the importance of the temporary crown in soft tissue management in immediate implant placement. Dr. Chu is clinical associate Professor in the Dept. of Prosthetic and Director of Esthetic Education at Columbia College of Dental Medicine. He also maintains a private practice with Dennis Tarnow in NYC. He is widely published and is an internationally know speaker on dental implant esthetics. This course is co-sponsored by an educational grant from Dodd Dental Lab, Bonadent Dental Lab and PDAIS.

Wednesday, May 22, 2013

John McGill, CPA, MBA, JD – Charlotte, NC – "Acbieving Financial Independence" Will you join the 5% of dentists who can afford to retire at age 65? Using these winning financial strategies, you can develop a game plan to reach financial freedom. This hard-hitting program contains "inside information" that you simply can't find elsewhere - gleaned from over 30 years of working exclusively with the dental profession. Learn how to: Reduce stress - control your money, rather than letting it control you; Develop winning saving and debt reduction strategies; Take advantage of huge tax- deductible retirement savings strategies; Dramatically increase business tax deductions; Simple steps to dramatically boost profitability; Slash children's educational cost by 50% or more; Evaluate professional corporation status; Discover tax-free income secrets. John K. McGill is a tax attorney, CPA and MBA. He serves as CEO of The McGill & Hill Group, LLC in Charlotte, NC, and is the Editor of the McGill Advisory Newsletter, a monthly publication enjoyed by over 7,400 dentists nationwide. Mr. McGill has also been a contributing editor to Dental Economics magazine for over 30 years. This course will be of special interest to doctors and their spouses. This course is co-sponsored by an educational grant from Dodd Dental Lab.

Those taking the full DKU Series will receive both Bonus Courses at the Valley Forge Radisson Hotel

Wed.-Fri., March 6-7-8, 2013 BONUS #2: Members choose one course from the Valley Forge Dental Conference

All meetings will be held at the Springfield Country Club on Route 320, Springfield, Delaware County, PA, except for the Bonus Courses held at the Valley Forge Radisson Hotel. Registration for all courses 8:15 AM. Lecture 9:00 AM – 4:30 PM. Continental breakfast and lunch included for all DKU courses.

Delco and Chesco Society Members - Entire Series plus both bonus Courses - \$695, Individual Courses - \$195, 3 Courses - \$530, 4 Courses - \$615

FEES Other ADA Members - Entire Series plus both bonus Courses - \$745 Individual Courses - \$210, 3 Courses - \$570, 4 Courses - \$665 Non-ADA Members - Entire Series plus both bonus Courses - \$815, Individual Courses - \$225, 3 Courses - \$605, 4 Courses - \$715

Staff members accompanied by a doctor will be \$95 per course per person with reservation at least one week in advance, \$110 per course per person at door.

Cancellations and Refund Policy - No refunds will be made without notice of at least one week prior to course date. (A \$25 administrative fee will be deducted.)

For information please contact: DKU • c/o Barry Cohen, DMD • 4750 Township Line Rd, Suite 2 • Drexel Hill, PA 19026 • 610-449-7002 • DKUDental@aol.com

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OUR FUTURE IS NOW

NEW DENTIST LEADERSHIP CONFERENCE A GREAT SUCCESS

On Saturday November 10th, the Valley Forge Dental Association held a New Dentist Leadership Conference at the Sands Hotel in Bethlehem. The conference was made possible with a grant from the American Dental Association Membership Program for Growth. We had 66 dentists in attendance and 8 vendor tables which helped support the conference as well. Of those 66 dentists, 46 were ADA New Dentists (out in practice 10 years or less), 14 were ADA dentists, 4 were non-ADA New Dentists and 2 were non-ADA Dentists. For the ADA New Dentists, this was a member benefit as their \$75 fee will be applied to their 2013 dues, making this a free course. For the 6 non-ADA dentists, there is time for them to sign up to be ADA members and have their \$200 fee applied to their dues. Their deadline to sign up to become members and receive the \$200 dues discount is March 31, 2013.

The day started with a brief presentation by Second District member and PDA president Dr. Bernie Dishler who updated everyone on the legislative victories we obtained this year. In addition he promoted the MOM-n-PA event which is the PDA's first Mission Of Mercy program to be held May 31 and June 1, 2013 in Philadelphia. Our main morning speaker was Dr. Chris Salerno from Long Island, New York. Chris is a dynamic speaker and gave terrific information on how to interview for a position in a practice, contracts for new dentists, patient management tips, as well as how to manage a dental team. In addition he gave 10 tips on how younger dentists can lead our profession. Chris did a great job and was well received by everyone.

The afternoon session started out with Mr. Sean Connolly from the Bravo Group public relations firm. He focused on how dentists can prepare for presentations to the media when asked to speak on oral health issues or controversies in dentistry. He spoke about "bridging the message" to keep the focus on the positive aspects of the profession when dealing with the media, and also discussed the Message Pyramid – headline it, prove it, visualize it, and bottom line your message by rephrasing the headline.

The biggest surprise of the day was the presentation by Dr. Leonard Tau from Philadelphia. His "Marketing Skills for the 21st Century" lecture was dynamic and fun. Len talked about The Tau Template which consists of superior customer service and a great patient experience, a well established on-line presence visible during local searches, an interactive website, and a well-branded social media campaign. He spoke about how he personalizes his new patient's experience with his office staff and how he sees his website as his marketing hub - the face of his practice. He also showed how to optimize search engines so patients and

potential patients will find his website first. He then spoke about social media such as Facebook, YouTube, Twitter and the use of Blogs. Honestly, Len spoke so fast and with such enthusiasm that it was hard to take notes! I recommend any local society to invite him to speak at one of your meetings. He has so much information to offer and I look forward to hearing him again in the future.

Dr. Charles Weber wrapped up the day with a brief presentation on Leadership Skills and Associations. As many of you know, Charlie has thrown his hat into the ring for ADA President which will be voted upon at the ADA Annual Session in New Orleans next fall. We hope everyone has the chance to speak to Charlie at some point and to support him in any way you can in his effort to lead our parent organization. He is a terrific person and serves our profession extremely well.

Our New Dentist Leadership Team and Planning Committee did a great job of organizing this event and they deserve special recognition for securing vendors, obtaining prizes and leading the presentation. Drs. Stephanie Klassner, Jennifer Koch, Lucas Mantilla and Brandon Walsh along with help from Betty Dencler are to be congratulated for their efforts in making this New Dentist Leadership Conference a huge success. Thanks everyone for making this a great day for our future leaders!

The Dr. John B. Lathrop Memorial Fund

The Dr. John B. Lathrop Memorial Fund was recently established by the International College of Dentists USA Section Foundation. Dr. Lathrop served as President at all levels of the Pennsylvania Dental Association and was actively involved with the ICD in many leadership positions, including serving as President of the ICD Foundation at the time of his tragic passing in 2006.

John was an avid collector of dental themed stamps from around the world with over 600 stamps in his collection. These stamps have been generously donated by John's wife, Ruth, to the Foundation. Those who donate at the Founders Level of \$1,000 or more will receive one of these engraved Stamp Collections with five or six dental stamps as seen in the photo while supplies last.

The ICD USA Section Foundation supports many Missions and Charities within the United States of America and around the Globe. Financial assistance from the ICDF is focused on education, communication, leadership, and the delivery of dental care to the under-served throughout the world. Every Fellow of the USA Section is automatically a member of the Foundation. For a foundation donation form visit www.usa-icd.org/foundation/download/FoundationForm4-2012.pdf





Resiliency

Tieraona Low Dog, MD Author of National Geographic's *Life is your Best Medicine*

See Dr. Low Dog's Courses, *Life is your Best Medicine, A Practical Guide to Health and Well Being* and *Nutrition for the Dental Team* on Friday, March 8, 2013 at the Valley Forge Dental Conference.

A man sooner or later discovers that he is the mastergardener of his soul, the director of his life.

James Allen

Most of us spend at least twelve years going to school learning the 3 "Rs," reading, writing and arithmetic. Some go on to college and maybe even graduate school. All so we can successfully enter adulthood and the workplace. With all this education, more than 16000 hours from first grade through high school graduation, you'd think at least some of that time would be invested in teaching us how to take care of our emotional and physical health. Maybe it's time to add a 4th "R" to the classroom, resiliency. From the Latin resili, meaning to spring back or rebound, resiliency is the ability to gather up one's strength and resources to overcome adversity and it is critically important for our health and well-being.

We are born with innate resiliency; our DNA is programmed to adapt to a changing environment. This means that all of us, not just a select few, are capable of overcoming even severe adversity. Physicians often focus on the "physical" aspect of resiliency, while psychologists put more weight on the "emotional, mental" component. As an integrative physician, I believe that the health of our mind and body are inseparable. It's silly to think of the mind, or brain, as somehow separate from the rest of our body! It isn't! The brain, just like the body, benefits from optimal nutrition, regular physical activity, rest, and healthy relationships. When one or more of these are lacking, we are less able to withstand stressful situations. And hard times will come our way, as Longfellow wrote, "Into each life some rain must fall, some days must be dark and dreary." My intention in writing this book was to show you how to optimize your life to get you through those dark, rainy days.

Since resiliency is a big subject, let's start with the role nutrition, exercise and sleep play. Good nutrition is crucial for the mind and body to functional optimally. The best way to ensure you're getting what you need is to eat a diet of minimally processed, low-glycemic load whole foods, as we talked about in Food. There's been a large body of scientific evidence showing that a diet of junk food is bad for our body but now there's evidence it's also bad for our brain. Researchers, who published their findings in the British Journal of Psychiatry, evaluated the diets of 3,500 office workers in England and found that eating a diet rich in processed foods (sugar, fried food, refined grains) increased the risk of depression, while consuming a whole food diet (vegetables, fruit, fish) was protective. This isn't surprising when you think about it. Refined foods are devoid of many of the vitamins, minerals and important phytochemicals (plant

compounds) that contribute to the healthful benefits of richly colored fruits and vegetables, whole grains, nuts, seeds and lean meat.

Processed, refined foods are also powerful promoters of inflammation in the body. Inflammation is necessary for our body to heal and repair itself, but in excess it increases the risk of blood clots, atherosclerosis, insulin resistance, and stimulates the growth of cancer cells. Inflammation has been linked to heart disease, diabetes, cancer, obesity and now, it appears, even depression. Thousands of years ago, inflammation was primarily elevated in response to injury or sickness. Inflammation causes the body to produce chemicals, cytokines, which trigger what's referred to as sickness behavior, a condition where you feel tired and lethargic and seek out a quiet place to rest and heal. This is exactly what happened when our puppy recently got sick after munching on the leftovers of a dead bird in the yard. Initially he had vomiting and diarrhea but even after this passed, he wouldn't wag his tail, eat, or interact with us. He just lay on the floor devoid of his normal animated spirit. If you didn't know he was sick you would've thought he was depressed.

People with depression have been shown to have high levels C-reactive protein (CRP), a compound produced by the body in response to excessive inflammation. We also see high levels of CRP in people with heart disease, cancer and active infections. A growing number of researchers believe that inflammation may be driving depression, according to a report in the journal *Medical Hypothesis* released in early 2012. So, not only is all the sugar laden and refined food in our diet lacking in important nutrients, but its driving inflammation, which in turn is contributing to the enormous burden or chronic disease and possibly the dramatic rise in depression seen in many western countries.

You need the nutrients found in a whole food diet for a healthy brain and body. A study in the *Journal of the American College of Nutrition* in 2011 found that people with major depression and bipolar have greater nutritional deficiencies of folate, B6, B12 and zinc, when compared to the general population. Without folate, B6 and B12 your body can't make the neurotransmitters involved in mood or cognition; serotonin, dopamine or norepinephrine. Many fruits and vegetables are good sources of folate and B6, while fish and meat contain B6 and B12. Fish is also a rich source of brain healthy omega 3 fatty acids, which also lower inflammation. Fish oil and folic acid (folate) supplements have both been shown to improve depressive symptoms in human studies. Zinc deficiency increases inflammation and may be linked to dementia, attention-deficit-hyperactive disorder and depression. Low levels of zinc also reduce the responsiveness of your immune system. Multiple studies show that zinc supplementation decreases infections in children and adults. This is why, in addition to a healthy diet, I recommend taking a multivitamin and fish oil to fill in the "gaps." For more in-depth information, please refer to the Food, Vitamins and Minerals, and Omega-3 Fatty Acid sections of the book,

There's no question that physical activity and exercise enhance resiliency. It's essential for our physical health and a great way of relieving tension, stress and lifting our mood. I know in my own life, tae kwon do and tai chi were vital for getting me through some difficult periods. But more than being just a tension reliever, exercise can actually help us think better, allowing our brains to respond more efficiently under stressful situations. It's been known for sometime that exercise stimulates the creation of new brain cells, but researchers at Princeton University have found that the brain cells that are formed during exercise are actually different from those created under sedentary conditions. The cells born of exercise are uniquely able to buffer the negative effects normally seen during stressful experiences. In other words, with regular exercise you can, over time, make your brain more resilient at a cellular level! And if you exercise outside you might even achieve even greater benefits. A review of ten studies with more than 1000 participants found that green exercise, physical activity in nature, led to significant improvements in mood and self-esteem. The research, published in the journal Environmental Science and Technology, showed that the benefits are almost immediate; it only takes about five minutes outdoors to feel better. Again, this isn't surprising. I know that going outside for 5-10 minutes to "clear my head," always relaxes me. Just a short walk around the neighborhood or in a park can have beneficial effects on your state of mind.

Sleep and rest are essential for resiliency. Researchers have been evaluating the effect of sleep disruption and insufficient sleep for decades, particularly when it comes to medical and aviation personnel. No one wants a pilot falling asleep in the cockpit or having open-heart surgery done by a doctor who hasn't slept for two days. Research consistently shows that not getting sleep leads to more errors at work, increased risk of accidents, irritability, depression, reduced motivation, increased cravings for sugary, fatty foods, and higher blood levels of stress hormones and CRP. We all know that after a couple nights of poor sleep, we simply aren't functioning at our best. I talk about this in more detail, as well as providing helpful tips, in the Sleep section of the book.

Given what we've already discussed so far, let's shift to a deeper exploration of what it means to be emotionally healthy. Your emotional health, or psychological wellbeing, is linked to your ability to handle stress, manage your emotions, have a positive view of yourself, maintain healthy relationships, and solve problems. Let's start with what many of us consider to be the primary cause of our woes: stress. Stress is neither good nor bad; it's how we *react* to stressful situations that determine their effect upon our emotional and physical health. Imagine stress as

a fire. When it's freezing outside, a fire that is controlled can keep you warm and save your life. But if that fire gets out of control and the house is on fire, it could kill you. The fire itself isn't good or bad - it's how the fire is managed that matters. We need a certain amount of physical and mental stress in our lives. Without the stress of gravity, our muscles would become flaccid and our bones weak. When the immune system is challenged, we develop antibodies that help us fight off infections. We get sick and depressed, when the strain in our life overwhelms our body's ability to respond. High blood pressure, heart disease, irritable bowel syndrome, headaches, insomnia, mood disorders, and even cancer all have at least some of their roots in the soil of excessive strain. It's not your job, friend or bank account that's making you sick. Once again, it's not the stressor itself that's the problem; it's the way we respond to life's circumstances that matters.

There are thousands of stress management books and classes in the marketplace. Many of them have to do with getting better organized. And it's true; chaos and clutter aren't good for resiliency! Roger Epstein, a noted researcher and Harvard professor of psychology, has spent most of his career studying the impact of stress on health. In one large study, he found the people who are happiest and able to cope best are those who are proactive at preventing stressful situations. For instance, he found that those who planned their day or week to avoid or minimize stressors were far happier than those who used meditation or breathing exercises once they already felt overwhelmed with tasks, commitments, etc. It's not to say that meditation and breathing aren't important as part of your overall approach to health and stress management but proactively reducing stress is far more effective than reacting to it! The second most important trait of resilient people in his studies was source management, the ability to schedule your time, organize your work environment, and delegate tasks. This means not taking on too many commitments and not always thinking that you're the only one who can do something! "It's just easier if I do it" is a sure sign of someone who doesn't know how to effectively teach and delegate.

I've found these tools particularly effective in my own life. I admit, I've read my share of get organized books! I do much better with a "to do" list. By writing down everything that must get done, I am able to organize my days far more effectively and it's incredibly satisfying when I'm able to check a task off the list. After years of feeling overwhelmed by the impossibly heavy workload I'd taken on, I started saying no. Not easy for someone who wants to help, contribute and please. But when I was honest with myself, I realized I didn't enjoy many of the things I was saying yes to. I started recommending colleagues that could write and review articles, speak at medical conferences, or serve on committees. While I was convinced the world would suddenly stop, lo and behold, committees still got their work done, conferences found presenters, and medical journals secured reviewers. It was hard at first, my ego was bruised; I wasn't near as indispensible as I'd secretly hoped. But as time went on, I found I had so much more to contribute. I realized saying yes to one thing, inherently meant saying no to something else —no to hiking, cooking classes, reading a novel or getting away for a weekend. When my life was tied up in all kinds of things I didn't really want to do, I had no time for the things I did. As the stress lifted, my creative juices returned. My work improved and my presentations were more inspiring. When you feel like you're just keeping your head above the water, all of your energy is spent just trying not to drown. But eventually, you become exhausted and you have to make the conscious decision to sink or swim.

I use the analogy intentionally. As we look upon an endless list of problems with no solutions in sight, we literally get a sinking feeling. If it feels like we have no control over a situation, it can be easy to lose hope. When there's no one we can turn to for help, we feel isolated and alone. The expression "sinking into depression" is highly descriptive. Our inability to positively cope with life's challenges puts us at high risk for depression and anxiety, which often coexist together. In 2011, the Centers for Disease Control reported that 11% of Americans over the age of 12 were taking anti-depressant medications, a 400% increase from the 1980s. In 2009, more than 40 million prescriptions were written for the anxiety drug Xanax.

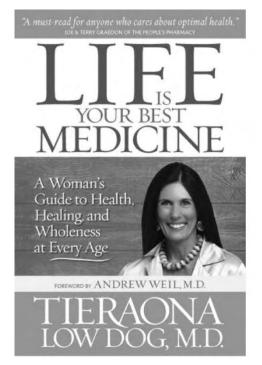
In an attempt to stem this growing tide, researchers at the University of Pennsylvania have developed a program to determine if early intervention in elementary and middle school can reduce the risk of depression in adolescents. In 13 controlled trials involving more than 2000 children ages 8-15, the majority of studies show that the Penn Resiliency Program significantly prevents depression and anxiety, especially in kids with high levels of stress at baseline. The program consists of 18-24 sixty-minute lessons where children are taught a variety of strategies for solving problems and coping with difficult situations and emotions. They learn how to be assertive without being aggressive, negotiate conflict, handle failure, as well as strategies to promote relaxation. I love it, the 4th R! Hopefully, we can expand these kinds of programs so that our children learn reading, writing, arithmetic and resiliency!!

You were born with resiliency. No matter what you've been through, or are going through, within you is the ability to overcome adversity. You have the inner strength to get through those days when nothing seems to be going right or when all you can see are your failures and it's hard to remember your victories. There will be those dark nights of the soul, when our faith is tested and our confidence shaken. But it is through adversity that our character is shaped and formed. It isn't avoiding or running away from challenges that gives meaning to our lives, it's discovering our values and virtues as we struggle through them.

This entire book is really about helping you find ways to enhance your resiliency. From the words you tell yourself and others, to the food you eat - your choices affect your health.. You have the power to make different choices. Maybe you'll choose to meditate for ten minutes every morning or quit drinking sodas. What about choosing to take a five-minute walk outside during your lunch break or buying a book of inspirational quotes that you can keep handy? A journey of a thousand miles starts with a single step. Today, you can choose to make your life a priority.

Tips for Enhancing Resiliency

- 1. Cultivate healthy and mature relationships. We all need people we can turn to for help and who can turn to us for the same.
- 2. Spend time in nature. Take a couple five-minute walks outside everyday.
- 3. Get organized. I have read and given as gifts to hopelessly disorganized friends both Sandra Felton's *Organizing for Life* and *Organizing from the Inside Out* by Julie Morgenstern.
- 4. Make time for relaxation. Practice your breathing exercises every morning and night. Listen to soft soothing music. Take a bath. Get a massage.
- 5. Read something inspirational. *The Book of Awakenings* by Mark Nepo and *Thirst* by Mary Oliver are two of my favorites.
- 6. Get counseling if you're stuck. Cognitive behavioral therapy can help you reframe how you think about life.
- 7. Make being active a part of your daily life. Join a yoga class, get a pedometer and work up to 10,000 steps per day, stretch while you watch television.
- 8. Write down one thing you're grateful for before bed. The grocery clerk who smiled at you, the spouse who made dinner or did the dishes, the child who loves you, or even the sun for shining. Practice gratitude.
- 9. Eat healthy. Good nutrition will ensure your body is getting what it needs to function optimally. Take a multivitamin everyday.
- 10. Expect good things to happen. Visualize what it is you want in life.
- 11. Be a life-long learner. Go to a free lecture, join a book club, learn the names of all the trees in your area, or take a class that advances your career.
- 12. Have faith that the universe is unfolding as it should. Accept that there are certain things you can't change. Find peace within the stillness of your own heart.



2013 VALLEY FORGE DENTAL CONFERENCE COURSE INFORMATION Wednesday ... March 6

"WHAT'S HOT AND WHAT'S GETTING **HOTTER... MATERIALS & TECHNIQUES''**



COURSES #102 & #103

WED., MARCH 6, 2013 **Dr. Howard Glazer** FULL DAY LECTURE 8:30 AM-4:00 PM AGD Code: 017 **CE Credits: 6** Course Code: D, H, A, E Moderator: Dr. Stephanie

Klassner

This is a program about real dentistry for real people by a real dentist! Dr. Glazer will present a potpourri of materials

* SPECIAL NEW DENTIST DISCOUNT: \$125 (for dental graduates of 10 years or less) and techniques that will make your day at the office easier, more productive and fun! Your entire dental team will benefit from learning about the latest products and benefits provided for you and your patients.

Topics may include:

- Curing lights...to light up your life (dental)
- Desensitization & Adhesives..a sticky subject made simple
- · Composites for esthetic fillings not just white ones
- ICON Infiltration technique...for minimally invasive procedures
- Impression materials...It's true...first impressions are important
- Provisional materials..provisionals should look great
- Lasers...simple, easy and quick w/ great results

- · Endodontic instruments...getting to the root of the matter
- · Cements..that which holds the relationship together
- Reducing Sensitivity with topical paste application & Fluoride varnishes
- · And more...

Course Objectives:

- 1. To learn the different types of materials in various product categories
- 2. To learn what is faster, easier and better
- 3. To be able to evaluate product claims and merit
- 4. To understand the necessity of oral cancer prevention

Educational Grant Provided by SHOFU.

Dr. Howard Glazer bio and course handout available on the website ... www.vfdc.org.

TUITION: (Prior to February 25) \$250 ADA \$145 STAFF/SPOUSE \$350 Non-ADA Member Includes Lunch

"JUSTICE THROUGH SCIENCE...LESSONS LEARNED FROM HIGH PROFILE CASES"



COURSE #104 WED., MARCH 6, 2013 DR. HENRY LEE FULL DAY LECTURE 8:45 AM-5:00 PM AGD Code: 145 **CE Credits: 6** Course Code: D, H, A, E, M Moderator: Dr. Brandon Walsh

Although the first book of forensic medicine was published in 1400 in China, the scientific investigation of crimes has

become more sophisticated only in the past 100 years. Would contemporary investigative techniques have made a difference in the outcome of the Sacco-Vanzetti case? Were they applied in the cases of O.J. Simpson and Dr. Sam Sheppard or in the kidnapping of the Lindbergh baby? Dr. Lee revisited those cases with a new scientific view.

The legendary investigator is known for finding the tiniest clues. Over the past 40 years, Lee assisted in the investigations of more than 6,000 cases, including the suicide of President Clinton's former White House attorney, review of the JFK assassination, and the death of Jon Bennet Ramsey.

The presentation will entail a detailed discussion of the application of bite mark evidence in criminal investigations such as homicides, child abuse cases, and sexual assaults. In addition, he will emphasize the importance of physical evidence recognition, collection and preservation including fingerprints, trace evidence/hairs, fibers, etc., and DNA.

COURSE ATTENDEES WILL RECEIVE A COPY OF HIS BOOK: "CRACKING CASES," THE SCIENCE OF SOLVING CRIMES. Dr. Lee will autograph the book at 1:15 PM in the Exhibit Hall.

Dr. Henry Lee bio and course handout available on the website ... www.vfdc.org.

TUITION: (Prior to February 25) • \$270 ADA / \$165 STAFF/SPOUSE • \$370 Non-ADA Member • Includes lunch and a copy of Dr. Lee's book

"EMERGING CONCEPTS OF PERIODONTICS AND ORAL IMPLANTOLOGY'



COURSE #105

WED., MARCH 6, 2013 DR. JON SUZUKI FULL DAY LECTURE 8:45 AM-4:15 PM AGD Code: 490 and/or 691 **CE Credits: 6** Course Code: D, H, A, E Moderator: Dr. Vinky Pathak

This course will emphasize the new trends and concepts in Periodontal Diagnosis and Treatment Planning. Concepts

of pathogenesis and immunology related to periodontal diseases will be presented with extensions to systemic diseases and conditions, including Myocardial Infarction, Cardiovascular accidents (stroke), Rheumatoid arthritis, Respiratory diseases, pancreatic cancer, ulcers, and others.

Advances in periodontal therapies will be included in this course. Ultrasonics, selective use of systemic antibiotics, local drug delivery systems, and periodontal surgical concepts have dramatically changed the scope of periodontal therapies. Case presentations will include non-surgical and surgical periodontal therapies, implant, site preparation and ridge preservation surgeries.

Course Objectives:

- 1. Understand biological basis for periodontal diseases
- 2. Relate Oral Infections to Systemic Diseases and Conditions
- 3. Describe advances in periodontal treatment planning and therapies
- 4. Understand concepts of periodontal and implant surgeries including regeneration

Dr. Jon Suzuki bio and course handout available on the website ... www.vfdc.org.

TUITION: (Prior to February 25) • \$250 ADA / \$145 STAFF/SPOUSE • \$350 Non-ADA Member • Includes lunch

"N_O SINGLE-DOSE SEDATION"



COURSE #107 Two Days: THUR. & FRI., MARCH 7-8, 2013 FULL-DAY LECTURE AND

COURSE TIMES: 8:00 AM-5:00 PM AGD Code: 132 **CE CREDITS: 14 AGD/PACE-approved credit hours** Course Code: D, H, A, E **Limited Attendance**

Nitrous oxide and oxygen sedation is among the oldest and safest anesthetics in dentistry, offering straightforward treatment for anxious patients of Thursday & various ages and medical conditions. Friday Partnering this approach with one of five different medications offers a simple analgesic solution for your practice. For complete course information and speaker bio, go to www.vfdc.org.

TUITION: *Doctor \$890 *Team \$295 *Attendees must register directly through DOCS Education at www.DOCSeducation.org or call 877-581-3627.

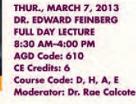
Participant Codes: D=Dentist H=Hygienist A=Assistant E=EFDA M=Management

2013 VALLEY FORGE DENTAL CONFERENCE COURSE INFORMATION Thursday... March 7

"DIAGNOSTIC CONSIDERATIONS AND RESTORATIVE MANAGEMENT OF DIFFICULT CASES"



COURSE #108



Difficult cases can be simplified when carefully thought out. This course will present a unique approach to diagnosis and treatment planning that will offer the practitioner more options to help patients—including patients who are not candidates for sophisticated dentistry. Numerous case examples will be demonstrated from a library of more than 100,000 slides, digital pictures and x-rays taken during the past 60 years.

Course Objectives:

 Learn how to manage difficult cases such as excessive wear, periodontal bone loss and malocclusions

- Learn how to restore teeth with no clinical crowns
- Learn how to utilize "hopeless" teeth for transitional restorations
- · Learn when and how to splint teeth effectively
- Learn when to best utilize fixed restorations, removable restorations and implant restorations
- Learn why the precision attachment case—for both natural tooth and implant abutments is an excellent treatment option that is often superior to fixed bridgework

Dr. Edward Feinberg bio and course handout available on the website... www.vfdc.org.

TUITION: (Prior to February 25) +\$250 ADA +\$145 STAFF/SPOUSE +\$350 Non-ADA Member +Includes lunch

"NON-ODONTOGENIC TOOTHACHE: A GUIDE TO ACCURATE DIAGNOSIS" & "THE ORAL MEDICAL CONNECTION"



COURSES #109 & #110

THUR., MARCH 7, 2013 DR. SCOTT DEROSSI AM LECTURE (#109): Non-Odontogenic Toothache: A Guide to Accurate Diagnosis 8:45 AM-12 NOON AGD Code: 737 PM LECTURE (#110): The Oral

in Lectore princip me on

Medical Connection 1:30 PM-4:30 PM AGD Code: 739 CE Credits: 3 each lecture Course Code: D, H, A, E Moderator: Dr. Jason Pellegrino

AM Lecture: The clinician should never automatically assume that all toothaches are caused by pulpal or periodontal disease. The most important step towards proper identification and management is the suspicion that the origin of tooth pain is not in fact in the pulp or supporting tissues. This course will review the clinical features of many sources of non-odontogenic toothache and discuss their diagnostic and management challenges.

Course Objectives:

- Become familiar with many structures that may refer pain to teeth
- Become familiar with clinical presentation of nonodontogenic toothache
- Learn key identifiers of non-odontogenic toothache
- Become familiar with the treatments for these conditions

PM Lecture: There is no debate that oral health and general well-being are inextricably bound. Many diseases that affect the body manifest in the oral cavity, a readily accessible vantage point to view the onset, progress, and management of numerous systemic diseases. This informative, multimedia program will review the link between overall health and oral health including: oral cancers, diabetes, oral lesions, eating disorders, heart disease, preterm low birth weight babies, salivary gland disease and diagnostics.

Course Objectives:

- Become familiar with many systemic diseases and their corresponding oral manifestations
- Become familiar with heart disease and its relationship to periodontal disease
- Become familiar with salivary function changes associated with systemic disease and the use of saliva as a diagnostic fluid

Dr. Scott DeRossi bio and course handout available on the website... www.vfdc.org.

TUITION: (Prior to Feb. 25) +\$150 ADA +\$110 STAFF/SPOUSE +\$250 Non-ADA Member +Price listed is per letture +Lunch included with purchase of AM & PM Courses

During this valuable day we will examine what it truly

"7 BREAKTHROUGH STEPS TO CREATE YOUR BEST YEAR EVER"



COURSE #111

THUR., MARCH 7, 2013

Moderator: Dr. Keith Hollander

DR. KIRK BEHRENDT

FULL DAY LECTURE

9:00 AM-4:30 PM

AGD Code: 557

CE Credits: 6 Course Code: D. H. A. E means to be all that we can be for our patients. Learn how some of the best dental practices are tapping unused resources to deepen their connections with patients, increase their personal passion, optimize their performance, increase their production and boost their profitability in the current economy. If you are looking for a course to inspire you and your team....this is it! The time is NOW to create your best year ever!

Course Objectives:

- Learn what some of the best dental practices in the country are doing to create their most profitable months ever
- Use a step-by-step diagnostic tool to identify (and correct) specific areas of the practice that suppress production and limit new patient growth
- Learn how to authentically inspire your team to stay "fully engaged" with patients

Dr. Kirk Behrendt bio and course handout available on the website... www.vfdc.org.

TUITION: (Prior to February 25) +\$250 ADA +\$145 STAFF/SPOUSE +\$350 Non-ADA Member +Includes lunch

"BOTOX HANDS-ON TRAINING FOR EVERY PRACTICE" (THURS) & "DERMAL FILLERS HANDS-ON TRAINING FOR EVERY PRACTICE" (FRI)

COURSE #106

AMERICAN ACADEMY OF FACIAL ESTHETICS PRESENTS <u>2 FULL DAY</u> LECTURES & HANDS-ON WORKSHOPS — THUR. & FRI., MARCH 7-8, 2013: PART I - "Botox Hands-On Training for Every Practice" (Thursday) PART II - "Dermal Fillers Hands-On Training For Every Practice" (Friday)

8:30 AM-5:00 PM (Thurs.) & 8:00 AM-5:00 PM (Fri.) AGD Code: 780 CE CREDITS: 8 each day



Course Code: D, H, A, E Limited Attendance: 25 Doctors/25 Staff



This is a certification course in the use of Botox and dermal fillers for dentistry by the American Board of Facial Esthetics. If you are planning on injecting, please bring your own model patient. **Course Objectives** available on the website... www.vfdc.org.

TUITION: +\$2997.00 for the Series includes admission for ADA & Non-ADA members for Thurs. and Fri. +Each staff cost is \$590.00 plus purchase of a vial of Botox Cosmetic for \$545.00. +All attendees must register directly through the AAFE at www.FacialEsthetics.org OR CALL 800-952-0521, Ext. 701.

ancany that affect the boo or accessible vantage \$110 STAFF/SPOUSE - \$25

2013 VALLEY FORGE DENTAL CONFERENCE COURSE INFORMATION Friday ... March 8

"LIFE IS YOUR BEST MEDICINE, A PRACTICAL GUIDE TO HEALTH AND WELL BEING" AND "NUTRITION FOR THE DENTAL TEAM"



COURSE #113

FRI., MARCH 8, 2013 DR. TIERAONA LOW DOG AM LECTURE: 8:15 AM-11:45 AM PM LECTURE: 12:45 PM-3:45 PM AGD Code: 150 **CE Credits: 6** Course Code: D, H, A, E, M Moderator: Dr. Larry Trubilla

AM Lecture ... "Life is Your Best Medicine, A Practical Guide to Health and Well Being"

The number of people living with chronic disease is growing at an alarming rate, even though the best of scientific evidence tells us that more than 80% could be prevented

by diet, lifestyle, stress management and minimizing exposures to toxins in the environment. Dr. Low Dog will use the best of modern scientific research and wisdom to show how a healthy life is really our best medicine. Learn how food affects mood and can reduce the risk of heart disease and certain cancers, including oral cancer. Discover how mindfulness and self-awareness can increase your resiliency during times of stress and which dietary supplements can promote oral and overall health.

Course Objectives:

- 1. Participants will be able to discuss the effects of chronic stress and social isolation on human health
- 2. Participants will be able to discuss the evidence for meditation, stress management, and creative arts in mental and physical health
- 3. Participants will be able to discuss the evidence of safety and benefit for nutrition and dietary supplements in mental and physical health

PM Lecture..."Nutrition for the Dental Team"

This informative and fact-filled lecture will explore how macronutrients, micronutrients, glycemic index/load, dietary patterns and sugar substitutes impact oral health, periodontal disease and overall health. Learn the cuttingedge science behind the recommendations.

Course Objectives:

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- 1. Understand the role of macronutrients and micronutrients in health and chronic disease
- 2. Understand how poor glycemic control exacerbates periodontal disease
- 3. Understand the relationship between cardiovascular and periodontal disease
- 4. Be able to counsel patients about sugar and sugar substitutes

Dr. Tiergong Low Dog bio and course handout available on the website ... www.vfdc.org.

List and compare ceramic restorations, the indications

of each, and differences between lab and chairside

Learn how to select the proper materials and techniques

restorations, including resin composite, glass ceramic

when bonding different types of direct and indirect

Understand the new technologies available for both

preparations and fabricating indirect restorations

Dr. Paul Child Jr. bio and course handout available

chairside and laboratory use for imaging tooth

Educational Grant Provided by BISCO

TUITION: (Prior to February 25) *\$250 ADA *\$145 STAFF/SPOUSE *\$350 Non-ADA Member Includes lunch

"TECHNOLOGY TRENDS AND TECHNIQUES - IMPLANTS, ESTHETICS, CERAMIC CROWNS, AND MORE"



COURSE #114

FRI., MARCH 8, 2013 **DR. PAUL CHILD** FULL DAY LECTURE 8:30 AM-4:00 PM AGD Code: 692 **CE Credits: 6** Course Code: D, H, A, E

Moderator: Dr. Lucas Mantilla

New products and techniques enter the dental industry each year with claims of being superior. How do you select what to use? Is it best to wait 10 years until it is well-proven or should you consider being an "early adopter"? What new innovations are worth the investment and will they replace conventional, time proven products? This practical presentation will address many areas of dentistry including: implant restorations and surgery, mini implants and RPD's, ceramic restoration comparison, radiography, cements, adhesives, CAD/CAM, diagnosis and treatment planning, direct vs. indirect restorations, and many FAQ's.

Course Objectives:

- Describe what new technologies, materials, and products should be considered and how to integrate them into your practice
- Discuss the relationship between ROI (return on investment), ethics, and good dentistry
- on the website ... www.vfdc.org. TUITION: (Prior to February 25) *\$250 ADA *\$145 STAFF/SPOUSE *\$350 Non-ADA Member *Includes lunch

"SOCIAL MEDIA MARKETING STRATEGIES"



COURSE #115 FRI., MARCH 8, 2013

DR. RITA ZAMORA FULL DAY LECTURE 9:00 AM-4:00 PM AGD Code: 550 **CE Credits: 6** Course Code: D, H, A, E, M **Moderator: Dr. Michael Carol**

Facebook, Twitter and YouTube have captured the attention of your patients. Over 800 million people around the world use Facebook. Learn how to position your practice to be found on sites like Facebook, Twitter and YouTube where millions of Americans now spend their time. This is a nontechnical seminar, yet you'll walk away with secrets to grow your practice with some of the hottest dental marketing techniques today!

Course Objectives:

- 1. Why Social Media Matters ... Learn how traditional advertising and use of the internet has changed and what it means for your practice
- 2. What Social Media Is ... Rita will familiarize you with the basics of: Facebook, Twitter, Google Plus and YouTube

- 3. Where to Get Started ... Learn which social media platform is the most important for you to market with, as well as where to get started
- 4. Which intermediate to advanced social media strategies have proven most successful ... Discover techniques to grow your online communities, motivate patients to "Like" you and interact
- 5. What's up and coming ... Learn about relevant new social media marketing options

Ms. Rita Zamora bio and course handout available on the website ... www.vfdc.org.



TUITION: (Prior to February 25) •\$250 ADA •\$145 STAFF/SPOUSE •\$350 Non-ADA Member •Includes lunch



TWO PATRIOT PASS OFFERS AVAILABLE THIS YEAR FOR MULTI-DAY ATTENDEES.



Participant Codes: D=Dentist H=Hygienist A=Assistant E=EFDA M=Management

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The Problem with "Panacea" Is there only one solution for every oral problem?

Paul L. Child Jr., DMD, CDT and Gordon J. Christensen, DDS, MSD, PhD

See Dr. Child's course *Technology, Trends, and Techniques–Implants, Esthetics, Ceramic Crowns, and More* on Friday, March 8, 2013 at the Valley Forge Dental Conference.

Dental clinicians frequently categorize treatment decisions providing potentially inappropriate treatment plans. In our attempts to simplify treatment, we often group patients into categories, such as edentulous, medically compromised, financially challenged, perio patient, pedo, average/normal, as well as many other politically correct (or incorrect) terms. In doing so, we risk overlooking many of the unique variables that each patient possesses, and the many other products and techniques available to treat them. Many dentists have a wide arsenal of solutions, procedures and products to treat a variety of patients. Some even have a formula or recipe to know exactly how to treat each category of patient, while others find it easier to use a few select products, techniques or procedures to treat all patients, regardless of individual situation, which is often based upon treatment cost. This approach of "panaceabased dentistry" is not only illogical and unethical, but seriously limits the dentist and the patient.

Whenever we become aware of a new product or technique that is inferred by the manufacturer, researcher or key opinion leader as being the "silver bullet" for a given patient or procedure, or touted as the new standard of care, caution and anxiety sets in and causes us to question the claims. Very infrequently has there ever been or ever will be a product or technique that can be applied to all dental patients in all situations. The introduction or over-hype of a new product or technique is no different in dentistry than it is in many other industries. In an attempt to simplify the many different options, products and techniques, dentists sometimes cope by defining the clinical situations in "black and white" terms. We, like many of you, have discovered this to be far from the truth dentistry is not just black and white or even many shades of gray, but full of colors, variables and a three-dimensional field of options with which we must become intimately familiar.

The purpose of this article is to address a few of the main areas of panacea-based dentistry and help you determine what treatment or product should be provided for your patients. For those who provide a panacea-based approach to dentistry, this article will provoke thought and reconsideration to provide an individual-based approach to dentistry.

Factors Influencing Oral Rehabilitation

Often, we clinicians state to our patients something similar to, "If you were my mother, I'd place (this product or technique) in your mouth." Other statements allude to the ideal treatment option versus the "poorer option," emphasizing how less desirable the latter option is regardless of individual patient situation. Interestingly, we sometimes see the same statements used on all patients. While some of these statements are comforting to the patient, very few patients are actually knowledgeable concerning what products or techniques are the best, as most simply trust our judgment. It is the dentist's responsibility to provide adequate informed consent by discussing all the treatment options, while considering the patients' individual situation. The following factors must be considered when proposing and deciding upon the best treatment for our patients. In addition to patient factors, we need to also consider material and product choices.

Systemic health Patient life expectancy Financial resources and third-party benefits Aesthetic considerations Vital vs. non-vital teeth Previous trauma to teeth Patient psychological status Previous and current caries experience Periodontal health and condition Patient interest in treatment Many others!

Onlays vs. Crowns

Presently, less than two percent of all indirect, labfabricated restorations are onlays. For many years, onlays and inlays were taught to a significant level in dental school. In fact, many of you passed your regional board by prepping and seating a cast gold inlay. However, today it is evident that our profession has decreased the emphasis from onlays to crowns. When a patient has a fractured cusp or two (typically from a Class II amalgam or trauma), many dentists immediately condemn the tooth to a crown, when an onlay would be the preferred choice in most cases. An onlay should be viewed as a precursor to a crown, and we suggest that more dentists provide this valuable service. Tooth structure can be preserved and the cost might be less in comparison to a full coverage crown. Most third-party benefit organizations are now reimbursing for this procedure. Onlays can be quickly and effectively provided to patients, due to the supragingival margins providing easier ability to make an impression, and superior resin cements.

Endodontics vs. Extraction and Implant Placement

Unfortunately, we frequently hear from lecturers and new and experienced implant dentists alike, that when a patient needs root canal therapy, they heavily encourage implant placement instead of endodontic therapy. Their justification is usually that the tooth will eventually fail and need to be extracted anyway. This panacea thinking is confusing to patients and might be unscrupulous. Individual patient factors need to be considered. Evaluate the remaining periodontal support, the restorative history of the tooth, the patient's financial ability, adjacent tooth support, aesthetics, the patient's interest in saving the tooth and many of the other above-mentioned factors.

Often, we see partially edentulous patients with teeth that are slightly mobile, some requiring endodontics, that could easily benefit from root canal therapy and a removable partial denture or fixed partial dentures or both. Instead, the patients are told that their teeth are hopeless and that four to six implants are required on each arch, followed by a fixed-detachable implant prosthesis or a full ceramo-metal fixed prosthesis on each arch. In such cases referring the patient to an endodontist or providing the root canal therapy yourself needs to be accomplished before condemning the tooth for extraction and implant placement.

Periodontal Crown Lengthening vs. Implant Placement

For some dentists, implant dentistry is a seemingly instinctive treatment choice. This is especially true when comparing cases in which a tooth can be extracted, the socket grafted, an implant placed and when observing the simplicity of restoring the implant to the alternative of periodontal crown lengthening. Implant dentistry appears to be a very popular choice when considering the proven longevity of implant dentistry and the greater financial reward for this treatment. Dentists are now more inclined to emphasize implant dentistry for patients rather than providing simple periodontal crown lengthening. Examples are patients with a healthy periodontium and a single tooth with severe decay requiring extensive bone removal which will compromise not only the aesthetics but also the bony support of the adjacent teeth. Other examples are patients with a tooth broken off at the gingival line (or below the gingival line) and the adjacent tooth is an implant-supported crown. Often, significant crown lengthening would be required to create an appropriate ferule for the long-term stability to the restoration.

Some dentists fail to provide or even offer crown lengthening to their patients for a variety of reasons, including: the belief or observation that the body will provide its own natural crown lengthening; the added cost to the entire procedure, which might influence the patient to reject the proposed treatment; the added time for the entire procedure, which can take up to three months, post-surgically; and even the decreased emphasis by the specialists themselves in favor of the implant option. Regardless of the reason, patients need to be informed when crown lengthening is the most appropriate treatment and the risks and benefits of the procedure. Additionally, the surgically oriented and experienced restorative dentist can provide simple crown lengthening at the time of the tooth preparation for a reasonable fee, increasing patient acceptance and decreasing overall treatment time, while ensuring that the patient is offered all available options.

Resin-based Composite vs. Amalgam

Composite restorations dominate most of the direct restorations being provided in the U.S. and in many parts of the world. Amalgam, despite its continued support by the ADA and other organizations, has been relegated to patients with minimal third-party financial benefits, government- supported programs, children, or those who are financially challenged. Amalgam is still taught in most U.S. dental schools; meanwhile, is outlawed in some countries. Amalgam restorations face the challenges of fractured cusps and staining, however, they have a known longevity that can last up to two decades. Despite the ongoing controversy about this material and its unaesthetic properties, amalgam has withstood the test of time and has been proven to be an effective restorative material. This is especially true in terms of its longevity compared to resin-based composites and its moderate cariostatic properties. Without question, resinbased composite creates superior aesthetic results. However, it is technique-sensitive, more expensive, lacks cariostatic properties and typically results in deeper and more extensive decay after a service period.

Although much more popular, resin-based composites do not enjoy the same overall success rate as amalgam, in terms of longevity, recurrent decay and depth of decay. Despite this, resin-based composite is reserved for our "best" patients and amalgam for our "worst" patients. If a dentist believes that resin-based composite is the superior option, he or she needs to present it to all patients regardless of their specific situation, discussing the expected longevity of the restoration compared to other options. If a resin-based composite is properly placed, using a rubber dam and well-established materials, the restoration might last up to 10 years. In some patients with some dentists, it can last longer. However, in a patient with a moderate to high caries index, the average longevity is somewhat shorter. Careful selection of the dental materials, techniques used, with patient education and frequent monitoring, can maximize the success rate of these restorations. Post-operative and continuing fluoride treatment should be used to assist in preventing recurrent decay.

Chairside CAD/CAM vs. Laboratory-fabricated Restorations Chairside CAD/CAM-based dentistry is continuing to grow and gain interest among many dentists. It is reaching beyond simple inlays, onlays and crowns. The technology is advancing into relationships with cone beam computed tomography (CBCT), surgical guides and immediate implant loading. While highly exciting for the technology-oriented dentist, some dentists shun this new direction out of disinterest, disbelief or ignorance. It seems as if conventional dentistry has a competitor instead of an alternative solution. Most manufacturers are predicting digital dentistry as a significant growth center in the years to come and are investing heavily to be a part of the movement.

While not all dentists are interested in chairside CAD/CAM or digital dentistry, the technology and its ability to produce highly acceptable restorations is proven. The dental laboratory industry is incorporating much of the technology and learning how to work with dentists who are using the technology instead of working against them. Many laboratories are converting their business model to direct their solutions to other dental labs, instead of the dentist, via digital scanning, design and fabrication for those labs. Dentists and their lab partners should discuss what is best for their practice and recognize the available options. In some practices, the chairside CAD/CAM model might not be appropriate. Intraoral digital imaging alone might be the next logical step for such practices continuing to use the existing dentist-laboratory relationship.

PFM vs. All-ceramic

In the past 10 years, a tremendous amount of money has been spent making dentists and laboratories aware of the newer, more aesthetic all-ceramic crown options. Advertisements linking attractive women to the ceramic systems infer the absolute beauty of these new systems compared to the gray or yellow appearing metal-based systems of the past. Improvements to past ceramic systems, such as the addition of leucite, reformulation of lithium disilicate, zirconia as a framework, monolithic ceramic options, as well as the rising cost of alloys, has increased the use of these all-ceramic options. Despite this, porcelain-fused-to-metal (PFM) still remains the number-one prescribed crown system in the U.S.

There are some dentists who refuse to use anything but gold alloy restorations (they are dying with the gold), while others use only zirconia, and still others only use lithium disilicate. The long-term success rates of many of these newer all-ceramic systems are being established and clinical judgment is advised on knowing when to use them and when not. But to use one system for all cases without providing the patient with options can be considered negligent and unethical.

The aesthetic result of a well-fabricated PFM crown can equal that of any of the newer all ceramic systems, with the added benefit of more than 50 years of proven success. However, the laborious waxing, investing and casting are being replaced for the simpler CAD/CAM lab systems that can be completed much quicker with consistent results. The dental ceramist/technician is becoming a digital dental designer. It is highly recommended that the dentist and the lab technician/ceramist discuss the available ceramic systems, including metal options, such as conventional PFM (layered) and press-to-metal and when it is best to use each.

Other Areas of Panacea Dentistry

While only a few of the main areas of panacea-based dentistry are addressed in this article, other examples include:

- The placement of porcelain veneers on all patients desiring an aesthetic improvement instead of providing a minimally-invasive approach that might include minor tooth movement, enamel recontouring, bleaching or direct resin-based composite placement.
- 2. The general dentist business model of "everything under one roof" when some procedures that the general dentist is not experienced in would be best treated by a specialist.
- 3. The approach that everything that has a flaw, fracture or evidence of age should be replaced instead of conservative repair or refurbishment.
- 4. The attitude and practice that only conventional-sized implants should be used in patients when small diameter implants (minis), as well as short/wide implants are viable options.

The common theme with all of the above examples is that the dentist is limiting the options to themselves and patients by using a "one or the other" approach.

Conclusion

Dentists should continue to educate themselves in all areas of dentistry, learn of the many treatment and material options available and provide a variety of services based upon research and facts. We suggest that dentists provide informed consent to every patient, reviewing all available treatment options, the advantages and disadvantages of each, as well as the associated risks and costs. Ultimately, educating patients and providing them with the autonomy to choose the best option for their individual situation is ethical and rewarding for dentists and provides the best service for patients.

Originally published in DentaTown magazine.

Congratulations to our annual award recipients who were honored during the luncheon of the October 2nd District Fall CE event. Dr. Ron Heier received the Valley Forge Dental Conference Recognition Award. Dr. Bob Brillman received the 2nd District Recognition Award. Rotaplast International received the Humanitarian Award and \$500. Rotaplast International is a non-profit organization providing free reconstructive operations and treatment for children with cleft lip and palate worldwide.

Dr. Incalcaterra and the 2nd District Board and Directors would like to thank all CE attendees who brought dental supplies and monetary donations to the meeting for Rotaplast International to take on their next mission. Six boxes of supplies were donated and Dr. Jack Brent matched the \$500 award they received.



Dr. Ronald Heier accepts the Valley Forge Dental Conference Award from Dr. Karin Brian.





Dr. Robert Brillman accepts the Second District Recognition Award from Dr. Karin Brian.

Linda Young accepts the Humanitarian Award from Dr. Charlie Incalcaterra and Dr. Jack Brent on behalf of Rotaplast International.

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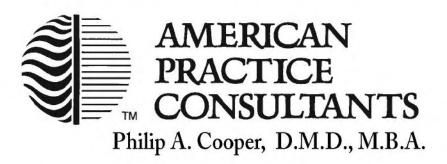
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Social Media Etiquette Should Social Media Marketing Be Outsourced?

Dr. Rita Zamora

See Dr. Zamora's lecture *Social Media Marketing Strategies* on Friday, March 8, 2013 at the Valley Forge Dental Conference.

Can social media marketing be outsourced? That's a common question I hear from dentists and practice managers. Ideally social media is handled internally. Total outsourcing is risky and in some cases entirely inappropriate.

For example, I recently overheard a dentist ask his assistant to check his personal Facebook account and respond to any new friend requests. On Facebook there is an expectation that you will interact on your own "personal" behalf. A best practice would be to manage your own "personal" Facebook account yourself. Why? Consider your colleagues or friends that likely assume it's you they're befriending, sharing, and interacting with. Had your colleagues or friends knew it really wasn't you participating, would they still want to be friends with you? This becomes even more problematic if patients were befriended.

On the other hand, a "Business" Facebook Page may be partially delegated or co-managed. However, keep in mind, social media is meant to be social—and people expect your efforts to be personalized, authentic and sincere.

Most importantly, be sure at least one person within your practice always knows the following:

- What is being posted (or tweeted) on the doctor's or practices' behalf.
- What conversations people are having about you on Facebook, Twitter and review sites.

• How to access your social media communities.

In order for your social media efforts to succeed, at least one person in your practice should be fluent and up to date with your social media efforts. Hopefully that one person is also 1) excited about social media. 2) interested in patient relations. 3) motivated to interact *and listen* to your online friends, patients and followers.

Outsourcing your social media efforts 100% can be risky. It's almost like telling someone to answer your phone, but "don't bother telling you what the conversations are about". In this situation, you may want to consider whether social media is a good fit for you.

An effective way to partially outsource is to appoint someone in your office to co-manage your social marketing with a professional social media marketing service provider. This allows your team to participate, interact, and enjoy the benefits of this type of marketing, without having to shoulder the entire responsibility.

Whether handled internally or co-managed, remember keys to success in social marketing are being authentic and sincere. Genuinely enjoying socializing, relationship building, and having fun while doing so are a plus!

Who manages your social marketing efforts?



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Upcoming Events

Save the date for the following events taking place Spring 2013:

May 22, 6:00 pm, the Dental Society of Chester County and Delaware County will be hosting an evening with **Oz Pearlman**, magician and mentalist. The event will include dinner and a stage show. Check out Oz's act at www.ozpearlman.com.

May 31, the Lehigh Valley Dental Society will host their annual evening with the Iron Pigs.

May 31 and June 1, MOM-n-Pa event will be held at the Liacouris Center, Philadelphia. Information can be found at www.MOM-n-Pa.com.

Local Happenings

The Dental Society of Chester County and Delaware County hosted 2 Give Kids a Smile Events this Fall. The first event took place at the office of Dr. Theresa Devine in Broomall on October 5. At that event 18 children received \$4600 worth of dental treatment.



The second event took place at CVM in West Chester on November 30. At this event 39 children were treated with over \$15,000 in dental care.

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GKAS Thanks...

We would like to thank the dentists, hygienists, assistants, and staffmembers who donated their expertise and dental supplies to provide dental care and education for indigent children on Friday, October 5th at Dr. Theresa Devine's office in Broomall and Friday, November 30 at CVIM in West Chester. The list of volunteer dentists includes Brad Adey, Kendra Adey (ortho.), Haddy Alrez, Lilyana Angelova, Tami Brady, Karin Brian, Jennifer Bush, Patrick DeForno, PDA President Bernie Dishler, Theresa Devine, Ron Heier, Linda Himmelberger, Bernie Logan, Stephanie McGann, Neal Neuman, Ruth Rosenberg, Bruce Terry (endo.), and Charlie Weber.

In addition, Drs. Dick Clark (o.s.), Michelle Halpern (ortho), Rob Raymond (pedo.), Cindy Trentacosti (o.s.), Bruce Terry (endo.), and Jon Voiner (o.s.) provided pro bono specialist care for several of our GKAS patients in their private offices as well--many thanks!

Mr. Mark Wallace, and Drs. Abboud-Niemczyk; Adey; Alrez; Andrews; Behnam; Borghesani; Bushick; Chiappa; Cimino; Delaney; Hughes; Koshetar; Levin; Maser; Nelson; Neuman; Pepe; Pfeiffer; Rambo, Leonetti, Silverstein, & Voiner; Recupero; Scharlock & Russo; Siegal, Cwyk, & Shah; Sierakowski; Smedley; Sullivan; Swenda; Terry; Waldman; and Werther graciously supported our efforts with their kind gifts!

We also want to express our appreciation to Nancy McFadden of Glaxo Smith Kline, who provided a delicious lunch for our volunteers on October 5th, and toothpaste for the kids; and George from DelVal who donated amalgam and prophylaxis paste. Nancy McFadden also provided lunch on November 30.

Thanks to your efforts our GKAS Program continues to provide dental care and education to children that would otherwise not receive this integral component of their health and well-being.

With gratitude,

Frace of Himmelberger, Dm) Bernadette Q. Logan, D.D.S.

Komberg School of Dentistry

2013 Continuing Education Courses

Wednesday, January 16, 2013 Jewels You Can Use On Monday: **Restorative Techniques to** Increase Your Productivity Dr. Marc Gottlieb

Friday, February 1, 2013 Advanced Local Anesthesia -What You Need to Know Dr. David Isen

Friday, February 15, 2013 Serve Your Patients Right and Avoid Getting 'Served': Perspectives from a Doctor, Lawyer and Patient (4 CE) Dr. Maria Fornatora, Mr. Harry Dorian and Eva Gravzel

Wednesday, February 27, 2013 Nitrous Oxide Sedation (Hands On) Drs. Haber-Cohen, Braid and Fielding

Wednesday, March 6, 2013 Dental Management of Emergencies and Medically Compromised Patients Dr. Gary Jones and Dr. Allen Fielding

> Wednesday, March 27, 2013 Adoption of 3D Cone-Beam CT In Your Practice Dr Jie Yang

Friday, March 29, 2013 Engine Driven Instrumentation in Endodontics -Panel Discussion (Hands On) Drs. Yesilsoy, Glass, Herbranson, Kuttler, Maggio and Trope

> Friday, April 19, 2013 Porcelain Laminate Veneers -The Whole Story! Dr. Steven Weinberg SFC D\$295; DT\$125

June 17-21, 2013 Surgical and Prosthetic Oral Implantology - A 5 Day Introductory Course (Part 2 in September, see site for info.)

Questions? Call us at 215.707.7541 or visit www.temple.edu/dentistry/ce.

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27TH ANNUAL VALLEY FORGE DENTAL CONFERENCE

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MARCH 6-7-8 2013

@ the VALLEY FORGE RADISSON HOTEL

with this exciting line-up of speakers:

Wednesday, MARCH 6 2013

Dr. Henry Lee • Justice Through Science... Lessons Learned from High Profile Cases Dr. Howard Glazer • What's Hot and What's Getting Hotter... Materials & Techniques Dr. Jon Suzuki • Emerging concepts of Periodontics and Oral Implantology

Thursday, MARCH 7 2013

 Dr. Kirk Behrendt • 7 Breakthrough Steps to Create Your Best Year Ever
 Dr. Edward Feinberg • Diagnostic Considerations and Restorative Management of Difficult Cases
 Dr. Scott DeRossi • Non-Odontogenic Toothache: A Guide to Accurate Diagnosis (AM);

The Oral Medical Connection (PM) DOCS EDUCATION • N20 Single Dose Conscious Sedation

AAFE • Botox Use in Dentistry - Lecture and Hands On, Part 1

Friday, MARCH 8 2013

Dr. Tieraona Low Dog • Your Best Medicine, A Practical Guide to Health and Well Being (AM); Nutrition for the Dental Team (PM) Dr. Paul Child • Technology Trends and Techniques—Implants, Esthetics, Ceramic Crowns and more Dr. Rita Zamora • Social Media Marketing Success Strategies DOCS EDUCATION • N20 Single Dose Conscious Sedation AAFE • Dermal Fillers in Dentistry - Hands On, Part 2



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PRESIDENT'S CAJUN JAZZ PARTY

HONORING SECOND DISTRICT PRESIDENT DR. CHARLES INCALCATERRA

* THURSDAY, MARCH 7, 2013

🌟 6 РМ ТО 10 РМ

VALLEY FORGE TAVERN RESTAURANT (located in the Radisson Hotel)

ew Orleans food, Party drinks, and Jazz musicians can be found at the VF Tavern where assorted Boudin, Dress is Business Casual

Andoullie, Chorio Sausages; Creoles; Seafood Paella; Cast Iron Seared Filet Mignon; Roasted Pig; Eberly Farms Chicken; Corn Pudding; Corn Bread; Raw Bar and a variety of sides will be stationed beginning at 6:00 PM.



President, Dr. Charles Incalcaterra, invites you to join him for an evening steeped in Cajun recipes and music. So slip on your zydeco shoes, grab your chapeau and embark on a multi-dimensional, knock-your-socks-off evening of spicy Cajun culture.

Plan to join your friends and colleagues for an evening to remember. Dessert will be shared with the newly elected Second District Officers and Directors.

Ticket Price is \$90.00 per person. Select #112 on the 2013 Valley Forge Dental Conference Registration Form.