

# Heritage Dental Laboratory Proudly Presents

## Functional Occlusion: "Science Driven Management"

by Dr. John C. Kois

Friday, September 5, 2008

7:30 a.m. – Registration & Continental Breakfast

8:00 - 4:30 p.m. – Lecture (Lunch Included - \$99.00 Value)



John C. Kois, D.M.D., M.S.D.



**3000 Warrenville Road  
Lisle, IL 60532  
(630) 505-1000**

#### ADDED BONUS:

#### "A COMPARISON OF ALL-CERAMIC RESTORATIONS, PROS AND CONS"

By Bill McCormick

Bill McCormick has been a Dental Lab owner and "hands on" CDT for over thirty years. He continues to educate himself at the Las Vegas Institute\*, The Pankey Institute, and various seminars to keep up to date on the latest cosmetic restorations. He lectures internationally on this knowledge of "alloy free" restorations and their successes.

### INTRO

Received his D.M.D. from the University of Pennsylvania, School of Dental Medicine and Certificate in Periodontal Prosthodontics with a M.S.D. degree from the University of Washington, School of Dentistry.

He maintains a private practice limited to Prosthodontics in Tacoma and Seattle and is an Affiliate Professor in the Graduate Restorative Program at the University of Washington.

Dr. Kois continues to lecture nationally and internationally, is reviewer for the *International Journal of Prosthodontics* and is a member of the Editorial Board for *The Compendium of Continuing Education in Dentistry*. Dr. Kois is the recipient of the 2002 Saul Schluger Memorial Award for Clinical Excellence in Diagnosis and Treatment Planning. His memberships to professional organizations include American Academy of Restorative Dentistry and American Academy of Esthetic Density.

In addition, he continues to work with restorative dentists at the Kois Center, a didactic and clinical teaching program.

**LIMITED SEATING –  
REGISTER EARLY!  
7 HOURS CE**

### LECTURE OUTLINE

Understanding the role occlusion plays is important for the long-term success of our restorative dentistry. Our knowledge about occlusion has been based on gnathologic principles. These concepts are the basis of a mechanical system with focus on posterior determinants and mutual protection. If it is that simple, why can't we predict when or why functional problems develop or why can't we always create a therapeutic occlusion?

This program will focus on biologic principles necessary for developing a functional occlusion. New paradigms will be presented to enlighten participants about understanding normal function, dysfunction and parafunction. This focus will develop principles for force management of the masticatory system and parameters to determine the most appropriate occlusal scheme. By focusing on key elements, the practitioner will be able to predict more successful restorative results and know when complex treatment is not necessary.

### COURSE OUTLINE:

- CONCEPTS
- FUNCTIONAL OCCLUSION
- DIAGNOSIS



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Heritage Dental Laboratory now offers 1 hour C.E. accredited powerpoint presentations for Dentists and staff or dental specialists for their referring clients...FREE of charge by special appointment.

**We have a variety of topics:**

- A comparison of All-Ceramic Restorations, including CAD/CAM, Zirconia, Pros – Cons and Cement Systems
- The Science of Shade Taking
- Tray and Bite selection for C&B success



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## LEAD – “BOO!”

By now, I'm sure you all have heard about lead being discovered in a bridge that was outsourced to China and delivered to an elderly lady in Ohio in the spring of this year.

During the first 7 days period from when the story ran in Ohio, television stations across the nation ran related stories with even national Fox News Channel running a live piece.

Scary stuff, right? As for the “powers that be”, here's what they are doing. Representative Arcuri (D-New York) and Representative Burgess, MD (R-Texas) have called for congressional hearings before the House Energy & Commerce Committee to investigate the problem of lead in dental restorations. Your ADA published an e-gram stating “lead should not be used as an ingredient in dental crowns”. The labs' association, NADL, is asking for registration/certification of U.S. labs. The FDA has proposed guidelines for lead in toys & candy, but none for dental restorations.

According to the Center for Disease Control and Prevention (CDC) and the FDA, on April 29, 2008 they said “Trace amounts of lead, @ 200 ppm, in dental crowns are **extremely** unlikely to cause adverse health effects”. Your ADA President, Mark Feldman, DMD says “We are glad the CDC sees no threat to patients based on trace amounts of lead reported”.

The patient's safety is the **CORE ISSUE** here, but it seems that the U.S. labs are more concerned with competition from outsourcing. At the Chicago Midwinter Meeting, Dentsply noted that they own Prident Dental Lab in China and are expecting to have over 1500 dental technicians while at the same meeting, Jim Glidewell acknowledged that his lab has satellite labs in Mexico and Costa Rica. At present, 20% of the domestic restorations are imported from 26 different countries. Soon the USA will catch up to Europe's 40% outsourcing!

I suspect that after the ADA investigates our own U.S. labs, that they will be greatly surprised with the results, perhaps not good ones. With gold at @\$1000/oz, do you really believe all your C&B restorations are made with high noble alloy? Perhaps we in the USA might have lead contamination and misfilled prescriptions as well

Don't be scared, see page 2 for additional solutions to gold approaching @\$1000/oz.

Regards,  
Bill McCormick, CDT  
President, HDL

### FUTURE SEMINARS

September 5, 2008 8am – 4pm Lisle, IL	– “ <b>Functional Occlusion: Science Driven Management</b> ” by Dr. John Kois “A Comparison of All-Ceramic Restorations” – Bill McCormick, CDT	6 hours  1 hour
October, 24, 2008 8:30am – 4pm Rockford, IL	– “ <b>Mastering Trouble Free Implant Dentistry For Profit and Fun</b> ” by Dr. Thomas Ford “A Comparison of All-Ceramic Restorations” – Bill McCormick, CDT	4 hours  1 hour
	– “ <b>Treatment Planning &amp; Financial Arrangements for Implant Cases</b> ” by Joy Gustafson, Senior Consultant – Professional Practice Consultants	
January 6, 2009 6pm – 9pm Arlington Heights, IL	– “ <b>Radical Provisionals &amp; Impression Techniques</b> ”	

## AT THE BENCH – Gold = \$1,000 ...So what?

Ok, gold is approaching \$1000/oz and oil is around \$120/barrel and the dollar is still in the toilet. Trust me, Doctors; the dollar will unfortunately stay there so we must learn to live with gold at @\$1000 per ounce. Unless your lab is charging \$200/unit for a high noble PFM, you may not even be getting a *High Noble* PFM!

Here are solutions to this conundrum with 3 great choices from Heritage Dental Laboratory:

### Solution #1 The Zirconia Partnership

A unique agreement with Heritage Dental Laboratory where you can enjoy Cad/Cam Zirconia for \$165/unit, the same price as that of a PFM/High Noble, if you qualify\*

### Solution #2 The Ultimate Crown™ (Patent Pending)

A PFM/NP restoration, developed by Heritage Dental Laboratory, that is plated with 22K gold in the intaglio, all for a fixed price of \$116/unit.

### Solution #3 The Outsourced Crown

Yes, to China. However for your peace of mind it is re-tooled and inspected by our certified dental techs ensuring you a high quality restoration for a competitive price, i.e., \$99/PFM/High Noble. This is available through our outsourcing lab, *Beijing Dental Lab*. Note: all materials used pass the US FDA 501(K) Certification Standards.

\* Please call 1-800-635-4527 for price lists and details for every solution.

About the Author – Bill McCormick, CDT is the owner of Heritage Dental Laboratory, Inc. in Arlington Heights, IL, Illinois leading cosmetic dental lab. He is also a frequent lecturer for continuing education courses on subjects such as All-Ceramic Restorations, Shade Taking and Selection of Trays and Bites.

## PAST SEMINARS

March 4-8, 2008 St. Maarten	– “Medical – Dental – Legal Update”	20 hours
April 27, 2007 Chicago, IL	– “The Art of Aesthetics and the Pursuit of Excellence” By Dr. David Hornbrook	7 hours
February 5-9, 2007 St. Maarten	– “Medical – Dental – Legal Update”	20 hours

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- Know your numbers, what you can change and what stops you
- Overhead can be 55% and it is a choice – a leadership decision
- Team members can increase their paychecks and have more time off with pay
  - Be effective and still accept insurance

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# LEADERSHIP CHALLENGE – FROM STAFF TO TEAM

By Bill Blatchford DDS

Creating that magic of a group working together on common goals and all singing the same song is what we all want. How that occurs is a factor of strong vision and leadership. What is your vision? Have you taken the time and energy to uncover and communicate with passion who you are and what you want?

Start with the important questions of:

1. Who Are We?
2. What Do We Do?
3. For Whom Do We Do It?

Until your group really knows your sense of integrity, accountability and responsibility, each person will operate within the environment which they have known before and are comfortable. They will go in their own direction and use systems which they have invented or are familiar. We do the things that interest us, avoid the tasks we don't like and as individuals, we have no idea of the bigger picture from 35,000 feet.

The leader is the one who can convey a sense of passion and belonging. You create a team by your knowing who you are and what is possible for your patients. When your vision is communicated regularly and well, people around you will make a choice to implement because they agree and are energized by your vision or they will choose to stonewall any movement forward. Joining a team is a choice. Being a strong leader is also a choice.

When leadership is in place, the energy moves forward creating geometric efficiency. If vision is clear and the team owns your vision, they will find ways to become more efficient and productive, especially if they have a share of the profits for their efforts, like an equitable bonus system.

We can avoid long discussions and waiting on decisions. We can use technology to create shorter work hours with higher production. Put computers in every operatory where assistants and hygienists enter treatment, schedule the next appointment, produce an insurance form and collect money.

How would your new team react to a suggestion of working less hours and increasing production? What technology and logistics would that take? Put the question to them and they can solve it.

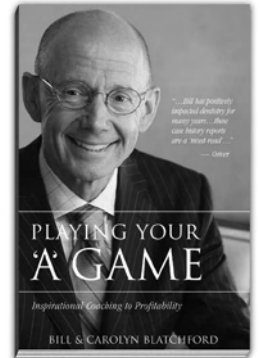
You can be the inspiration for your team. Your micro-managing days are over. Be strong in your vision, let them choose to be on your team and experience what a real team feels like.

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## ASK DR. CARL / ATTORNEY

**Question:** I recently purchased a practice and have adjusted my lifestyle to the cashflow. While the debt service on my practice loan is substantial, we have seen significant growth in the practice and our gross production has increased faster than I anticipated. I'm thinking about buying some land and building a building. Is this a good investment at this time?

**Answer:** When a young doctor purchases a practice and the practice develops more rapidly than anticipated, there are several financial pitfalls to avoid when the checkbook is expanding. Here is a list of tips that we share with buyers as they reach a comfort level with their increasing income. The sooner you are on the road to financial independence, the sooner you will experience the joys of owning a dental practice.

- 1. Start Investing Now:** It is not OK to wait. Compounding interest is like magic. It will only work to its full advantage if you start early. Set up a monthly contribution. Get a good financial advisor and make him or her, an important member of your team.
- 2. Don't Buy More House Than You Can Afford:** Over buying in the house department will tie up excessive cash that can be used to fund the retirement portfolio. Remember that the sooner your money starts to compound, the sooner you will be financially independent. Additionally, people that have a big house, but are cash poor give up a significant amount in the lifestyle category.
- 3. Don't Go Overboard on a Customized Office Building:** Ownership of your practice location is thought by many to be one of their best investments. Over spending on the office can lead to the same type of problems as the home. A good rule of thumb is to get the best and largest building that is practical. Don't rely on the emotional need to have the biggest or the fanciest. Make sure that the cashflow during the payback period allows you to adequately fund your retirement.
- 4. Avoid Accumulating Credit Card Debt:** Just because dentist make an above average income doesn't mean they avoid the credit card trap. Credit card debt is stifling and impedes your ability to build wealth. Practice restraint and the dividends will be great.
- 5. Assemble A Great Team Of Advisors:** Accountants, Attorneys, Financial Planners, Insurance Agents among others will help you develop a financial plan and avoid the serious financial blunders that compromise many dentists' finances. Don't forget to include the insurance agent. Many dentists are under insured or insured with the wrong products Review regularly and replace members on your team that aren't performing.
- 6. Stay Married:** The biggest detriment to financial independence is splitting your savings and starting over. Sometimes it is the best thing emotionally, but financially it takes years to recover. If you do divorce and decide to remarry, take your time and don't make the same silly mistakes that led to failure the first time around.

By: Michael J. Carl, D.D.S., J.D.

Dr. Carl/JD is a practicing general dentist and attorney, who divides his time between dentistry and legal matters of practice buyouts, corporate matters and disciplinary proceeding with healthcare, and he is a client of Heritage Dental Lab! Please send any legal questions that you may have for the next issue, or e-mail him at [mjc@transitionworks.com](mailto:mjc@transitionworks.com)

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