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A Look Back, A Hope For The Future

s FDLA presidents have said before me, "Wow, that went quick." Still, I hadn't realized just how fast it would go. So, in my last message to you, I wanted to say thank you and share what an amazing year being FDLA's president has been.

I was able to meet many great people. One of the highlights for me was seeing one of our own members, Patrick Pellett, CDT, be named as the 2018 CDT of the Year during the NADL Vision 21 meeting. As many of you know, Patrick has been an FDLA member for a number of years and has always been a strong supporter of FDLA. He's been in the dental laboratory profession for more than 40 years. In addition to getting to celebrate Patrick's achievement, it was wonderful to get to attend my first Vision 21 meeting. Just being around the other laboratory owners from across the country and learning about how they run their labs and listening to the speakers as they gave insight into dental laboratory trends was quite an experience.

I am so grateful that I was able to be involved with FDLA and help steer this organization as it moves into the future. I hope I was able to contribute and help. Ours is a strong community in Florida and it can only get stronger by involving more technicians and lab owners in FDLA. Please, bring a non-member friend to a district clinic, share *focus* with them and invite your dentist clients to the Southern States Symposium & Expo. Most of all, please share your opinions about the association and the dental laboratory profession in Florida. We want to hear them and help you meet your professional goals.

Finally, I'd like to leave you with one thought for the future and it's this: while we are a strong community, the dental laboratory profession is changing. One of the hardships many of us face is

finding qualified technicians. We need to find a way to work together to recruit, train and retain dental laboratory technicians. Together, with the staff of FDLA, we can find a way to do that.

Thank you again for letting me be your FDLA president.

Lenny Herrera, CDT FDLA president



"Ours is a strong community in Florida and it can only get stronger by involving more technicians and lab owners in FDLA."

FDLA Mission

Serving Florida's dental technology professionals as a valued part of the dental team enhancing oral health care.

FDLA Vision

Advancing the individual and collective success of Florida's dental technology professionals in a changing environment.

Values Statement

FDLA's board of directors and professional staff are guided by these principles:

- Integrity
- Leadership
- Recognition
- Safety
- Acceptance
- Innovation



focus

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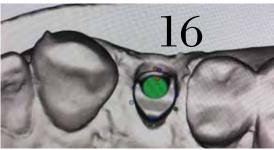
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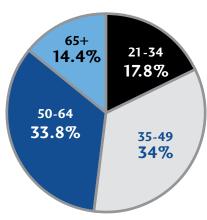
A Dental Snapshot of **FLORIDA**

DENTIST DEMOGRAPHICS

49

Average Age of Florida Dentists

FLORIDA DENTISTS BY AGE





FLORIDA DENTISTS BY GENDER

67.6%

Male

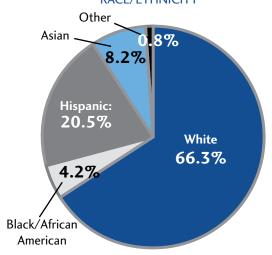
32.4%

Female

47.2%

Percentage of Female Dentists (projected) in 2035

FLORIDA DENTISTS BY RACE/ETHNICITY



3,370 (30% of dentists)

Number of Florida Dentists Participating in Medicaid or CHIP

DENTISTS WORKING IN FLORIDA

2001: 8,055	2006: 8,704	2011: 9,504	2016: 10,738
2002: 8,079	2007: 9,016	2012: 9,676	2017: 10,816
2003: 8,464	2008: 9,098	2013: 9,837	
2004: 8,535	2009: 9,270	2014: 10,103	
2005: 8,678	2010: 9,428	2015: 10,450	

52.3

Number of Dentists per 100,000 Floridians

56.9

Projected Number of Dentists per 100,000 Floridians in 2035

FLORIDA DENTIST PRACTICE STRUCTURE

27.5%

Non-DSO Affiliated Solo Practice

13.1%

DSO Affiliated Solo Practice or **Group Practice**

59.5%

Non-DSO Affiliated Group Practice

PRIVATE PRACTICE DENTISTS' **AVERAGE INCOME (2016)**

\$188,580

\$333,540

General **Practitioners** **Specialists**



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- Anton Woolf, CEO of Argen







A Dental Snapshot of Florida, continued

DENTAL LABORATORY TECHNOLOGY EDUCATION PROGRAMS



DENTAL LABORATORY
TECHNOLOGY ENROLLMENT

Capacity: **487 Students**

Enrollment: **324 Students**

	FIRST-YEAR STUDENTS	GRADUATES
2006	425	265
2007	389	269
2008	280	234
2009	416	239
2010	431	245
2011	421	276
2012	435	301
2013	402	297
2014	320	311
2015	303	245
2016	324	300

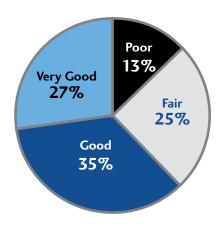


78%

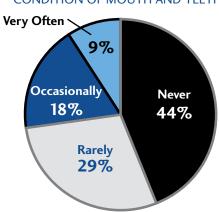
Percentage of Floridians on Community Water Systems Receiving Fluoridated Water (2012)

THE FLORIDA DENTAL PATIENT

OVERALL CONDITION OF FLORIDIANS'
MOUTH AND TEETH



FLORIDIANS WHO SAY LIFE IN GENERAL IS LESS SATISFYING DUE TO CONDITION OF MOUTH AND TEETH



REASONS FOR NOT VISITING THE DENTIST MORE FREQUENTLY, AMONG THOSE WITHOUT A VISIT IN THE LAST 12 MONTHS

Cost: **60%**

Afraid of Dentist: 28%

Inconvenient Location

or Time: 26%

Trouble Finding a Dentist: 13%

No Original Teeth: 12%

No Perceived Need: 5%

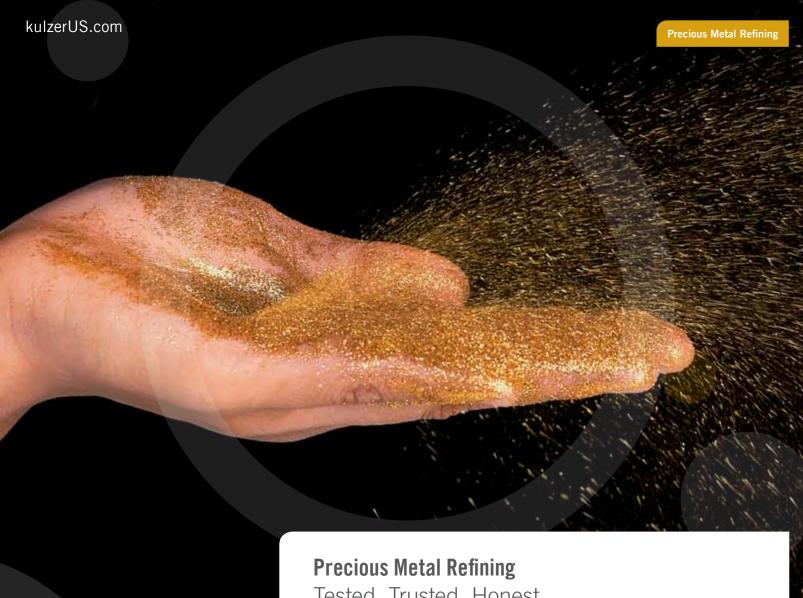
No Reason: 8%

Other: 10%

U.S. DENTAL EXPENDITURES: 2017 UPDATE

- Total dental expenditures were \$124 billion in 2016. This was a 3.3 percent increase from 2015, after adjusting for inflation.
- Per capita total dental expenditures also increased in 2016, for the second year in a row.
- Dental expenditures increased in 2016 for all sources of financing (e.g. out-of-pocket, insurance, CMS programs). The breakdown of expenditure by source of financing was largely unchanged in 2016. However, CMS programs saw a slight increase.
- Total U.S. dental expenditures have increased for two straight years after being flat for several years.

Source: American Dental Association Health Policy Institute



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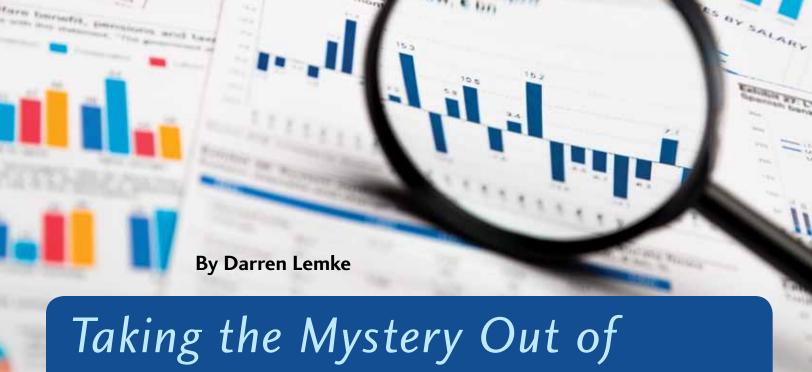
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YOUR LAB'S FINANCIALS

hen I was asked to write an article on revealing the mystery behind financials, I looked back at a webinar we did this past year. Financials are those tools that are created by every company in the world, no matter how big or how small. The key is to use them and make them work for you.



SEE IT AT THE SOUTHERN STATES SYMPOSIUM & EXPO

Get even more about mastering your lab's financials from Darren Lemke during his presentation at the Southern States Symposium & Expo.

See page 33 of this issue for registration information.

You receive a set of financials from your accountant, every year, so you can report your business earnings to the government for tax purposes. They usually include your income statement or Profit & Loss (P&L), as we will refer to it, as well as a balance sheet.

The key to making sure your business is going forward in an informed manner is to make sure we get key financials in a timely basis. We will use these financials to make informed business decisions, measure our successes and identify changes in our business. At the end of day, you can have peace of mind that you are on the right track or determine what you need to do to make changes in your business to get on the right track.

The first financial report we will look at is the balance sheet. The balance sheet represents the company's financial position at the end of a specific period, includes assets and liabilities and tells how much you own and how much you owe. As the title indicates, the two sides must balance. Banks take stock in this report to see how healthy a company is, and in case you are trying to sell your lab, the vendor also likes to see a healthy balance sheet.

The most important report that we like to use in day-to-day management is the P&L statement, which should be provided monthly by your accountant or in-house financial team. What a P&L does is summarize the revenues, costs and expenses incurred during a specific period. It provides information about the company's ability, or lack of, to generate profit.

The key factor in a P&L for a dental lab is how it is set up to give you the information you need to check the health of your lab. Accountants have different ways of setting up P&Ls, but the lab needs one set up to give you all your key performance indicators or (KPIs).

The P&L can be created using an accounting software like QuickBooks or Sage and can be done in-house, if the input of data is kept current. A P&L can also be created via an outside bookkeeper if

they receive all the data for input in a timely manner. To have a P&L that makes management sense, we need to make sure the format of it reads easily and helps you make business decisions.

It is logical for all the revenue to be recorded at the top. You can have as many GL (General Ledger) codes as you want to track. You can break this down into all ceramic, E.max, implants, implant bars, implant parts, dentures, partials, ortho, etc. Below that, you will record your cost of goods which go into making all your restorations as well as your direct labor and shipping costs. To be clear, the direct labor is only labor that is used to produce the product.

It is important not to lump the cost of goods into one GL code. If you have only one GL code and enter everything in there, it makes it difficult to track and make informed decisions, as you won't really know how much of which product is in the lump sum of cost of goods.

This will get us to the gross profit line.

From there, we will move into the expense part of the P&L that includes all the other overhead expenses that the lab incurs on a monthly basis. For example: rent, utilities, admin salaries, marketing, etc. This part of the P&L should lay out the overhead expenses that are required to run the business day-to-day. This also allows you to find your breakeven points, based on your KPI's, and monitor your direct and indirect operating expenses.

So, one of the questions we often hear is: What is the difference between direct and in direct operating expenses? Well, here is a quick little guide to them, in kitchen-table terms.

Direct expenses are the fixed labor costs, both direct and admin labor, rent, utilities, taxes, insurances, etc.—everything required to keep the business going day to day. Indirect expenses are what you spend on cost of goods, marketing, supplies, travel, etc.— things that are more discretionary in nature.

It's very important that both expenses be monitored on a regular basis to ensure you are getting the best rates and deals, as this is an area where you can bleed profits by as little as a 1/10th of a percent at a time. That may not sound like much, but if you have 30 expense line items, that's 3 percent of lost profit. Therefore, it's very important to stay on top of the entire P&L to make sure you are maximizing the profitability of your lab.

To summarize, the P&L is broken into three parts:

- 1. Monitoring direct labor.
- 2. Cost of goods.
- 3. Operating expenses.

THREE BASIC FINANCIAL STATEMENTS YOUR LAB NEEDS



1. BALANCE SHEET

This statement provides an overall financial snapshot of your small business. As an equation, it looks like liabilities + owner's equity = assets. The two sides of the equation must balance out. There are two types of assets: current and fixed. Current assets include cash or other holdings that can quickly be converted to cash within a year. These may include inventory, prepaid expenses and accounts receivable. Machinery, equipment, land, buildings, furniture and other essentials that you are not planning to sell are considered fixed assets. Liabilities can be broken down into current or short-term liabilities, such as accounts payable and taxes, and long-term debt, such as bank loans or notes payable to stockholders. Owner's equity includes any invested capital or retained earnings. If you captured all of your accounting information correctly, both sides of the balance sheet equation should be equal.

2. PROFIT AND LOSS STATEMENT

A profit and loss statement, also referred to as an income statement, enables you to project sales and expenses and typically covers a period of a few months to a year. To determine net profit, subtract total operating expenses from gross profit. (Gross profit – total operating expenses = net profit.) Remember that gross profit is calculated as total sales minus the cost of goods sold. Costs of goods sold include things like raw materials, inventory and payroll taxes. Make sure to also factor in overhead costs, such as repairs, utilities, insurance and legal fees into your operating expenses to ensure your net profit is accurate.

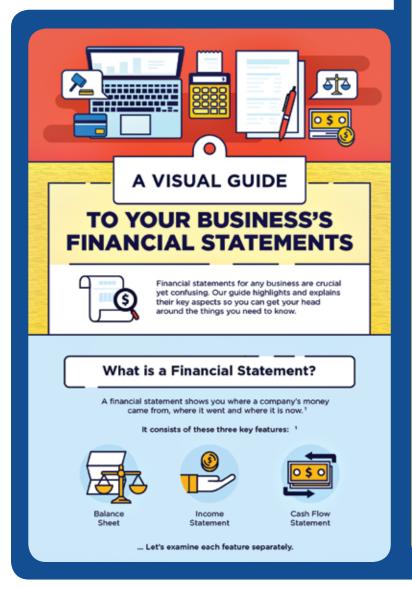
3. CASH FLOW STATEMENT

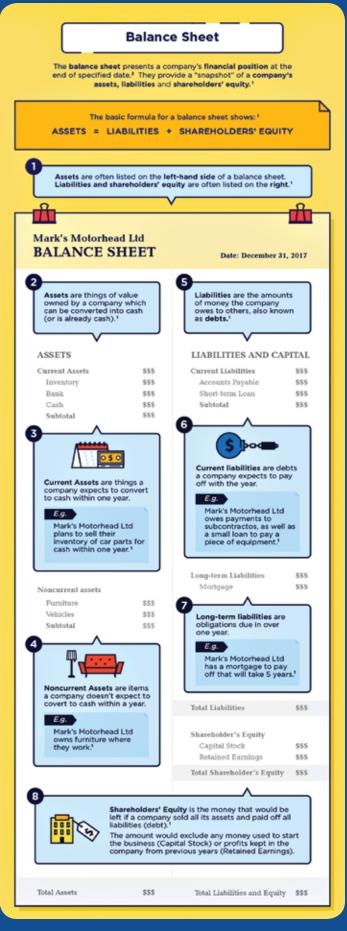
This statement highlights how much money is coming in (cash inflows) and going out (cash outflows). Cash inflows include cash sales, accounts receivable collections, loans and other investments. Equipment purchased, expenses paid, inventory and other payments are considered cash outflows. To calculate your ending cash balance, take the beginning cash balance, add cash inflows and then subtract cash outflows.

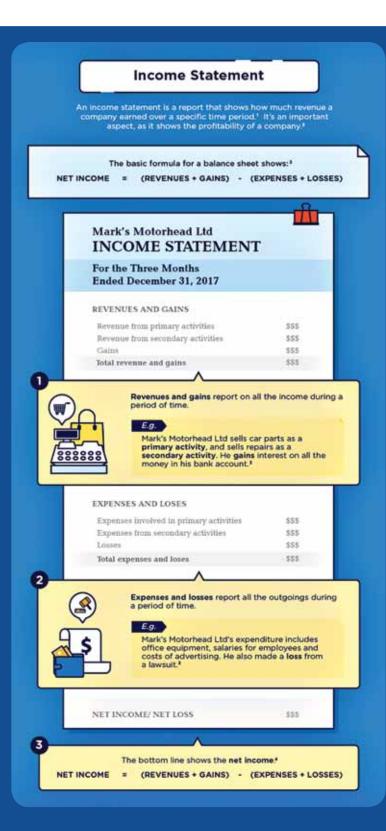
Source: U.S. Small Business Administration

The benefit of a good P&L is that it helps to create your operating budget and forecasting budgets. We use a budget just like any government, public company or even a nonprofit organization or condo association. A budget is a prediction of what you plan to do in your business in the upcoming year, or want to project what would happen if your revenues and expenses hit certain targets. They allow you to manage expenses, what amount of sales need to be increased to add labor, and how to control expenses to affect your bottom line. It also lets you see where your sweet spot is. That is the spot where, for every increase in revenue dollars you add, a greater amount falls to the bottom line. Because you have hit your efficiencies of your overhead expenses, your labor is at maximum production and you have your cost of goods under control.

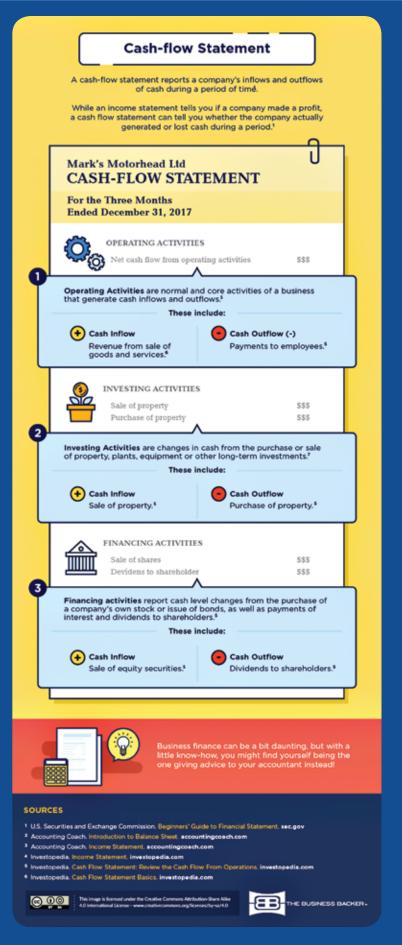
The foundation to business success is timely, quality reporting in the area of producing a budget, P&L statements, and a good solid balance sheet. Make sure you and your financial team are on the same page and you are getting all the information you can and use it to make sure







"IT'S VERY IMPORTANT TO STAY ON TOP OF
THE ENTIRE P&L TO MAKE SURE YOU ARE
MAXIMIZING THE PROFITABILITY OF YOUR LAB."



your business stays healthy for the long term. Let these financial reports be the basis for your monthly financial reviews with your team or with yourself. Enjoy the fruits of your hard work, by hitting your career goals and personal targets. •

ABOUT THE AUTHOR:

Darren Lemke is president of Approach Management Group. He has more than 25 years of dental industry experience, having started his dental career in 1990 with the Aurum Group of dental laboratories. He was one of the co-founders and past presidents of DTI Dental Technologies Inc., where he expanded his knowledge of the dental laboratory industry. Lemke is a very energetic person who believes anything can be achieved through proper planning and hard work. Using his knowledge of finance and business practices as well as the friendships gained as an entrepreneur, he enjoys helping others achieve success by building a winning formula.

5 FATAL
FINANCIAL
MISTAKES
MADE BY SMALL
BUSINESS OWNERS

- Mixing Personal and Business Expenses
- 2. Hiring Too Softly Based on Personal Connections Rather Than Skill
- 3. Borrowing Too Much Too Early
- 4. Being a Jack-of-all-trades Rather Than Hiring For Items Like Marketing
- 5. Forgetting to Plan for Retirement

Source: QuickBooks



1.040 00



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ex. Easily convert A2 disc to A3, A3.5 or A4 crown. (Patent Pending Process)







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DENTAL IMPLANT ABUTMENT

Design Considerations

owadays, custom CAD/CAM abutments for fixed partial dentures have become economical and accommodating to managing fit, form and function of the dental prosthesis. There are certain considerations to designing the abutments that we as technicians need to account for, such as, overall retention, path of insertion, material thickness, tissue response, esthetics and cementation control.

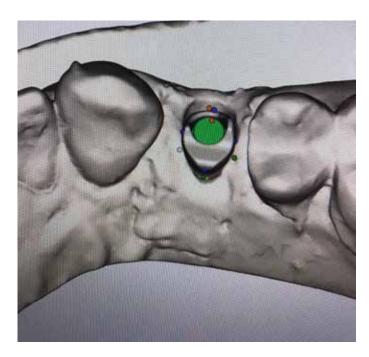
With all of the components carefully contoured, the results can be very natural.

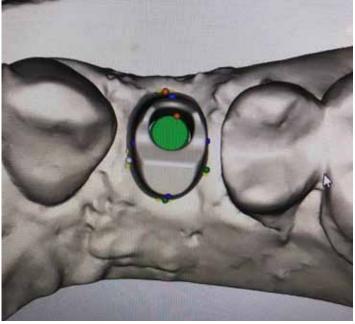
When I start an abutment design, I prefer to determine where I want my final tooth contours. With single tooth, I will reference adjacent tooth positions. With CAD, we will either scan a diagnostic or pre-treatment model of the proposed site and merge the scans over the working cast or we use the CAD tools to develop the contours. Then, I can see how the implant fixtures fit to that design.

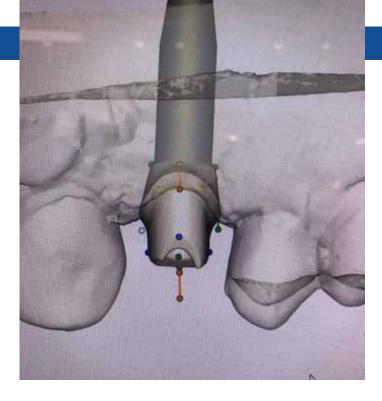
I prefer to start with the crown-to-abutment margins as this influences how the prosthesis will look and gives the dentist better control of the cementing process. Using the mock contour scan over the working scan, I will position the margins in the vertical and horizontal positions. The vertical

position should put the margin at the preferred gingival position (sub, even or supra-gingival). The horizontal position will form the emergence position of the new prosthesis.

The vertical margin position factors to consider are esthetics and cement control. Esthetics are to keep the crown/abutment margin hidden, so the buccal and facial margins are usually placed sub-gingival (1 mm-1.5 mm). Once the margin transitions to the proximal, I position it at 0 mm-.5 mm sub-gingival. I place the lingual margin, most times, at gingival level or sometimes above. These closer-to-gingival-crest margin positions aid the dentist in removal of excess cement ,which has been cited as a root cause of perio-implantitist.



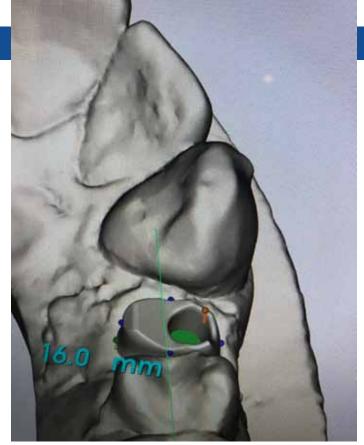




The horizontal margin position effects esthetics and tissue response. Because implants are cylindrical and teeth have varied shapes, there is need for transition to accomplish a natural effect of all the prosthetic parts together. I want to get the margin position as close to a natural tooth as possible at the gingival level. Using the mock contour scan, I know I have considered the buccal and lingual positions for esthetics of the buccal corridor and gingival levels for the anterior. I set the proximal positions at 1 mm-1.5 mm to the adjacent tooth, where it emerges from the tissue. Also, I look at the margin position from an occlusal view and confirm that the shape is similar to the type of tooth being replaced (oval, trapezoid, rectangular, triangular or oval).

The horizontal tissue effect is due to displacement of the tissue between the implant interface and the crown/abutment margin. The buccal tissue displacement will push the tissue level apical. The more that is displaced, the more the gingival level will move. This is most critical in the anterior, where gingival level is a critical esthetic factor. Because of this, I will sometimes develop a concave contour of the labial transition of the abutment to the fixture interface. Otherwise, I usually will use a straight or convex contour of the transition zone.

The minimum height of the apical walls and the height of the abutment above the margins should be 4mm. If there is compromise of this factor, it should be discussed with the clinician, as less than this height will adversely affect the retention of the prosthesis. The other limit to the height of the abutment is the opposing dentition. I position the height to within 2mm of the opposing most of the time depending on the prosthetic material. For the axis of the abutment walls, the adjacent proximal contacts and splinting abutments are used as a guide (path of insertion). With posterior abutments,



the axis should direct toward the opposing occlusion. With an anterior abutments, the labial lingual position needs to be considered. Occasionally, there is a slim margin of error as to being too labial or too lingual—both of which can compromise the material thickness. With the guide of the diagnostic CAD image, I position the abutment appropriately. The axial walls of the abutment need to be tapered by at least 5 degrees mesial to distal and buccal to lingual. Be careful not to get too tapered or retention will be lost. Cusp enhancement and central groove are dependent upon the opposing teeth. The more exaggerated the opposing, the more that can be designed into the abutment. A flat opposing equals a flat abutment and vice versa.

To finalize the design, I will eye up the position in reference to the adjacent tooth alignment, being sure the buccal and lingual are in line as well as the central grooves. At this point, you should double check clearance to the opposing dentition. If the abutment is short or of a round shape, I will add a vertical groove usually in one of the proximal walls to aid in retention and anti-rotation. With all of the components carefully contoured, the results can be very natural.

About the Author:

Tim Stevenson, CDT, is the president of Stevenson Dental Technology, CDL, in Beverly Hills, FLA., where he employees a staff of 12. He has been a technician for more than 35 years and has operated SDtech for 25 years. He is FDLA's president elect and has served on the board for the last three years.

Chris Bormes, MICOI

Treating the Edentulous Patient

reating an edentulous patient involves many factors and the goal of this article is to keep it as simple as possible. In the U.S., the percentage of edentulous patients is declining 10 percent each decade. However, this reduction is more than off-set by the aging baby boomer population and the increase in life expectancy portending an increased number of edentulous patients.¹ As early as 2030, almost one in five people in the United States will be over the age of 65 (**Figure 1**).

It is important to design a prosthesis that may be serviced and repaired.

Initially, with the edentulous patient who will receive an implant supported or retained prosthesis, we need to recognize the difference between natural teeth and implants. Natural teeth have periodontal ligament, nature's shock absorbers. When patients come into occlusion, there may be up to 1 mm of movement between opposing natural teeth. Implants do not have these shock absorbers and we, therefore, need to protect our implants. Further, natural teeth

Population Growth by Age Group

Age Groups	Percentage of Change 2010-2030
65 and older	76.8 percent
40-64 years old	3.4 percent
20-39 years old	11.9 percent
<20 years old	14.1 percent

Percent of Total Population by Age Group

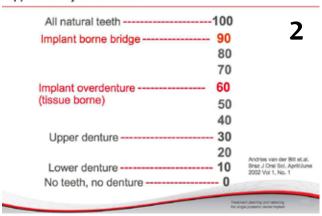
	PERCENTAGE OF TOTAL POPULATION		
Age Groups	2010	2020	2030
65 and older	13.1 percent	16.2 percent	19.6 percent
40-64 years old	33.2 percent	31.0 percent	29.0 percent
30-39 years old	26.8 percent	26.5 percent	25.4 percent
<20 years old	26.9 percent	26.4 percent	25.9 percent

Source: U.S. Census Bureau

provide proprioception, which protects the teeth by providing neurological stimulus letting the brain know if we are overloading or potentially damaging the tooth prior to completion of the destructive movement. Teeth are sensory organs, and the tactile sensory feedback coordinates chewing, swallowing and breathing. The only tactile sensation available to implant restorations comes from bone deformation, which results in a threshold level 50 times greater than that of the natural dentition.2 The absence of mechanoreceptors impairs fine motor control by a reduced feedback mechanism. Studies also show that subjects with dentures and implants are unable to position their jaws as precisely as those with natural teeth. This lack of positional control, coupled with increased tactile sensory thresholds, results in much greater force being applied to implant restorations versus tooth-borne prosthetics.³ Therefore, implant prosthetics are likely to experience a greater incidence of mechanical damage. Implant-supported fixed hybrid prostheses experience 3.8 times more prosthetic complications than biologic complications.4 Therefore, it is important to design a prosthesis that may be serviced and repaired as the patient ages and needs change.

Traditional denture wearers have reported that wearing dentures limits their ability to live life to the fullest, impacts their love life, affects their career and contributes to a lack of confidence in meetings.⁵ It is these patients where a two implant overdenture can restore confidence, diet, health and overall quality of life. Not only will a

Relative functional capacity – upper/lower jaw situations





two implant overdenture improve the patient's functional capacity from 10 percent to 60 percent, implants maintain bone. Seventy-five percent of denture wearers would have chosen implant treatment had they known about bone loss.⁶

The opposing arch is the first variable to consider when treating the edentulous arch. Fixed work on implants provides 90 percent of functional capacity, but the bite forces generated—again, without proprioception—can be destructive. The question becomes: When fabricating prosthesis, is it not better to control where the failure occurs with time? After all, a failing or broken implant or abutment is more difficult to repair than a piece of plastic. By the same token, if a zirconia prosthesis chips or fractures, the only option is the costly replacement of the entire prosthesis.⁷

Our restoration should have some resilience built in to protect against these potentially destructive forces. Conversely, a full or partial denture may only generate 10 percent of functional capacity (Figure 2). Mounted casts shown in Figure 3 tell us:

- 1. What is opposing, and therefore, the bite forces
- 2. Any parafunctional habits the patient has
- 3. How much interocclusal space we have

Mounted casts also provide necessary information on the patient's residual ridge. The key factor in removable prosthetics when choosing between a bar and stud attachment will be the health and shape of the alveolar ridge. A tall, knife-edge ridge provides limited support, but provides excellent prosthesis stability (Figure 4). Often, patients who have been edentulous for some time have an atrophied (or pancake) ridge. This wide flat ridge provides excellent support, but very little prosthesis stability (Figure 5). This type of patient will not be happy with a stud overdenture. They need a bar overdenture, or two more well placed implants for a removable bridge.

The vertical dimensions required for the treatment protocols may be put into 4 classes:

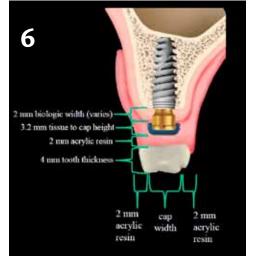
- 1. Class I has 15mm or greater
- 2. Class II has 12-14mm of space
- 3. Class III has 9-11 mm of space
- 4. Class IV arch has less than 9mm

A monolithic full arch fixed restoration requires 18mm of space. However, what is often neglected and needs to be considered is the horizontal space available, specifically on patients with high smile lines and anterior implants in the maxillae. Ideally, to provide maximum esthetics as well as strength of acrylic around the attachment housing, stud attachments need 2mm of thickness of flange, as well as taking into account the thickness of the attachment housing (Figure 6).

When planning, a favorable outcome in both the mandible and maxillae is







achieved when we have 10mm length and 5mm of width of bone for our implants.9 The difference in bone quality in the mandible and maxillae also is a key factor (**Figure 7**). Studies have shown that to support 20 pounds of force in the maxilla we need 9mm squared of titanium to bone contact. By comparison, in the mandible, we only need 6mm squared of titanium to bone contact to support the same 20 pound load. The average quality or density of cancellous bone is 50 percent greater in the mandible than in maxilla. Therefore, we need stronger or more implants in the maxilla to support the same load as in the lower arch. Bone can be broken down into four classifications:

- Type 1 (think oak wood, hard and dense)
- 2. Type 2 (think pine wood)
- 3. Type 3 (think balsa wood)
- 4. Type 4 (think Styrofoam).

Ideally, we are placing and loading implants in only Type 1 and 2 bone. Implants in these bone classifications may be safely used as cantilever abutments, while implants placed in Type 3-4 bone need to be protected via splinting with a bar and may not safely be cantilevered from in the posterior (Figures 8 and 9).

The fixed detachable (also called hybrid) prosthesis provides 90 percent functional capacity and is often the first choice for patients who have the bone quantity and quality, finances and space necessary. A wrap around bar, which may be serviced/relined as the patients' needs change, has an acrylic intaglio, which is not as biologically kind to the gingiva as titanium. Patients with these designs need to have the acrylic and teeth replaced every five to eight years. Acrylic resin in the mouth will break down and biofilms are potentially life altering. Overdenture teeth are made of plastic and wear out about every

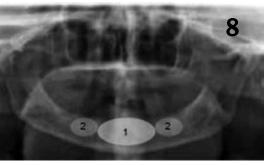
five to eight years. When they wear out, they need to be replaced. If left to wear for too long, the patient's face will begin to look older because the distance from your nose to your chin has gotten smaller. 10 A fixed detachable requires much less maintenance than an overdenture, but requires increased chairside time for hygiene visits. A Montreal Bar has a metal intaglio, which is easier to keep clean. In the maxillae, a facial inclination is necessary to avoid saliva ejection and whistling, with the trade-off being a harder prosthesis for the patient to keep clean. The full Monolithic restoration is strong, very esthetic, but requires more space (18mm) and requires accurate record taking and processing between the clinician and technician (Figure 10). A negative of the fixed detachable design is that you cannot independently service the prosthesis. If something goes wrong, all screws must be removed and the entire prosthesis removed in order to repair or remake it.

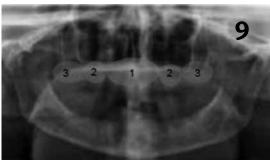
7 Static Compressive Strength of Maxillary Cancellous Bone 10 MPa

Applied Force in Pounds	Required Bone Area in Square MM
1	0.444
5	2.220
10	4.450
15	6.670
20	8.900
25	11.120
30	13.350
35	15.570
40	17.790
45	20.020
50	22.240

Static Compressive Strength of Madibular Cancellous Bone 15 MPa

Applied Force in Pounds	Required Bone Area in Square MM
1	0.296
5	1.480
10	2.970
15	4.450
20	5.930
25	7.410
30	8.900
35	10.380
40	11.860
45	13.350
50	14.830













When choosing between fixed and removable prosthesis, the three major contraindications for fixed solutions include:

- 1. Inadequate lip support due to horizontal loss of maxillary bone, necessitating a buccal flange. If the bone and soft tissues are deficient, a buccal flange is created to replace the missing structures.
- 2. Lack of dexterity and hygiene. If the patient cannot, or will not, practice good oral hygiene on the fixed restoration, a removable is indicated. One trend we are seeing in implant dentistry is the transition of a great number of patients from fixed over to removable. Often, we are asking patients with limited dexterity with a modified ridge lap—or even a full ridge lap—prosthesis to get into a 1mm lingual opening multiple times per day to clean. This esthetic and hygiene tradeoff may lead to a patient with a food trap leading to halitosis, gingiva receding away from the bacteria caked on the intaglio of the fixed prosthesis, black smile lines, saliva ejection, bone loss



and potential implant failure (Figures 11-13). Furthermore, when a removable prosthesis is provided for patients with limited dexterity, telescopic retainers and others that are difficult to remove and seat should not be chosen. Overdenture bars for patients with limited manual dexterity should be tapered versus parallel to facilitate insertion and removal and reduce wear potential and, ideally, utilize attachments that are self-aligning.

3. Lip dynamics that would produce an unfavorable esthetic result due to the position of the prosthesis tissue junction (PTJ). These patients require a removable prosthesis, or need to have an alveoplasty performed, to raise the PTJ above the smile line. Eighty percent of the population has a Medium or High smile line. 11 Patients with a high, medium, or gummy smile lines should be treated with fixed restorations very carefully (Figure 14). The implant must be placed higher than the smile line for proper PTJ (Figure 15). The PTJ may be designed one of four ways (Figure 16). A convex intaglio area provides the patient with the best opportunity to clean the

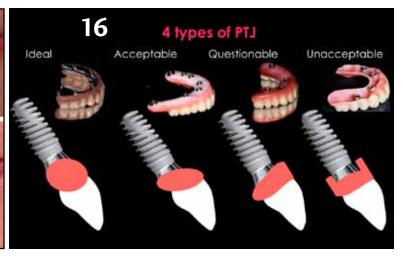


prosthesis, while a modified ridge lap—common in the maxillae—needs to be presented to only the patients with the dexterity to clean from the lingual.

If the patient does not fit the criteria for a fixed detachable prosthesis, the fixed removable provides the best of both worlds (Figure 17). This prosthesis is rigid, the implants are splinted to protect weaker abutments, a flange restores lip support, the need to reduce bone is eliminated, the prosthesis can be removed for easier hygiene, and an open palate is utilized for patient satisfaction. When designing the primary bar for the fixed removable, it is important to provide sufficient room between the







bar and gingiva as well as to round/ smooth the bottom of the bar for ease of cleaning. The secondary structure is processed in veneering material of choice and is retained by a combination of friction and attachments.

One of the initial steps for the edentulous arch is fabricating a provisional prosthesis, which allows the patient to approve esthetics, the clinician to assess patient function and the technician to discover any changes needed and to make adjustments before manufacturing the final prosthesis. The provisional can also help determine fixed or removable if the patient has the dexterity and acceptable smile line. Remove the flange from the provisional prosthesis and determine if a flange is needed for lip support. If the patient has a flat, atrophied ridge and a bar overdenture is chosen, it is important to ensure that adequate tongue space is provided for the patient, and modify the design if necessary before delivering the final prosthesis.

It is also important to consider the patient's parafunctional habits—brux, tongue thrust, grind, smoke, or chew tobacco. Bruxers can generate up to 1000N of force, which makes it important that we have resilience built

into one of the arches to protect the implants. If we are providing a fixed restoration to a bruxer, a hard and soft night guard is necessary to protect the restoration.

Instructing the patients how to clean their removable prosthesis is very important. Studies have shown that denture cleaners reduce attachment retention by up to 20 percent, and 6.15 percent sodium hypochlorite (NaOCL) can lead to up to a 80 percent loss of retention on attachments. The simple solution is to instruct those patients who use denture cleaner to brush their attachments with a mild dish soap and water prior to reinsertion.

Properly restored implant restorations rely on the final restorations being in proper position from an esthetic and functional perspective. The implant should then be properly positioned under the restoration for optimal loading. The bone type, the opposing dentition and bite forces that need to be supported, and restoration will dictate the position of the implants. If the bone quantity and quality necessitates a cantilever, it is ideal to cantilever only from Type 1 or 2 bone with the largest diameter and length—and, therefore, greatest titanium to bone contact—

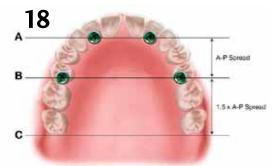
possible. Because bite forces increase nine times from anterior to posterior, ¹⁴ and bone often increases in quantity and quality in the posterior, implants in the posterior should be larger to support these increased forces in lesser quality hone

When deciding to cantilever, the accepted rule of thumb is based from Dr. Charles English's research, 15 which stated the distance from the most anterior to most posterior implant (multiplied by 1.5mm) is the reasonable amount of cantilever safely allowed off the most distal implants bilaterally (Figure 18).

A fixed detachable (Figure 19) provides prosthesis stability, the security of fixed teeth, abutment splinting, maintenance of bone, an open palette for comfort and taste, and high esthetics. Potential drawbacks when choosing this type of prosthesis include the need for more and larger implants to fully support the restoration, inability to independently service, often a hygiene and esthetic trade-off, phonetic and saliva issues in the maxilla as well as wear and breakage of teeth.

These fixed prostheses provide many benefits, but require sufficient bone, money, a low smile line (or alveoplasty),













dexterity and hygiene. If not all these criteria are met, a fixed removable is the next best option as both restore 90 percent of functional capacity.

A fixed removable (**Figure 20**) has all the benefits of the fixed detachable, with the added benefit of a flange, easy hygiene and servicing for both the patient and the clinician, facially inclined screw access channels are not an issue, and does not require an alveoplasty. Drawbacks include increased cost and potentially more frequent servicing requirements.

An overdenture bar (Figure 21) provides between 60 percent and 90 percent of functional capacity and is ideal for the patient who has a flatter (pancake) ridge and would not have sufficient stability with a stud attachment. Bars are also preferable in the maxillae, as the bar splints and protects implants in this weaker bone. Extremely divergent implants are easier to handle. If the bar is going to be both abutment and tissue supported, we can design our loading points and fulcrum to protect the attachments during prosthesis rotation. Patients need to have the dexterity to clean underneath the bar, which is a large pontic, as well as handle insertion and removal. More interocclusal space is needed for a bar than a stud.

An overdenture stud (Figure 22) is the most inexpensive way to improve the quality of life for mandibular denture patients, taking the patient from 10 percent to 60 percent functional capacity. Overdenture studs provide easy hygiene maintenance, as there is a small abutment area to clean around, excellent prosthesis retention, and allows independent servicing of the prosthesis. Contraindications are patients with atrophied/flattened ridges, extremely divergent implants, and potential bone loss around stud attachments when placed into implants in poor quality bone in the maxillae. 0

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Pellett Named CDT of the Year at NADL Vision 21 Meeting



he National Board for Certification in Dental Laboratory Technology named FDLA's own Patrick Pellett, CDT, as the 2018 CDT of the Year. The announcement came during the 2018 NADL Vision 21 Meeting in Las Vegas. Pellett is a long time member and supporter of FDLA and has been in dental laboratory technology for more than 40 years. He is the dental laboratory manager at PRIDE Dental Laboratory where he trains inmates to become dental laboratory technicians and encourages them to pursue certification.

Pellett was one of nearly 300 lab owners, technicians and manufacturers who attended the January NADL Vision 21 Meeting. The meeting kicked off with a FDA and DAMAS best practices session featuring panelists Chris Brown with Aclivi, LLC, Bennett Napier, CAE, with NADL and Tim Torbenson with EVO820. Thursday also consisted of business roundtables where attendees discussed important business topics, such as profitability, employee motivation and incentives, employee benefits, materials trends and FDA trends. Thursday concluded with three great networking receptions including a first-time-attendee reception, an event recognizing Foundation for Dental Laboratory Technology donors and a reception recognizing incoming NADL President Robert Savage.

Friday sessions included a dynamic keynote presentation about balanced leadership by Rocky Romanella, a state of the industry



presentation, a session on bridging change, a panel presentation from dental laboratory owners about how they identified new business opportunities to drive their success and a session discussing clinical trends impacting dentists and dental laboratories. Friday concluded with a reception honoring the NADL 2018 Award winners:

- The Argen Corporation Supplier Member of the Year
- Bayou State Crown and Bridge Laboratory, Inc., CDL, DAMAS – Laboratory Member of the Year
- Judy Fishman Hall of Fame
- Jim Collis, CDT Excellence in Education



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Saturday education included a session on branding and marketing, as well as a closing keynote presentation and value-added workshop from Patrick Morin about important exit strategies and preparing a dental laboratory for transition.

The meeting couldn't have been the success it was without the support of more than 20 sponsors. Please mark your calendars for the 2019 NADL Vision 21 Meeting being held January 17 – 19, 2019 at Bally's Las Vegas. •





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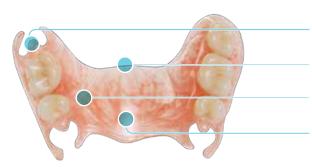
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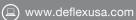
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Getting In Focus With Dental Photography



ental photography can be a huge part of successful dentist-technician communication, making a great impact on patient expectations and treatment outcomes. So how do you make sure you're doing it right? That's where Dr. Miles R. Cone's Southern States Symposium & Trade Show keynote address comes in: Exposed—The Art and Science of Emotive Clinical and Dental Laboratory Photography. Recently, we sat down with Dr. Cone to talk about dental photography and what every technician should know.



Marketing the services and products of the laboratory with dental photography is undoubtedly the most powerful means to attract these new accounts.

What do you wish every lab technician understood more about dental photography?

One of the most frequent comments I hear from laboratory owners and technicians is that they would love to have more discerning, top-paying clients so that they can move away from the high-volume production level of service and enter the realm of a more personalized and boutique model of dental prosthetics. Marketing the services and products of the laboratory with dental photography is undoubtedly the most powerful means to attract these new accounts. It is absolutely vital in today's marketplace to have a well-designed webpage with a photographic portfolio focused on the individual strengths of each lab technician. After all, the consumer cannot covet what they cannot see.

What are the three biggest mistakes dental technicians do when it comes to dental photography and what should they be doing instead?

As in all photography, lighting makes or breaks an image. Understanding this one factor better will radically elevate the level of any photographer, regardless of experience. So often I see underwhelming pictures of otherwise outstanding dental work that have been ruined by blow-out and over-exposure. A second mistake that is quite common in dental photography is trying to fit too much content into a single image, such as overlapping photos and distracting text. It's

best to keep photos simple and streamlined. Lastly, photo composition is something that is frequently overlooked by most individuals. This final element is extremely subjective in nature and is certainly the most difficult to teach, yet it is absolutely critical. This is the aspect of dental photography that speaks to the viewer and gives personality and life to sterile and static images.

Tell us a little about social media dental photography. Is that limited only to dentists or can laboratory technicians benefit as well?

Dental photography is huge on social media platforms such as Facebook and Instagram. I can upload a case study to any number of dental forums and have my work viewed by hundreds of thousands of people in a matter of hours on a global scale. That is a ton of exposure that was previously unheard of in the dental field.

What would you say is the most important thing that dentists and laboratory technicians should know about the power of the photograph for treatment planning and acceptance?

In my personal experience, a patient's decision to undergo treatment is based on emotion. Nothing elicits a strong emotional response more than objective before and after imagery.





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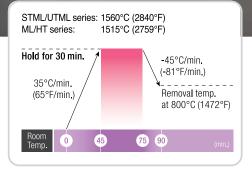


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OPTIONAL HANDS-ON WORKSHOP

Saturday, May 12 - 8:00am - 12:00pm / 1:00pm - 3:00pm (6 CDT/RG Credit)

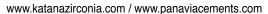
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Phone: 315-396-5507 Fax: 866-262-0840 www.aspendentaljobs.com Aspen Dental supports over 480 general dentistry locations in 27 states across the US. We are on a mission to give America a healthy mouth.



Atlanta Dental Supply

Phone: 800-218-5447 Fax: 877-614-0597 www.atlantadental.com/lab



Atlanta Dental Supply Lab Division is an employee-owned company servicing the dental lab market for over 145 years. Specializing in denture teeth by Dentsply TruByte, Hereaus Kulzer, Ivoclar, as well as lab supplies by Modern Materials, Garreco, Whip Mix, S S White, Keystone, GC, Dedeco and Shofu. Atlanta Dental also offers lab scanning solutions.

Heraeus Kulzer

Phone: 574-299-5502 Fax: 574-291-2907 www.kulzerus.com Scrap refining.



Ivoclar Vivadent, Inc.

Phone: 800-533-6825 Fax: 770-935-4794 www.ivoclarvivadent.com Leading international manufacturer of high quality dental materials for preventative, restorative and prosthetic dentistry.



Panthera Dental

Phone: +1 (855) 233-0388 www.pantheradental.com Headquartered in Quebec City. Canada, Panthera Dental is a world leader in CAD/CAM prosthetic implant solutions and dental sleep appliances. The rapid growth of the company is based on the values that are very dear to us, namely highly attentive customer



care, quality products, as well as innovation, and on its collaboration with many key opinion leaders in the dentistry field. Both a pioneer and a leader. Panthera Dental has successfully combined creativity, science and know-how to develop its proprietary innovative technology and is now able to offer next-generation products to the dental industry worldwide.

Southern States SYMPOSIUM & EXPO

presented by **FDLA**





MAY 10 - 12, 2018 • RENAISSANCE ORLANDO AT SEAWORLD • ORLANDO, FL



astering the Art of Communication" is the theme for the 2018 Symposium. Communication is key in the dental industry. Make plans to attend and learn valuable information to master your communication both personally and professionally.



The Southern States Symposium & Expo, presented by FDLA, is the largest dental laboratory industry meeting in the country run by a nonprofit association. Everything being offered at the Symposium will provide everyone in attendance an exceptional experience.

Bring Your Client Dentists!

The Southern States Symposium & Expo courses are specifically designed for the entire dental team. These courses will help both the dentist and the dental technician work together on the latest trends and techniques.

Don't miss this excellent opportunity to be a part of one of the industry's largest meetings providing continuing education courses and an outstanding showcase of dental laboratory products and services.

Offering CDT/RG, AGD and State of Florida Approved Credits

2018 SCHEDULE OF EVENTS

THURSDAY – MAY 10

12:30 p.m. - 5:30 p.m. FDLA Matheson Memorial Golf Tournament

Shingle Creek Golf Club Sponsored by: Kulzer

FRIDAY - MAY 11

7:00 a.m. – 6:00 p.m. Registration Desk Open

7:30 a.m. – 8:00 a.m. Morning Beverage Break

Sponsored by: Ivoclar Vivadent, Inc.

8:00 a.m. - 8:30 a.m. Welcome. Board Installation and Awards

Presentation

8:30 a.m. – 9:30 a.m. OPENING KEYNOTE ADDRESS

EXPOSED: The Art and Science of Emotive Clinical and Dental Laboratory Photography

Presented by: Dr. Miles R. Cone Sponsored by: GC America Inc.

9:30 a.m. – 9:45 a.m. Mid-Morning Beverage Break

9:45 a.m. - 11:45 a.m. OPTIONAL HANDS-ON WORKSHOP

The LiSi PEKKbridge Hybrid: An Addition to

Your Digital or Analog Workflow – PART I

Presented by: Pheng Lor

Sponsored by: Anaxdent and GC America Inc. (Pre-registration and additional fees required – Capacity 12. Special Note: This is a 2-day course, participants must attend both days to understand

content and receive course credit.)

9:45 a.m. - 11:45 a.m. OPTIONAL HANDS-ON WORKSHOP

The Basics of Doing Predictable

Removable Dentures Presented by: Martin Schmid Sponsored by: Ivoclar Vivadent, Inc.

(Pre-registration and additional fees required –

Capacity 15.)

9:45 a.m. - 11:45 a.m. FRIDAY MORNING KEYNOTE

Artistry and Technology for our Restorative

Future

Presented by: Peter Pizzi, CDT, MDT, FNGS

Sponsored by: VITA

12:00 p.m. - 12:45 p.m. FDLA Luncheon

Sponsored by: The Argen Corporation

12:45 p.m. - 4:45 p.m. HANDS-ON WORKSHOP (continued)

The LiSi PEKKbridge Hybrid: An Addition to Your Digital or Analog Workflow – PART I

Presented by: Pheng Lor

(Pre-registration and additional fees required.)

12:45 p.m. - 4:45 p.m. HANDS-ON WORKSHOP (continued)

The Basics of Doing Predictable

Removable Dentures

Presented by: Martin Schmid

(Pre-registration and additional fees required.)

1:00 p.m. – 3:00 p.m. AFTERNOON KEYNOTE SESSION

Perfecting Anterior All-Ceramic Full-Coverage Restorations: A Step-by-Step

Approach

Presented by: Nondas Vlachopoulos, N.V. Sponsored by: Kuraray America, Inc.

3:00 p.m. - 6:00 p.m. FDLA Expo Hall Open

3:00 p.m. - 6:00 p.m. Expo Hall Kickoff Reception

Sponsored by: Zahn Dental

6:00 p.m. - 8:00 p.m. FDLA Friday Night Reception at the Renaissance

Orlando at SeaWorld

Reception Sponsored by: Affordable Dentures Dental

Laboratories

Reception Beverages Sponsored by: Aspen Dental

SATURDAY - MAY 12

7:00 a.m. - 3:30 p.m. Registration Desk Open

7:30 a.m. - 8:00 a.m. Morning Beverage Break

Sponsored by: Cardinal Rotary Instruments

8:00 a.m. - 9:30 a.m. A COURSES

8:00 a.m. – 12:00 p.m. OPTIONAL HANDS-ON WORKSHOP

The LiSi PEKKbridge Hybrid: An Addition to Your Digital or Analog Workflow – PART II

Presented by: Pheng Lor

Sponsored by: Anaxdent and GC America Inc. (Pre-registration and additional fees required -Capacity 12. Special Note: This is a 2-day course, participants must attend both days to understand

content and receive course credit.)

8:00 a.m. - 12:00 p.m. OPTIONAL HANDS-ON WORKSHOP

Color Matching on an Anterior 3-Unit

Zirconia Bridge
COURSE IS FULL

Presented by: Nondas Vlachopoulos, N.V. Sponsored by: Kuraray America, Inc. and FDLA

8:30 a.m. - 3:30 p.m. FDLA Expo Hall Open

9:30 a.m. - 11:00 a.m. Expo Hall Break

11:00 a.m. - 12:00 p.m. B COURSES

12:00 p.m. - 1:00 p.m. Expo Hall Break / Lunch in Expo Hall

12:00 p.m. – 1:00 p.m. Gavel Club Luncheon (Invitation Only)

1:00 p.m. – 2:00 p.m. C COURSES

1:00 p.m. - 3:00 p.m. HANDS-ON WORKSHOP (continued)

The LiSi PEKKbridge Hybrid: An Addition to Your Digital or Analog Workflow – PART II

Presented by: Pheng Lor

(Pre-registration and additional fees required.)

1:00 p.m. - 3:00 p.m. HANDS-ON WORKSHOP (continued)

Color Matching on an Anterior 3-Unit

Zirconia Bridge
COURSE IS FULL

Presented by: Nondas Vlachopoulos, N.V.

1:00 p.m. – 5:30 p.m. NBC Exams (CDT & RG Exams)

(Candidates must pre-register with NBC)

2:00 p.m. - 3:30 p.m. Expo Hall Break / Afternoon Beverage Break

3:30 p.m. - 4:30 p.m. COURSE D1: Regulatory Standards

Root Cause Analysis, Preventing Errors in the

Dental Laboratory

Presented by: Gary Morgan, CDT Sponsored by: Safelink Consulting (1 Hour Regulatory Standards Credit / 1 Hour Prevention of Medical Errors Credit)

KEYNOTE SESSIONS - FRIDAY - MAY 11

Opening Keynote Address

EXPOSED: The Art and Science of Emotive Clinical and Dental Laboratory Photography

Sponsored by:



Presented by Dr. Miles R. Cone

CDT/RG: 1 hour of Scientific Credit • State of Florida: 1 hour of General Credit

ental photography serves as an effective tool for communication with colleagues, and as an emotional means of marketing to patients and clients in regards to our clinical services and laboratory products. This presentation will discuss the philosophy, equipment, and resources necessary for intraoral shade analysis, portraits, benchtop photography, and publishing outstanding high-end results with lowend consumer cost to social media and for scientific peer-review.



Dr. Miles R. Cone

Dr. Miles R. Cone is a graduate of Tufts University School of Dental Medicine, and completed a three-year Prosthodontic residency program while serving in the United States Army before being honorably discharged as a field grade officer in the rank of Major. In addition to achieving board certification and diplomate status within his specialty, Miles has also successfully challenged all the requirements necessary to earn his designation as a Certified Dental Technician. Miles has been frequently published in peer-reviewed literature, including the Journal of Prosthetic Dentistry, the Journal of General Dentistry, and the Journal of Dental Technology. Currently, Miles' career in civilian life revolves around his dual role as the owner of Nuance Dental Specialists, a private practice dental clinic limited to prosthetic dentistry in the heart of Portland, ME, and his role as Editor in Chief of the American College of Prosthodontists quarterly publication, The Messenger. When Miles is not at the chair, in the classroom or at the bench, he serves as a Key Opinion Leader and guest speaker for Amann Girrbach, GC America, Garrison Dental Solutions, Innovato Holdings, and Straumann Implants.

Friday Morning Keynote

Artistry and Technology for our Restorative Future

Presented by Peter Pizzi, CDT, MDT, FNGS

CDT/RG: 2 hours of Scientific Credit • State of Florida: 2 hours of General Credit

n today's evolving marketplace, the importance of utilizing technology is paramount to our success. Yet, the loss of the artistic process has hurt the dental market. Our goal for the future of the dental health industry is to provide esthetic, functional restorative options to support the physical and financial need of our patients. The technicians' role is much more demanding today as we must have an understanding of each of the material options, the technologies that can help us and a clear understanding of the diagnostic communication process to aid our dental partners in the future of our patient's success. Implant restorative and larger case options will be a large part of our future. The successful technicians will have a great understanding of each of these and not just be a piece worker in the process. Artistry and Technology can work well together.

Sponsored by:



Peter Pizzi, CDT, MDT, FNGS

As a dental educator for several years, Peter Pizzi has found an easy transition into the lecture/clinician circuit. His personal appreciation and expertise on all phases of Clinical/Laboratory techniques including Crown and Bridge, Ceramics, Implantology, muscle function, Color communication, Digital Photography and mandibular physiology have made him a source of knowledge and motivation for his peers. Peter's unique lecture ability and communication skills create a great learning environment.



Peter is the owner and manager of Pizzi Dental Studio, Inc. He is a Board member of ASMDT (Association of Master Dental Technicians) and a teacher and educator in the Master Dental Technician program at New York University. Peter has lectured to doctors and technicians throughout the United States, Europe and Asia on many different topics. He also continually studies with some of the world's top speakers and clinicians.

KEYNOTE SESSIONS - FRIDAY - MAY 11

Friday Afternoon Keynote Session

Sponsored by:

Kuraray Noritake

Perfecting Anterior All-Ceramic Full Coverage Restorations: A Step-by-Step Approach

Presented by Nondas Vlachopoulos, N.V.

CDT/RG: 2 hours of Scientific Credit • State of Florida: 2 hours of General Credit

oday's aesthetic dentistry invests in a broad range of knowledge coming from many sciences and arts. The great contribution of modern technology in the field of materials and machinery, combined with today's most advanced manufacturing techniques is the key to satisfy the aesthetic and functional demands of patients.

The need for optimum results in the areas of aesthetics, function and biocompatibility, necessitates more and more the use of all-ceramic restorations, implants, and their combination. However, knowledge, talent, technique, artistic ability and perception of the dental technician remain the biggest and perhaps, the most important factor to create impeccable work. The dental technician must have the ability to assess all factors every single time in order to select a suitable patient therapy, and also to modify his technique wherever it is necessary for the design and execution, so that the best result can be obtained.

In this presentation, you will learn the step by step daily laboratory process and the way that art and technology in combination with artistic ability, manage to fulfill with great success and excellent accuracy for the requirements of each individual case. Methods and handling analysis and design will be described in order to understand and be able to select the proper solution for the optimal result.

Learning Aims & Objectives:

- Framework design and its importance to the increase of the Pressable restorations' aesthetics.
- Internal stain techniques and fluorescent increase on Zirconia restorations.
- Step by step layering on Feldspathic Veneers with the "One Bake Technique".

Nondas Vlachopoulos, N.V.

Nondas Vlachopoulos was born in Toronto, Canada. He graduated from the School of Dental Technology in 1985. He then acquired a BSc Hons from the School of Dental Technology of the Technological Educational Institution of Athens (1989). In 1990, he established his own dental laboratory, AestheticLab in Athens. Since 2001, he has been an Opinion Leader for Noritake Dental, Ivoclar Vivadent and MPF Brush Co. in Greece.



Since May 2014, he has been an editorial reviewer at the AACD's Journal of Cosmetic Dentistry (jCD). He specializes in aesthetic all-ceramic and implant restorations. His laboratory collaborates with the Dental School of the National and Kapodistrian University of Athens, Greece and its postgraduate programs of Dental Prosthodontics and Dental Surgery, as well as with the Department of Prosthodontics of the Eastman Institute of Oral Health of the University of Rochester, USA.

Since September 2015, he has been working on practical education of the Postgraduate program leading to a Master of Science Degree in dental Biomaterials/Materials of Dental Technology. The program is operated by The Department of Dental Technology of the Technological Institution of Athens in conjunction with the Dental School of the National & Kapodistrian University of Athens. Nondas Vlachopoulos leads many educational hands-on courses in Greece and worldwide (USA, South America, Europe, Asia and Middle East). He is an invited lecturer on dental aesthetics at international meetings and congresses and has published articles in Greek and international Dental Technology journals.





2018 COURSES & EXPO SCHEDULE - SATURDAY, MAY 12

	CERAMICS / CROWN & BRIDGE	REMOVABLES	IMPLANTS	LABORATORY MAN- AGEMENT	6 HR – OPTIONAL WORKSHOP	6 HR – OPTIONAL WORKSHOP								
8:00 A.M. – 9:30 A.M. A COURSES	COURSE A1 Keeping the Passion and Artistry Alive James Choi Sponsored by: Jensen Dental	COURSE A2 New Digital Denture Solutions Alexander Wuensche, CDT Sponsored by: Amann Girrbach	COURSE A3 Custom Abutment Digital Workflow Max Schulze, CDT, MDT Sponsored by: Straumann North America	COURSE A4 Preparing Your Lab for the Long Term Darren Lemke Sponsored by: LabStar Software	Color Matching on an Anterior 3-unit Zirconia Bridge Nondas Vlachopou- los, N.V. Sponsored by: Kuraray America, Inc. and FDLA	The LiSi PEKKbridge Hybrid: An Addition to Your Digital or Analog Workflow (2-day work- shop — cont'd from Friday)								
8:30 A.M. – 11:00 A.M.		EXPO HALL OPEN (Expo	o Hall Opens at 8:30 A.M.)		COURSE IS FULL	Pheng Lor Sponsored by:								
11:00 A.M. – 12:00 P.M. B COURSES	COURSE B1 Your Future by Design. Artistry, Technology and Our Evolution Peter Pizzi, CDT, MDT, FNGS Sponsored by: VITA	COURSE B2 Digital Workflow for Digital Denture Excellence Analog, Digital or Both? Bill Barton, MM, BS, CDT, TE Sponsored by: Ivoclar Vivadent, Inc.	COURSE B3 Screw Retained - The Future of Dental Implants Conrad J. Rensberg Sponsored by: Dentsply Sirona Implants	COURSE B4 Profitability Robert Gitman Sponsored by: FDLA		Anaxdent and GC America Inc.								
12:00 P.M. – 1:00 P.M.	EXPO HALL OPEN (Lunch in Expo Hall)													
1:00 P.M. – 2:00 P.M. C COURSES	COURSE C1 Self-Induced Lab Headaches Marlin Gohn, CDT Sponsored by: The Argen Corporation	COURSE C2 Fundamentals for Successful Digital and Non-Digital RPD's Amit Kamat, DMD, MS, FACP and Mike Janes Sponsored by: Laboratory Distribution Network	COURSE C3 Predictable Advanced Implant Supported Dental Prostheticsa sequential method to technical fabrication. Mark Williamson, CDT Sponsored by: Panthera Dental	COURSE C4 Keeping More of Your Company Profits! Shanna F. Morales, CPA Sponsored by: FDLA	Color Matching continued 1:00 p.m. – 3:00 p.m.	The LiSi PEKK-bridge Hybrid: An Addition to Your Digital or Analog Workflow continued 1:00 p.m. – 3:00 p.m.								
2:00 P.M. – 3:30 P.M.		ЕХРО Н												
3:30 P.M. – 4:30 P.M. D COURSE	COURSE D1 Root Cause Analysis, Preventing Errors in the Dental Laboratory Gary Morgan, CDT Sponsored by: Safelink Consulting 1 Hour Regulatory Standards / 1 Hour Prevention of Medical Errors													





CDT/RG Credits

All Southern States Symposium & Expo courses have been approved by the National Board for Certification for CDT/RG Credits.



AGD Credits

Approved PACE Program Provider FAGD/MAGD Credit Approval does not imply acceptance by a state or provincial board of dentistry or AGD endorsement.

CERAMICS / CROWN & BRIDGE

COURSE # A1 - 8:00 A.M. - 9:30 A.M.

CDT/RG: 1.5 hours of Scientific Credit State of Florida: 1.5 hours of General Credit

Keeping the Passion and Artistry Alive

by James Choi

If you are responsible for creating part of or complete monolithic crowns, but are not happy with the process or end results you are achieving – this course is for you. In this course, using his unique perspective on the essential facets of ceramic art and technology, James will show you how to overcome the many variables that challenge successful restorative outcomes. He will start with traditionally layered ceramics and build from there.

If you need help with processing and finishing techniques that can have a huge impact on the esthetic outcome of your restorations, you should attend this course. This interactive course will illustrate NEW materials and techniques for achieving beautiful and predictable restorations that are sure to increase case acceptance through improved esthetics.

COURSE # B1 - 11:00 A.M. - 12:00 P.M.

CDT/RG: 1 hour of Scientific Credit State of Florida: 1 hour of General Credit

Your Future by Design. Artistry, Technology and Our Evolution

by Peter Pizzi, CDT, MDT, FNGS

We are at an exciting time where artistry, technology, products and processes are shaping our industry. In today's evolving marketplace, the importance of utilizing technology is paramount to our success. Yet, the loss of the artistic process has hurt the dental market. Our goals for the future of the dental health industry are to provide esthetic, functional restorative options to support the physical and financial needs of our patients. The technicians' role is much more demanding today as we must have an understanding of each of the material options, the technologies that can help us and a clear understanding of the diagnostic communication process to aid our dental partners in the future of our patients' success. As the clinical side of dentistry continues to evolve, we must grow and be able to create products for a broad spectrum of our patients. Understanding the diagnostic options and being able to select materials based on our comfort levels will be critical. Although creativity will always be our strength, how we get there must evolve. Combining our talents for producing the highest quality from traditional methods of fabricating restorations with the best digital technologies available on the market can be an unbeatable combination for satisfying your dentist clients.

Topics for this course will include: The Future Technician; Design your future [do not let it be designed for you]; Case management; Diagnostic communication; Preparation guided Ceramic layering and contours; The use of new technologies and The importance of photographic communication and perception.

COURSE # C1 - 1:00 P.M. - 2:00 P.M.

CDT/RG: 1 hour of Scientific Credit State of Florida: 1 hour of General Credit

Self-Induced Lab Headaches

by Marlin Gohn, CDT

This course will cover how to avoid self-induced headaches in the laboratory by eliminating simple, but common procedural mistakes. PFM to Zirconia to achieve consistent results, transitional shading zirconia and press to metal will also be discussed.

REMOVABLES

COURSE # A2 - 8:00 A.M. - 9:30 A.M.

CDT/RG: 1.5 hours of Scientific Credit State of Florida: 1.5 hours of General Credit

New Digital Denture Solutions

by Alexander Wuensche, CDT

Where are we now and where are we going in the future? This course will inform the audience about the latest and most progressive digital denture solutions in the dental industry. Alexander will present preparation and assessment on the clinical side and will discuss the technical side for the dental technician in detail. Treatment options for fully edentulous patients as well as full arch implant reconstructions are a very actual topic at the everyday workplace. These new CAD/CAM modules and solutions are going to make the dental technicians' life easier and more predictable. Alexander will discuss material choices and options, as well as compare the new materials with materials currently being used for the full-arch denture and implant denture approach. Shade and mold consulting is a very important section for the success of a denture restoration and is part of the case communication between the dentist and the dental technician. Communication tools and their use will also be discussed in this presentation. You will hear in detail the use of a simplified system from impression taking, scanning and digital design of the case with final milling of the restoration. The two most accurate and economic sufficient systems will be explained as well. One is targeting a digital workflow and traditional processing in finishing the denture; the other one a full digital production and milling of the final full denture. Lastly, the economic advantages for the digital denture solution will be discussed.

After this presentation, the attendees should be able to understand: Case evaluation and decide which workflow to choose for the case; Treatment planning of the case with the clinician; Case preparation; Scanning and designing the digital denture; Finishing of the milled restoration and Making an economical evaluation about digital dentures.

continued

COURSE DESCRIPTIONS - SATURDAY - MAY 12

REMOVABLES (continued)

COURSE # B2 - 11:00 A.M. - 12:00 P.M.

CDT/RG: 1 hour of Scientific Credit State of Florida: 1 hour of General Credit

Digital Workflow for Digital Denture Excellence...Analog, Digital or Both?

by Bill Barton, MM, BS, CDT, TE

This course will cover key components for the fabrication of a premium denture utilizing Ivoclar's Digital Denture Professional processes. It will include a comprehensive look at the clinical and laboratory innovative workflows as well as unique diagnostic instrumentation, equipment, and materials.

Attendees will gain a thorough understanding of the following: Precise clinical instrumentation and competencies ensure digital denture success; Unique innovative laboratory workflows for digital dentures to include some analog options; Advantages of fully monolithic milled teeth, specifically, for the immediate denture and immediate same-day implant (All-on 4/6) hybrid denture; and Exclusive 3 Shape Digital Denture software add-ons, Ivoclar Digital Programill 5 & 7 milling units, and high-quality materials i.e. IvoBase CAD, SR Vivodent CAD, and ProArt CAD Wax.

COURSE # C2 - 1:00 P.M. - 2:00 P.M.

CDT/RG: 1 hour of Scientific Credit State of Florida: 1 hour of General Credit

Fundamentals for Successful Digital and Non-Digital RPD's

by Amit Kamat, DMD, MS, FACP and Mike Janes

Amit Kamat, DMD, MS, FACP, and Mike Janes (Owner Sorrento Smiles Dental Lab) will share their fundamentals for predictable RPD outcomes. Topics will include basic preparation principles, material options, as well as digital and non-digital manufacturing techniques. The two speakers have extensive knowledge on the RPD workflow that includes incorporating designs that plan for future implant support as well.

IMPLANTS

COURSE # A3 - 8:00 A.M. - 9:30 A.M.

CDT/RG: 1.5 hours of Scientific Credit State of Florida: 1.5 hours of General Credit

Custom Abutment Digital Workflow

by Max Schulze, CDT, MDT

Digital dentistry is changing the way dental laboratory technicians interact with one another to plan prosthetic restorations. Incorporation of CAD/CAM technology for restorative solutions can help deliver natural-looking, esthetic results for patients. This course will review a systematic approach to designing custom abutments using digital technology and the many benefits available to the entire dental team when using digital dentistry solutions.

At the conclusion of this course, attendees will be able to: Recognize how to incorporate recent technological advances to design custom abutments; understand what various materials and processes are available for custom abutments, copings and crowns; and use digital dental implant planning to manage the soft tissue zone with a provisional prior to designing a custom abutment.

COURSE # B3 - 11:00 A.M. - 12:00 P.M.

CDT/RG: 1 hour of Scientific Credit State of Florida: 1 hour of General Credit

Screw Retained – The Future of Dental Implants

by Conrad J. Rensburg

In this lecture, Mr. Rensburg will discuss the latest implant supported and retained options available for restoring the edentulous and partially edentulous arch.

Over the last decade, we have witnessed a true evolution in the implant restorative field. With multiple studies now pointing to peri-implantitus, caused by cement clean-up being a major cause of implant failure, a true demand for a functional and esthetic screw retained solution has developed. This lecture will discuss non-implant specific options and focus on how to treat our patients more efficiently by utilizing these innovative restorative protocols.

By discussing these advancements in technology, the restorative team will be able to effectively determine the best restorative avenue, customized to every individuals' needs. Today's technology allows our restorative team a multitude of options. By showing case studies, this lecture will give the restorative team the knowledge they need to best treat their patients using these innovative products.







COURSE DESCRIPTIONS - SATURDAY - MAY 12

IMPLANTS (continued)

COURSE # C3 - 1:00 P.M. - 2:00 P.M.

CDT/RG: 1 hour of Scientific Credit State of Florida: 1 hour of General Credit

Predictable Advanced Implant Supported Dental Prosthetics ...a sequential method to technical fabrication.

by Mark Williamson, CDT

In this course, Mark will share his techniques in detail from start to finish on how he constructs implant supported prosthetics in a fixed/detachable hybrid bar and the RE Bourke bar. Observe how he breaks down each step to create an award winning Prosthesis (i.e. Panthera's Master Cup 2017). A simple approach to complex implant dental prosthetics utilizing CAD/CAM technology through Panthera Dental makes your final restorations a success for your clients and their patients. Mark's approach can easily be integrated into your restorative cases immediately. He will also share information on materials used, tools, and trade techniques that are available today.

LABORATORY MANAGEMENT

COURSE # A4 - 8:00 A.M. - 9:30 A.M.

CDT/RG: 1.5 hours of Professional Development Credit State of Florida: 1.5 hours of General Credit

Preparing Your Lab for the Long Term

by Darren Lemke

Looking at your lab for the long term will help lab owners make business decisions that will guide them to their end goal of selling to an outside entity or to someone within the lab itself. Lemke will touch on the guidelines needed to have a successful career.

COURSE # B4 - 11:00 A.M. - 12:00 P.M.

CDT/RG: 1 hour of Professional Development Credit State of Florida: 1 hour of General Credit

Profitability

by Robert Gitman

This course will review the use of key performance indicators to increase laboratory productivity and profitability. Key performance indicators help to measure a laboratory's internal processes and are critical in meeting and/or exceeding both customer expectations and the laboratory's strategic goals.

COURSE # C4 - 1:00 P.M. - 2:00 P.M.

CDT/RG: 1 hour of Professional Development Credit State of Florida: 1 hour of General Credit

Keeping More of Your Company Profits!

by Shanna F. Morales, CPA

All businesses need to maximize their available opportunities. In this program, we've compiled our best tax-saving ideas for 2018. Some strategies are "tried and true," while others have been tailored to address the changes in tax laws for the current year. We'll discuss how to implement these ideas on both the corporate and individual levels.

Topics covered include: Tax credits and deductions; Depreciation; Retirement planning and Ordinary and Necessary Business deductions. We will also discuss new audit focus areas for the IRS.

REGULATORY STANDARDS / PREVENTION OF MEDICAL ERRORS

COURSE # D1 - 3:30 P.M. - 4:30 P.M.

CDT/RG: 1 hour of Regulatory Standards Credit State of Florida: 1 hour of Prevention of Medical Errors Credit

Root Cause Analysis, Preventing Errors in the Dental Laboratory

by Gary Morgan, CDT

The goal of every dental laboratory is to achieve customer satisfaction with the products and services provided to the dental client and the patient. This seminar will show how using Root Cause Analysis and determining and implementing Corrective Actions and Preventive Actions will help reduce both internal and external remakes. Customer complaints concerning product service issues can be reduced as well. Creating useful metrics and analyzing the data for trend analysis will be discussed.







OPTIONAL HANDS-ON WORKSHOPS - FRIDAY, MAY 11

The Basics of Doing Predictable Removable Dentures



Presented by: Martin Schmid
CDT/RG: 6 hours of Scientific Credit
State of Florida: 6 hours of General Credit

Workshop Schedule:

9:45 a.m. – 11:45 a.m. Lecture and Interactive Hands-on Demonstration

12:00 p.m. – 12:45 p.m. FDLA Luncheon (included in registration fees)

12:45 p.m. - 4:45 p.m. Lecture and Interactive Hands-on Demonstration

his lecture and interactive hands-on demonstration will cover the following:

- Review the Myostatic Outline and applications for proper fit, function and esthetics
- Proper use of articulator, accessories and mounting of cast
- Learn how to set anterior teeth with function and esthetics
- Ease of setting posterior teeth with predictability
- Advantage of injecting acrylic verses flask and press
- Define predictable results and superior esthetics

Sponsored by:



Since this is a lecture and interactive hands-on demonstration, participants will not need to bring any additional materials.

(Note: Pre-registration and additional fees required – Capacity 15. Participants must pre-register by 4/18/2018.)

Registration Includes: Friday morning Awards Ceremony & Opening Keynote Address, Friday Only Registration for Hands-on Workshop, Friday Lunch, Friday Night Reception, admission to the Expo on Friday & Saturday.

OPTIONAL HANDS-ON WORKSHOP - FRIDAY, MAY 11 & SATURDAY, MAY 12

The LiSi PEKKbridge Hybrid: An Addition to Your Digital or Analog Workflow – Parts I & II



Presented by Pheng Lor
CDT/RG: 12 hours of
Scientific Credit
State of Florida: 12 hours of
General Credit

(Special Note: This is a 2-day course, participants must attend both days to understand content and receive course credit.)

Workshop Schedule:

FRIDAY, MAY 11

9:45 a.m. – 11:45 a.m. 12:00 p.m. – 12:45 p.m. Hands-on Workshop FDLA Luncheon

(included in registration fees)

12:45 p.m. – 4:45 p.m.

Hands-on Workshop

SATURDAY, MAY 12

8:00 a.m. – 12:00 p.m. 12:00 p.m. – 1:00 p.m. Hands-on Workshop Lunch & Expo Hall Break

(included in registration fees)
Hands-on Workshop

1:00 p.m. – 3:00 p.m.

continued opposite page

OPTIONAL HANDS-ON WORKSHOP - SATURDAY, MAY 12

Color Matching on an Anterior 3-Unit Zirconia Bridge



Presented by Nondas Vlachopoulos, N.V.

CDT/RG: 6 hours of Scientific Credit State of Florida: 6 hours of General Credit

COURSE IS FULL

Workshop Schedule:

8:00 a.m. - 12:00 p.m. Hands-on Workshop

12:00 p.m. – 1:00 p.m. Lunch & Expo Hall Break (included in registration fees)

1:00 p.m. – 3:00 p.m. Hands-on Workshop

n this course, participants will first select the preferable tooth shade to be copied, just like working on a LIVE case. This will be done either by selecting between different tooth photos or by choosing one of the participants' teeth. Intraoral photos will be taken to proceed with the demonstration.

The following topics will be discussed and analyzed:

- Color selection
- Internal stratification
- Chroma
- Opacity
- Value

- Transparency
- Translucency
- Opalescence
- Morphology
- Surface Texture

Then participants will proceed with the ceramic powder selection and the demonstration of the ceramic stratification following the One Bake Technique. After baking the ceramic, the demonstration will continue with the adjustment of the interproximal contact surfaces, grinding, morphology, surface texture, staining & polishing.

Participants should bring:

Each participant should bring personal tools for the ceramic layering (palette, brushes, etc).

Sponsored by:





(Note: Pre-registration and additional fees required – Capacity 15. Participants must pre-register by 4/18/2018.)

Registration Includes: Saturday Only Registration for Hands-On Workshop, Saturday Lunch, Saturday Regulatory Standards, admission to the Expo on Friday & Saturday.

OPTIONAL HANDS-ON WORKSHOP - FRIDAY, MAY 11 & SATURDAY, MAY 12

The LiSi PEKKbridge Hybrid: An Addition to Your Digital or Analog Workflow - Parts I & II

Course Objectives:

- Learn the nuances and benefits of Pekkton high-performance polymer implant frames, with GC Initial® LiSi Press crowns and pink composite
- Review best practices for case planning, verification, temporization, etc. in full-arch implant cases
- Understand analog and digital frame design options, and protocols for both pressing and milling Pekkton frames
- Enhance esthetics of ceramic crowns using GC Initial LiSi Press, GC Initial LiSi layering powders and GC Initial Luster Pastes (hands-on practice)
- Learn the following steps to fabricate final implant restorations (hands-on practice):
 - o Pekkton surface preparation
 - o Cementation of titanium cylinders / abutments
 - o Cementation of LiSi crowns
- Elevate pink esthetics using pink composites and light cure stains and a novel clear glaze application technique (hands-on practice)

Participants Should Bring:

Porcelain and composite build up tools and a hand piece with burs.

(Note: Pre-registration and additional fees required – Capacity 12. Participants must pre-register by 4/18/2018.)

Registration Includes: Friday morning Awards Ceremony & Opening Keynote Address, Friday Lunch, Friday Night Reception, Saturday lunch in the expo hall and admission to the Expo on Friday & Saturday. (Special Note: This is a 2-day course, participants must attend both days to understand content and receive course credit.)

Sponsored by:



HANDS-ON TABLE CLINICS IN EXPO HALL

BACK BY POPULAR DEMAND!

DLA will provide the opportunity to earn CE credits during the expo hall hours again this year. The table clinics will take place in the sponsored island booths during expo hall hours on both Friday, May 11 and Saturday, May 12. The following sponsors will be presenting table clinics in the Expo Hall:











Topic, speaker and schedule for each table clinic will be listed in the Symposium onsite program.

Each participant will earn 1 hour of Scientific Credit (CDT/RG) and 1 hour of General Credit through the State of Florida per course.

FDLA MATHESON MEMORIAL GOLF TOURNAMENT

SHINGLE CREEK GOLF CLUB

9939 Universal Boulevard, Orlando, FL 32819 407.996.9933 www.ShingleCreekGolf.com

Thursday, May 10 • 12:30 p.m. – 5:30 p.m.

(Additional registration and fees required.)

hingle Creek Golf Club presents challenges to players of all levels and has consistently been rated as one of Orlando's best golf courses since opening in 2003. In 2016, the golf club partnered with the renowned Arnold Palmer Design Company to create a new Arnold Palmer Signature Golf Course. The course is known for its large, undulating greens, plush fairways and an abundance of water hazards. Make plans to participate in this great networking opportunity!

Tournament Fees Include:

- Greens/Cart fees
- Unlimited practice balls
- Boxed lunch for each golfer
- Prizes awarded for top scoring team, longest drive and closest to the pin

Sponsored by:





(as of 3/1/18)

KEYNOTE SPEAKERS









FRIDAY LUNCHEON

MATHESON MEMORIAL GOLF TOURNAMENT

EXPO KICKOFF RECEPTION

FRIDAY NIGHT RECEPTION









FRIDAY NIGHT RECEPTION BEVERAGES



ROOM KEY CARDS

TRADE SHOW BAGS



FRIDAY MORNING **BREAK**



SATURDAY MORNING **BREAK**

AspenDental simply easier



ATTENDEE

LANYARDS

FRIDAY NIGHT RECEPTION PRIZES



TRADE SHOW **BAG INSERTS**



EXHIBITORS

(as of 3/1/18)

3D BioCAD

Aegis Dental Network

Affordable Dentures Dental Laboratories Aidite(Qinhuangdao)Technology Co., Ltd.

Americana Dental Aurident, Inc.

The Argen Corporation

Aspen Dental

Atlanta Dental Supply

BEGO USA

Besmile Biotechnology

Brasseler USA

Cardinal Rotary Instruments

Cora Refining

DAL DT Technologies

Deflex

Dentsply Sirona

Devine Dental Supplies

Esthetic Professionals

EvoDent 3D

Garfield Refining Company

GC America Inc.

HASS BIO America. Inc.

Ivoclar Vivadent, Inc.

lensen Dental

Kettenbach

Komet USA

Kulzer

Mastercut Tool Corp.

McFatter Technical College

Medentika

Meisinger USA

NADL / NBC / FDLT

New Stetic USA

Nobel Biocare Nobilium

Nowak Dental Panthera Dental

PREAT Corporation

Proto3000 Inc.

Quatro Air Technologies

Renfert USA

Shanghai Union Technology Corporation

SNOWROCK USA

Sterngold

Straumann

TruAbutment Inc.

VITA

Whip Mix Corporation

White Peaks Dental Solutions USA

XPdent Corp

Zahn Dental

ZIMMER BIOMET Dental

Zirkonzahn USA, Inc.



Member Benefits

Your membership in the Florida Dental Laboratory Association (FDLA) will bring you a return many times greater than your investment. The association's proven programs provide members with the tools they need to operate their businesses successfully.

EDUCATION

As the leader of dental laboratory technology continuing education within the state of Florida, we are committed to helping laboratories formulate a business that will grow, meet the requirements mandated by Florida law and help Certified Dental Technicians (CDT) and Certified Dental Laboratories (CDL) maintain their certification. FDLA members are eligible to receive discounted rates on all continuing education.



District Workshops – Rotating around the state of Florida, FDLA District Workshops offer laboratory owners and technicians/staff the opportunity to receive continuing education credits year round on a variety of topics including the required "Florida Laws and Rules for Dental Laboratories" course.

Online Education – FDLA offers online education, including the mandatory "Florida Laws and Rules for Dental Laboratories" course, on our Website www.fdla.net.

Southern States Symposium & Expo presented by FDLA – As the largest not for profit dental laboratory meeting in the country, attendees have an opportunity to meet with vendors of dental laboratory products/services to discuss equipment, supplies and techniques that can improve their business. A wide range of technical clinics are scheduled to provide members with the most current industry standards and continuing education.

LEGISLATIVE/ GOVERNMENT RELATIONS

FDLA works with several agencies to modify and strengthen existing laws affecting dental laboratories and ensure that such regulations strike a balance between patient safety and ease of compliance. FDLA members are provided critical updates and reminders for important legislation, deadlines and regulatory alerts.

Florida State Laws Affecting Dental Laboratories Manual – FDLA has developed a manual defining the state laws affecting dental laboratories. This manual explains in detail: continuing education, data required on prescriptions, materials disclosure and point of origin requirements necessary with all communication and case work executed between the dentist and laboratory.

Continuing Education Requirement –

The state of Florida mandates that each laboratory in Florida must receive 18 hours of Florida approved continuing

education credit every
two years. FDLA is an
approved provider and offers
a variety of courses – including the
mandatory course on "Florida Laws
and Rules for Dental Laboratories."



BUSINESS SERVICES

(available to laboratory owners)

Human Resource Hotline -

The average dental laboratory does not have the workforce or means to hire a human resources manager. Even larger laboratories that have a human resources manager may need some advice on tough situations from time to time. FDLA members receive human resources telephone consultation services FREE OF CHARGE!



Credit Card Payment Processing –

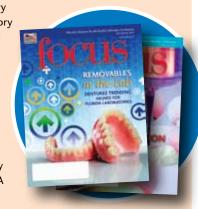
FDLA member laboratories are eligible to receive discounted rates on credit and debit card processing. Our provider specializes in creating card acceptance programs specifically for the dental industry.

COMMUNICATION

focus Magazine – FDLA's quarterly focus Magazine is the most widely read state dental laboratory association publication.

It provides updates on crucial industry information, new technology, laboratory management and other issues of vital concern. FDLA members receive a complimentary subscription as part of their membership.

Website – FDLA's Website, www.fdla.net, has comprehensive information on pertinent industry updates as well as conference registration forms, an online directory that enables dentists to look up FDLA member laboratories and other links.



of Florida Appr



Florida Dental Laboratory Association Membership Application

Any commercial dental laboratory registered by the State of Florida Department of Health is eligible. Membership shall be in the name of the laboratory as registered by the State of Florida. The owner, partner or designated representative shall represent the laboratory in meetings and is eligible for elective office and voting privileges. Dental laboratories located outside of the state of Florida may join as an Affiliate member using this form.

Name:			CDT
Laboratory Name:			CDL □ DAMAS
Laboratory Owner Name:			CDT
Address:			
City:		State:	Zip:
Phone:	_Toll Free:	Fax:	
E-mail:		Website:	
Florida Department of Health Laboratory Lic	ense Number: (if applicable))	
Payment Information Tota	I Enclosed: \$		
•		□ AMEX	
	s	ecurity Code*:	Expires:
*This is the three digit number found on the bac	k of your card in the signature are	ea. AMEX - This is the four digit r	number found on the front of your card.
Name as it appears on card:		Signatur	re:
Credit Card Billing Address:			
1-2 Members: \$235 3-5 Members: \$335 6-9 Members: \$435 10-14 Members: \$750	(Please note: the primary contact to Name: Name: Name: Name: Name:	hat you listed above will be included Email: Email:	In the membership level you chose. In the total count.)
	Or Join as a Stud	dent:	Student Membership: \$15

offering a dental technology program.

HOTEL INFORMATION

Renaissance Orlando at SeaWorld

he 2018 FDLA Southern States Symposium & Expo will be held at the Renaissance Orlando at SeaWorld, located across from SeaWorld® and adjacent to Aquatica and Discovery Cove. From the moment you step into the resort's lush, tropical landscape, you will feel relaxed and refreshed as you immerse yourself into the flowing, aquatic-themed design. Enjoy modern accommodations, family-friendly amenities and the on-site waterpark R Aqua Zone. Guests can enjoy a cocktail by the pool, pampering treatment at the spa or explore International Drive and much more.

The FDLA has secured a special reduced rate of \$157 inclusive of the resort fee for FDLA attendees. Also included in your rate are 50% discount on in-room high speed internet, complimentary self-parking and access to 24-hour fitness center. Make your hotel reservations directly with the Renaissance by calling 407.351.5555. Be sure to mention you are with FDLA and make your reservations by Wednesday, April 18, 2018 to receive this special reduced rate. The association can only reserve a certain number rooms at the discounted rate. Once the room





block is sold out, even if that day is prior to the cutoff date, a higher prevailing room rate will apply. Make your reservations today! NOTE: The association can only reserve a certain number of rooms at the discounted rate. Once the room block is sold out, even if that day is prior to the cutoff date, a higher prevailing room rate will apply. Make your reservations today!

Please continue your support of the FDLA Southern States Symposium & Expo by staying at the Renaissance Orlando at SeaWorld, the appointed FDLA host hotel.

Great Benefits of Staying at the FDLA Host Hotel:

- Special reduced rate of \$157 for FDLA!
- The expo hall is minutes away from your hotel room.
- Increased networking time with attendees in the hotel's restaurants and lounge areas!
- Across the street from SeaWorld Orlando

Need additional information on the 2018 Symposium & Expo? Please visit www.fdla.net.

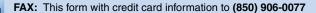
REGISTRATION INFORMATION AND EXPO POLICIES

3 Ways to Register:



ONLINE: Go to **www.fdla.net**, click on the conference tab, then register online. Use your Master Card, Visa or AMEX.







MAIL: Registration Form, Postmarked by April 18, 2018 to: 2018 Southern States Symposium & Expo (FDLA), 1401 Maclay Commerce Dr., Tallahassee, Florida 32312



Refund Policy: Written notification is required for all refunds. Refund requests received by April 18, 2018 will receive a refund less a \$25 administrative fee. No refunds will be paid after April 18, 2018.

Age Restrictions & Stroller Policy: No children in strollers or children under the age of 15 will be allowed access into the exhibit hall during booth setup, show hours or during booth dismantling.

ADA: If you have special needs that require accommodations, please notify FDLA in writing no later than April 18, 2018.

Southern States Symposium & Expo Dress Code: The dress code for the 2018 Southern States Symposium & Expo daytime workshops and courses is business casual (no t-shirts, tank tops or flip flops please).

Questions? For more information, contact FDLA's Southern States Symposium office by phone at 866.873.3352 or email fdlareg@mcraemeetings.com.

2018 SOUTHERN STATES SYMPOSIUM & EXPO REGISTRATION FORM

Please print or type. Please photocopy form for additional registrants. See page 48 for options to register.



First Name: Last Name	e:
Are you an authorized buyer for your dental laboratory? \Box YES \Box No	O □ CDT □ RG □ DDS □ DMD □ Other:
State of FL Dental Laboratory/Dentist License Number (if applicable):	CDT/RG Number (if applicable):
Laboratory, Dental Practice or Organization:	□ CDL □ DAMAS
Address:	
City:	
Phone: E-mail:	
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FULL REGISTRATION - MAY 11 & 12	HANDS-ON WORKSHOPS You must register in advance by April
Includes: Friday Keynote Sessions, Friday Lunch, Friday Night Reception, choice of Saturday courses, Saturday Lunch, unlimited admission to the Expo on Friday and Saturday	18, 2018 for all Hands-on Workshops. Workshops have limited capacities and are on a first-come, first-served basis. Onsite registrations will not be accepted. See pages 42-43 for additional workshop information.
FDLA MemberFirst Member: \$295 (\$325 after 4/18/18) Each Additional Member from Same Lab: \$275 (Pre-registration Only)	6 HR - THE BASICS OF DOING PREDICTABLE REMOVABLE DENTURES FRIDAY- MAY 11
☐ CDTs and Dentists\$345 (\$375 after 4/18/18) ☐ Non-Member\$550	Includes: Friday Only Registration for Hands-on Workshop, Friday Lunch, Friday Night Reception, admission to the Expo on Friday and Saturday
Add Friday Workshop* \$150 Add Saturday Workshop* \$150	☐ FDLA Member\$250 ☐ Non-Member\$325 ☐ CDTs and Dentists\$275
*(Full Registration Required – Must Pre-register to attend) Indicate Workshop(s):	6 HR – COLOR MATCHING ON AN ANTERIOR 3-UNIT
Subtotal Due: \$	ZIRCONIA BRDIGE SATURDAY – MAY 12 - COURSE IS FULL
FRIDAY ONLY REGISTRATION – MAY 11	Includes: Saturday Only Registration for Hands-on Workshop, Regulatory Standards Course, Saturday Lunch, admission to the Expo on Friday and Saturday
Includes: Friday Keynote Sessions, Friday Lunch, Friday Night Reception, unlimited admission to the Expo on Friday and Saturday	,
FDLA Member First Member: \$195 (\$225 after 4/18/18) Each Additional Member from Same Lab: \$175 (Pre-registration Only)	2-DAY WORKSHOP – THE LISI PEKKBRIDGE HYBRID: AN ADDITION TO YOUR DIGITAL OR ANALOG WORKFLOW MAY 11 & MAY 12
CDTs and Dentists\$245 (\$275 after 4/18/18)	Includes: Friday & Saturday Only Registration for Hands-on Workshop,
Non-Member\$450 Subtotal Due: \$	Friday Lunch, Friday Night Reception, Saturday Lunch, admission to the Expo on Friday and Saturday. NOTE: This is a 2-day course, participants must attend both days to understand content and receive course credit.
SATURDAY ONLY REGISTRATION – MAY 12	☐ FDLA Member\$495 ☐ Non-Member\$595
Includes: Choice of Saturday courses, Saturday Lunch, unlimited admission to the Expo on Friday and Saturday	☐ CDTs and Dentists
FDLA MemberFirst Member: \$175 (\$200 after 4/18/18) Each Additional Member from Same Lab: \$155 (Pre-registration Only) CDTs and Dentists \$225 (\$250 after 4/18/18)	Subtotal Due: \$
☐ CDTs and Dentists \$225 (\$250 after 4/18/18) ☐ Non-Member\$450	Payment:
Subtotal Due: \$	SUB-TOTAL DUE FOR SYMPOSIUM & EXPO: \$
EXHIBITS ONLY REGISTRATION	FOUNDATION FOR DENTAL
(Pass good for entry into Expo either Friday, Saturday or both. Must register and receive a name badge to enter Expo Hall.)	LABORATORY TECHNOLOGY DONATION: \$
☐ FDLA Member\$0 No Charge ☐ Non-Member\$50	TOTAL ENCLOSED: \$
ADDITIONAL EVENT OPTIONS	☐ Check (payable to FDLA) Check #
FDLA Friday Luncheon\$35 each ticket	Credit Card: □ MC □ Visa □ AmEx Charge \$
☐ FDLA Friday Night Reception\$50 each ticket☐ Saturday Box Lunch\$35 each ticket	CC #:
	Exp: Security Code*:
GOLF TOURNAMENT - THURSDAY - MAY 10 FDLA Matheson Memorial Golf Tournament	Cardholder Signature:
(See pg. 12 for more details. Must register and pay in advance.)	Print Name:
☐ Conference Registrant or Exhibitor\$99 ☐ Golf Only\$115	Billing Address (if different from above):
Handicap/Estimated Average Score	
Foursome Requests:	*The 3 digit number on the back of the card, AMEX: The 4 digit number on the front of your card.

Please refer to page 48 for registration information and expo policies.





Join us in Building the Future of Dental Technology

At the 2018 Southern States Symposium & Expo, FDLA will join together with the Foundation for Dental Laboratory Technology to increase awareness of the opportunities for enhancing education in the industry.

The Foundation is a 501(c)(3) educational non-profit created in 2008 to advocate and raise awareness of the necessity of dental laboratory technology education for dental technicians and other effected members of the dental team. The Foundation provides grants and scholarships to interested candidates for advanced education and develops educational programs that are relevant and accessible to both dental technicians working in the laboratory as well as dental laboratory technology students.

My Commitment Pledge

We need your help. Make an investment in the future of your profession by contributing to The Foundation. As a contributor, you will be recognized by having your name listed on our website www.dentallabfoundation.org, but more importantly, you will carry the knowledge that you made an investment that will positively impact the future of your profession.

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The Foundation for Dental Laboratory Technology is exempt under section 501(c)(3) of the Internal Revenue Code, making your contributions tax-deductible.

The Foundation for Dental Laboratory Technology

Lab Supplies and Teeth GREAT Prices!



The Atlanta Dental Lab Division is growing to meet your needs!

You will now see our Lab Division called...



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- We carry all major brands: Trubyte, Heraeus, Whip Mix, Keystone, Garreco, Snow Rock, Renfert, NSK, and many more!

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Delta Delivers EVERYTHING YOU EXPECT From Your Zirconia



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- Competitively Priced
- Superior Quality and Technical Support

Aurident is here to help with your Zirconia needs



Call 800-422-7373
View our entire line at aurident.com

