



Florida's Outlook On the Dental Laboratory Profession

4th Quarter 2017

www.fdla.net

focus

DIGITAL
SMILE DESIGN

Is it real, or is it Celtra®?



Courtesy of Hans-Jürgen Joit, MDT, Germany.

Celtra®

Zirconia - Reinforced Lithium Silicate (ZLS)

A unique class of high strength glass ceramics -
Developed to make a difference

- Natural opalescence and translucency provides a chameleon effect that blends in seamlessly with surrounding dentition
- Exceptional margin integrity and high strength you can rely on*
- Easy to adjust and polish chairside
- Radiopacity shows sealed margins

Available for chairside milling with CEREC®,
and **now also at dental labs nationwide!**

celtra-dentsplysirona.com

*Bending strength testing by Justus-Liebig, University of Giessen, Germany

DP-0000238 Rev. 1



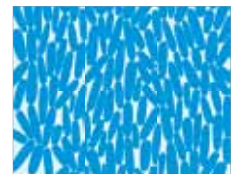
Clinical photo courtesy of Dr. Stephen Chu, DMD, MSD, CDT, New York USA. Full contour Celtra tooth #7. Adam J. Mieleszko, CDT, SDNY (Synergistic Dentistry of New York).

Celtra Microstructure



Zirconia-reinforced
Lithium Silicate
crystallites
500-1,400 nm

Competitive Microstructure



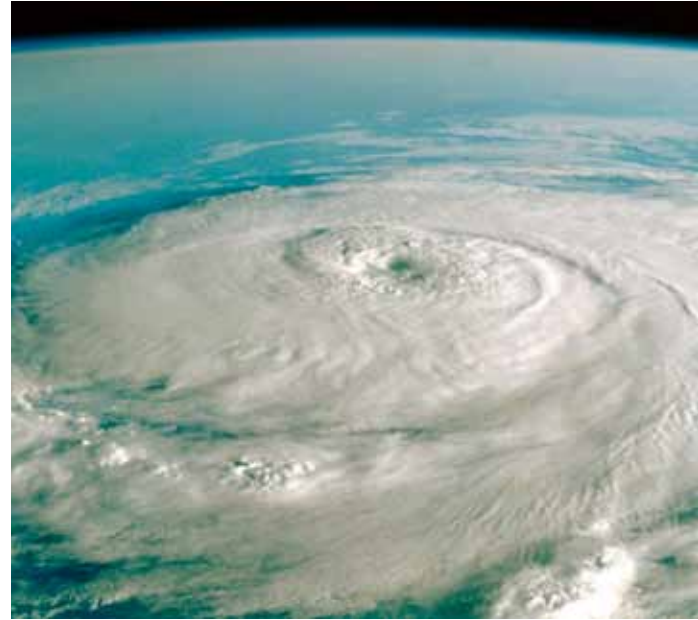
Conventional lithium
disilicate crystallites
2000-4000 nm

To learn more, request a free
Celtra Clinical Information Kit
at CeltraInfo.com

Help After Irma

No matter where you are in Florida, I'm sure you felt the effects of Hurricane Irma, which according to Architectural Digest, destroyed one out of every four homes in our state. Here are some other statistics about Irma from the magazine:

- Number of miles, from east to west, Irma stretched: 650
- Number of people in Florida without power as of Sept. 12: 15 million
- Share of houses destroyed in the Florida Keys: 25 percent (initial estimate)
- Share of houses with major damage in the Florida Keys: 65 percent (initial estimate)
- Area impacted by Irma's tropical storm force winds: 70,000 square miles (roughly the same square mileage as Cambodia)
- Highest recorded wind speed: 185 m.p.h.
- Number of people told to evacuate Florida: 6.3 million



No doubt, if you didn't live through those hurricane winds (or evacuated because of them), then you know someone who did. Your lab may have been hit, your business damaged, and your livelihood effected. If so, I have a number for you that may help:

800-950-1150

That's the number for the National Association of Dental Laboratories, which has a Disaster Relief Fund for laboratories and technicians impacted by natural disasters. Better yet, here's the link to download the application for disaster assistance: www.nadl.org/pdfs/NADL_Application_for_Disaster_Assistance.pdf

Requests for assistance are filled on a first come, first serve basis and will be for a flat amount of assistance. If you'd like to make a donation to the NADL Disaster Relief Fund, here's the link: www.nadl.org/disaster/donation.cfm.

"NADL originally kicked off this fund raising drive in 2005 to help victims of Hurricane Katrina and has continued to assist victims of many natural disasters. Individual dental technicians, dental laboratories, and dental laboratory suppliers and manufacturers are encouraged to contribute to this industry specific relief fund," NADL states. "The National Association of Dental Laboratories joins with you in recognizing the severity and magnitude of the destruction that natural disasters inflict upon its victims. We realize the emotional, physical, and financial devastation on the impacted individuals, businesses and local communities."

So, as we all get back to work after Hurricane Irma, know that you're not in it alone. NADL and FDLA are both here for you.



Lenny Herrera, CDT
FDLA president

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

Florida Dental Laboratory
Association
325 John Knox Rd,
Ste L103
Tallahassee, FL 32303
Phone: 850-224-0711
Fax: 850-222-3019

Southern States Symposium & Expo Office

866-873-3352
E-mail:
membership@fdla.net
Website: www.fdla.net

Published quarterly by the
Florida Dental Laboratory
Association. The FDLA
is not engaged in legal,
accounting, financial or
other professional
counseling and readers
are cautioned to contact
their professional advisors
for advice. FDLA simply
gathers information from
various sources to keep
the membership informed.

focus Staff

**Jillian Heddaeus, CMP,
IOM**
Executive Director &
focus Publisher
jillian@fdla.net

Bennett E. Napier, CAE
Senior Advisor
bennett@fdla.net

Cassandra Corcoran
Editor
editor@fdla.net

Maureen Turner
Advertising Sales
advertising@fdla.net

Christina Welty
Program Manager
membership@fdla.net



6 The Fitting Flexible Partial

10 Digital Dentistry, Exceptional Communication

By Lee Culp, CDT

20 The Evolution of Restoring Dental Implants: A CoCr Alloy Case Study

By Conrad J. Rensburg

26 The Hub

FDLA news and recent happenings.

28 Why Top Performers Leave

By Deborah Laurel

32 Zero-In

FDLA calendar and classifieds.

34 Focal Point

Setting The Right Priority — The Patient

Advertisers Directory

The Argen Corporation page 5
www.argen.com

Atlanta Dental Supply Inside Back Cover
www.atlantadental.com

Aurident, Inc. Outside Back Cover
www.aurident.com

B&D Dental page 25
www.BnDdental.com

Deflex page 31
www.deflexusa.com

DENTSPLY Prosthetics Inside Front Cover
www.dentsplyprosthetics.com



**Foundation for Dental Laboratory
Technology** page 13
www.dentallabfoundation.org

Garreco Dental page 33
www.garreco.com

Ivoclar Vivadent, Inc. pages 18 and 19
www.ivoclarvivadent.com

Kulzer page 9
www.KulzerUS.com

Medentika page 15
www.medentika.us

U.S. Dental Milling page 17
www.usdentalmilling.com

Zahn Dental page 29
www.zahndental.com



Like us on Facebook at facebook.com/floridadentallaboratoryassociation

THE NEXT GENERATION OF HT ZIRCONIA

- 4-5% More Translucency
- 150 MPa Higher Strength
1250 MPa
- Sinter HT+ & Anterior Together
1500° C
- Bridges up to 14 Units



Argen serves more than 75% of labs in America.

“Over the past year, we have invested a tremendous amount of time and resources into developing ArgenZ HT+. It's a very special product and we are excited to be receiving such a fantastic response from labs. We will continue to expand our product line – a commitment driven by our dedication to serve our customers, our top priority for more than 50 years. **We're proud to be a family-owned company producing all products in America and are devoted to treating our customers like family.**”

– Anton Woolf, CEO of Argen



* Use promo code HT+ZFr1. ** Use promo code HT+D25. Offers cannot be combined. One offer per lab. Offers expire Friday, December 29, 2017.

(800) 255-5524
www.argen.com

THE FITTING FLEXIBLE PARTIAL

By Bryan Johnson

M

anufacturing a properly fitting flexible partial can be difficult for dental technicians. Despite all of the years that I've been fabricating flexible partials, I've had my share of successes and failures. From the partial not fitting the master model with that perfect snap down to it not fitting the master model at all, I have had to deal with my fair share of failures.

There are five clasp design options that technicians should consider.

With all of my years of experience of being taught hands-on and being chairside in the doctor's office, I'm sharing some tips to help ensure successful delivery so that the patient can experience good form and function.

Using an indicator spray to fit the partials during the fabrication process to the duplicate model was an eye opening experience for me. It is useful in doing two things to help with fitting the partial. First, it imitates conditions on the mouth and marks specific areas that need attention. It also highlights retention areas, which are another benefit of a good fitting partial.

We all have different doctors that require certain things to their cases like a tighter fit or

a somewhat looser fit. In some cases, patients may be handicapped or elderly, which can make it difficult for them to remove the appliance from the mouth. However, the bottom line in fitting the partial is this: If you cannot physically remove the partial from the model with your hands, then it is too tight. If you have to work to get it off the model, just imagine how difficult it's going to be for the patient to get it out of their mouth. The snap theory is great and proves that you have a nice conformity to the model and proper retention. However, this only applies to certain circumstances.

Usually, when it comes to a partial with a wrap around clasp, the doctor or technician can modify the clasp, thus reducing it from the bottom up to narrow the clasp. In some cases, the doctor or



Possibilities in design



Friction clasps



Modified C-Clasp

Using an indicator spray to fit the partials during the fabrication process to the duplicate model was an eye opening experience.

technician may convert it into a modified C-clasp to reduce irritation of the gingiva.

For chairside polishing and reduction, I give my clients a TCS greenstone to prevent over relieving and a TCS fuzz buff to take the fuzzies off.

There are five clasp design options that technicians should consider:

Modified C-Clasp:

The benefits of this type is that it provides retention where you need it and has little or no tissue irritation. Also, it has a less bulky feeling for the patient. The key to this design option is that the crescent style needs to be achieved when finishing and the technician can't thin it out too much.

Wrap Around Clasp:

This is the second most retentive of all clasps. Technicians should use this clasp when they have a patient with clinically shorter teeth or where tissue retention is a must or in a long span situation. The stiffness of the material may become a factor in a long span situation. For example, the nylon



Use of a pencil to aid the fitting of flexible partials



*The bottom line
in fitting the
partial is this:
If you cannot
physically
remove the
partial from the
model with your
hands, then it is
too tight.*

and TCS unbreakable is a little stiffer, and this will help with stabilization. The cons for this design are the possibilities of tissue irritation because the appliance is too tight against the patient's tissue. Other problems can be a too tight fit for the patient and that the clasp may be too bulky for the patient, thus making modifications necessary.

Circumferential Clasp:

The pros for this design are that this is the most retentive of the clasps. It's perfect for when the height of contour is insufficient, or there isn't enough tissue for a wrap around clasp or modified C-clasp. The cons are that it may need adjustments chairside if it has a very tight fit, and esthetics may suffer because the tooth may be completely covered.

Half or Finger Claps:

I use these clasps on a daily basis, and they have served me well. For some highly demanding doctors and patients, this may be a solution because the technician is turning a flexible partial into a clasless flexible partial. It may appear without a clasp, but the clasp is still evident while not visible facially. Precision duplication is required due to the nature of the clasless partial and the windows of retention. Pros for this design are esthetics, sealing possible food traps, illusions of no clasp, minimal fullness, much different thickness, and combinations. Functions of this clasp are they grab mesial and distal embrasures, to add to the stability of frames and are used on cases with multiple abutments. The cons are precision

duplication needed, over-adjustment is easy, has minimal retention and is not recommended for more than two teeth of distal retention.

Spur Clasps:

This clasp is another that gives the appearance of being clasp free. It's in the family of embrasures and friction clasps. The clasp is shaped in the form of a cowboy spur and does engage the distal and mesial undercut and for added stability, extends the facial gingiva. It is usually best for a stand alone tooth, mesial and distal abutments, adequate retention, sealing food traps, and maximum friction. Also, it appears to be clasp free. The negatives are that it is precision fitting, over reduction or adjustments. It's recommended for the molar region due to torque and bite occlusal forces. Remember not to extend the clasp past the tissue's height of contour. A great aid in design is if the technician traces them out. ⓘ

About the Author:

Bryan Johnson is the vice president, removable department manager and lead CAD/CAM laboratory designer at Sterling Dental Arts, a full service dental laboratory, which was founded in 1980. He is a second generation laboratory technician with 23 years of experience.





Precious Metal Refining

Tested. Trusted. Honest.

Refine direct for highest returns.

Don't lose money by accepting cash on the spot. Get more for your scrap - skip the middleman and refine direct with Kulzer, one of the world's largest refiners.

Why Refine with Kulzer?

- Higher Profits - We have a robust process that accurately values your scrap
- No Cost to You - We cover all materials and shipping costs
- Autoship Program - Automates your refining process
- Full Assay Report - Detailed scrap value report provided
- No middleman - Come straight to the end refiner
- No Hidden Fees - Transparent, easy-to-follow fee structure
- Payout - In only 7-10 business days

Visit mydental360.com/refining to learn more about your autoship program for scrap materials.

Get An Extra

5%
for your
scrap!

Include this certificate with your next shipment and receive an additional 5% for your scrap.

Giving a hand to oral health.



KULZER
MITSUI CHEMICALS GROUP

By Lee Culp, CDT



DIGITAL DENTISTRY

EXCEPTIONAL COMMUNICATION

There was tension and excitement in the room as the lights were slowly dimmed in the auditorium. For the next two hours, there was a glimpse of the future of dentistry. The topic was something out of a science fiction novel, and it instilled in the audience a sense of awe, wonder and just a touch of fear. As the auditorium lights came up, everyone sat in stunned silence as they contemplated all the possibilities offered by the presenter ... dentistry was going digital.

That presentation was given over 30 years ago by one of digital dentistry's pioneers, Dr. Francois Duret, on the application of computer-assisted design/computer-assisted manufacturing (CAD/CAM) technology into restorative dentistry. While it took slightly longer than anticipated to integrate into the daily practice of dentistry, the new millennium seemed to be the catalyst for change in digital dentistry, as more than 10 different CAD/CAM systems have now been introduced as solutions for restorative dentistry.

The laboratory technician's primary role in restorative dentistry is to perfectly copy all functional and esthetic parameters that have been defined by the dentist/technician team into a restorative solution. It is an architect/

builder relationship, and throughout the entire restorative process, from the initial consultation through treatment planning, provisionalization and placement final restorations, the communication routes between the dentist and the technician require a complete transfer of existing, desired and realistic situations and expectations to and from the clinical environment. Functional components, occlusal parameters, phonetics and esthetic information (shade and contour) are just some of the essential information that is required by the technician to complete the fabrication of successful, functional and esthetic restorations.

Historically, the transfer of esthetic and functional information from the clinical

environment to the laboratory was somewhat limited. There was little, if any, direct communication of the functional requirements for a case beyond the dentist providing an opposing model and an impression and sometimes an interocclusal record with the shade preferences. With limited guidance, the technician would mount and articulate the case and restore the case by filling spaces and trying to mimic the existing dentition using their interpretation and experience. The result was a close approximation of what the technician hoped would meet or exceed the dentist's and patient's expectations. In situations like this, the dentist could spend considerable chair time seating, case-adjusting the occlusion and recontouring restorations. The results were often a complete removal of anatomy, occlusal form and sometimes an esthetic and functional compromise of the final restoration.

There were, of course, dentists and technicians that desired more predictable results and sought a solution through advanced continuing education courses that encouraged a dentist and technician team approach and also sought out the combination of restorative and functional requirements. This group was introduced to the concept of comprehensive dentistry, which took into account optimum oral health, anatomic and functional harmony and occlusal stability rather than a focus on just the restoration of a few teeth. To accomplish this, the dentist/technician partnership became a diagnostic team with the dentist and technician both participating in the complete understanding of the cause and effect relationship of the problems, before initiating treatment.

As restorative dentistry evolves into the digital world of image capture, computer design and creation of dental restorations through robotics, our perceptions, and definitions of the dental laboratory must also evolve. First, to fully understand this concept, we must define what a laboratory is. At first thought, we might say that a lab is a place that a dentist sends his or her patient's impressions to, which are then processed by that laboratory into restorations, which are sent back to the dentist for adjustment and delivery. This definition does seem to fit well with

the traditional concept of a dentist-laboratory workflow. However, just as the internet has forever changed the landscape of communication through related computer technology, the possibility to use CAD/CAM restoration files electronically has provided the catalyst for a significant change in the way we view and structure the dentist-lab relationship.

Let us imagine first that our laboratory is not a place. It does not have walls and exists only in the talents for the partners in the restorative process –the dentist, and technician. The equipment we use to create the restoration may be located in the dental laboratory, or next to the chair, in an in-office laboratory area. Our laboratory is nothing more than a workflow, which is flexible to the degree that our abilities, access, and equipment will allow. The primary decision becomes where the handoff from one partner to another should occur. Moreover, a dentist who can optically scan intraoral for impressions and who often choose CAD/CAM restorations as the best treatment option for their patients, have enhanced freedom as to where the hand-off to the technician partner should occur. A lab is no longer a place; it is, to a large degree, a virtual and fluid entity.

Digital technology, not only offers a process to more predictable and efficient workflow flow, and ultimately an excellent final restoration.

A LAB IS NO
LONGER A
PLACE; IT IS,
TO A LARGE
DEGREE, A
VIRTUAL AND
FLUID ENTITY.

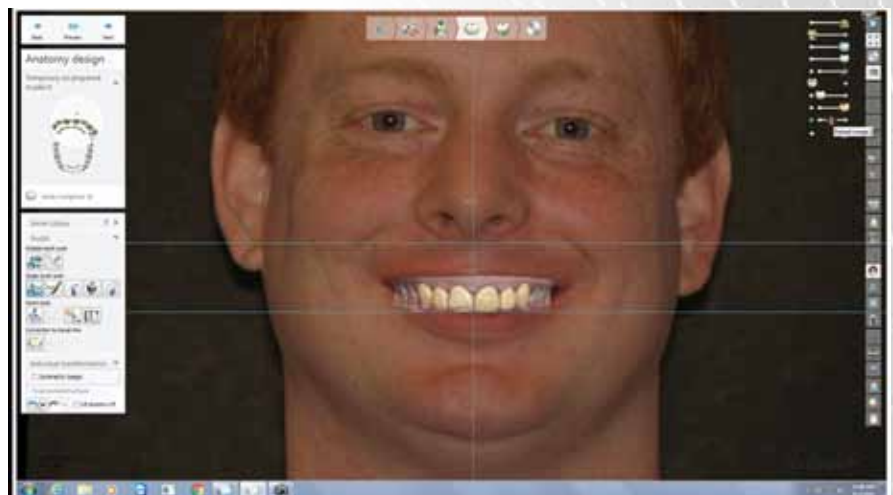


Figure 1

THIS SYSTEM
ALLOWS
THE DENTAL
RESTORATIVE
TEAM AND
PATIENT TO
PREVIEW
THE NEW
SMILE, MAKE
REVISIONS IF
NECESSARY,
AND THEN
CREATE THAT
EXACT SMILE.

But, more importantly, it allows exceptional 3D communication between dentist, laboratory and patient.

Following diagnosis and treatment planning, the first step of confirmation of treatment goals is to design the case and then to produce a digital diagnostic wax-up. This digital diagnostic wax-up is based upon the functional and esthetic desires of the patient and restorative team and takes into account a complete awareness and understanding of any clinical limitations. An organized and systematic approach is required to evaluate, diagnose and resolve esthetic problems predictably. Our ultimate goal as a restorative team is to achieve pleasing composition in the smile by creating an arrangement of various esthetic elements.

A smile design should always include the evaluation and analysis of both facial and dental composition. Harmonizing an esthetic smile requires a perfect integration of facial composition and dental composition. The facial composition includes the hard and soft tissues of the face, and the dental composition relates more specifically to teeth and their relationship to gingival tissues.

There are several two-dimensional software products on the market that allow modifications to tooth shape and shade, but still require the interpretation from the technician, to try and duplicate the smile depicted in the flat image. Now we can move to the next level, by using the 3D design software. This system allows the dental restorative team and patient to preview the new smile, make revisions if necessary, and then create that exact smile and tooth shape and position into



Figure 2

Figure 3



beautiful ceramic restorations, with the use of digital technology (**Figure 1**).

This approved digital diagnostic wax-up can either be printed or milled. It then becomes the first 3D blueprint of the case and would be the maps for the course of treatment (**Figure 2**). The initial 3D blueprint was followed to fabricate milled PMMA provisional restorations, which became the clinical prototypes used to finalize functional, phonetic and esthetic parameters (**Figure 3**).

If any modifications are requested by the dentist or patient, intraoral scanning, or conventional impressions of the final provisional design, would then be used to record, transfer and verify preferred tooth positioning and contouring so that the final restorations would be a replica of the functionally successful and confirmed interim restorations. Final restorations were milled from the e.max CAD material, and finished with minimal layering techniques, followed by the application of a creative layer of stain and glaze (**Figures 4-5**).

The result of this concept of complete digital dentistry and a teamwork approach provides



Figure 4



Figure 5

SHAPING THE FUTURE THROUGH EDUCATION

Foundation Learning Library

Currently hosting more than 60 on-demand courses, the Foundation Learning Library offers a variety of quality education through online learning. Courses include, but are not limited to:

- 2016 NADL Winter Daze courses – *free of charge*
- 2017 NADL Winter Daze courses – *free of charge*
- Entire Wealth of Knowledge (WOK) library – *free to NADL members*
- Virtual Full Denture Training Program
- Lithium Disilicate Over Zirconia Bridge

All courses are approved for CE credit through the NBC and are available on-demand for 90 days after purchase.

**SPECIAL
DISCOUNTED
RATE FOR NADL
MEMBERS!**

The Foundation
For Dental Laboratory Technology

www.dentallabfoundation.org/resources/courses

Figure 6



Figure 7



DIGITAL
DENTISTRY
REPRESENTS
A NEW WAY
TO DIAGNOSE,
TREATMENT PLAN
AND CREATE.

predictable, functional and successful restorations and avoided much of the time consuming intraoral functional and phonetic adjustment, and esthetic surprises (Figures 6-8).


The dental profession currently regards CAD/CAM technology as just a machine that fabricates full contour ceramic restorations or frameworks. Digital dentistry and the digital dental team represents a new way to diagnose, treatment plan and create functional esthetic restorations for our patients in a more productive and efficient manner. Digital dentistry will only further enhance the dentist/technician relationship as we move together into this new era of patient care. 

Figure 8



ABOUT THE AUTHOR:

Lee Culp, CDT, is the CEO of Sculpture Studios, a dental laboratory, education and research and product development center, for new and innovative digital dental technologies, and their applied applications to diagnostic, restorative and



surgical dentistry. He is the 2007 recipient of the Kenneth Rudd Award from the American Society of Prosthodontics, the 2007 recipient of the AACD Presidents Award for Excellence in Dental Education, as well as the 2003 recipient of the National Association of Dental Laboratories, Excellence in Education Award, and the 2013 American College of Prosthodontics-Dental Technician Leadership Award. Culp has been appointed adjunct professor at The University of North Carolina- School of Dentistry, Graduate Prosthetics Department. He is a leading resource/inventor for many of the materials, products, and techniques used in dentistry today, and holds numerous patents for his ideas and products. He writes many articles per year, and his writing, photography, and teaching style have brought him international recognition as one of today's most exciting lecturers and innovative artisans in the specialty of digital dentistry, dental ceramics and functional esthetics.

»» Seamless integration
with your **full arch**
Digital Workflow! ««



Medentika has digital
libraries compatible with:

3shape

exocad

dental wings

Dentsply
Sirona

FREE NEXT-DAY SHIPPING*
FOR ORDERS OVER \$500



www.medentika.us 855-412-8883 toll free

 **MEDENTIKA®**

A Straumann Group Brand

*UPS Next Day Air Saver (3pm). Other shipping methods will be charged at the standard rate.

FDLA Business Partners

These companies support the Florida Dental Laboratory Association in our vision to advance the individual and collective success of Florida's dental technology professionals in a changing environment. They are FDLA's Business Partners, and have pledged their support to Florida's dental laboratory profession.

Accurate Metals & Refining, LLC

Phone: 866-973-3463
Fax: 860-871-2925
www.accuraterefining.com
Refiner of precious metal scrap.



Amann Girschbach North America, LP

Phone: 704-837-1404
Fax: 704-837-0763
www.amanngirschbach.us/home



As a pioneer in dental CAD/CAM technology Amann Girschbach is one of the leading innovators and preferred providers in digital dental prosthetics. With its high degree of expertise in development and commitment to customer orientation, the ambitious company creates sophisticated system solutions for tomorrow's practice routine. Maximum customer satisfaction and a constantly increasing number of partners in over 90 countries worldwide speaks for itself. Amann Girschbach has long since proven itself in the global dental sector as a guarantee for the highest quality products, innovative materials, as well as sophisticated system solutions.

The Argen Corporation

Phone: 858-455-7900
Fax: 858-626-8658
www.argen.com



The Argen Corporation provides a wide range of alloys to meet any need, as well as refining services.

Aspen Dental

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.heraeus-scrap.com
Scrap refining.



KULZER
MITSUBISHI CHEMICALS GROUP

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.



Lista International

Phone: 860-538-6676
www.listaintl.com

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.



Want information on supporting Florida's dental laboratories by becoming an FDLA Business Partner?
Call the FDLA office at (850) 224-0711 or e-mail membership@fdla.net.



THE AMERICANA GROUP



- **INCLUSIVE® w/ TI Base Abutment**

\$119.00 *from STL File

- **Titanium Custom Abutment**

\$94.99 *from STL File

- **INCLUSIVE® w/ TI Base, Screw Retained Full Contour ZR Crown**

\$239.99



DIAMOND COATED

ADAMAS MILLING TOOLS
approximately 400 mills

**WIELAND
ROLAND
VHF**

\$79.50
each
*all sizes

ONE DAY TURN AROUND ON STLs



- **ADAMAS Anterior**
Full Contour Zirconia
\$39 from STL

- **ZR HT Copings** \$29 from STL

ON TIME OR IT'S FREE!

3SHAPE SCANNERS



E1 E2 E3

No Dongle Fee Required
100% Open Architecture
Available with Scanner Replacement

CALL US FOR A QUOTE

AMERICANA DENTAL GROUP
6015 Benjamin RD. Suite 310
Tampa, FL 33634

Americana Dental: 813-888-8889
U.S DENTAL MILLING: 813-886-8918
info@americanadental.com

IPS[®]
e.max[®]

Introducing IPS e.max[®]

ZIRCONIA

THE **ONLY** ZIRCONIA ESTHETIC ENOUGH TO BE CALLED e.max!



ivoclarvivadent.com
EXPLORE SHOP LEARN

For more information, call us at 1-800-533-6825 in the U.S., 1-800-263-8182 in Canada.
© 2017 Ivoclar Vivadent, Inc. Ivoclar Vivadent and IPS e.max are registered trademarks of Ivoclar Vivadent, Inc.



IPS e.max ZirCAD®

A whole NEW LEVEL of strength, color and translucency.



- Three translucency levels (MO, LT, MT) for natural esthetics
- Polychromatic MT Multi Discs for efficiency and highly esthetic restorations
- Physical properties allow for reduced wall thickness
- Up to 30% higher flexural strength and 50% higher fracture toughness compared to common translucent zirconia materials

By Conrad J. Rensburg

The Evolution of Restoring Dental Implants: A CoCr Alloy Case Study

The ability to embrace and implement cutting edge technology gives today's dental lab the advantage needed to survive in an ever-changing market. In my more than 25 years in the dental technology industry, I have seen a definite shift from technicians being seen as the guy in the backroom making teeth to one of the most valued partners in the restorative team.



(Above) Dr. David Hedgecoe, Restorative Dentist

Today's exponentially evolving dental landscape is not only driven by technological advances, but also by new materials and innovative restorative options. This ever-changing market is causing a true demand for treating our patients with higher quality products and better restorative options. To survive in this new world, dental technicians are expected to not only be artists, but to be able to provide guidance on these new materials and protocols. Clinicians are bombarded by a multitude of restorative options mostly advertised by sales driven marketing. Technicians who are in the know and able to guide their customers can use this knowledge as a powerful marketing tool.

(Below) Pre-op



Technology is now allowing dental labs to be less dependent on human hands for the arduous tasks. Through these efficiencies, our industry—for the first time—is now becoming scalable. Unfortunately, this scalability also creates a more level playing field within the industry and with this comes price pressure from corporate labs.

Over the last few years, I have witnessed a definitive shift in our industry where posterior crowns, once considered the moneymakers, have become a mere commodity. I believe we will most likely see a complete eradication of most of these posterior prosthetics, made by human hand, over the next five to 10 years. In a world where fast turnarounds and low cost often trumps artistry, the only defense we, as dental artists, have is staying abreast of new protocols. This allows us to showcase our artistry through innovative products that cannot easily be substituted by machines.

As a lab owner, I have come to the realization that not adapting to this new environment will only lead to one thing: extinction.

Historically, restoring the edentulous arch has been reserved for removable labs, but with the advancements in implant dentistry the line between removable and fixed prosthetics has become much less defined. With the use of a diagnostic denture,

restoring the edentulous or partially edentulous arch with a fixed, clip or even hybrid prosthesis has become extremely predictable.

Hybrid restorative options have also evolved with the implant industry, but the restorative flow has stayed very much the same. In 2004, Nobel Biocare revolutionized restoring these patients with their all on four concept. Since then, we have seen a surge to find better long-term options in lieu of this traditional wrapped acrylic over a titanium bar. For many years, zirconia hybrids were considered a more stable long term option, but the inherent brightness of zirconia and the always lurking possibility of post-delivery fracturing has dampened the excitement we once saw for this material.

Milling facilities, like Dentsply Atlantis and others, are now also offering a third hybrid option, supra-structures, which are milled from a dental specific CoCr material. In conjunction with technologies like Angulated Screw Access (ASA), these hybrids can now be restored directly into the implant interface without having to consider the screw access position. ASA allows us to predictably fabricate full arch hybrids as well as posterior and anterior partially edentulous screw-retained prosthetics. In the near future, we expect this type of screw access technology to be available for single units.

With all the talk about peri-implantitis caused by cement, there is a definite drive in our industry away from two-piece CAD restorative options back to a simplified screw-retained solution. The pressure on laboratory technicians is mounting to find more economical yet still esthetic solutions, while maintaining profitability. This product fulfills all of the above requirements.

With the advancements in this alloy make-up over the last 10 years, today's dental CoCr offers an exceptional CTE, compatible with most all popular dental ceramics. Dental CoCr used by most manufacturers falls well within the acceptable range for dental ceramics of 14.0 to 14.9 fflm/m.K.

If we compare the Coefficient of Thermal Expansion of dental CoCr alloy to some of the most popular alloys on the market today (Argen Nobel NF - 14.4-14.8, Argident Euro White High Nobel - 14.1-14.4 & Argident Bio 880PF High Nobel Yellow - 14.2-14.4), it is easy to see why this alloy is so predictable under multiple firings.



Figure 1
Soft tissue model



Figure 2
Tooth try-in for
structure design

Most ceramists who have worked with previous generations of CoCr alloys remember a thick green oxide layer causing greening and cracking in ceramics under multiple firings. This excessively thick oxide layer also caused de-bonding between the opaque layer and alloy.

Because of the eradication of nickel and beryllium from today's alloy, we achieve an excellent oxidation layer, creating an exceptional base for bonding and color. This type of support structure not only allows our ceramists to showcase their artistry, but the protocols we use to restore these cases have given my team and I a great marketing tool.

Clinical Protocol

*Please note that for explanation purposes, multiple cases are pictured.

First Appointment

The clinician registers an implant level impression using digital or PVS media. The lab fabricates a soft tissue model (**Figure 1**) and a wax based tooth try-in on an acrylic base (**Figure 2**).



Figure 3A
Diagnostic denture try-in

Figure 3B
Bucco-lingual parameters

Figure 3C
Accurate metal support



Variation 1: The laboratory technician can also fabricate an implant supported bite rim to establish a bite and model verification jig. Although valuable in posterior applications, most smaller anterior cases will not require an implant supported bite rim. A traditional metal framework try-in can be used in lieu of a verification jig.

Variation 2: If the patient has an acceptable temporary or partial flipper, a model of this approved tooth position can be used as a study cast to assist in fabricating the Atlantis supra-structure.

Second Appointment

The clinician will do a tooth try-in (**Figures 3A-3C**) to determine patient expectations as well as to establish the bucco-lingual corridors and incisal edge position. This tooth try-in will be duplicated and used as a copy-mill design structure for the final CoCr supra-structure. An accurate tooth try-in contributes to precise

Figure 4
Digital dual scan for design



metal support and this in turn contributes to the long term success of the prosthesis. The tooth try-in will also be used by the ceramist as study cast for tooth position, shape and shade.

Variation 1: Clinician verifies model/impression accuracy by seating the model verification jig in the mouth. The clinician registers a bite with the supplied implant supported bite rim. The laboratory technician fabricates an implant supported tooth try-in on acrylic base.

Variation 2: If the patient has an acceptable temporary or partial flipper, a model of this approved tooth position can be used as study cast to assist in fabricating the alloy Atlantis support supra-structure. No tooth try-in or model verification appointment is necessary in this case.

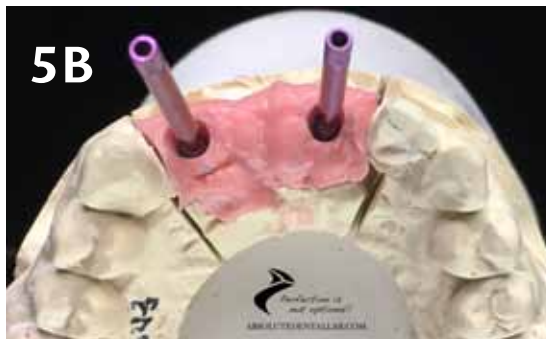
Atlantis Fabrication: The laboratory technician will ship the models and tooth try-in to Atlantis Supra-structures for design and milling of the final metal support structure. Atlantis will return a digital work-up (**Figure 4**) of the case to the lab for potential changes and final approval. Once approval is received from the lab, Atlantis will mill the support structure (**Figures 5A-5D**) and return to the lab.

Third Appointment:

Optional metal framework try-in (**Figure 6**) to verify model accuracy and fit. To reduce the possibility of internal connection implants



5A



5B



5D

5C



Figure 5A
Metal structure for try-in

Figure 5B
Screw access is controlled with ASA technology

Figure 5C
Atlantis ASA

Figure 5D
Angulated screw access correction

creating undercuts, the Atlantis supra-structure does not engage the hex of the implants (**Figures 7A and 7B**). Seating is verified by complete integration between the internal axial wall of the implant and external axial wall of the structure.

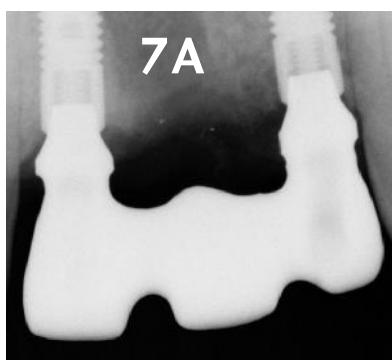
Variation 1: Tooth try-in to establish desired bucco-lingual parameters, tooth shape and shade.

Fourth Appointment:

Final delivery precisely matching the patient approved tooth try-in (**Figure 8**). Our master ceramist Yunsoo Kim (**Figure 9**) carefully shapes the pontic to allow for a natural emergence from the tissue. In this case, pink tissue was applied to create a natural emergence and control the



6



7A



7B



8



9

Figure 6
Frame-work try-in and model verification

Figure 7A
Verifying fit

Figure 7B
Non hexed frame

Figure 8
Screw access corrected prosthesis

Figure 9
Yunsoo Kim, Absolute Master Ceramist



Figure 10
Pink tissue applied to create natural emergence, length and line angles



Figure 11
First attempt without pink tissue




(Above) CoCr Fixed Partial

coronal length of the teeth (**Figure 10**). Pink tissue is also very helpful to control tooth emergence and line-angles influenced by implant positions. The first attempt (**Figure 11**) to restore this case was done without pink tissue, making control over the emergence and neck positions an esthetic challenge.

Variation 1: Optional metal frame work try-in. If model is verified, no metal try-in is required.

Fifth Appointment:

Final delivery of Variation 1. 



(Above) Post-op final

About the Author:

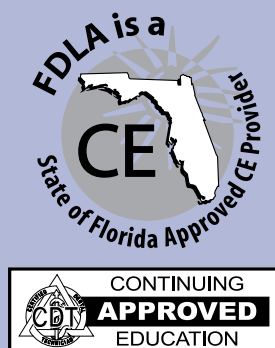
Conrad J. Rensburg graduated from Pretoria Tech under full scholarship with a four-year baccalaureate degree in dental technology. He has specialized in fixed dental prosthetics with an emphasis on dental implant restorations since 1993. As a CE-accredited speaker since 2002 for several U.S.



dental implant companies, Rensburg has been the keynote speaker at special events across the U.S. His meetings focus on keeping restorative dentists up to date with the ever-changing protocols associated with restoring today's implant systems. He focuses on CAD implant design protocols and fixed and removable hybrid implant supported restorative techniques.

Earn continuing education credits for this article and quiz!

Receive .5 hours CDT/RG scientific credit and .5 hours general credit towards your state of Florida dental laboratory renewal by reading this article and passing the quiz. To get your credit, complete the quiz located on the FDLA website at www.fdma.net using the *focus* Magazine link. Once you have completed the quiz, fax it to FDLA at 850-222-3019. This quiz is provided to test the technician's comprehension of the article's content and does not necessarily serve as an endorsement of the content by FDLA.



ORIGIN[®] *Beyond Plus*[™]

The Uniquely Universal Zirconia, Truly The Next Generation

- ♦ Strongest Anterior (>1100 MPa)
- ♦ Most Translucent Posterior
(>47% Total Light Transmittance @ 600 nm Wavelength,
1mm Sample, Lambda 35 UV/VIS Spectrometer)
- ♦ Eliminates Graying on Lighter Shades



CHROMA[™]
3D-Master Shades &
16 Classic Shades



"I'M IMPRESSED with *Beyond Plus*[™]. It looks just like the shade guide for every shade and has **GREAT TRANSLUCENCY** without being too gray."

David Hughes, Hughes Dental Lab



"We have CONSISTENT SUCCESS with *Beyond Plus*[™] and every shade is so close that it requires little or no stain."

Kirk Redding, Creative Crown Dental Lab

FDLT Raises Nearly \$83,000 in Annual Fundraiser

The Foundation for Dental Laboratory Technology's fourth annual Race for the Future took place on Aug. 26-27 in conjunction with the Transamerica Chicago Triathlon in Chicago, Ill. With 30 sponsors, approximately 50 racers and spectators onsite, and countless contributors, nearly \$83,000 was raised. Money raised supports the foundation's mission of advancing the profession by developing educational curriculum and programs that will be relevant and accessible to dental technicians and other members of the dental team. Save the date for the Race for the Future 5.0, held once again in conjunction with the Transamerica Chicago Triathlon on Aug. 25-26, 2018!



Garreco receives Arkansas Governor's Quality Award

Garreco, LLC, was recognized with the Challenge Award during the 23rd Annual Arkansas Governor's Quality Awards Celebration, administered and presented by the Arkansas Institute for Performance Excellence. More than 300 business and civic leaders from throughout Arkansas attended the celebration. Garreco was one of 28 recipients to receive a Quality Award, but was the only dental manufacturer honored. The Governor's Quality Award is based on the Malcolm Baldrige National Quality Award and was developed to provide an opportunity for all organizations in Arkansas to be recognized for their progress in pursuing performance excellence.

Right: From left: Lauren Acklin, marketing; Samantha Clark, assistant production manager; Kristofer Mainar, quality assurance director; Jerry Woodam, production manager; Lori Beth Hope, acrylics supervisor.





FDLA St. Petersburg Workshop a Success

4Points Dental Designs hosted a hands-on FDLA district workshop on Sept. 23 in St. Petersburg and it was a huge success. We would like to thank GC America, Inc. and Renfert for sponsoring the session *"Improved Esthetics from Presentation to the Final Product using Renfert Geo Expert Wax and GC Initial LiSi Press"* presented by Mitch Hurst, CDT. We would also like to thank Rick Sonntag, RDT, at 4Points Dental Designs for allowing us to use his laboratory for the workshop.





By
Deborah Laurel

Why TOP PERFORMERS Leave

just read an article by Jeff Buenrostro in Forbes. The article caught my attention because of its title: *Obituary Writing and Retention*. Catchy, isn't it? Buenrostro writes that leaders can retain top talent if they know what those employees value and if those values coincide with the organization's values.

TOP PERFORMERS LEAVE for a variety of reasons, most of which pertain to the organization's management style.

He suggests that leaders have their employees write their own obituaries. He believes that this will benefit the leaders because they will learn what matters to their employees. He adds that it will also benefit the employees, because it requires them to think about what they want out of life. Once the employees have identified their core values, "if an employee and an organization are a good match, these core values should align and the company should be providing avenues for the employee to achieve their lifetime goals."

I take issue with Buenrostro's recommendation on six points.

1. Unless the organization's core values have radically changed since the employees' hire, I don't think that incongruent core values is the reason why top performers leave.

Top performers leave for a variety of reasons, most of which pertain to the organization's management style. They leave because:

- Their motivational needs have not been met.
- There is insufficient challenge, recognition or simple appreciation for their efforts.
- They work in a hostile environment.
- They lack the tools or support to continue to perform at a high level.
- They are burnt out because the managers over rely on them.
- Their managers do not back them up or advocate for them.

In summary, organizations lose their top performers because the employees' values and needs are not supported!

2. The values that individuals identify when asked to write their obituary have little to no relationship to the specifics of their jobs. I have asked participants to write their obituaries in

continued on page 30

The Wait Is Over!

Outsource Your Titanium Abutments Today!

Save over \$3,000!



OUTSOURCING IS A GREAT PATH TO OFFERING MANY AUTOMATED RESTORATIVE PRODUCTS.

By partnering with CMC you have immediate access to efficient and cost-effective solutions. Backed by an unrivaled combination of expertise, precision fabrication capabilities, and consultative services, CMC can help add to your portfolio and help your lab thrive.

SCAN

Novux E3
3D Scanner
with Dental System™
Crown & Bridge

+

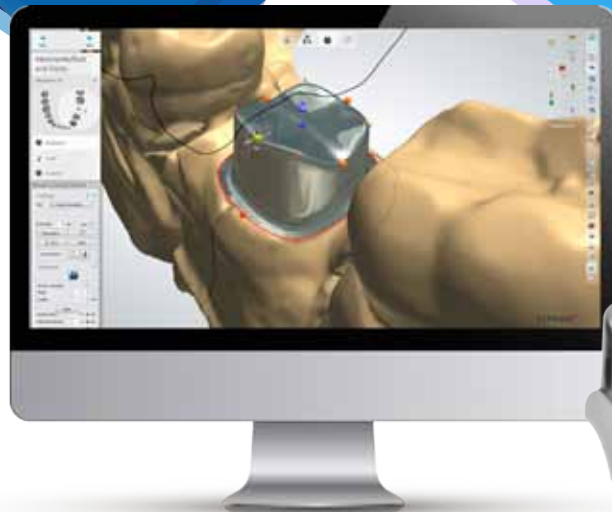
DESIGN

Abutment
Designer Module

+

SAVE

5 Titanium
Abutments
from Custom
Milling Center



+5

Call your Equipment Specialist at **877.977.7889** for more information.



(877) 977-7889
www.cap-us.com



(800) 496-9500
www.zahndental.com



(877) 933-6455
www.custom-milling.com

IF LEADERS WANT TO ENSURE that their employees share the organization's values, it can be done during the selection process using situational questions.

stress management classes for more than 30 years. When volunteers read their obituaries, they talk about having made a difference, helping others, raising successful and happy children; living a full and healthy life; having been a loving helpmate; using their gifts; being true to their faith; seeing their children educated; and simply being a good person.

Typically, a lot of the stress that the participants are feeling comes from their work lives. When I ask the participants to think about what is stressing them and see if it has anything to do with their desired legacy, it never does. I conclude that activity by telling them if they need to stress over something, let it be over what really matters.

3. It is extremely intrusive to order employees to not only write their obituaries, but also to share them with their management. Besides having little to do with the job, the content of their obituaries is very personal. Unless there is an unusual amount of trust in the organization, employees who are ordered to write their obituaries may feel extremely vulnerable. I notice that there is no suggestion that the leaders write and share their own.

4. While I agree that we want employees to share the core values of their organization, I don't think that having them write their obituary is the way to discover what those values are. An

obituary communicates how an individual wants to be remembered. That is different than a core value. For example, if the obituary says, "Lived a full and healthy life," there are certainly personal values implicit in that statement, but they are not explicit. We lack sufficient information to help us identify the values that would contribute to that legacy.

If leaders want to ensure that their employees share the organization's values, it can be done during the selection process using situational questions. If leaders really want to retain their top performers, they need to ask them what the organization can do to better support them. Some may say challenging work, while others might say more backup or up-to-date equipment and technology.

5. Many employees are not even aware that their organization has core values (or a vision or mission statement). Perhaps the place to start is to discuss them in staff meetings. Better yet, what about an organization-wide event to co-design the core values? That would ensure that the employees not only know, but also feel ownership of those values. Then it would be very clear that the employees and the organization were on the same page.

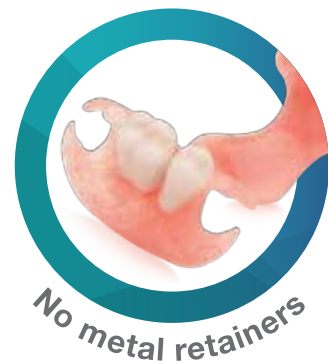
6. An organization may claim to have core values (and may have them posted on meeting walls and printed in annual reports). Employees may share and believe in those values. But even if employee and organizational core values appear on the surface to be shared, unless management acts in accordance with these values, there is no guarantee that top performers will stay. ①

ABOUT THE AUTHOR:

Deborah Spring Laurel is the President of Laurel and Associates, Ltd., a certified woman-owned small business that builds and strengthens managerial, employee development and technical skills through the design and delivery of participatory classroom training on a national and international basis. If you would like your participants to leave training with practical skills that they can use immediately, or you would like your trainers to facilitate quality programs that effectively achieve their learning goals, contact Deborah at <http://www.laurelandassociates.com>, where you can also access over 680 training tips. Article Source: http://EzineArticles.com/expert/Deborah_Laurel/207649



Deflex



INJECTABLE LINE

Polymers for removable dentures



Aesthetically pleasing

Free of metal.
Inconspicuous



Lightweight

Allows for
reduced thickness



Resistant

Highly resistant
to blows and falls



CLASSIC SR
Semi-rigid polyamide



ACRILATO FD
Injectable acrylic



Partial
dentures



Complete
dentures

Introducing the Deflex automated denture injection system

- Pneumatic • Fully automatic
- 7 pre-configured and 7 free programs*
- Compact, easy to install, ease to use
- Flask pre-heats simultaneously during injection cycle



10% DISCOUNT ON YOUR FIRST PURCHASE

HOLANDEK LLC

6303, Blue Lagoon Drive, Suite 400 -Miami; Florida (33126)



deflex@deflexusa.com



www.deflexusa.com



protesisdeflex



ISO 9001:2008 ISO 13485:2012



2017-2018 Board of Directors

PRESIDENT

Lenny Herrera, CDT
The Surveyor Dental Arts
West Park
survdentsupp@aol.com

PRESIDENT ELECT

Tim Stevenson, CDT
Stevenson Dental Technology, CDL
Beverly Hills
tim@sdt-labs.com

TREASURER

Alexander Wunsche, CDT
Zahntechnique Inc., CDL
Miami
alex@zahnlab.com

SECRETARY

Dory Sartoris
DCS Dental Lab, Inc.
Jacksonville
dory@dcslab.com

DIRECTORS AT LARGE

David Giompalo, II, CDT
The American Dental Lab
Fort Myers
americandentalab0@gmail.com

Rob Greeson
Rob Greeson Dental Studio
Bonita Springs
robgreesondental@gmail.com

Douglas Jackson, CDT
Touchstone Dental Laboratory, LLC
Altamonte Springs
touchstonelab@cfl.rr.com

Bryan Johnson
Sterling Dental Arts
Merritt Island
sterlingdntlarts@gmail.com

Tryron Lloyd
Knight Dental Group, CDL, DAMAS
Oldsmar
tlloyd@knightdentalgroup.com

Chris Peterson, CDT
Peterson Dental Laboratory
Delray Beach
chris@petersondentallab.com

PAST PRESIDENT

Fernando de Leon
Precision Esthetics
Apopka
fernando@precisionestheticsinc.com

SUPPLIER REPRESENTATIVES

Nick Azzarra
DNS Consulting
Winter Springs
Nick@DNSConsultinggroup.com

Ramon Flores
Amann Girschbach North America
Charlotte
Ramon.flores@amanngirschbach.com

EXECUTIVE DIRECTOR

Jillian Heddaeus, CMP, IOM
Tallahassee
jillian@executiveoffice.org

SAVE THE DATE!



Southern States
SYMPOSIUM & EXPO

presented by **FDIA**

May 10-12, 2018

Renaissance Orlando Resort at SeaWorld

www.fdia.net | 850.224.0711

Florida Laws & Rules Course Register at www.fdia.net



The 1-hour
required course
on Florida Laws
and Rules is
available online.
Register today!

Are You Renewal Ready?

Current licenses will expire at midnight, Eastern Time, February 28, 2018. Registered Dental Laboratories are required to renew their license no later than midnight, Eastern Time, on February 28, 2018.

CONTINUING EDUCATION REQUIREMENTS

REQUIRED SUBJECT AREA	REQUIRED NUMBER OF HOURS	IMPORTANT INFORMATION
General Hours	13 to 15	Total general hours depends on the number of hours completed in the Laws and Rules course
Medical Error	2	Must be Board Approved
Laws and Rules	1 to 3	Course can be a minimum of 1 hour or up to 3 hours. Coursework must be based on laws and rules that govern dental laboratories and dental technicians.

The Department's Continuing Education Tracking system is powered by www.CEBroker.com

For more information, go to
<http://floridasdentistry.gov/renewals/>

Classifieds

CONTACT: Maureen Turner, Advertising Director
(850) 224-0711 advertising@fdia.net

CERAMIST: PROGRESSIVE LAB, EXCELLENT LEARNING ENVIRONMENT, FANTASTIC OPPORTUNITIES TO GROW

4Points Dental Designs has been providing fantastic smiles in beautiful downtown St. Petersburg, Florida since 2009. "Building value through values" is the cornerstone of our laboratory. For a technician, this means you'll be able to create amazing restorations with the patient in mind, rather than working to meet a high volume quota. We're a small but growing lab, striving to do things the right way for the right reasons. 4Points is led by a former AACD Accredited Technician whose experience includes 7 years in-house at the clinical practice of the Dawson Center. We are searching for a full-time ceramist who would like the opportunity to maximize their full potential with an above-average salary in a stimulating work environment. 4Points is located in the heart of downtown St. Petersburg just minutes from the white sand beaches of Florida's Gulf Coast. St. Petersburg has been listed in Best Places to Live (Coastal Living), America's Hottest City (Huffington Post), and Best Underrated Food Cities on the East Coast (USA

Today). The city is home to numerous microbreweries, innovative restaurants, and a growing art scene. MLS Soccer will soon be across the street, Major League Baseball is a 5 min drive from the lab, NHL, and NFL just a short hop across beautiful Tampa Bay. The successful applicant will have a minimum of 5 years of experience, be a supportive co-worker, and be passionate about continuing education and professional growth. Salary is commensurate with production and skill level. You bring the head, the hands, and the heart, we'll take care of the rest. We've always believed that if you love what you do, you'll do it with meaning and passion. Please email resumé to 4pteeth@gmail.com. All inquiries are kept strictly confidential.

HELP WANTED

Wise Dental Laboratory in beautiful Asheville, NC, is seeking a motivated dental technician to join their team. Wise Lab specializes in dentures & partials. Knowledge of all aspects of denture production is desired. Come enjoy the many activities the mountains of western North Carolina provide. Send resume to wisedental@att.net or call Mark Glass 828-252-3876.

When it comes to dental lab supplies we're the best at what we do.

Let us prove that to you.



Now through December 31st

GET \$50 BACK

ON ALL ORDERS OF \$500 OR MORE WORTH OF GARRECO PRODUCTS*

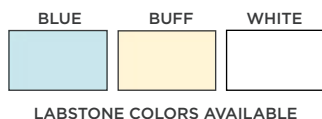
Our *focus* is on providing you with the highest quality and most consistent
GYPSUM · ABRASIVES · ACRYLICS · LAB SUPPLIES · AND MORE

LABSTONE TYPE III BASE STONE

Garreco is known in the dental industry for our superior consistency and our Labstone is no exception. We use only the best raw materials and test each batch to ensure it meets our quality standards.

Known as the "work horse" of the gypsum family, this popular base stone can be used for models and flasking, in the production of full or partial dentures, and in basing crown and bridge models.

- All-purpose model stone
- Designed for ultimate versatility
- Smooth, strong casts
- Low expansion (0.12%) for accuracy
- Setting Time: 11-14 min
- Water/Powder Ratio: 30ml:100g
- Compressive Strength: 8,500 psi
- Expansion: 0.12%



Haven't tried Garreco Labstone before?
New User Promotion:

NOW GET \$10 BACK ON EVERY 50LB BOX OF LABSTONE*

These Garreco specials are available through our Featured Florida Dealers



888-727-3016
www.amdsupply.com



Americana
Dental Inc.

800-336-1122 or 813-888-8889
www.americanadental.com



800-241-3743
www.atlantadental.com



727-515-9071
www.devinedentalsupplies.com

Promotions for end-users in US & Canada only. To receive Manufacturer's Rebate, customer must make qualifying purchase of Garreco products through one of these select dealers. Please allow 6-8 weeks for processing and delivery by mail of Manufacturer's Rebate. Limit one \$50.00 Rebate per customer; new Labstone users shall receive a rebate of \$10 per 50lb box of Labstone purchased during promotion. Customers may combine rebate promotions. Other restrictions may apply. Promotion ends December 31, 2017.



Setting The Right Priority — The Patient

Recently, Marc Wagenseil, DD, CDT, took time out of his busy schedule at Heritage Dental Lab LTD (Heritage Dental Centers) in Edmonton, Alberta, to chat with FDLA's *focus* about life in the laboratory, his belief that the key is to build the prosthetic to the patient not the other way around, and what he wishes everyone knew about dental technology.

Tell us a little bit about your lab.

I've been in business since 1992. I opened up my doors without any clients and said, here I am world. Now I've celebrated my 30th year looking after patients and dentists... I love what I do.



What are the three biggest things you wish people knew about dental technology?


That dental technologists are very trained people who are very dedicated to their job and to helping the patient. We build a product that fits in the human body and that fact comes with awesome responsibility. Who do you want to build it? Personally, my wish would be an educated and trained person to do so, thank you. There's a saying I work by and it is, "learn to build teeth to the patient, not the other way around." James Carlson, DDS, said that and he was right. The biggest thing for me is for people to understand that it matters who makes your teeth. It's more important than the cost because what matters is the quality of what goes inside your mouth—of course, just because it's inexpensive doesn't mean it's without quality—in the end, it always has to be about care and craftsmanship.

At the end of the day, we're making a better life for our patients and want the best for them.

What do you find most exciting about dental laboratory technology today?

The fact that I get to build something that stays in the human body and that I'm helping to improve the patient's chewing life and their quality of chewing life. That's a big deal.

What is the most important piece of advice you've gotten about succeeding in the dental laboratory industry?

Thinking back through my 30 years, the thing that has really impacted me now is the quote I gave you: Build teeth for the patient and not the other way around. At the end of the day, we're making a better life for our patients and want the best for them. The average adjustment rate for a denture is two to five times and we accept that as standard when we shouldn't. We are damaging tissue in the mouth. We can do better and that's why I'm out on the road training dental technicians about how we can do better. The key is to surround yourself with companies and people who share that philosophy and believe in quality craftsmanship and you'll be successful. 

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...



- Guaranteed Low Prices
- Same-Day Shipping
- Next-Day Arrival Anywhere in the USA
- Professional Lab Customer Service Agents
- We carry all major brands: Trubyte, Heraeus, Whip Mix, Keystone, Garreco, Snow Rock, Renfert, NSK, and many more!

Call 800.218.5447



Ask for Maggie, Indira, Edina or Zenaida

800.218.5447 • www.atlantadental.com
1650 Satellite Blvd • Duluth, GA 30097

A DELTA ZIRCONIA **FREE OFFER** FROM AURIDENT

**BUY 5
DISCS
GET 1
FREE**



**THE LOOK YOU WANT.
THE STRENGTH YOU NEED.**

- ANTERIOR
- PRESHADED
- TRANSLUCENT
- MULTILAYERED

**RECEIVE
A SIXTH
DISC
FREE**
when you
order 5 discs
of equal or
greater value.

**ORDER
NOW...**

to receive our new
LOWER PRICING and
FREE DISC Special Offer.
Call 800-422-7373

View our entire line at **aurident.com**

Cannot be combined with any other special offers or discounts. No limits on purchases. Offer expires 12-31-17.

*Aurident Delta Zirconia
products are available in
a large range of sizes.*



AURIDENT, INC.
Dental Alloys • Refining • Milling Services