

[<Back](#) [Print](#)

January 2006

from Gregory Tarantola DDS



Greetings!

Currently In Production: Multimedia DVD of the November 11th "Getting To Yes" seminar with Mr. Kirk Behrendt and Dr. Greg Tarantola. We will announce it in an upcoming newsletter!

Also in the works - the 2006 Case Study Guide update with 12 more fully documented cases.

Tarantola Dental Learning is dedicated to helping dentists and their dental team, specialists and technicians learn and apply the principles of comprehensive, masticatory system dentistry in a relationship-based environment. That means promoting and maintaining optimal health, function and esthetics of all the components of the masticatory system, that is, the TMJs, the neuromuscular system, the dentition, the periodontium and occlusal bio-engineering. And accomplishing this in a way that is appropriate for that particular patient, that is, with their interest and active participation.

Remember this formula for "Peace Of Mind" in your practice:

NP (or EP)+E+D+TP+TS+CA=PS

New Patient (or Existing Patient)+Examination+Diagnosis+ Treatment Planning+Treatment Sequencing+Case Acceptance=Predictable Success

Thanks to Charles W Martin, DDS, MAGD, DICOI, FIADFE
LeadershipMastermindCoaching.com for suggesting the enhancements to the above formula for success.

This month's inspirational quotes:

"We have too many high-sounding words, and too few actions that correspond with them."

Abigail Adams, 1744-1818, Former First Lady of the United States

"I never did a day's work in my life. It was all fun."

Thomas Edison, 1847-1931, American Inventor/Entrepreneur/Founder of

General Electric**Thought For The Month - Articles For You And Your Team To Talk About**

Past "Thoughts For The Month" Are Now Conveniently Archived For Easy Review

May you have a "Cheerful" 2006

I certainly hope that 2005 was a great year for you and that 2006 will be even better. As you consider your "New Year's Resolutions" think about this month's thought which is a story by Lee Ryan Miller.

We all have a choice on how we approach life. That choice affects us and those around us. And that choice has to be backed up with congruent action. Make the choice to be "cheerful".

WHO YOU ARE SPEAKS LOUDER TO OTHERS THAN ANYTHING YOU CAN SAY

As this month's quote tell us, make sure it's a choice that is fun and make sure your actions back up your 'high-sounding' words.

Peace, prosperity and happiness for 2006.

- [Go to the article.](#)

**SELF-STUDY LEARNING CDs**

Multimedia...interactive...interesting...effective AND now approved for AGD CE credit



COMPREHENSIVE, RELATIONSHIP-BASED DENTISTRY



**NOW PACE APPROVED
FOR 28 HOURS OF
ACADEMY OF GENERAL
DENTISTRY CONTINUING
EDUCATION CREDITS**

Enjoy the peace of mind and fulfillment of practicing comprehensive-care, relationship-based, masticatory system dentistry! These **SELF-STUDY LEARNING MODULES ON CD** are a great way to learn and implement masticatory system principles and to connect with the patient so they become an appreciative partner with us. The learning modules are very visual, the text is to-the-point outline style, and the photo table of

contents is linked to every page making it extremely easy to navigate and refer back to over and over. You'll find it a GREAT value...and of course, with a money-back guarantee!

Read what a participant has experienced!

"Early into owning my practice, I realized a great number of my patients had severe occlusal trauma, brought on by sleep stress and mis-alignment of occlusion of the teeth. It was through my search for occlusal technology that I met Dr. Tarantola. As I began to study and apply Tarantola Dental Learning's CDs, I began the long and tedious learning and applying process. Dr. Tarantola mentored me one on one and I started seeing great results. I began questioning the amount of time I was spending, even considered delegating the lab work and inserting of the occlusal guards to my assistant. However, my patients were very happy with the results of the occlusal guards because I was taking the time to insert the occlusal guards myself along with the lab work. Then the unexpected happened, my practice started a growth pattern as a result of all the extra time I had spent with the patients getting it right, you could tell a deeper relationship was developing. The patients began telling others! Isn't that the best marketing tool of all?. My only suggestion is get Dr. Tarantola's CD'S and do the time!." Dr. Clay Sligh, Kansas City.

We all learn in different ways. These modules are very visual and not a lot of text to read. If you are already in a course of study, you need these CDs to complement your learning.

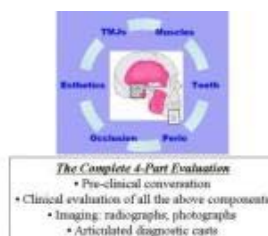
The Case Study Guide is a collection of 33 fully documented cases - an incredible tool at learning the everyday implementation and application of comprehensive, masticatory system dentistry.

For the month of January, we will continue to include the "Management Workbook" and "Vision Workbook" with the purchase of the Complete Set or Case Study Guide.

- [Click here to see the Learning Modules](#)
- [Click here to see the Case Study Guide](#)

JANUARY CLINICAL TIP

Past "Clinical Tips" Now Conveniently Archived For Easy Review



This 4-Part evaluation is the bedrock of the comprehensive, relationship based practice. I find that dentists understand its value on an intellectual level but often times question its value on a practical level. "Sure I do it on bigger restorative cases or if the patient is having a problem, but why take the time if they are healthy or not having problems?" is a question I have heard hundreds of times. Then in the same conversation, they express the need for more high quality patients and question how to attract them. Well the two go hand in hand. Not only that, if a comprehensive evaluation is done, there will be more discovery of abundantly needed dentistry and therefore a need for fewer new patients. And that is the point of this month's tip. There is an abundance of undiagnosed subtle problems that will go undetected and allowed to progress to more serious problems unless a complete exam and treatment plan is done.

It's The Subtlties That Make The Difference!

We're trained to find what's broken, decayed or diseased and fix it. As we get busier and busier, often times it is just the obvious problems that get noticed, talked about and treated.

The issues that may not be so obvious...the subtlties...may get overlooked. Often these subtlties are not discovered unless all phases of the exam are done. What may not be obvious

clinically may be very obvious on diagnostic casts, for example.

These subtlties often carry significant long term implications affecting comfort,

function, health and esthetics.

Uncovering and addressing these seemingly small and unimportant issues can be a tremendous service for our patients and very gratifying for us knowing that we are truly problem solvers (problem preventers) rather than just tooth fixers and disease treaters.

This month's case is a perfect example.

- [Click here to see the JANUARY CLINICAL TIP](#)

"ASK THE TECHNICIAN" **NEW SECTION**

Enhancing the dentist-technician relationship



Tarantola Dental Learning has the goal of helping dentists and their team of auxiliaries, specialists, technicians, etc. One of the suggestions received has been to include a section by technicians offering helpful articles and answering questions from our readers.

This month includes a tip from Anthony Calonico CDT, Removable Manager at Artistic Dental Studio.

Although implant dentistry is having a remarkable impact on the dentistry we do, it is not an appropriate approach for some of our patients for a variety of technical and biologic reasons. Patient circumstances, objectives and temperament also necessarily come into play.

Therefore, combination fixed/removable approaches are the most appropriate for some of these patients. Esthetically matching the porcelain with the denture teeth can be tricky. See how Anthony handles this.

He can be reached at anthony@artisticdentalstudio.net or 1-800-755-0412

Anthony has just completed his "Splint Companion", a multimedia CD that covers all aspects of predictable bite splint fabrication. See his new website at www.TheSplintCompanion.com

- [Click here to read this month's tip from "ASK THE TECHNICIAN"](#)

QUESTIONS AND COMMENTS SUBMITTED FROM DECEMBER'S CLINICAL TIP AND THOUGHT

Do you use T-scan for splints?

I find it especially helpful with splints. As I use the T scan more and more, I am still surprised at discrepancies in intensity and timing that I miss with even the thinnest films. And with splints and our goal of improving signs and

symptoms, subtle interferences can make the difference between success or not. I also find the learning curve with the T scan to be a little easier with splints because you have cusp tips hitting the flat splint and less chance of engaging inclines of the cusps.

How do you decide if equilibration alone will get the desired results or if other treatments such as crowns, orthodontics or orthognathics will be needed?

Once you have confirmed the condyles are seated in CR or ACP, the articulated casts have to be corrected. No matter how "off" it may seem, I'll start with reshaping. Then it becomes a matter of degree and clinical judgement. If a totally intact tooth needs all the enamel removed and dentin exposed, I would look towards orthodontics or possibly orthognathics. If the tooth has old deteriorating restorations and endo and/or crown lengthening is a good possibility anyway, then restorations would seem feasible. Usually you can figure out a way to get reasonable posterior stops. The tricky decisions involve anterior tooth to tooth relationships. Good posterior stops without a good anterior guidance is incomplete treatment. As in December's case, only minor tooth movement was needed to get an acceptable anterior relationship.

Do you ever decide NOT to do the equilibration and do the crowns in MI?

Let me start by saying that response to that question is Greg Tarantola's approach after 24 years of practice, observation and reflection. So, if for some reason equilibration was not in the plan for whatever reason, I personally would use an approach to fix the teeth that need it (because of decay, fracture etc.) that would allow easier future modification such as indirect composites and not porcelain. I would not do elective dentistry. I have found that doing porcelain or gold with uncorrected occlusal mis-engineering has a high chance of disappointments, and it may take years to manifest. Wear, mobility, migration, endo issues, vague discomfort, subtle TMD issues etc. I also would not attempt anterior esthetic treatment plans involving porcelain. I don't want predictability to be based on luck or adaptability. I have found through the years that a physiologic occlusion in CR (or ACP) gives the best possibility of long term success.

With this comprehensive approach, the definitive plan often is more involved than the patient, and even the dentist, may have initially thought. How do you deal with this?

I don't think you can ever go wrong being totally honest with the patient. If the exam was a co- discovery experience with the focus totally on the patient, they will know that you are being honest and the plan is in their best interest and not yours. Everyone's circumstances are different and in may often be the case that the investment of time and money may be beyond their capabilities at that point in time. So we need to roll up our sleeves and, together with the patient, figure out a way to sequence the plan over time or come up with a "Holding plan", as I heard Dr. Pankey say so many times. Compromise treatments I have found end up costing more over time.

email: gtarantola@gtarantoladds.com
phone: 3053728212
web: <http://www.tarantoladentallearning.com>

"TIE" IT ALL TOGETHER

[Forward email](#)

 **SafeUnsubscribe**®

This email was sent to gtarantola@gtarantoladds.com, by gtarantola@gtarantoladds.com
[Update Profile/Email Address](#) | Instant removal with [SafeUnsubscribe](#)™ | [Privacy Policy](#).

Email Marketing by



Gregory Tarantola DDS | 848 Brickell Ave | Suite 920 | Miami | FL | 33131