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from Gregory Tarantola DDS



Greetings!

Tarantola Dental Learning is dedicated to helping dentists and their team of staff, 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:

E+D+TP+TS=PS

Examination+Diagnosis+ Treatment Planning+Treatment Sequencing=Predictable Success

Thought For The Month

Catering to Baby-boomers:

1. Boomers will expect and even demand genuine, individual attention. Unlike their parents who passively accepted the fact that the doctor had an allotted seven minutes or less per patient, Boomers will expect to have all their questions answered and all their concerns addressed without feeling rushed. SET UP YOUR SYSTEMS SO YOU CAN OFFER YOUR UNDIVIDED ATTENTION!
2. Boomers are Internet-savvy and are used to having information available at their fingertips. Information and even access to services 24 hours a day on the Internet is a must. And while they're on the Net seeking an answer to a medical question, Boomers may visit an online health community to gather and exchange information with other Boomers who have similar health issues. The Internet can also help keep them connected with their healthcare provider - WHO HAD BETTER HAVE A WEBSITE AND USE E-MAIL
3. They will expect a broad choice of therapeutic options. They will look for product innovations and extensions that allow them access to additional services for an additional cost such as cosmetic dental procedures, implant treatment plans, etc. And



while they are willing to pay more to get more, they will absolutely draw the line at more paperwork. It's got to be easy and convenient. It must have value and it must be communicated. INVEST THE INTELLECTUAL TIME TO PERSONALIZE A PLAN AND SEQUENCE AND COUNSEL WITH CONFIDENCE.

4. They think for themselves and are less likely to take the word of authority figures than previous generations. They will look for information on their own, seek help from peers and find their own experts. Word-of-mouth marketing and the enlisting of expert "referral sources" may become even more important components of marketing and communication plans. RE-THINK THE IMPORTANCE AND VALUE OF THE "POST-TREATMENT CONSULTATION".

5. They expect to be active participants, at every level, in their own healthcare. They must have the information to do so and the collaborative attitude of their doctors to be part of the "team." THE SUCCESSFUL DOCTOR WILL BECOME A "PARTNER" IN THE BOOMER'S HEALTHY AND ACTIVE LIFESTYLE.

6. Because of their strong self-image and the fact that they view themselves as healthy and active - even as they face the limitation of aging - COMMUNICATIONS MATERIALS SHOULD REFLECT THIS SELF-IMAGE OF CAPABILITY, ACTUALIZATION AND DIRECTION.

UNIQUE LEARNING CDs



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 review and reference for those already practicing masticatory system dentistry and also a great starting point for those wanting to learn more about this approach. 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!

"I cannot thank you enough for the learning CD's. I was up until 3:00 one morning studying them. They are truly awesome!!" Dr. D.C.

- [Click here to see Tarantola Dental Learning](#)

JULY CLINICAL TIP



The importance of the diagnostic blueprint cannot be overstated. It puts the dentist "in the driver's seat" when treating patient's esthetic and restorative needs by visualizing all aspects of the new form and function in three dimensions prior to beginning the case...

(click the link below to read more...)

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

NEW! MANAGEMENT WORKBOOK



Whatever you can do or dream you can do, begin it. Boldness has genius, power and magic in it. Begin it now.
- Johann Wolfgang von Goethe, German Author (1749-1832)

We already have plenty of knowledge. Yes, we need to keep learning and reviewing to keep it fresh, but the tough part is putting this knowledge into action for the benefit of our patient, the prosperity of our practice and for our own peace of mind. Close the gap between what you know and what you do on a day to day basis. This workbook format allows you to think and reflect, plan, set goals, involve your team...AND GET IT DONE!

- [Click here to see the MANAGEMENT WORKBOOK](#)

QUESTIONS SUBMITTED FROM JUNE'S CLINICAL TIP ON RIBBOND-REINFORCED PROVISIONALS

Can some of the newer composite provisional materials be used with this technique?

I have found these materials to be rather brittle for longer span bridges. A material such as ColdPac has some resiliency and toughness making it more fracture resistant.

What about other methods of reinforcing the provisional such as metal or wire?

The advantage of the Ribbond is that the provisional material actually bonds to it. Obviously it does not bond to metal unless it is coated with some type of bonding agent, which becomes cumbersome. The color is an advantage, no metal color showing. Ribbond is thin so bulkiness of the provisional is less of a problem

How do you repair the provisional if it does fracture?

If it does fracture, the Ribbond holds the segments tightly together so at times it is hard to even tell it is fractured. To repair, use a disc to widen the fractured area but not disturbing the Ribbond. Flow acrylic into the area and let it self cure while in place in the mouth.

Can I put Ribbond in AFTER I have fabricated the provisional?

Yes, you can cut a trench in the provisional where you want the Ribbond and then flow acrylic resin around it. With this approach you can't "wrap" the Ribbond around the walls of the tooth preps which I believe adds to the overall strength.

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"TIE" IT ALL TOGETHER

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