

# Implant Dentistry for Dental Assistants

Do you ever wish you could duplicate yourself. When it comes to successfully implementing implant dentistry into your daily practice, a trained chairside assistant makes all the difference between a smooth day and a stressful one. From reassuring the patient that implants are the best treatment option, to properly setting up and cleaning the implant instruments, a well informed and confident assistant is necessary for the efficient delivery of both surgical and restorative procedures.

Of course, all the best implant training will go to waste unless patients understand and accept treatment. Every implant practice requires the front office staff to learn about implant dentistry in order to answer the inevitable questions that patients will have regarding implant procedures. Due to the costs and fears associated with dental implants, treatment plan presentations must be modified to maximize patient acceptance.

It is commonly know that doctors will spend a considerable amount of time and money pursuing their dental implant training. However, it is impossible to maximize the return on this significant investment unless the front and back office team are properly educated.

Our program is carefully designed to provide your team members with the most up-to-date information regarding treatment presentation and acceptance, surgical setup and assisting concepts, implant instrumentation, and patient followup. This way, your team will feel confident in recommending implant solutions to your patients and allow them to do their best in all phases of patient interaction and care.

Maximize your implant practice by educating your team and watch your implant practice take off in 2010. For more information, visit [www.modernimplantinstitute.com](http://www.modernimplantinstitute.com).

**The fee for this course is \$249 per attendee. I would like to pay this fee by:**

*Method of Payment*

\_\_\_\_\_ Check \_\_\_\_\_ Visa \_\_\_\_\_ MC  
\_\_\_\_\_ Amex \_\_\_\_\_ Disc

*Credit card charges will appear as "Modern Dentistry" on your statement*

*Card Number* \_\_\_\_\_ *Exp Date* \_\_\_\_\_

*Billing Address*  
\_\_\_\_\_

*Name on Credit Card*  
\_\_\_\_\_

*Cardholder Signature*  
\_\_\_\_\_

*Name of Attendee(s)*  
\_\_\_\_\_

*Please Choose One Course Date*

- April 16, 2010  
 October 15, 2010

*Office Phone*  
\_\_\_\_\_

*Office Fax*  
\_\_\_\_\_

*Special Needs (Please Describe)*  
\_\_\_\_\_  
\_\_\_\_\_

Fax this form to:

**630-466-7405**

Or mail to:

Modern Implant Institute  
769 Heartland Drive, Unit C  
Sugar Grove, IL 60554

