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To be a practical journal promoting excellence in implant dentistry by providing a full range of clinical, continuing education, practice management, and technology articles written by leading specialists.

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Technology and the team: **Sharing success**

We can all agree that the advances in implant dentistry over the last decade are climbing at logarithmic rates. These advances are the products of shared innovation and science.

As practitioners advance their practices, there are several factors that need to be considered and implemented to ensure consistent, successful outcomes — training, technology, and the importance of your team. We should remember that patients judge us by the function, esthetics, longevity, and value of our work.

Proficiency in providing the highest standard level in dental rehabilitation requires obtaining the appropriate legitimate training, then committing a lifelong dedication to developing and maintaining an armamentarium of knowledge. This applies to every area of dental and medical practice. Traditional divisions in dentistry are now replaced by the expectation that one's primary dentist "knows what's best" for them. The benefits of specialization in health care are proven and established. These should not be abandoned in the name of a titanium screw. We need to be careful of "tunnel vision" from titanium. The clinical mission is to restore comprehensive dental health. The implant is one option, another modality to implement when needed. The individual practitioner needs a level of knowledge to provide proficiency in his/her area of practice and an understanding of the benefits of involving and referring to the specialist. Commitment to continuing education is the key to maintaining this knowledge.

Implementing the technology that fits one's practice is also a must. Infusing appropriate technology provides a new basis for treatment planning predictable dentistry. These new standards continue to raise the bar of excellence. They include digital radiography, digital photography, digital scanning (scientifically based), refined implant design and bone grafting techniques, and cone beam CT scanning. These enable us to make available such advances as guided surgery, immediate temporization and restoration, and computer-assisted design for augmentation and reconstructive facial surgery. Having this technology available to one's team invites fiscal efficiency.

Most importantly, involving a team of specialists allows leverage of talent. In my practice, this team includes every specialty discipline of dentistry and medicine. Utilizing the specialist as a bail out for complications only provides the basis for sharing a failure. This is not a healthy approach. The responsibility of anticipating risk starts with the primary doctor and is shared with the treatment team. Clinical success is only realized through appropriate treatment planning and communication.

Additionally, your team involves everyone on your staff from front desk to assistant personnel. All of the staff must reflect our own philosophies of practice. Refining and redefining positionspecific duties and responsibilities encourages an advanced level of practice, one that coincides with what we are all striving for: excellence.

Implant dentistry has allowed our profession to provide so much more dental care than ever was anticipated, above anything else a level of esthetics, function, and comfort that allows more confidence for our patients. Proper training, appropriate technology, and a dedicated treatment team remain cornerstones for success in comprehensive dentistry.



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