

Rehabilitation:

In the Minimally Invasive Era



In a world of *minimally invasive dentistry*, how and why would you ever do **full mouth rehabilitation**?

How does a comprehensive, **esthetic dentist** establish an accurate treatment plan?

What information is crucial to aiding with **esthetic and functional determinants**?

Once the patient has accepted our treatment plan, *is there only one way or one end point?* Consider the roles of occlusal equilibration, composite occlusal stability, prototypes and tissue modeling to set-up these sometimes overwhelming cases. Once the dentition is stable, definitive restorations and maintenance will complete the **multi-phase care**.

Cases will be shown on natural dentitions and implants. Several no-prep veneers will be shown to remind us of our ethical obligation of nonmaleficence.

Learning Objectives:

- Learn how phased treatment will aid with simplifying complex cases and getting the patient to say “Yes”.
- What simple rules do you need to know about occlusion to stabilize the bite?
- How does esthetic and function lead to a predictable outcome?



Many dentists have a drawer full of models that they are not sure *what* to do with.

This **full day program** shares simple principles that enable the dentist to analyze the models to determine what is wrong for the patient, establish a good end-point and get the patient to that end point.



“My philosophy has always been the most conservative, least invasive, predictable restoration of teeth to normal form and function with tooth-colored materials.” ~ Dr. LeSage

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