

NVISALIGN® SYSTEM INTERNATIONAL PROGRAM

Protocols for therapeutic success & clinical management

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MÁSTER NTERNACIONAL NVISALIGN® WHERE diamonds ARE MADE

¿Apuestas por ti?



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PRESENTATION

Welcome to the Invisalign International Master.

Aligners have become an option increasingly demanded by our patients. For a long time, it was considered that only mild malocclusion could be treated. With the passage of time and the improvement of the system, moderate malocclusions began to be resolved successfully. However, it is the training and in-depth knowledge of the technique that will take you to the next level and allow you to treat 100% of patients with Invisalign

Dr. Ramón Mompell, will expose everything related to the protocols established by Invisalign as predictable protocols as well as how to solve severe malocclusions through the use of minimplants and Invisalign.

Dr. Kenji Ojima, will be responsible for teaching the resolution of severe malocclusions with or without extractions. He will also teach the part of Invisalign in combination with orthognathic surgery.

Dr. Mark Garlington, expert in Invisalign Teen and First will explain everything related to these treatments such as mandibular advancement and other orthopedic treatments. Dr. Francis Coachman, creator of Digital Smile Design, will reveal firsthand how to make the Digital Smile Design (DSD) and activate the option of DSD + Invisalign to make the collaboration with Invisalign.

To get Invisalign implemented in an integral way in its daily clinical practice, whether as a clinic owner or not, the training will be complemented by master classes taught by Dr. Jose Luis Mompell, oral surgeon and Pedro Morchón, specialist in management and address of dental clinics.

METHODOLOGY

The Invisalign program can be done in the INTENSIVE Option or in the SEMI-INTENSIVE option.

THEORETICAL SESSIONS

In the theoretical sessions you will learn the essential, basic, advanced and master protocols through the 25 protocols specially designed for this course following the treatment philosophy and predictability protocols of Invisalign. All theoretical training is based on clinical cases for better understanding and future application.

HANDS-ON

Different practices will be carried out during the program to get the necessary skills for its complete implementation in the clinic. The practices will be carried out in biomodels, animal models and real patients.

ON-LINE SESSIONS

Clinical updates in the Invisalign technique, through an on-line seminars.

CLINICAL ASSISTANCE

Assistance in the development of your own Clin-Checks and clinical evaluation of your own patient. Assistance in planning for the placement of Mini-implants, MSE (MARPE) or any other auxiliary technique taught during the course.



CHARACTERISTICS

- Modality:
- √ Theoretical-practical course. Hands-on in biomodels, animal models and real patients
- √Online Sessions: Clinical updates in the Invisalign technique, through on-line seminars.
- √Clinical assistance:: Assitance in the development of your own Clin-Checks and clinical evaluation of your own patients. Assitance in the planning for the placement of Mini-implants, MSE (MARPE) or any other auxiliary technique.

- Language: English with simultaneous translation into spanish.
- Venue: Madrid, Spain.
- Addressed to: orthodontists and dentist with orthodontic experience
- Course coordinator Dr. Ramón Mompell

SEMI-INTENSIVE

- · Schedule:
- **✓** SEMI-INTENSIVE COURSE:

Friday: 10am-6pm, Saturday: 9am-6pm

- Dates:
- **✓**SEMI-INTENSIVE COURSE:
- Section I: 11-12 October 2019.
- Section II: 8-9 November 2019.
- Section III: 29-30 November 2019.
- Duration:
- **✓** SEMI-INTENSIVE COURSE::

3 sections of 2 days each

Cost

4990 € (Reservation 1990€)

INTENSIVE

- Schedule:
- **✓INTENSIVE COURSE**

Sunday: 9am-8pm / Mon-Thurs: 9m-7pm

- Dates:
- **✓INTENSIVE COURSE**
- Intensive week: 3-7 November 2019
- Durationn:
- **✓INTENSIVE COURSE**

5 consecitives days teórico-prácticos.

Cost

4990 € (Reservation 1990€)

OBJETIVES

The **main Objective** is to provide the student all the necessary knowledge, both clinical and strategic to be able to **become a doctor with DIAMOND category**, capable of treating 100% of malocclusions through the use of aligners. Therefore, a program of 25 protocols has been developed, explained by Diamond doctors to guarantee and maximize the success.

At the end of the course, the student will be able to:

- 1. Know all the biomechanics of aligners with the Invisalign protocols.
- 2. **Identify treatment options** and appropriately **select** the patient.
- 3. Use the different protocols to simplify cases and obtain clinical success.
- 4. **Develop** an effective **methodology** to optimize the use of Invisalign software.
- 5. Simplify communication with Invisalign technician improving ClinCheck results.
- 6. Improve communication with the patient, through different tools
- 7. Optimize the time with each patient, applying the necessary protocols.
- 8. Incorporate Digital Smile Design (DSD) as a digital planning option.
- 9. Integrate Invisalign into your daily clinical practice.
- 10. Acquire knowledge to train auxiliaries.
- 11. **Use mini-implants** in combination with Invisalign. Differentiate the different types of miniplants, elements, sizes and difference between them. Use them for anchoring control in the absence of teeth, cases of extraction, retraction "in mass", protraction "in mass", cant of the occlusal plane, surgical Set-Ups, etc.
- 12. Analyze the evolution of the treatment, by studying different malocclusions.

Apply the knowledge acquired during the course, for the resolution of **dental** and **orthopedic** problems, both in **adults** and **children**, through the use of **Invisalign**

SPEAKERS





SPEAKERS







I. ESSENTIAL PROTOCOLS

GENERAL CONSIDERATIONS WHEN USING INVISALIGN

- Introduction to the International Aligners Course (IAC): INVISALIGN technique.
- 2. The meeting point between different ideas and **emerging technology.** ITero / 3shape intraoral scanner / Carestream, CBCT, 3D facial scanner, 3D printing, etc.
- **3.** Transparent or plastic orthodontics: differences between the INVISALIGN system, other aligners brands and the homemade (3D printed) orthodontic aligners designed by different softwares.
- 4. Basic and advanced nomenclature in plastic orthodontics: smartforces (conventional attachments, optimized attachments, powers ridges, precision cuts, pressure points, bite ramps); IPR, pontics, additional aligners, passive aligners, refinement, additional aligners, overcorrection, virtual jump, compliance indicators, eruption tabs and eruption compensators.

- 5. Invisalign website (Invisalign Doctor site -ID-): step by step to master the use and the advantage of each of its functions: case submission and my clinical preferences.
- 6. Protocols pre-established by Align Tech: Invisalign G3, G4, G5, G6 and G7

II. BASIC PROTOCOLS

TREATMENT SELECTION (EXPRESS, LITE OR COMPREHENSIVE),
FIRST AND CONSECUTIVE APPOINTMENTS, TAKING RECORDS AND
USE OF C.CHECK PRO

1. Treatment Selection:

- STEP 1: **SELECTING THE CASE** Can you treat everything with aligners? Simplemoderate and severe cases. How to AVOID MISTAKES with the case selection?
- STEP 2: **TYPE OF PATIENT**: Adult, Adolescent or Child (first)
- STEP 3: **TYPE OF PRODUCT:**Transparent Invisalign aligners or retainers (Vivera)
- STEP 4: **TYPE OF TREATMENT:**Express (old 17), Lite and Comprehensive
- 2. Basic and advanced use of Clin-Check Pro (CCP): proper management of all its functions. Accurate and sequenced planning of the treatment with Invisalign: Differences between CC web and CC Pro. Analysis of the functions of the CCP: evaluation sheet and treatment sheet.
- **3.** FIRST APPOINTMENT PROTOCOL:

steps to follow, role of each team member and aspects to enhance.

4. INITIAL RECORDS PROTOCOL:

making of minimum and advanced diagnostic records to start a case: 2D photographs / 3D facial scan; 2D / CBCT radiographs; silicone impressions / iTero intraoral scanner; communication with Digital Smile Design (DSD) Planning Center. Centric relationship or maximum intercuspidation.

- **SENDING COMMUNICATION RECORDS PROTOCOL:** sending records to INVISALIGN and DSD Planing Center: preparation of shipments, management of the same and organization of the clinic. Auxiliary functions within the process.
- 6. Basic marketing in the clinic: experience for new patient and loyal patients.

- 7. CLINCHECK REVIEW PROTOCOL: selection of conventional or optimized attachments, study of the position of the attachments, study of the position of the attachments, predictable and unpredictable movements, analysis of the IPR and the spaces. Superposition with the initial position and with the possible treatment proposed by DSD planning center. Number of stages: how to reduce them and remain predictable. Problems and tricks.
- 8. Effective & efficient communication guides with Invisalign technician. Rules, nomenclature and tricks to facilitate and speed up communication with them.
- PROTOCOL: manual modifications of the treatment plan: changes in the position of teeth, attachments and precision cuts, correct distribution of IPR and spaces, modifications in the shape of the arch, etc.
- 10. EVALUATION PROTOCOL, CEMENTED ATACHES AND IPR. Instructions for the patient.
- **11.** CHANGE ALIGNERS PROTOCOL. 10/14/7/5 days
- **12.** CHECK-UP APPOINTMENT **PROTOCOL**: control and evaluation of treatment success: supervision and superposition of different intraoral scanners (STL) of the same patient. Interval between appointments.

13. PROTOCOL FOR REFINEMENT / ADDITIONAL RECORDS. Registration in centric relation or maximum intercuspidation.

14. RETENTION PROTOCOL: recommended type of retention. Intervals of time between appoinments.



III. ADVANCE PROTOCOLS

TRANSVERSAL, SAGITTAL, VERTICAL & ASYMMETRY CORRECTIONS EXTRACTIONS AND SURGICAL CASES

- A. Correction of TRANSVERSAL problems of dental, dentoalveolar & skeletal origin
- Growing patients: cross bites and scissor bites. Choice between Invisalign first, slow palatal expansion (SPE) or rapid palatal expansion (RPE) associated or not with mini-implants. Advantages and disadvantages.
- 2. Patients without growth: cross bites and scissor bites. Rapid palatal expansion associated with mini-implants (MARPE). Advantages and disadvantages.
- 3. PROTOCOL RPE / MARPE + INVISALIGN + DSD. MARPE installation in combination with Invisalign + DSD. Expansion, retention, transition and finishing. Development of ClinCheck in a predictable way. Ideal time for refinement. Advantages and disadvantages.
- 4. Invisalign and airways. Effects after correction of the transversal problem.

- **B.** Correction of SAGITTAL problems of dental or skeletal origin.
- Growing patients (CLASS II & III):
- Skeletal Class II with mandibular origin: INVISALIGN PROTOCOL TREATMENT MANDIBULAR ADVANCEMENT ITMA. Stages, advantages and disadvantages, IPR, tricks and complications.
- Dental Class II: use of Class II
 elastics. Duration, moment of use, force,
 anchor teeth, etc. Importance or not of
 the extraction of third molars. Virtual
 jump. PowerRidges and Precision Cuts.
- Skeletal Class III with maxillary origin: INVISALIGN PROTOCOL + MARPE + FACIAL MASK / MINIPLATES. Stages of expansion, retention, maxillary protraction and finishing. Development of ClinCheck in a predictable way. Ideal moment of refinement. Advantages and disadvantages. Special attention in dolichofacial patients.
- Dental Class III: use of Class III elastics. Duration, moment of use, force, anchor teeth, etc. Importance or not of the extraction of third molars. Virtual jump. PowerRidges and Precision Cuts.

- 2. Patient without growth (CLAS II & III):
- Dental Class II with maxillary origin: SEQUENTIAL DISTALIZATION PROTOCOL + AESTHETIC PRINCIPLE. Distalization 1/2. Application of the aesthetic principle.
- Dental Class III. Distalization of the mandibular arch or protraction of the maxillary dental arch. Combination with mini-implants.
- Skeletal Class II and III. Introduction to surgical cases with INVISALIGN.
- **C.** Correction of VERTICAL problems of dental, dentoalveolar and skeletal origin.
- 1. Open bite. ANTERIOR OPEN BITE CLOSURE PROTOCOL. Attachments selection. IPR planification. Use or not of mini-implants. Posterior intrusion or anterior extrusion. Selection of the arch to be intruded in the posterior sector and selections of the arch to be extruded in the anterior sector. Control of the occlusal plane. Retention.
- **2. Deep bite.** *PROTOCOL FOR DEEP BITE CORRECTION.* Application of the G5 Protocol. Attachments selection. IPR programming. Use or not of mini-implants. Extrusion of molars or intrusion of anterior sector. Choice of the arch to be extruded in the posterior sector and intruded in the anterior sector. Control of the occlusal plane. Retention.

- **D.** Correction of VERTICAL problems in COMBINATION with SAGITTAL problems of skeletal and dental origin.
- 1. Orthopedic treatment of growing patients and adults. PROTOCOL IN ANTERIOR OPEN BITE CASES + SAGITTAL PROBLEM OF CLASS II OR III. Correction of the facial aesthetics using the dentition as a tool: Molar Intrusion with Mini-Implants + Invisalign. Mandiublar anterorotation. Premature contact of incisors. Dental distalization of the lower arch or maxillary skeletal protraction. Occlusal plane control and mandibular plane.

E. Correction of asymmetries, complex and surgical cases

1. Asymmetrical movement: Midline, Correction of the occlusal plane Cant and Control of Chin Point by Invisalign + Minimplants. Selection of attachments. IPR programming. Retention.

2. Cases of extraction:

- Upper extractions. PROTOCOL IN CASES OF UPPER EXTRACTIONS.
 Application of invisalign G6.Class II elastics. IPR needed. Time of the extraction. Retention.
- Lower extractions. *PROTOCOL IN CASES OF LOWER EXTRACTIONS.*Application of invisalign G6.Class III elastics. IPR needed. Moment of the extraction. Retention.

3. Surgical cases:

- Class II with mandibular origin. Extraction or Lower sequential distalization. ClinCheck planning. Communication with the surgeon Choices of attachments and IPR. Retention. Advice for the success of the treatment.
- Class III with mandibular and maxillary origin. Extraction or sequential distalization. ClinCheck planning. Communication with the oral surgeon. Choices of attachments and IPR. Retention. Advice for the success of the treatment.
- Vertical problems isolated or in combination with sagittal and transverse problems. ClinCheck planning. Communication with the oral surgeon. Choices of attachments and IPR. Retention. Advice for the success of the treatment.
- Surgical cases in combination with extractions.
- PROTOCOL OF INVISALIGN + SURGERY FIRST.
- PROTOCOL FOR IMPACTED TEETH: impacted canines, impacted second molars, etc. Use of Mini-implants. ClinCheck planning. Ideal moment for refinement.



IV. MASTER PROTOCOLS

DSD COLLABORATION, INVISALIGN FIRST, MINI-IMPLANTS,

ACCELERATED MOVEMENT, INVISALIGN + PERIO / RESTORATIVE /

ORAL SURGERY AND MARKETING

- 1. Invisalign FIRST. Advantages and disadvantages. Product characteristics. Limitations.
- 2. Advanced Auxiliary Techniques, Use of Mini-implants for correction of transverse, sagittal and vertical problems. Reduction of treatment times. Clinical application of Mini-Implants and biomechanics with aligners: considerations of anchorage, absence of teeth, cases of extraction, retraction "in mass", protraction "in mass", inclination of the occlusal plane, surgical Set-Ups, etc.
- 3. Invisalign and the periodontal patient. Clinical cases. Precautions. Speed in the treatment. *PERIODONTAL PATIENT PERFORMANCE PROTOCOL*
- 4. Invisalign in combination with restorative cases. Bridges, crowns and veneers. Importance of Digital Smile Design. DSD + Invisalign communication. PROTOCOL INVISALIGN + RESTORATIVE. Communication with restorative doctor. ClinCheck planning
- **5.** Invisalign in combination with oral surgery. 3D bone reconstructions in mandibular atrophies, sinus lift, implants, grafts, etc. Communication with the surgeonClinCheck planning. **PROTOCOL INVISALIGN + ORAL SURGERY**

- 6. Invisalign + accelerated movement.

 ACCELERATED USE + INVISALIGN
 PROTOCOL Corticopuncions,
 corticotomies, lasers or
 photobioestimulation. Times of use.
 Advantages and disadvantages. Can we
 save time in treatment by using these
 procedures?
- **7.** Advanced marketing to turn Invisalign into the choice of treatment for both adult patients and Teen patients.
- 8. Clarifications, comments and peculiarities about Teen and First patients. Compliance indicators. Eruption tabs. Compensators of eruption.
- 9. Commercial strategies for private clinics to incorporate Invisalign in the most efficient way to the daily practice.

HANDS-ON

I. ESSENTIAL HANDS-ON

HANDS-ON 1: RECORDS WITH INTRAORAL SCANNER ITERO
VS CONVENTIONAL IMPRESSIONS.

Intraoral scanners will be performed with the ITERO system in real conditions.

You will learn to scan complex structures such as edentulous areas, third molar area, periodontal teeth or extensive amalgam restorations.

II. BASIC HANDS-ON

HANDS-ON 2: INTER-PROXIMAL REDUCTION (IPR)

Different types of IPR will be carried out, both in animal models, and in biomodels specially prepared with different types of crowding to be able to master the IPR technique. Different types of IPR systems from manual system to rotary system will be tested.

HANDS-ON 3: ATTACHMENTS PLACEMENT

Attachments will be placed in animal models, to know the perfect technique and thus avoid the debonding of the same. Full arch / split arch.

HANDS-ON 4: MANUAL ADJUSTMENT OF ALIGNERS.

Student will cut, adjust and add pressure buttons to the aligners to know the different options that can be made for a better optimization of the system in some cases.

III. ADVANCE HANDS-ON

HANDS-ON 5: HOW TO DO A CLIN-CHECK EXCLUSIVELY WITH DENTAL MOVEMENT USING 3D CONTROLS CLIN-CHECK PRO

A full Class I / II / III CC will be performed using the 3D controls. CC technique in two steps.

HANDS-ON 6: HOW TO DO A CLIN-CHECK INCLUDING DENTAL AND SKELETAL MOVEMENTS USING 3D CONTROLS CLIN-CHECK PRO.

A complete CC of Class II will be made by mandibular advancement and class III by maxillary protraction using the 3D controls of the Clin-Check Pro. CC technique in two steps

IV. MASTER HANDS-ON

HANDS-ON 7: PLACEMENT OF MINI-IMPLANTS.

The student will place Mini-implants in animal model and biomodels to know the exact position of them and get accustomed with Invisalign mechanics complemented with Mini-implants.

INSCRIPTIONS

TO ENROLL IN THE COURSE YOU HAVE TO PRE-REGISTER FROM THE WEB

(WWW.INVISALIGNCOURSE.COM)

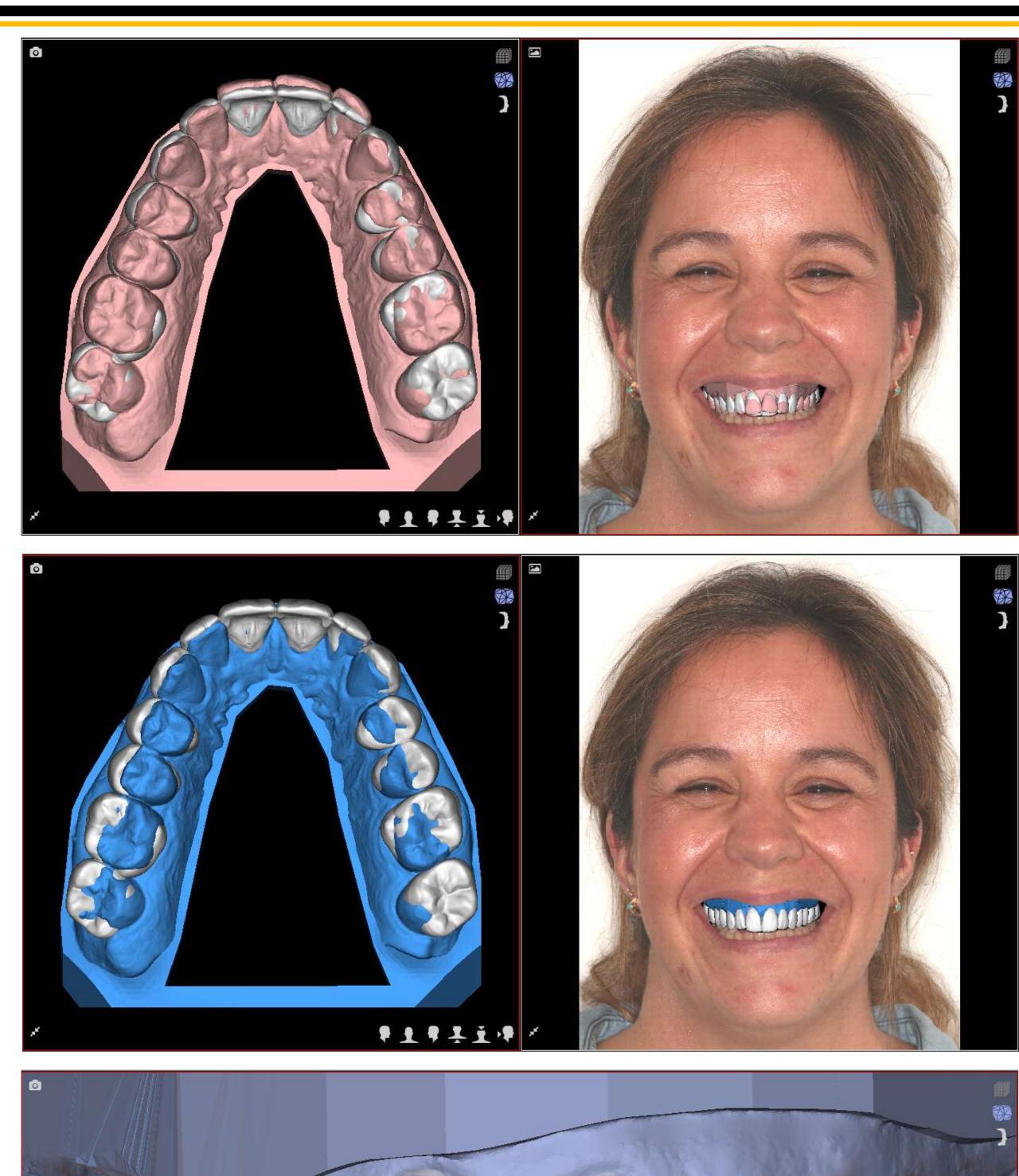
YOU WILL RECEIVE AN E-MAIL TO PROCEED TO MAKE
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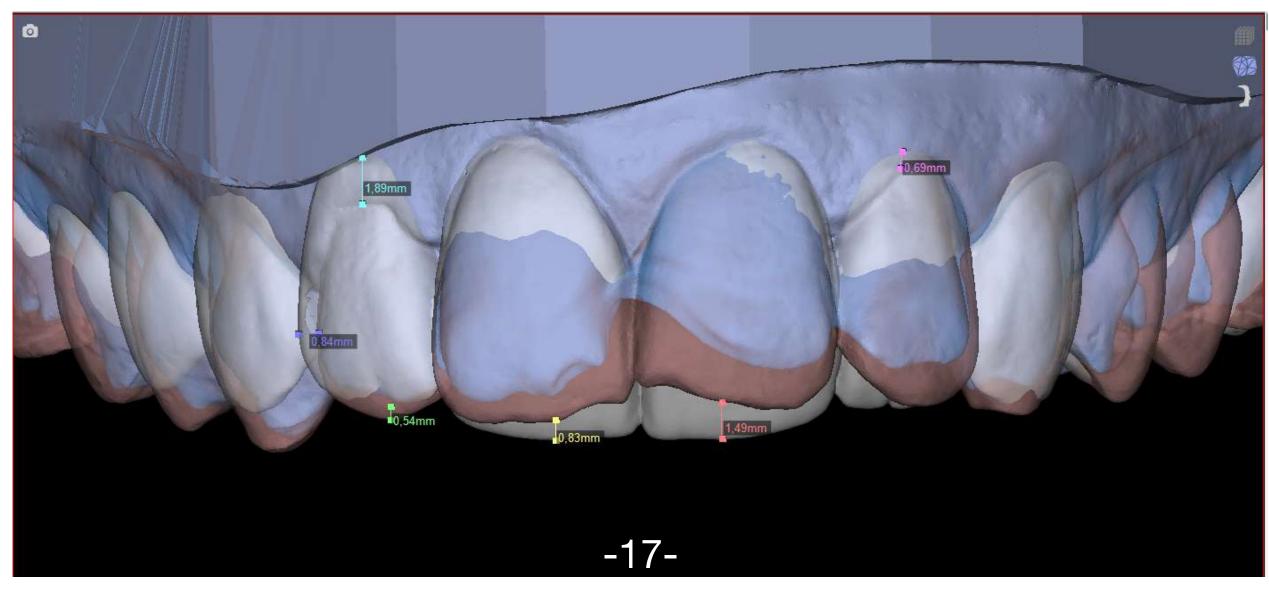
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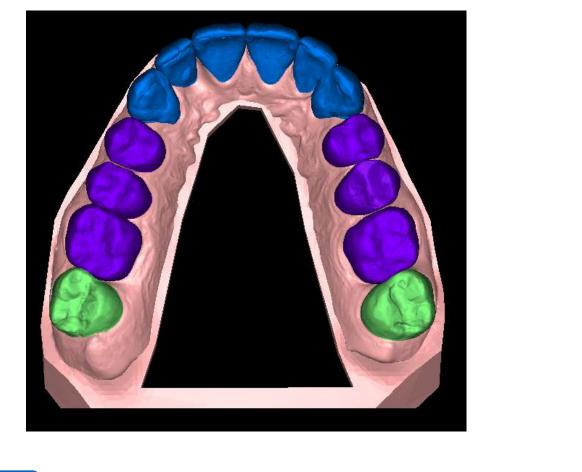
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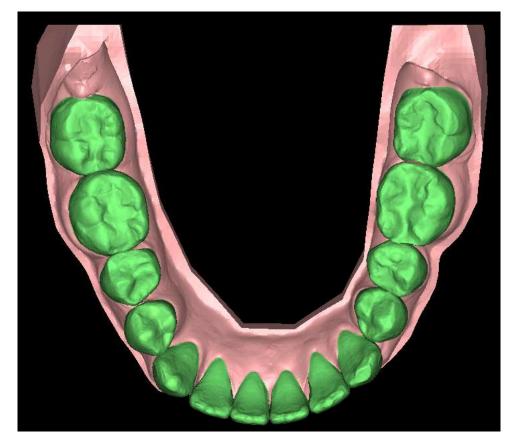
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Treatment Color Code





Ortho + Restorative

Restorative

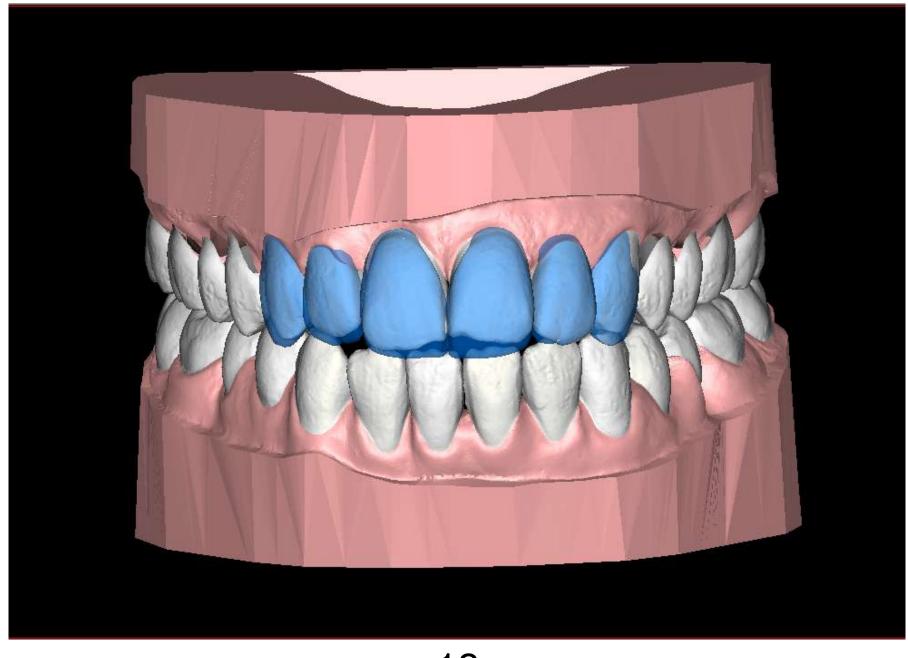
Ortho + Crown Lengthening

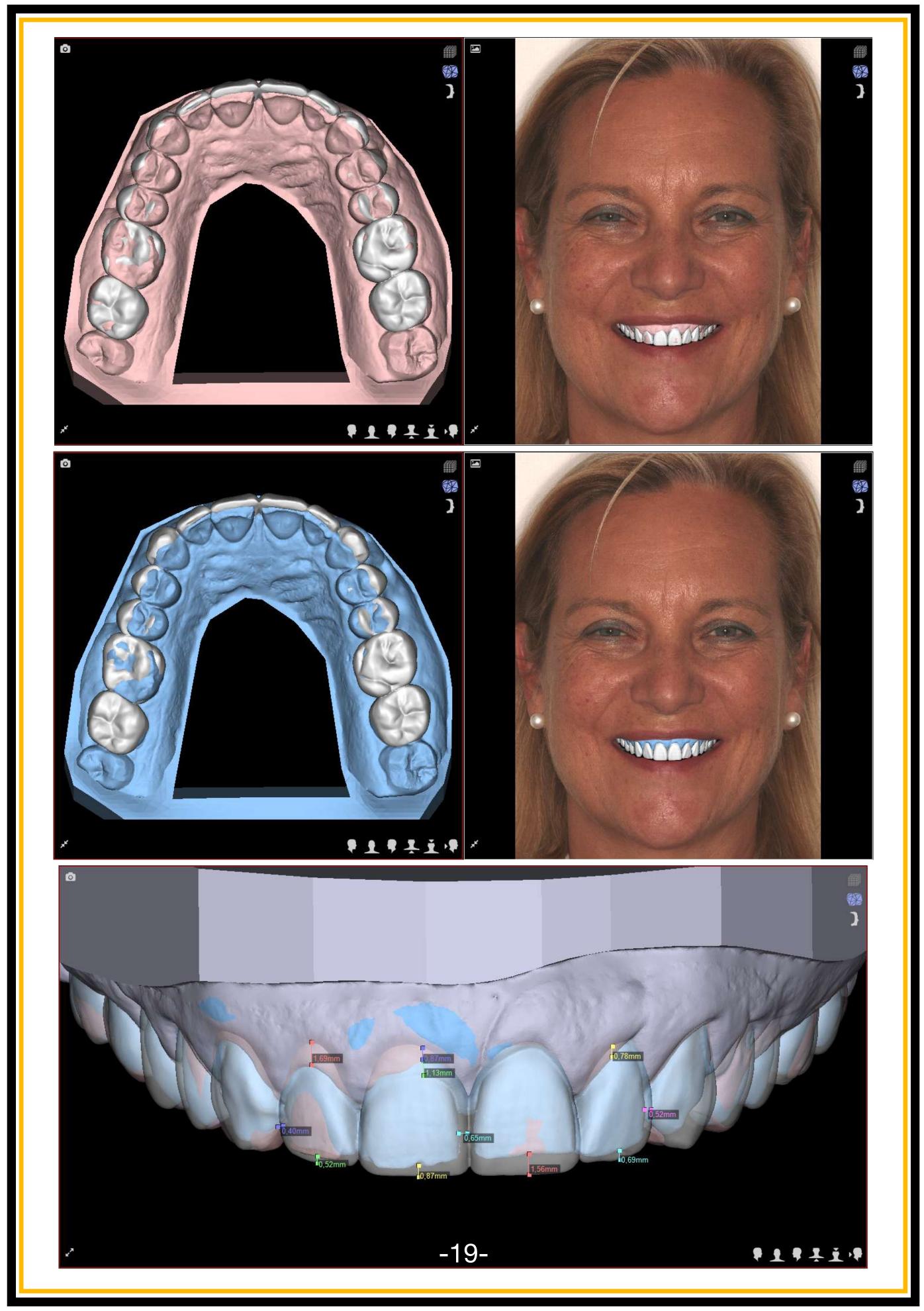
Ortho

Nothing

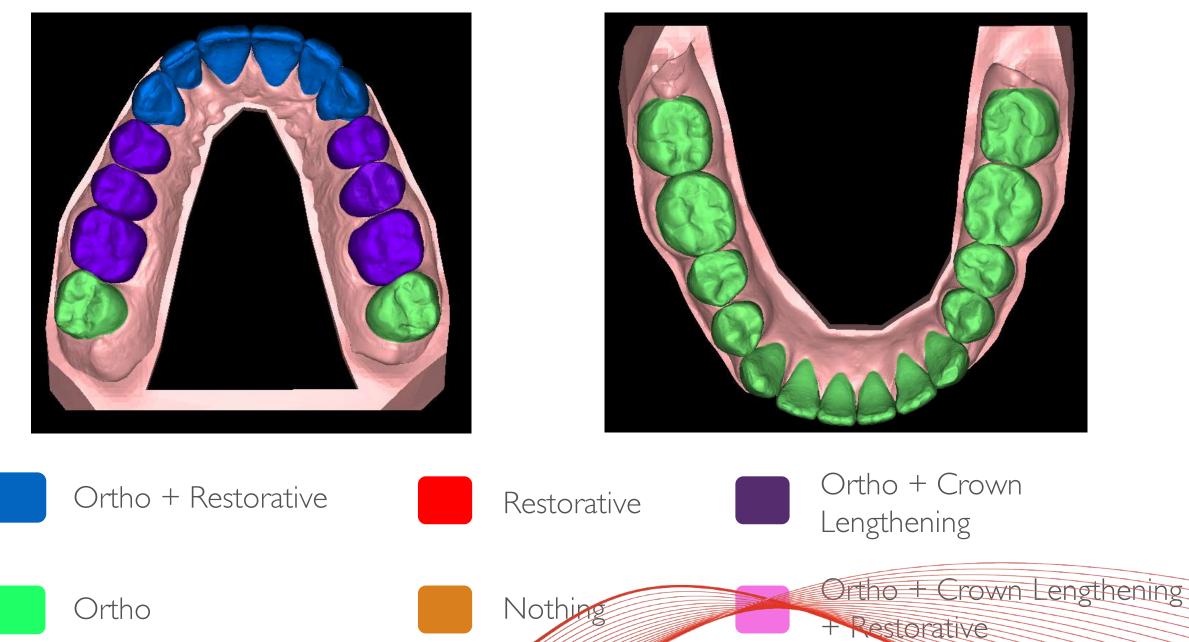
Ortho + Crown Lengthening + Restorative

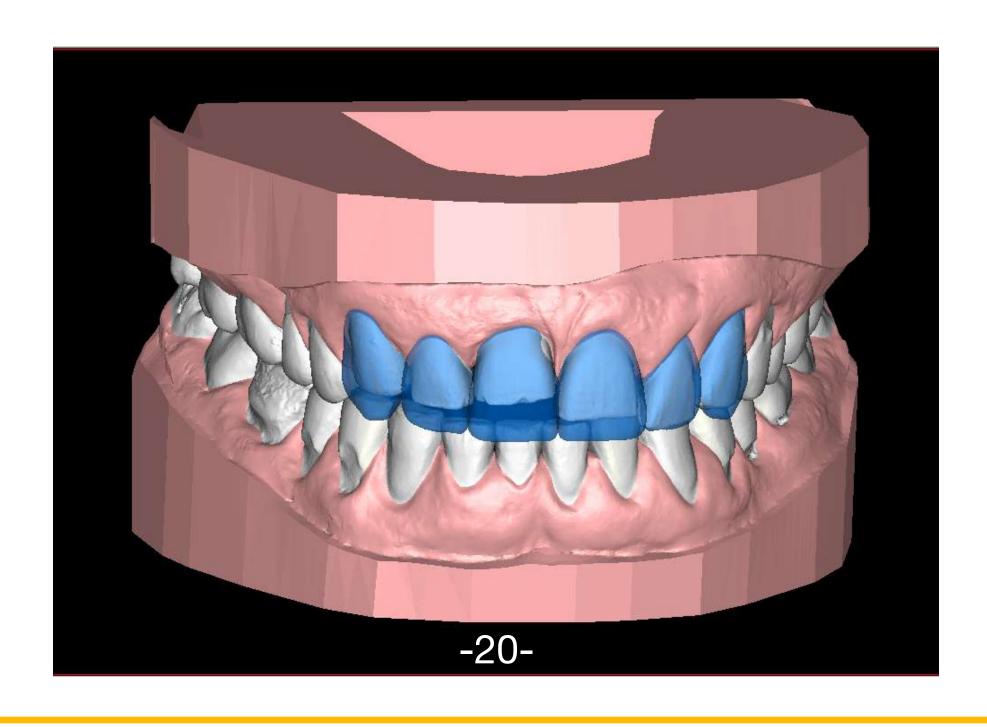
PEANING CENTER

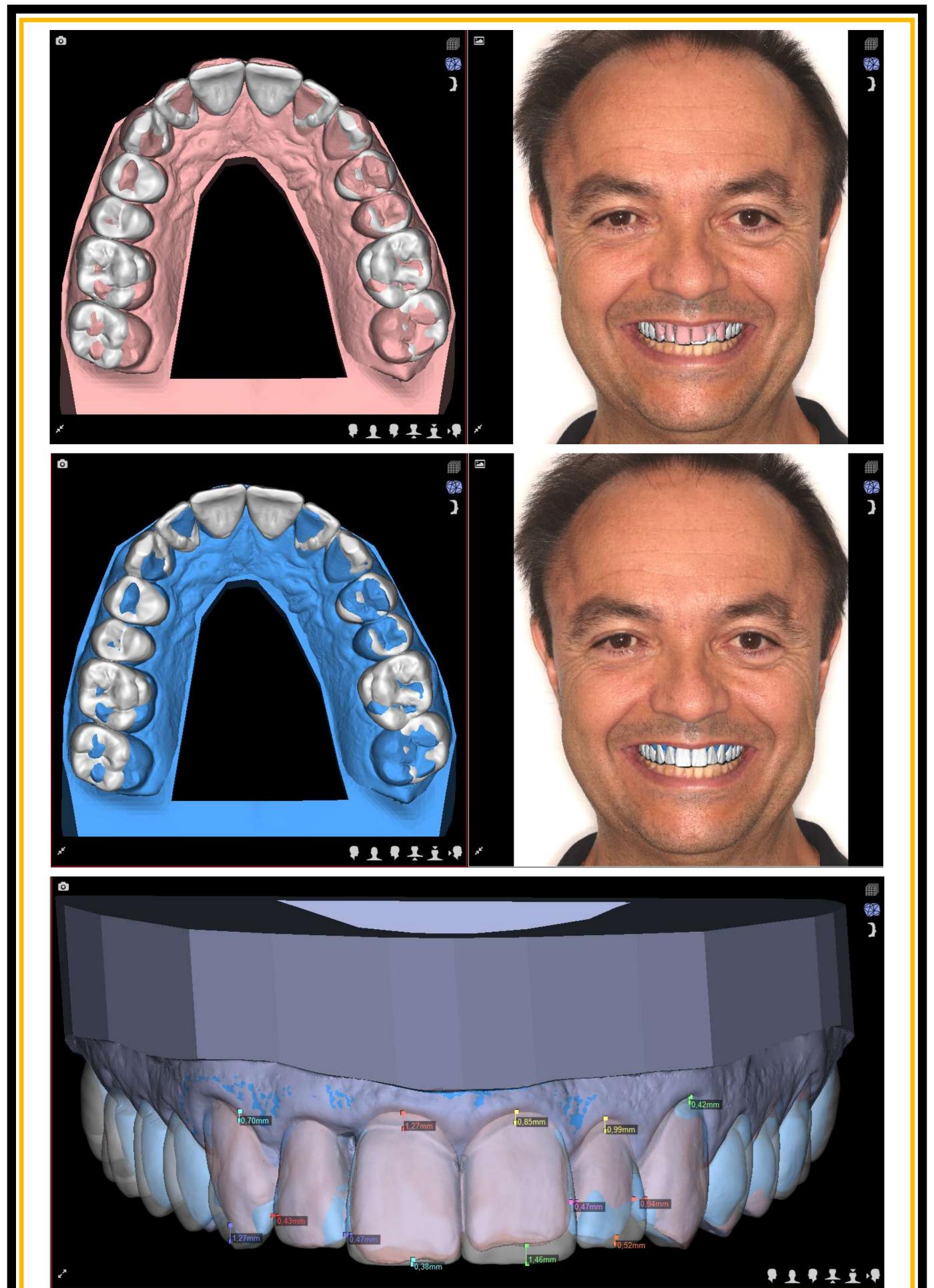


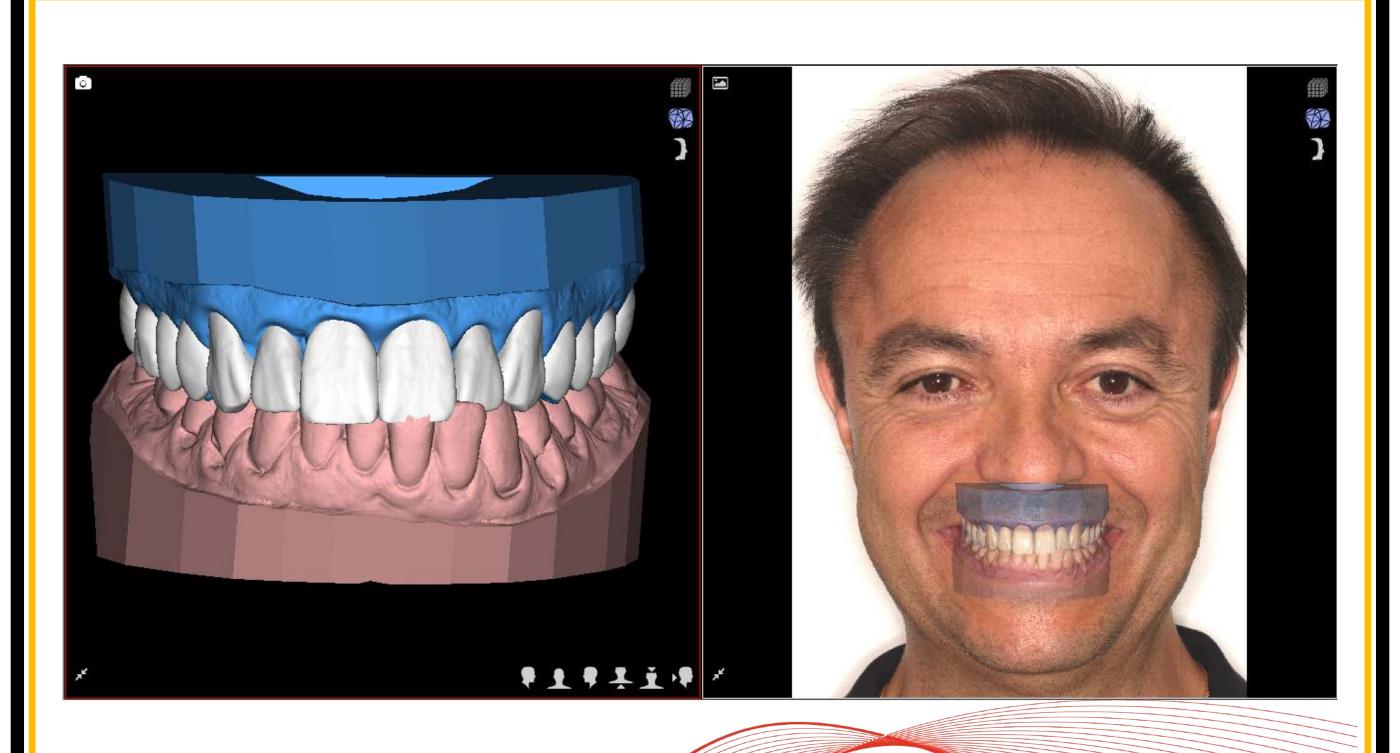


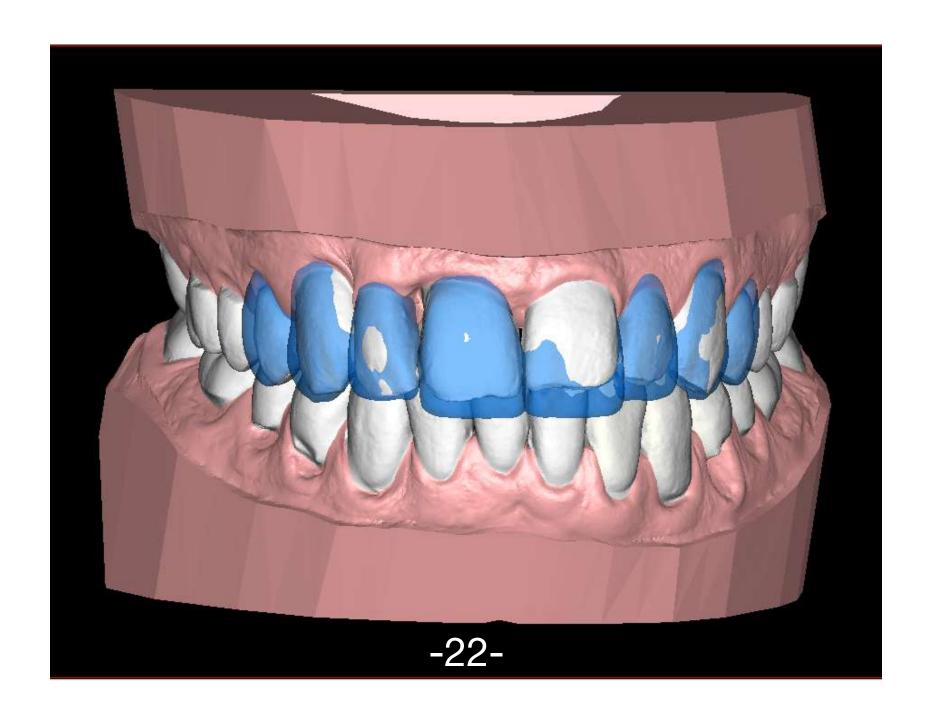
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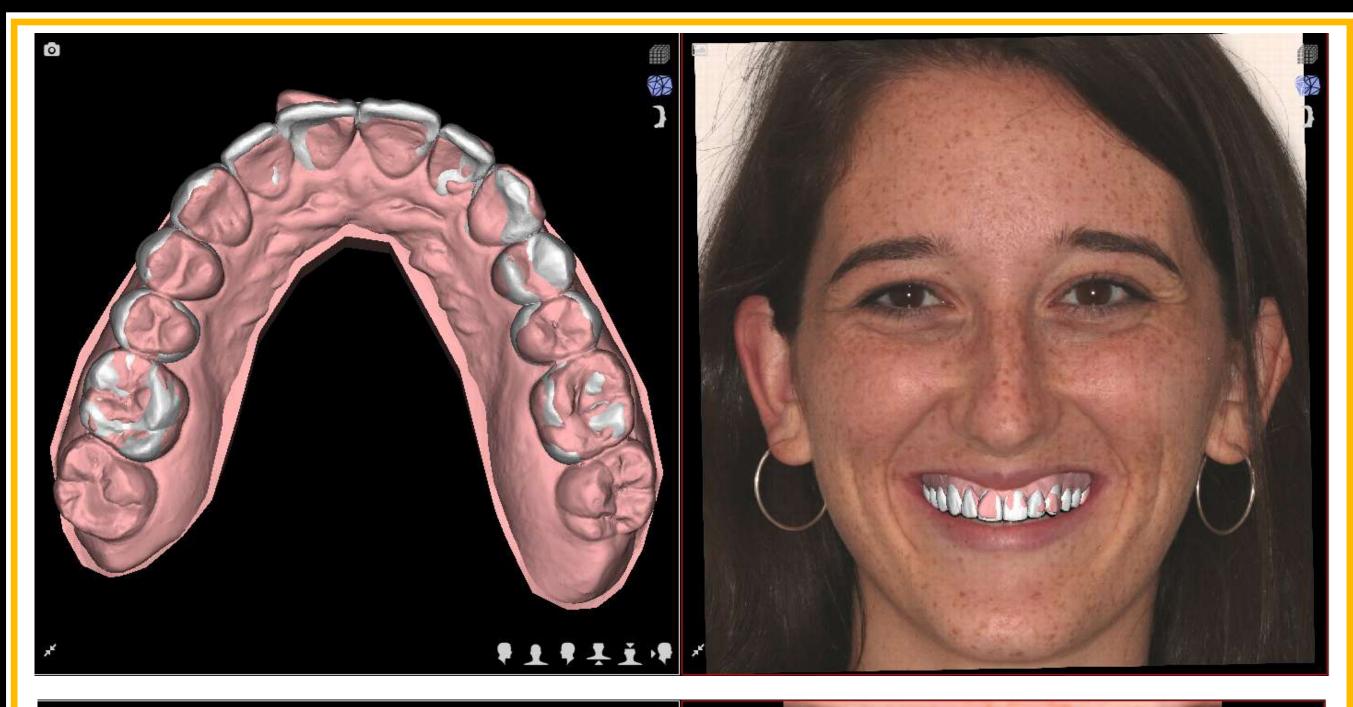


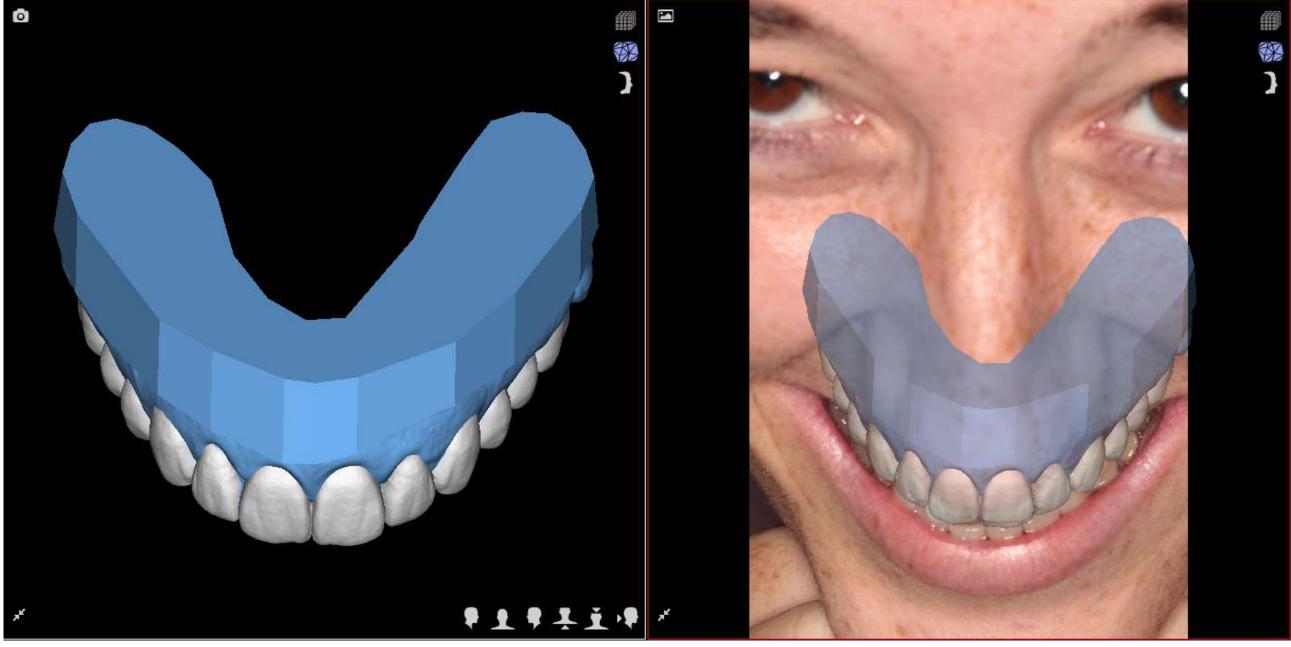


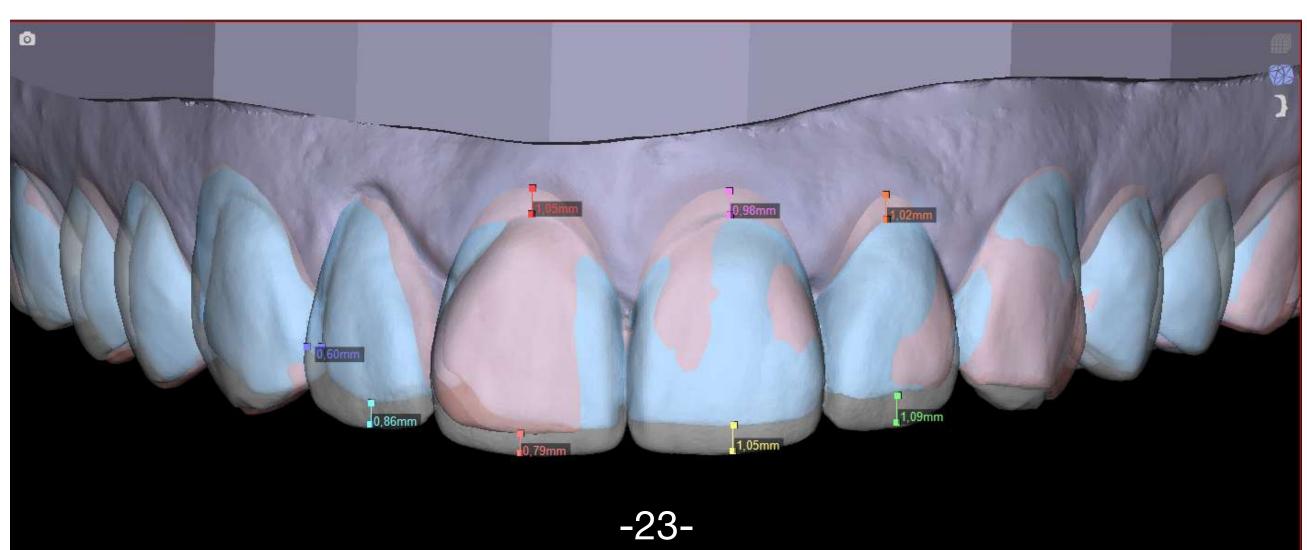


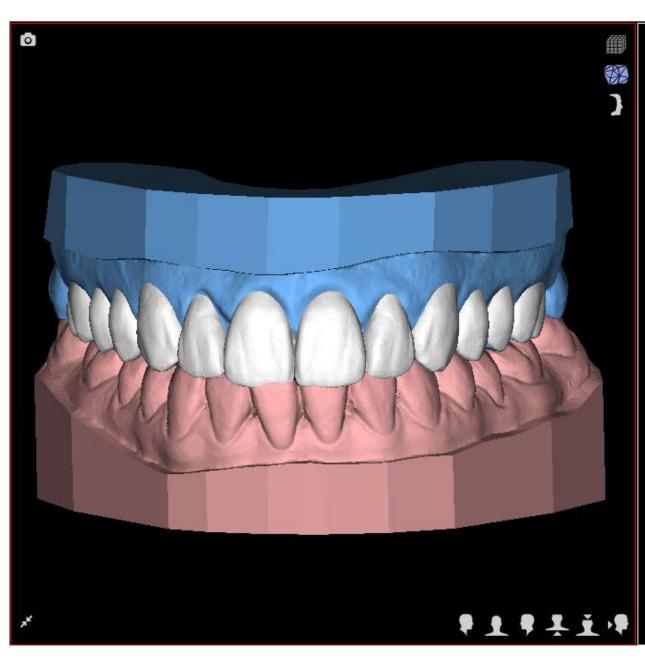


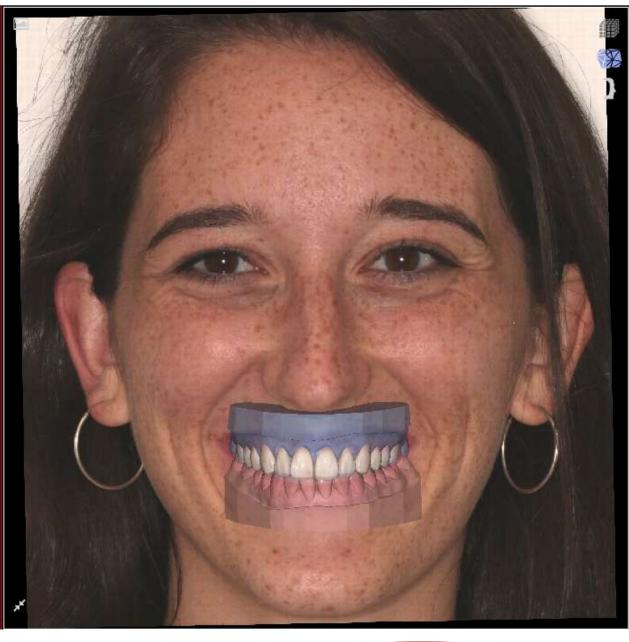


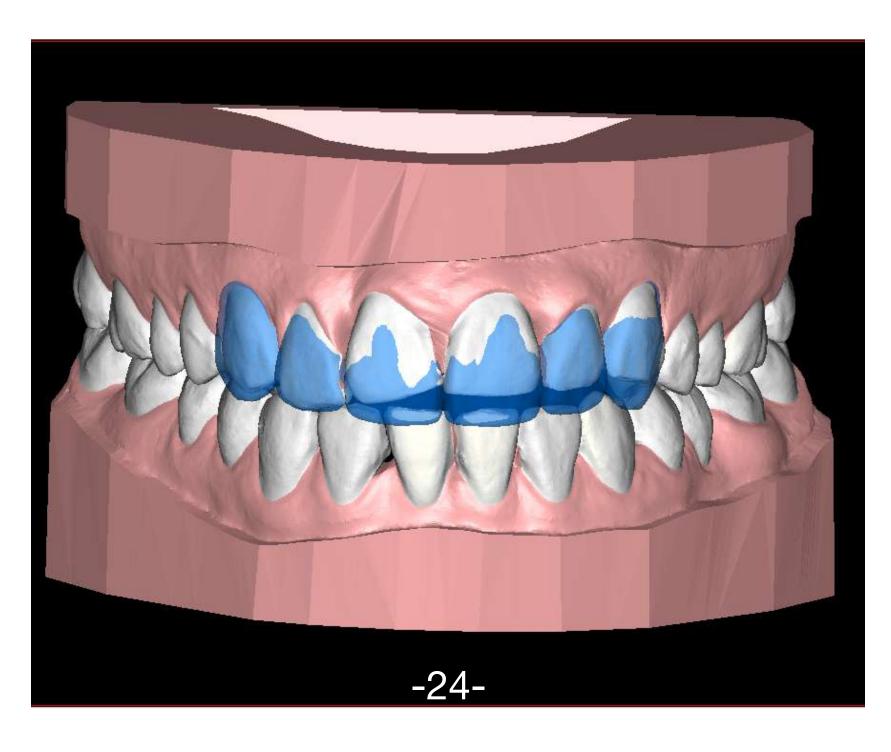


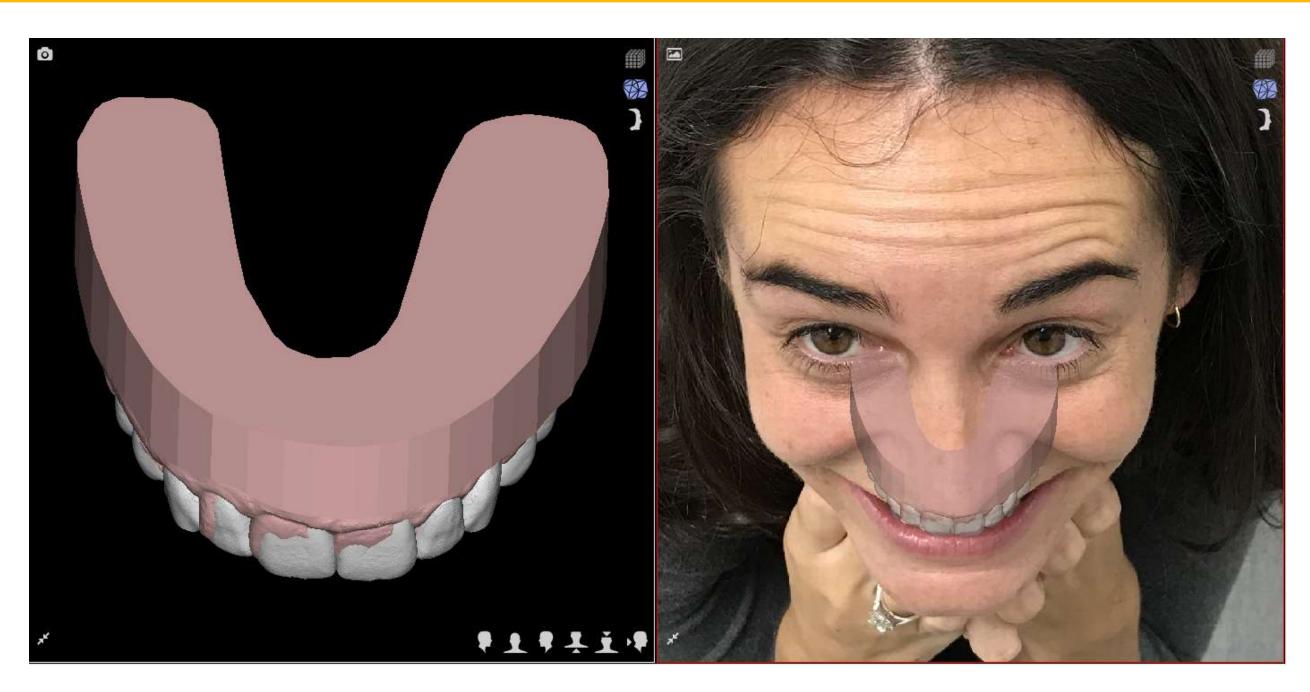


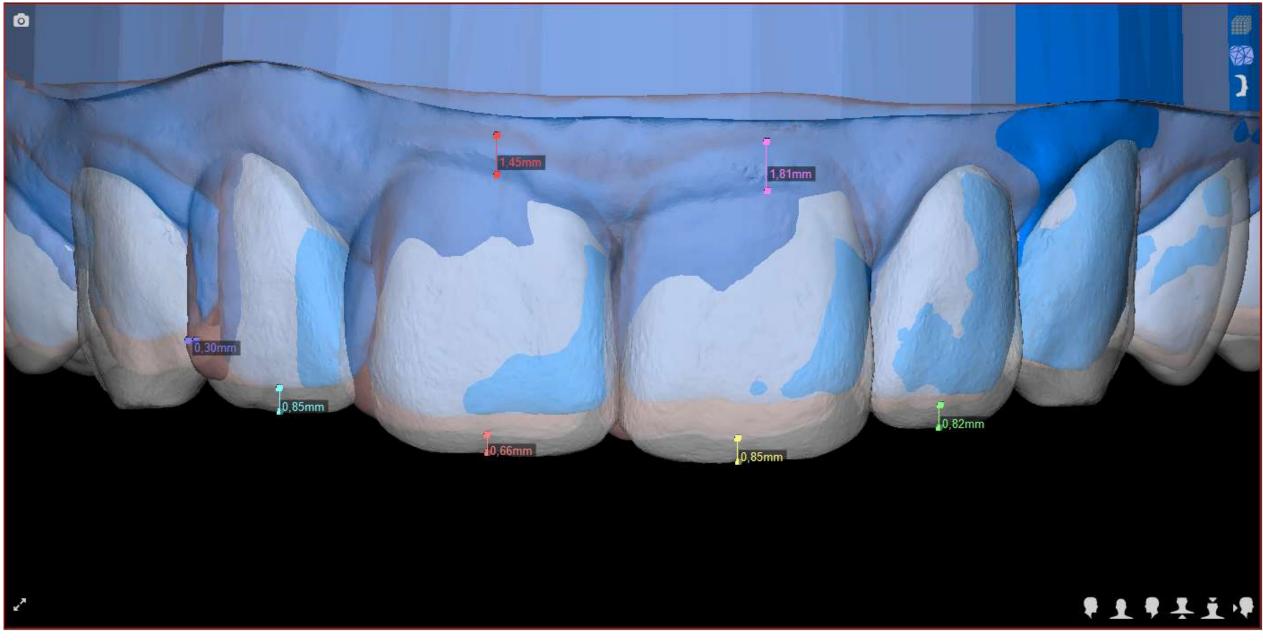


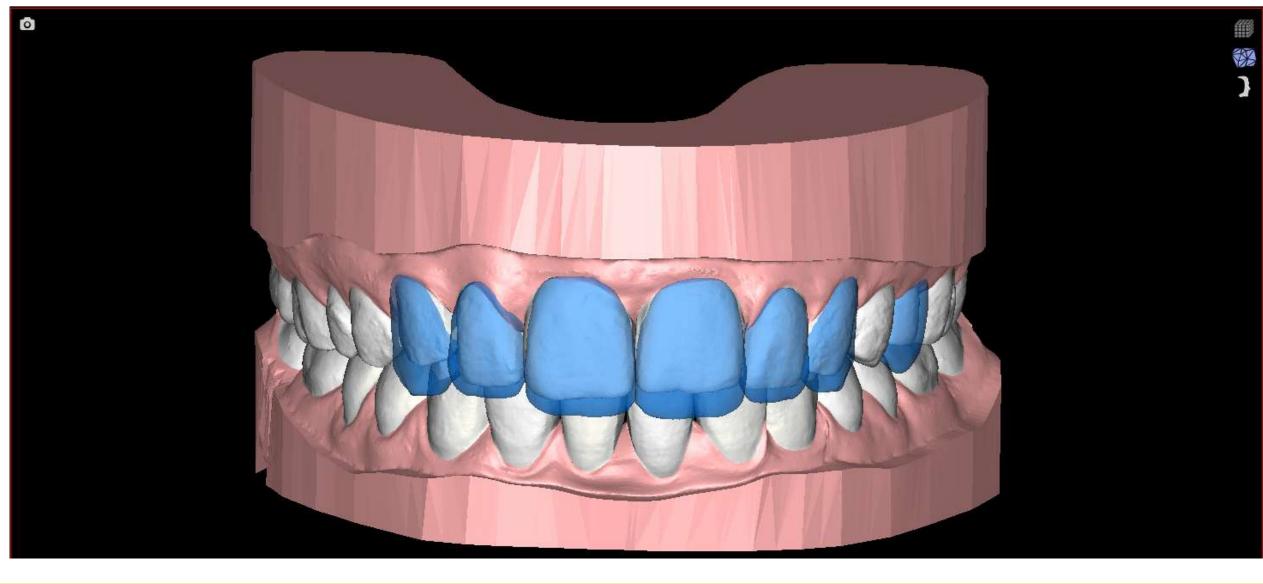


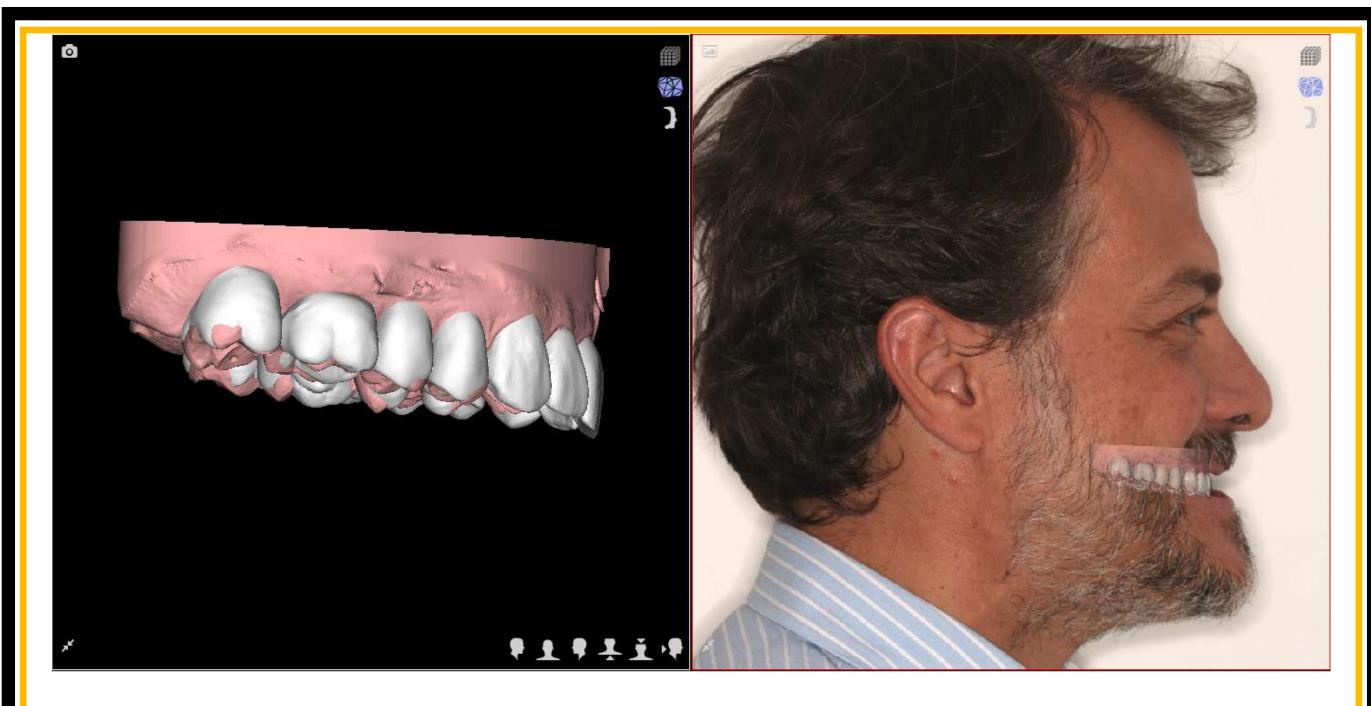


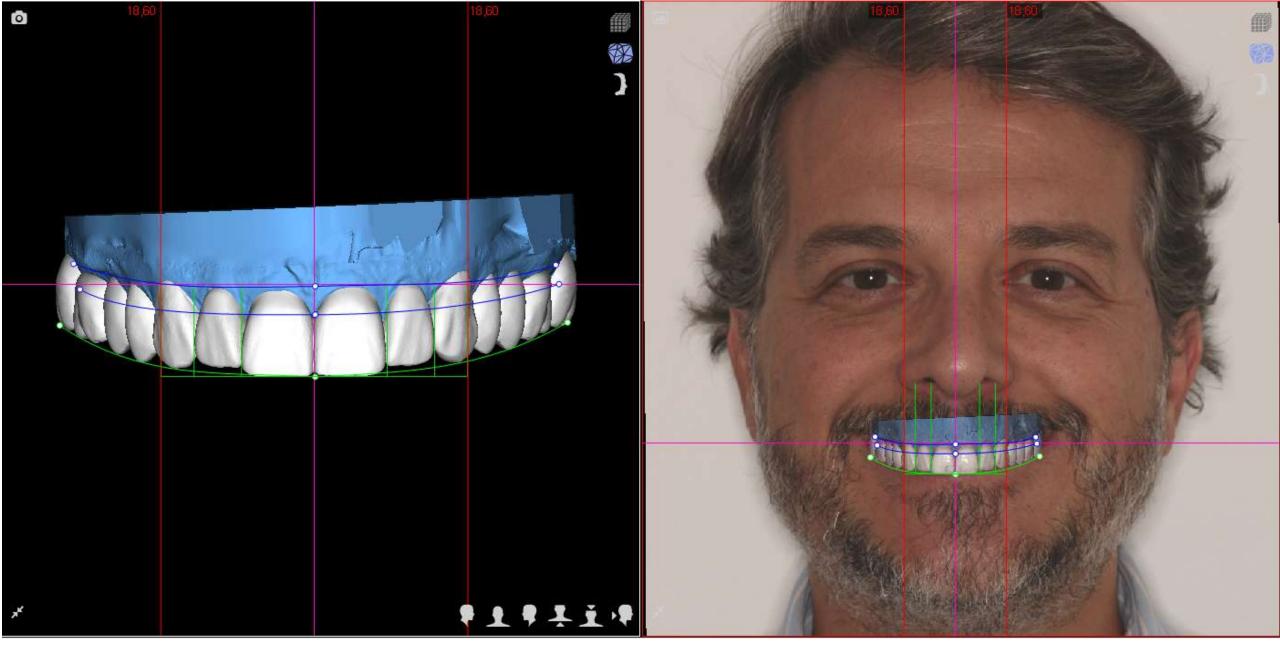


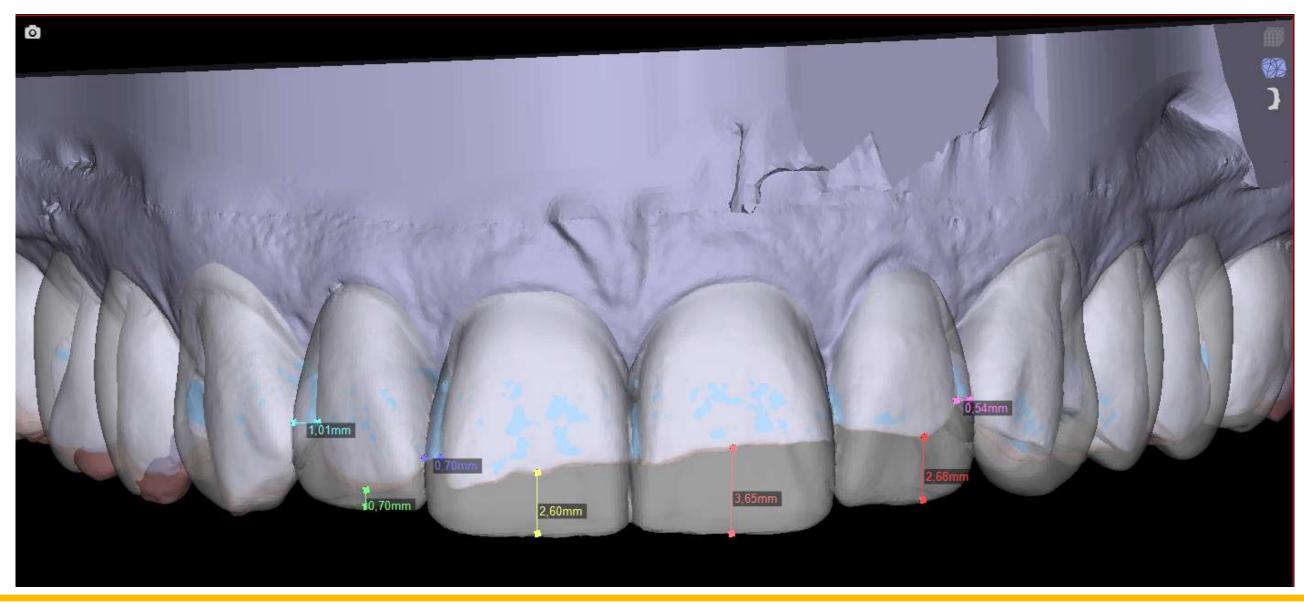


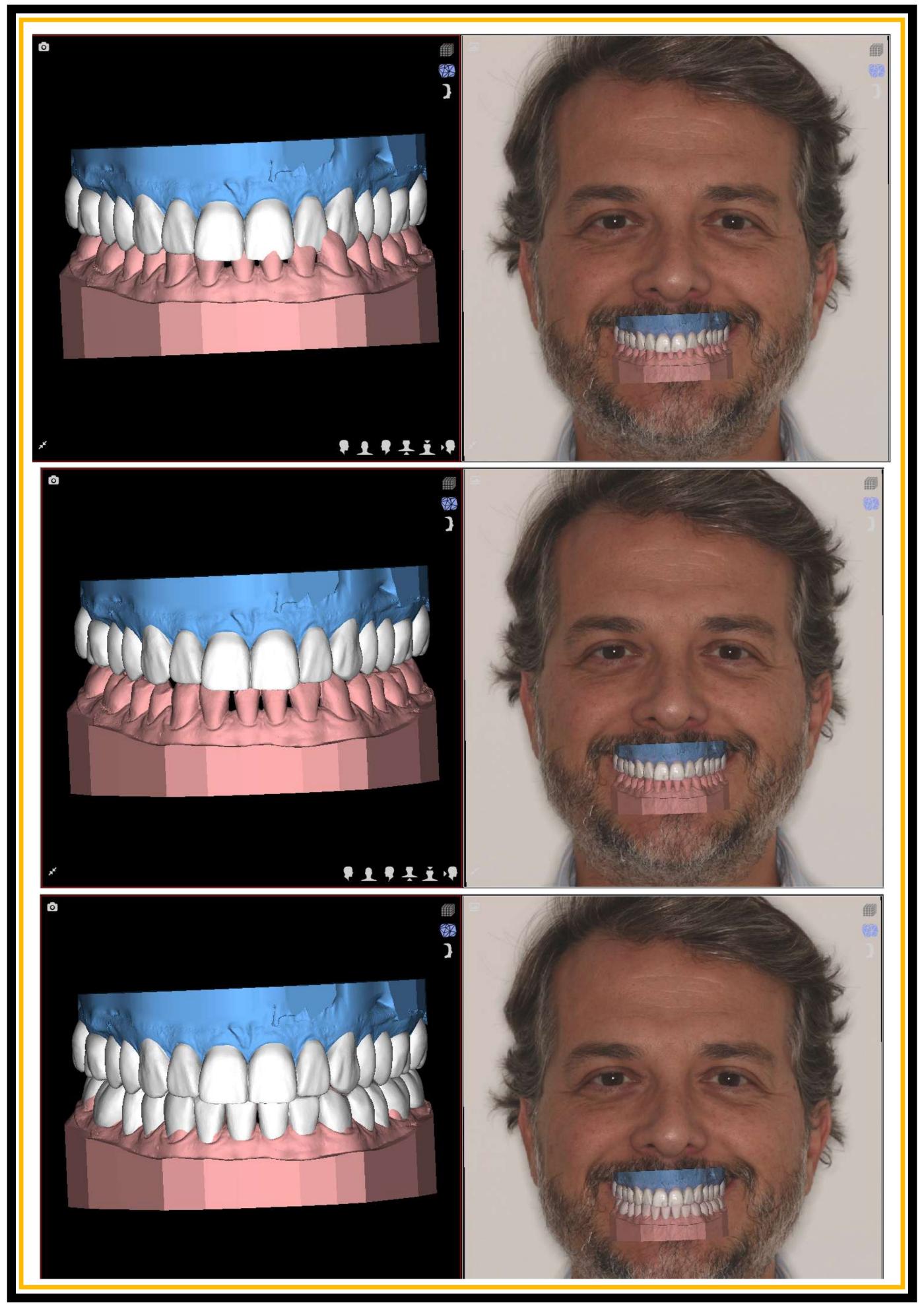


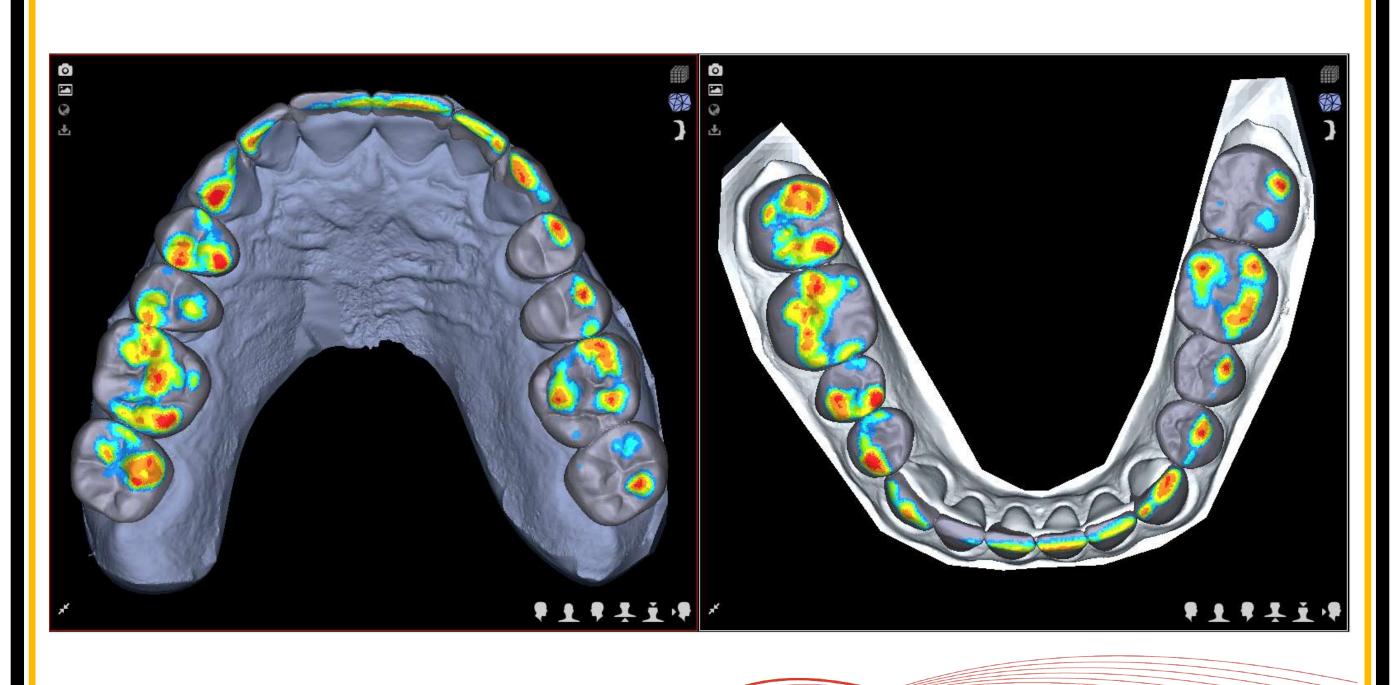


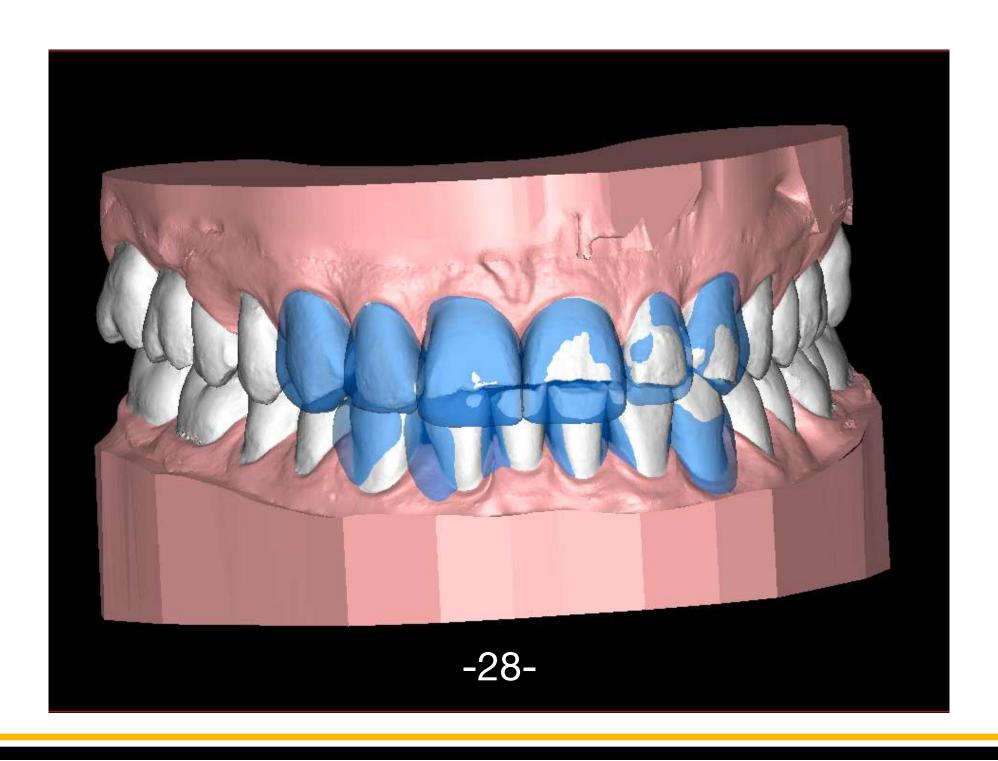




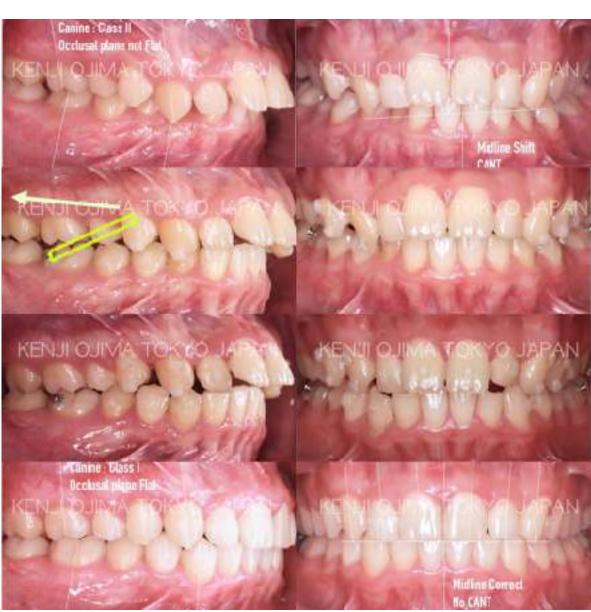








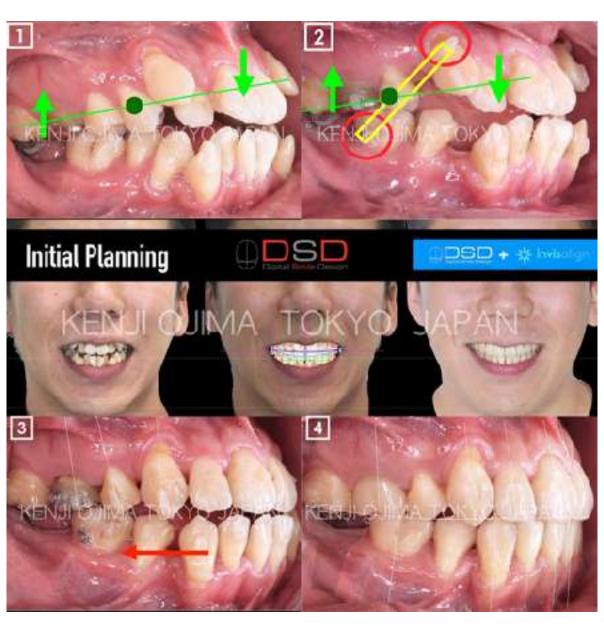












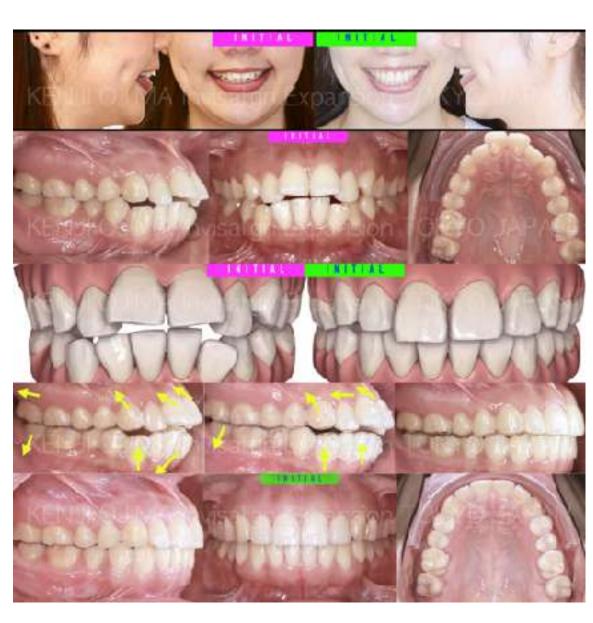


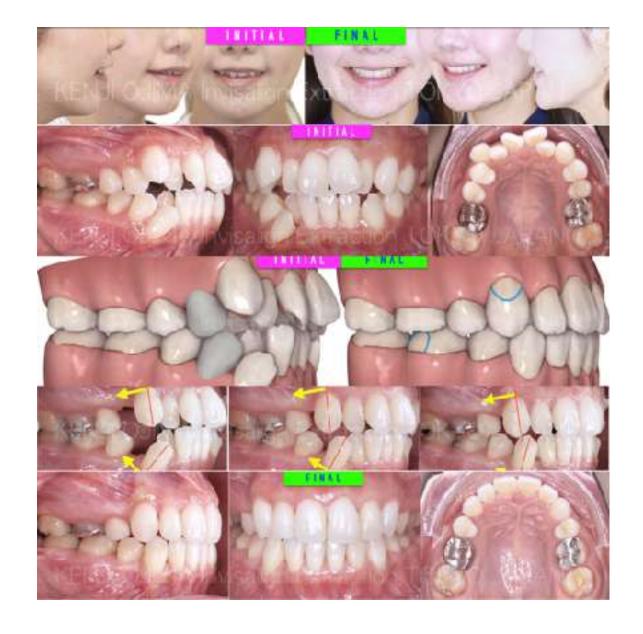






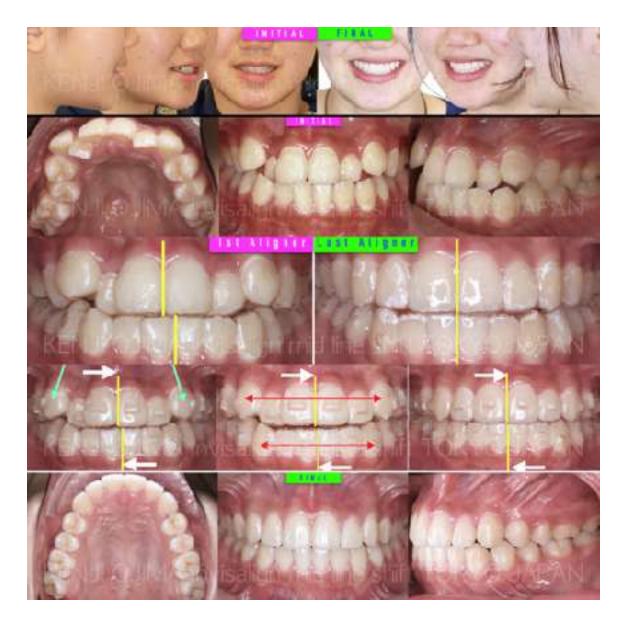




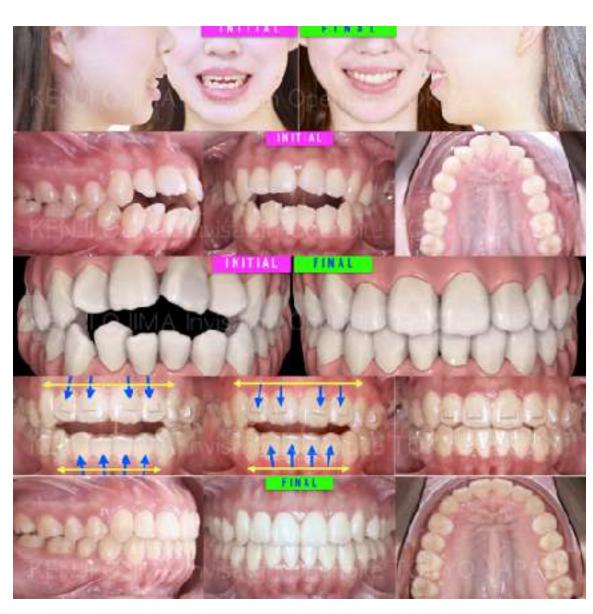










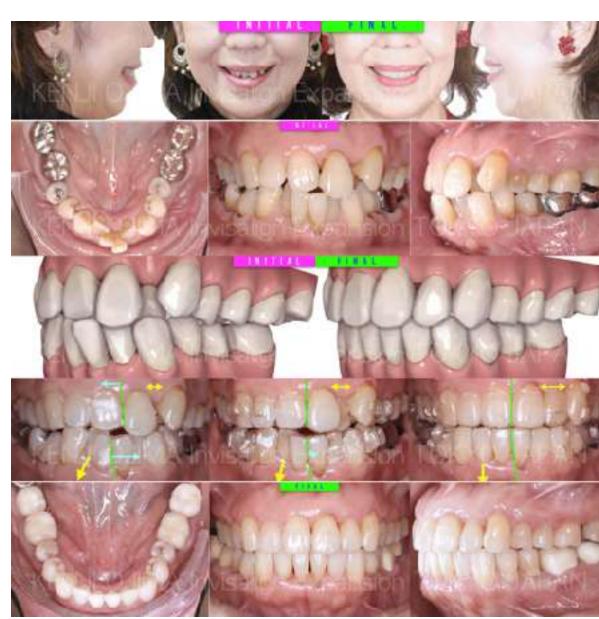




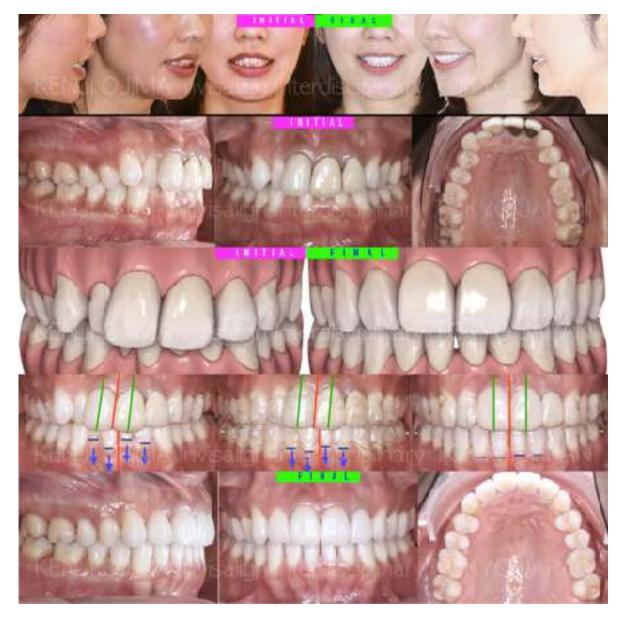


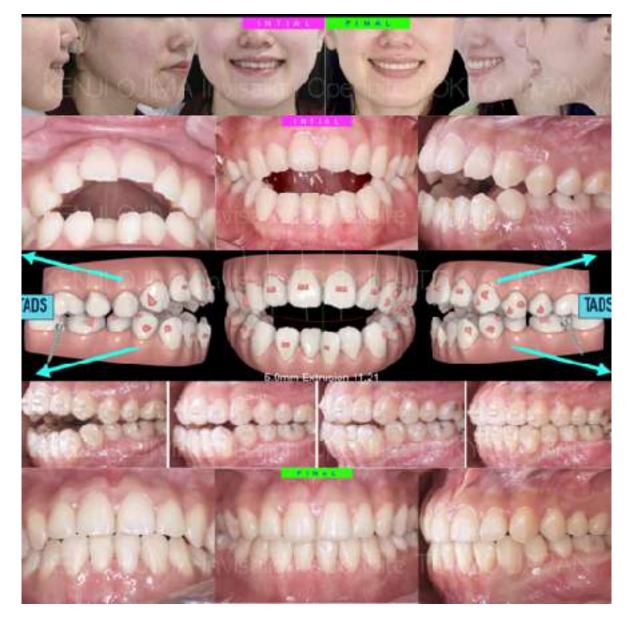








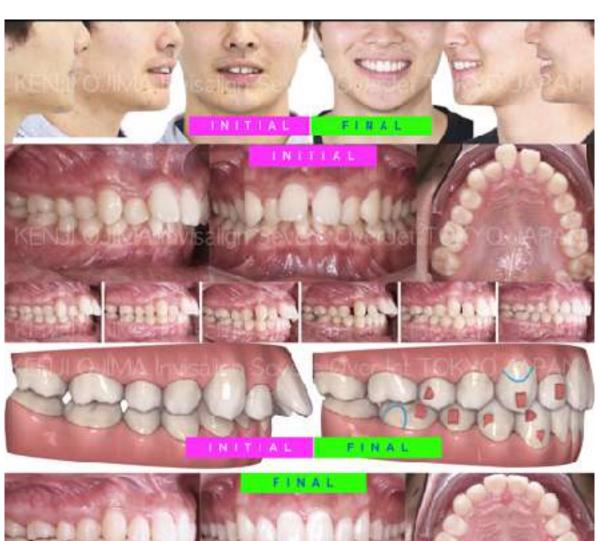


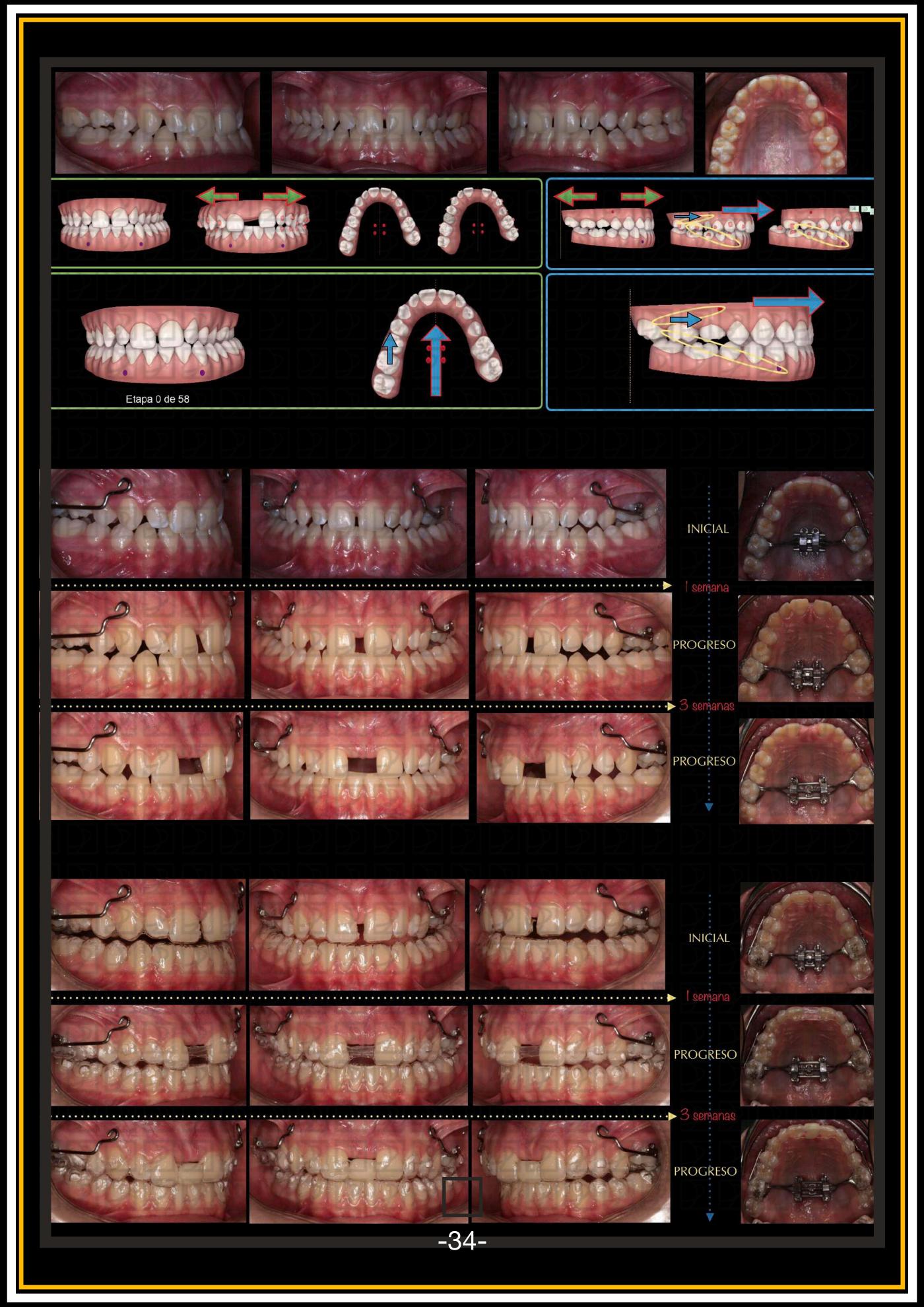




















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