



The Dental Implant Center

Steven Branberg, DDS

Meet Dr. Branberg, Prosthodontist

The California native received his bachelor's degree in Biological Sciences from the University at Irvine and his DDS degree from the University of Southern California School of Dentistry, where he went on to earn his Certificate in Prosthodontics—a highly-specialized area of dentistry that focuses on cosmetic and reconstructive dental treatments. There are fewer than 1,500 prosthodontists in

private practice in the U.S. today, and Dr. Branberg is one of the leading experts in the area on restorative dentistry—right here in Colleyville!

Dr. Branberg, who has been practicing locally since 2011, provides the highest level of individualized care to patients of all ages. He offers many new in-house technologies that are impacting dental implant treatments today, including CT

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scanning to help design and structure complex treatments and aid in implant and prosthetic planning.

What is Digital Treatment Planning?

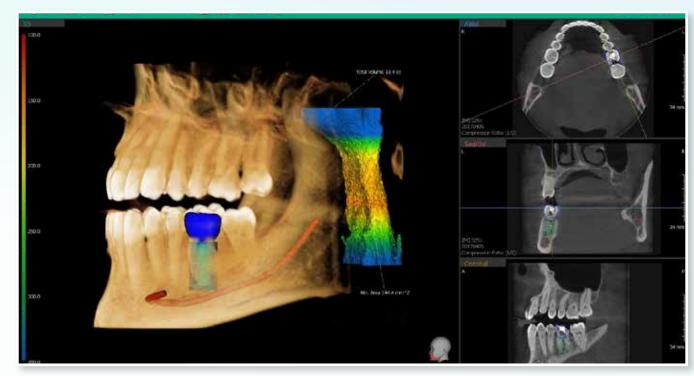
Cone beam computed tomography. or CBCT imaging, has helped to revolutionize the field of implant dentistry. "CBCT images have become increasingly important in diagnosing and treatment planning for oral surgery and implant dentistry," said Dr. Branberg. "Using CBCT scans and restorative virtual treatment planning, along with specialized training, this technology allows me to provide computer-guided implant placement for my patients. With the additional information provided, such as the width and height of available bone, density of the bone, identification of nerves, blood vessels, sinuses, airway and other vital structures, implant dentistry has never been more predictable and safer for the patient."

Through the virtual 3D rendering treatment planning software, Dr. Branberg is able to superimpose a digital replica of the planned dental implant and final crown into the software program. Once planning is complete, the software creates a surgical guide that is used during implant placement. "This guide directs the exact location, angle, and depth of the implant placement," he explained.

Working with a 3D model also allows patients to better understand the planned procedures and visualize the end result. "Since the procedure is planned prior to the day of surgery, surgical times are shortened and post-op discomfort can be minimized by performing an atraumatic surgical procedure," the doctor continued. These virtual plans also allow Dr. Branberg to take multiple aspects of implant placement and restoration into consideration, resulting in optimal aesthetics, function, and longevity for the patient's final restoration.

The Dental Implant Center Experience.

At The Dental Implant Center, the overall goal is always patient comfort and



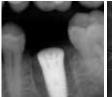
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complete satisfaction. "Whether replacing a single tooth or a full-mouth restoration, I take the same detailed approach," said Dr. Branberg. And because both the surgical and restorative phases of treatment are done in one office, the total treatment fees are often lower than one might expect.

The Dental Implant Center also has an in-house lab and a dental hygienist, so they are able to meet a multitude of their patient's needs before and after surgery quickly and efficiently. So whatever your age, if you have one or more missing teeth, you owe it to yourself to see how a true specialist in tooth replacement can help you. You owe it to yourself to see a prosthodontist.

For more information or to schedule a FREE initial consultation, please call (817) 498-3331 or visit them online at DentalImplantCenter.com









Case Scenario

A 48-year-old male visits The Dental Implant Center with a broken lower left tooth. The tooth is asymptomatic, but he is having difficulty eating because the broken tooth moves when he eats. "He was anxious to have the tooth replaced, so the plan was to remove the broken tooth and place a dental implant at the same visit," explained Dr. Branberg.

Diagnostic Evaluation and Digital Treatment Planning

Diagnostic Evaluation:

A) After examining the cross-sectional view of the CBCT image, a crack line can easily be seen on the right side of the image.

B) Using the "ruler" tool, the width of the bone at the crest is 10.1 mm and the nerve is located 15.2 mm from the crest of the bone. Therefore, a 10- to 12-mm dental implant can safely be placed without causing nerve injury.

C) After examining the CBCT image, a 5.7x10 mm dental implant was virtually planned according to the position of the final crown.

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BY CLARE HEEKIN LYNCH PHOTOGRAPHY BY YOUR CANDID MEMORIES

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