Can you tell me about your background?
Dr Baer graduated from University of Illinois College of Dentistry, after which he completed a two-year GPR at the University of Chicago. Dr Russell Baer was an Assistant Professor at the University of Chicago where he taught implant dentistry in the General Practice Residency and Maxillofacial Prosthodontics program and conducted clinical research in implantology and reconstructive dentistry. Dr Baer is an active member of the Academy of Osseointegration and the International Congress of Oral Implantology. He has written numerous articles and lectured both nationally and internationally on implant dentistry. His passion of implant dentistry led him to the former Soviet Union, where he founded and serves as Academic Director of the Chicago Center for Advanced Dentistry. Dr Baer continues mentoring and educating general dentists on implantology at our UAD location.

Dr Marcus graduated from Loyola School of Dentistry. After graduation he went into private practice with his father. In 1990 he joined the group dental practice affiliated with the University of Chicago and as a Clinical Associate position helped teach incoming residents. In 2005 the group dental practice became private and born out this was University Associated in Dentistry. Dr Marcus has also managed the group dental practice University Associates in Dentistry, seeing its exponential growth over the years. Instrumental in bringing in technologies and education and marketing concepts, he has transformed a 20 year dental practice into a well respected, locally and nationally recognized dental facility, serving their patients with state of the art care, as well as dental mentorship and educational programs.

When did you decide to become implantologists and why?
We are super General Dentists practicing all aspects of dentistry with a focus in implants, cosmetic and reconstructive dentistry. Our emphasis in implantology and reconstructive dentistry resulted in the opening of UAD’s educational training center - Dental Implant Institute of Chicago. Through this we are able to offer many courses that range from simple implant placement, to advanced bone grafting, All on Four, Guided surgery and more. These courses have both academic and clinical components. The majority of the courses are offered at our clinic, which allows us to ‘practice what we preach’. Participants not only get the opportunity to learn, but they get the opportunity to see it first hand. Many of the courses include ‘live’ surgeries. Our facility is set up with a monitor in the surgical operatory and can be viewed from different locations throughout the clinic. While the sur-
gery is being performed, participants are able to watch, hear and ask questions. Procedures are filmed and later posted on YouTube.

Is your practice solely implant dentistry or do you practice other types of dentistry?

We have a group general dental practice. Our abilities within this practice allow us to treat all aspects of adult dental care in our facility. Implant and restorative dentistry is a large focus though and being able to do surgical and prosthetic parts together is a benefit to our patients.

The UAD team of doctors includes general dentists, as well as an emphasis in implant and cosmetic dentistry, periodontics and Invisalign. This allows UAD to offer a wide spectrum of restorative and preventative dental services - each designed to extend the life of our patient’s teeth and total dental health. Establishing rewarding and lasting relationships with patients is extremely important to us.

How is placing and restoring implants in one office a better option for you? How does it benefit the patient?

In our group general dental practice, we have the ability to perform both the surgical placement and restorative prosthetics of dental implants all in one facility.

The benefits allow for much greater control of the entire implant process. We are able to communicate in a seamless, effective manner between the clinicians, office staff and patient with regards to appointment scheduling, treatment protocols and finances. From the inception to the completion, the patient feels they have one office to visit to coordinate all their needs. This builds relationships that are price-less.

Our education and experience, in a myriad of facets relating to surgery and prosthetics, is the key to our success with this approach. We have the ability to understand the surgical needs required, ie: sinus lift, bump, ridge split, bone grafting, as well as the talents to perform them. Prosthetically, we can meet the challenges of esthetic needs, full mouth reconstruction as well as occlusion. This doesn’t come overnight, but through education, mentors and a quest for knowledge to be better.

Just one empirical unique feature about our ability to perform all portions of implant services in our facility is the ‘emergency’ implant patient. Often we will get a patient who has broken a tooth that is deemed unrestorable. Instead of rescheduling or just temporizing, if even possible, we can extract the remaining tooth root, immediately place the implant and a temporary restoration during that emergency appointment. This allows a more concrete treatment without delay and alleviates the patient’s stress over thinking too much about the upcoming procedure.

Communication is the key to success in much of what we all do in our profession. At UAD, we take this very seriously. It has helped us build a dynamic practice over the past 25+ years that we are truly proud of.

Why did you decide to focus on implants?

Implants have always been an interest to us since we began our dental careers soon after Branemark presented his data to the world. We saw the benefits it offered patients early on, allowing patients a more stable and natural single tooth, multiple teeth or full arch oral rehabilitation. Several major implant systems have been used over the 20 years that we have been placing implants. This allows us to treat patients that have old implants that need new restorations and patients that come from overseas or from other doctors seeking restoration. UAD’s implant of choice is Nobel Biocare. Nobel Biocare is the world leader in innovative restorative and esthetic dental solutions, providing integrated, science-based solutions. In fact, UAD has been recently very active in participating in a three year Implant Clinical Study. 18 patients received a one-piece NobelDirect implant with the body of the implant and the integral abutment machined out of a single piece of titanium. The implant study is to evaluate the long-term stability of the biological complex surrounding the implant, to determine the clinical efficacy of the implant design and placement technique. After a year and a half we continue to see great results.

Do your implant patients come from referrals?

We get referrals from our current patient population, other dentists who have been to our education programs, mentorship’s or study clubs. We also market directly to the public. Having been practicing dentistry at our current location for over 20 years and having just expanded our clinic to twice its original size, we have relied heavily on our patient base. We are honored to say that our patients have been extremely supportive and loyal. There is no better compliment than word of mouth. Dentists, who have participated in our implant courses,
refer their patients to our clinic if they present with a more complicated case. We also believe in networking with dentists in our area. UAD offers CT-Scans for diagnostic purposes to area dentists that do not have scans. We work with them to treatment plan cases and guide them through the initial surgeries, if desired. This has built many relationships with area dentists that have resulted in referrals for larger cases.

**What can the specialist do to improve the communication?**

Good communication is the key to creating a well-planned implant placement and restoration, as well as, education. The team should continue to seek out the possibilities available today, as well as what may be coming down the road to best benefit the patient. Specialists should develop study clubs of their referral base and have clinical sessions going over interesting cases or presentations of concepts to their dentists. Never assume that your referring dentists know what you can do. Educate them; invite them to observe surgeries. Watching can be a wonderful educational experience for them to learn more of the dental procedures as well as of your demeanor and style.

**How long have you been performing implant dentistry and what systems do you use?**

We have been performing implant dentistry for 25 years. Our primary system is Nobel Biocare implants.

**Can you tell me more about the training you have undertaken?**

Drs. Baer and Marcus both have maintained a faculty position at the University of Chicago Zoller Dental Department. All dentists at UAD are involved with teaching the education programs given at our education center, Dental Implant Institute of Chicago. We participate in local area study clubs and constantly attend an array of continuing education seminars and conventions. Lastly, we mentor with some of the finest clinicians around the world.

**Who has inspired you?**

- Dr P.I. Branemark – through his research and method of osseointegration many lives have been dramatically changed for the better.
- Dr Paulo Malo – we have both had the privilege to train and mentor first hand with Dr Malo, who developed the ‘All on 4’ surgical technique.
- Dr Jack Hahn – inspired by his expertise and professionalism as a pioneer in dental implants.
- Dr John Kois – the complete package of ex-

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**Professional/personal**

1. Name/ Title: Dr Russell A Baer, DDS, Dr Martin J. Marcus, DDS
2. Educational Institutions: University of Illinois School of Dentistry, Loyola University School of Dentistry
3. Name of Practice/ Location: University Associates in Dentistry / Dental Implant Institute of Chicago
4. Practice size – sq. ft / operatories: 4,000 sf/10 operatories
5. Staff – Number and titles
   - Dr Nelson Lo, DDS - Associate Dentist
   - Dr Kathryn C. Delfs, DDS - Associate Dentist
   - Dr Rauf Yousuf, DMD - Periodontist
   - Elsie Barrueta - Office Manager
   - Regienia Eubanks - Scheduling Coordinator
   - Cassandra Chraca - Recall/Hygiene Coordinator
   - Niedra Camp Wells - Insurance Coordinator
   - Cheryl Michalak - Dental Assistant Coordinator
   - Lisa Richardson - Dental Assistant
   - Enza Lombardo - Dental Assistant
   - Carolyn Ciara - Dental Assistant
   - Cathrine Tinney - Dental Assistant
   - Johanna Head - Hygienist
   - Kathleen Batty - Hygienist
   - Vicky Greene - Hygienist
   - Kathleen Laskodi - Hygienist
   - Carol Wexler Kalnow - Administrator

**Products/equipment**

- Gendex CB 500 i-Cat
- Infusc Bonegraft BMP
- Dexis Digital Imaging
- Peizosurgery Unit
- Cerec
- Messinger Bon Expanders
- Nobel Active Implant System
- Laser (soft and hard tissue)
- Dentisofonline - web based dental management software
What is the most satisfying aspect of your practice?
The best part about our practice is we are able to comprehensively treat our patient’s needs, using state of the art technologies, within our own facility. About two years ago it became apparent to us that we had long out-grown our clinic. The need to expand to accommodate our growing practice was paramount. It was the best decision, as we have now been in our new clinic for a year and have never looked back. We were fortunate in that we were able to move our clinic down the hall from our former location. This afforded us the ability to continue to practice while building out our new home and to be able to keep an eye on the progress. UAD went from a cramped seven chair clinic to an expansive 10 chair clinic that maintains four full time hygienists, a separate surgical operatory, centrally located sterilization area and in house lab. The expansion includes an i-Cat, which has become our diagnostic and treatment planning area. The reception and staff areas can be converted to educational areas as need be. There are not only chairside monitors for patient viewing of digital X-rays and patient based educational materials, but there are strategically located monitors throughout for clinical training on a larger, more personal scale.

Professionally, what are you most proud of?
We are most proud of our ability to merge a clinical dental practice with an academic approach to implant dentistry, performing cutting edge clinical research and education in a private practice setting. Also, this is accomplished with our spectacular staff’s talents and outstanding customer service. Our patients are our most important commodity. It is crucial to us that they feel comfortable and welcomed every time they visit us.

What do you think is unique about your practice?
We are a full service general dental practice with a cutting edge implant practice within it. The biggest challenge in our practice is to deliver state of the art implant dentistry in a financially responsible way to allow us to treat more patients. We are constantly updating our technologies, office systems and education, so that we can continue to be leaders of what we offer our patients and referral doctors.

What would you have been if you didn’t become a dentist?
Dr Baer: I feel lucky to be a dentist, as I can’t image being anything but. I might have ended up being an oceanographer, if I had lived close to the sea.
Dr Marcus: I, too, feel lucky to be a dentist, especially at this time. Over the past 27 years the changes to our profession have continued to allow us to grow and be challenged. Another professional choice might possibly have been business or education.

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What is the future of implant dentistry?
The future of implant dentistry is bright. There is still a great need to get more dentists implementing implants into their practice and this hopefully will fuel the growth that will drive new innovations and technologies at the same pace as it has been.

What are your hobbies and what do you do in your spare time?
We love to travel, mixing work and pleasure is a great way to see the world. Indoor and outdoor sports and fitness in all forms, skiing, bicycling, hiking, golfing, etc allows us to get a healthy ‘big picture’ in life.