

COSMETIC PROCEDURES

| SERVICE DESCRIPTION | TDC PLAN | TDC PRIVATE |
|---|----------|-------------|
| Cosmetic Bonding (per tooth) | 340 | 425 |
| Porcelain Veneer (laminare) | 600 | 750 |
| Procera Veneer (laminare) | 900 | 1200 |
| Elite Bleaching | 800 | 1095 |
| Zoom Bleaching (inc/ custom trays and 1 kit of bleach) | 650 | 795 |
| Bleaching Trays (inc/ 1 kit of bleach) | 370 | 495 |
| Bleaching Touch Up Kit | 75 | 95 |

ANESTHESIA

| SERVICE DESCRIPTION | TDC PLAN | TDC PRIVATE |
|---|----------|-------------|
| Local Anesthesia | n/c | n/c |
| Nitrous Oxide Per Visit | 75 | 100 |
| Oral Sedation Per Visit | 350 | 500 |
| IV Sedation 1st 30 minutes (Oral Surgeon) | 200 | 300 |
| IV Sedation add 15 minutes (Oral Surgeon) | 100 | 150 |

Plan Highlights:

- 24-HOUR EMERGENCY SERVICE
- 2 FREE CLEANINGS, EXAMS AND XRAYS PER YEAR
- IMPLANTS AND COSMETIC SERVICES
- ORAL SEDATION AND IV SEDATION
- TEETH WHITENING
- NO ADDITIONAL LAB FEES
- NO HIDDEN SPECIALIST FEES
- ALL SERVICES AT THE ADVERTISED RATE
- UP TO 60% SAVINGS ON ALL PROCEDURES

TDC
TOTAL DENTAL CARE
of Middle Island

699 Middle Country Road
Middle Island, NY 11953
1-800-PLAN-TDC
www.totaldentalcare.com

TDC DENTAL PLAN



2011 Fee Schedule

DIAGNOSTIC

| SERVICE DESCRIPTION | TDC PLAN | TDC PRIVATE |
|---------------------------------|----------|-------------|
| Consultation (no xrays) | n/c | 45 |
| Comprehensive Exam | n/c | 65 |
| Emergency Exam | 40 | 80 |
| Palliative Treatment | 25 | 45 |
| Periodic Exam (recall) | n/c | 50 |
| Diagnostic Casts | 50 | 80 |
| Oral/Facial Photographic Images | 20 | 45 |
| Full Mouth Xrays | n/c | 80 |
| Panorex | n/c | 65 |
| DentScan (per arch) | 275 | 350 |
| Oral Cancer Testing | 35 | 65 |
| Caries Susceptibility Testing | 15 | 25 |
| Saliva Testing | 35 | 50 |
| Periapical Xray 1st Film | n/c | 20 |
| Periapical Xray each additional | n/c | 10 |
| Bitewing Xray single film | n/c | 15 |
| Bitewing Xrays 2films | n/c | 20 |
| Bitewing Xrays 4 films | n/c | 35 |

PREVENTIVE

| SERVICE DESCRIPTION | TDC PLAN | TDC PRIVATE |
|----------------------------------|----------|-------------|
| Child Cleaning & Polish | n/c | 45 |
| Adult Cleaning & Polish* | n/c | 80 |
| Topical Fluoride Treatment-child | 30 | 40 |
| Topical Fluoride Treatment-adult | 35 | 45 |
| Sealant (per tooth) | 30 | 40 |
| Space Maintainer Unilateral | 200 | 250 |
| Space Maintainer Bilateral | 325 | 450 |
| Nightguard | 375 | 525 |
| Occlusal Guard | 300 | 450 |

* More involved cleanings see periodontics
1 routine cleaning covered per member in a 6 month period

RESTORATIVE

| SERVICE DESCRIPTION | TDC PLAN | TDC PRIVATE |
|-----------------------------------|----------|-------------|
| Amalgam (silver) Fillings | | |
| 1 Surface | n/a | n/a |
| 2 Surface | n/a | n/a |
| 3 Surface | n/a | n/a |
| Composite (white) Fillings | | |
| Anterior (front) | | |
| 1 Surface | 100 | 155 |
| 2 Surface | 130 | 185 |
| 3 Surface | 155 | 210 |
| Posterior (back) | | |
| 1 Surface | 130 | 185 |
| 2 Surface | 155 | 210 |
| 3 Surface | 220 | 275 |
| 4 Surface | 255 | 310 |
| Sedative Filling | 35 | 45 |

FIXED PROSTHODONTICS

| SERVICE DESCRIPTION | TDC PLAN | TDC PRIVATE |
|---|----------|-------------|
| Crowns (per tooth) | | |
| Crown- Porcelain & Noble Metal | 650 | 1200 |
| Crown-CAPTEK (porcelain w/gold liner) | 750 | 1300 |
| Crown-PROCERA (all ceramic) | 850 | 1400 |
| Crown-LAVA (zirconia) | 950 | 1500 |
| Bridges (per tooth) | | |
| Bridge- Porcelain & Noble Metal | 650 | 1200 |
| Bridge- CAPTEK (porcelain w/gold liner) | 750 | 1300 |
| Bridge- PROCERA (all ceramic) | 850 | 1400 |
| Bridge- LAVA (zirconia) | 950 | 1500 |
| Other | | |
| Prefab Post & Core | 250 | 300 |
| Cast Post & Core | 310 | 425 |
| Core Build Up | 185 | 235 |
| Lab Processed Temporary (per tooth) | 210 | 270 |
| Recement Crown/Bridge (per tooth) | 35 | 50 |
| Remove Crown/Bridge | 85 | 150 |
| Post Removal | 185 | 250 |

REMOVEABLE PROSTHODONTICS

| SERVICE DESCRIPTION | TDC PLAN | TDC PRIVATE |
|--|----------|-------------|
| Complete Denture (per arch) | 850 | 1260 |
| Simply Natural Denture (per arch) | 1150 | 1500 |
| Partial Denture (per arch) | 975 | 1350 |
| Valplast Partial Denture (per arch) | 1250 | 1500 |
| Temporary Denture (single tooth) | 375 | 550 |
| Immediate Denture (per arch) | 850 | 1260 |
| Repairs | | |
| Denture Adjustments n/c n/c | | |
| Add/Repair tooth -existing partial denture | 120 | 150 |
| Add/Repair clasp -existing partial denture | 130 | 175 |
| Reline Denture | 225 | 325 |
| Repair Acrylic | 130 | 160 |

ENDODONTICS

| SERVICE DESCRIPTION | TDC PLAN | TDC PRIVATE |
|--------------------------|----------|-------------|
| Direct/Indirect Pulp Cap | 65 | 100 |
| Pulpotomy | 85 | 100 |
| Anterior Root Canal* | 350 | 500 |
| Bicuspid Root Canal* | 575 | 725 |
| Molar Root Canal* | 785 | 950 |

* Initial Root Canal Therapy Only- Retreats not included

PEDIATRICS

| SERVICE DESCRIPTION | TDC PLAN | TDC PRIVATE |
|----------------------------------|----------|-------------|
| Pulpotomy | 85 | 100 |
| Mineral Trioxide Aggregate (MTA) | 250 | 325 |

| | | |
|-----------------------|-----|-----|
| Stainless Steel Crown | 125 | 175 |
| Composite Crown | 180 | 200 |

PERIODONTICS

| SERVICE DESCRIPTION | TDC PLAN | TDC PRIVATE |
|--|----------|-------------|
| Consultation w/ Periodontist | 65 | 80 |
| Full Mouth Debridement | 100 | 130 |
| Scaling & Root Planning (per quadrant) | 110 | 130 |
| Irrigation w/medication | 10 | 25 |
| Osseous Surgery (per quadrant) | 585 | 775 |
| Bone Graft 1st site | 250 | 325 |
| Bone Graft each add site | 125 | 200 |
| Soft Tissue Graft | 375 | 500 |
| Gingivectomy (per tooth) | 200 | 250 |
| Gingivectomy (per quadrant) | 420 | 445 |
| Crown Lengthening | 475 | 550 |
| Periodontal Maintenance* | 95 | 130 |
| Periodontal Laser Program | 1200 | 1500 |

* following active therapy- 1 visit every 3 months is routine for this procedure. Every other visit n/c as long as d.o.s is 90-110 days from last perio maint appt.

ORAL SURGERY

| SERVICE DESCRIPTION | TDC PLAN | TDC PRIVATE |
|------------------------------|----------|-------------|
| Consultation w/Oral Surgeon | 55 | 75 |
| Simple Extraction | 125 | 160 |
| Surgical Extraction | 175 | 250 |
| Soft Tissue Impaction | 220 | 275 |
| Partial Bony Impaction | 300 | 375 |
| Full Bony Impaction | 375 | 450 |
| Full Bony Complicated | 425 | 500 |
| Alveoplasty w/extraction | 185 | 210 |
| Alveoplasty w/out extraction | 285 | 315 |
| Apicoectomy - Anterior | 375 | 625 |
| Apicoectomy - Bicuspid | 410 | 685 |
| Apicoectomy - Molar | 500 | 820 |
| Apicoectomy each add'l root | 150 | 260 |
| Retrograde Fill (per root) | 135 | 210 |
| Cyst Removal | 100 | 210 |
| Hemisection | 130 | 155 |

IMPLANT SERVICES

| SERVICE DESCRIPTION | TDC PLAN | TDC PRIVATE |
|---|----------|-------------|
| Endosteal Implant | 1200 | 1500 |
| Mini Implant | 499 | 600 |
| Custom Abutment | 650 | 850 |
| Crown-Porcelain-Noble Metal Implant Supp | 950 | 1350 |
| Bridge-Porcelain-Noble Metal Implant Supp | 950 | 1350 |
| Overdenture | 3150 | 3900 |
| Hader Bar | 2000 | 2550 |
| Semi Precision Attachment (each) | 520 | 650 |

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