

Dental care of Rialto  
1817 N Riverside Ave,  
Rialto, CA 92376  
(909) 879-1024

Dental Implant Institute  
616 W Edinger Ave,  
Santa Ana, CA 92707  
(949) 687-8065

**Once in a Lifetime  
Opportunity Join The  
Dental Club**

**Just Like A COSTCO Card  
FOR ALL YOUR DENTAL NEEDS  
The Biggest Discount in Dentistry  
If you find lower, we will beat it by 10%**

**PLUS An Additional 10% Discount for SENIORS & VETERANS**

Dear Patient,

We are happy to inform you that we are extending our operation across two counties, Orange County and the Inland Empire.

This is **SIMPLE**. If you are confused by your coverage, and tired of having an insurance actuator or a government bureaucrat control your choices when it comes to your oral health & if you have an HMO plan that does not cover **ALL your dental needs** that allows only the basic minimum of options, THERE IS A WAY OUT.

**Join The Dental Club. Pay \$ 99.95 A Year.**

**See the attached fee schedule that will NOT change. Get all your dental treatment AT A HEAVILY DISCOUNTED FEE SCHEDULE at a SUPERB QUALITY.**



**CALL NOW: (909) 879-1024**

**Here is how to join in 3 easy steps:**

- 1- Fill out the simple application attached to this letter.
- 2- Or fill out the form online or on your phone.
- 3- **Pay *once yearly* \$99.95.**
- 4- Send in the form by mail or submit it online.
- 5- Wait for your **Dental Club Card** to arrive by mail.

We are doing something that no one else does, we are advertising our full fee schedule (we are attaching a copy with this letter and advertising it on our website scan the QR code). You will know how much your treatment will cost even before you set foot in the office.

No surprises. No games. No Gimmicks.

## Dental Club Card Application

NAME: \_\_\_\_\_

First

Middle

Last

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Month

Date

Year

TEL: \_\_\_\_\_

Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Circle One Payment Option:

☐ One Yearly Payment of \$99.95

Choose One Method to Pay:

☐ Pay Online Using Secured Link

☐ Send A Check

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## FAQ:

Q: What if I have dental insurance? Why do I NEED this membership?

A: Most dental insurances are actually 'riders' meaning it is an extra benefit that you prepay for and contribute to the cost of the eventuality and not by definition a 'true insurance' that covers your oral needs come what may. That having been said, most people have a cap of \$1000-\$1500 on their dental insurance per year. If your teenage child breaks a front tooth during a basketball game, that alone will cost anywhere from \$4000-\$9000 to fix. Do you really want to go by your 'rider's snail pace to fix an urgent situation?

Q: Does that membership really save me any money?

A: The answer is a loud YES. Absolutely it does. Take high ticket items such as crowns \$950-\$1200 per crown on average to \$500. Implants for example \$3500-\$5000 on average to \$1500. No Questions asked.

Q: Why are you guys so inexpensive?

A: We have our own FDA Import license which enables us to cut the middleman + our In-House Lab which allow us to pass on the savings to our patients instead of just increasing our bottom-line. We consider you a partner in this situation and we NEED YOUR SUPPORT for this business model. Are You In?

Q: Do you provide Cheap products?

A: Absolutely NOT. We would not be in business today. We would not be expanding. Moreover, our dear patients would not be still coming back to us and referring their friends and family to us. Do not fall victim to gimmicks that prey on a consumer's psyche that if it is priced below the market, then it must be not up to par. It's too good to be true. In This Instance, Do Not Miss Out Because of Your Doubt. In This Case: IT IS TOO GOOD AND IT IS VERY TRUE. What have you got to lose, check us out.

**CALL NOW: (909) 879-1024**



**These prices will never change.** What you see is what you get.

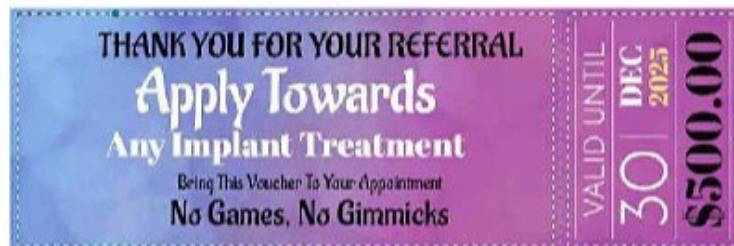
## **Here is A Bonus for Signing Up**

Attached with this letter are (3) THREE VOUCHERS. They are our gift to you.

- 1- First Voucher is for you worth \$500 to use towards any Implant + Abutment + Crown  
(regular price is \$1995) You **ONLY PAY \$1495.**



- 2- Second Voucher is also worth \$500, and it is yours to apply towards any Dental Implant Treatment when you refer a friend, and they sign up for Dental Implant Treatment.



- 3- Third Voucher is **\$3500 off** any full arch rehabilitation (All On 4) Procedures. No Questions Asked.



**No Games. No Gimmicks.**

**NO HIDDEN FEES**

**0% In-House Financing**

(ask about details certain restrictions apply)



To Sum It All Up:

- 1- Attached are **(3) THREE VOUCHERS**. Use them whether you're a member or not. That's our **GIFT** to you. This will save you hundreds if not thousands.
- 2- Get Heavily Discounted Fee for your **General Dental & Cosmetic Procedures Including Veneers & Implants**
- 3- \$100 a year is **less than a cup of coffee for a month** opens the gate to Premium Dental Options that is Only allowed to CEOs of multimillion dollar companies. We believe every person is entitled to premium dental health options regardless of their income or position.
- 4- **Premium Dental Implant Options** ranging from single implants to full mouth rehabilitation at jaw dropping prices.
- 5- **No Hidden Fees**.
- 6- A published **Fee Guide** That is lower than what any insurance company pays out to dentists that **WILL NOT CHANGE**.
- 7- In-House Financing Option at **0% interest**.
- 8- **Warranty** provided (ask about details)
- 9- Treatment is provided by **World-Class Experienced Dentists**.
- 10- Two convenient locations: **Santa Ana & Rialto**.
- 11- **Cutting Edge Technologies** used, 3-D imaging and Digital Inter-Oral Scanner for example.
- 12- **In-house Lab** and all crowns and veneers are designed by the doctor.
- 13- An Extra 10% Discount for **SENIORS & VETERANS**.

What are you waiting for? Call us now. Our highly trained team members will happily assist you with your appointment to see **Dr. Carmy** to start a productive conversation about your oral health.

**Dental care of Rialto**

**Rialto~Inland Empire**

**(909) 879-1024**

**&**

**Dental Implant Institute**

**Santa ana~ Orange County**

**(949) 687-8065**



Respectfully, I am

**Dr. Carmy Michael DDS**

Confidential - PPO Contracted Fee Schedule

Location Name		TIN	Practice Location	Specialty
Dental Care of Rialto		*****3890	1817 N Riverside Ave Rialto, CA 92376	General
Procedure	Nomenclature			
D0120	Periodic oral evaluation - established patient			25
D0140	Limited oral evaluation - problem focused			25
D0145	Oral evaluation for a patient under three years of age and counseling with primary caregiver			45
D0150	Comprehensive oral evaluation - new or established patient			45
D0210	Intraoral - comprehensive series of radiographic images			65
D0220	Intraoral - periapical first radiographic image			12
D0230	Intraoral - periapical each additional radiographic image			5
D0272	Bitewings - two radiographic images			10
D0273	Bitewings - three radiographic images			
D0274	Bitewings - four radiographic images			25
D0330	Panoramic radiographic image			45
Procedure	Nomenclature			
D0367	Cone beam CT capture and interpretation with field of view of both jaws; with or without cranium			195
D0460	Pulp vitality tests			25
D0601	Caries risk assessment and documentation, with a finding of low risk			10
D0602	Caries risk assessment and documentation, with a finding of moderate risk			10
D0603	Caries risk assessment and documentation, with a finding of high risk			10
D1110	Prophylaxis (cleaning) - adult			95
D1120	Prophylaxis (cleaning) - child			55

D1206	Topical application of fluoride varnish	25
D1208	Topical application of fluoride - excluding varnish	25
D1310	Nutritional counseling for control of dental disease	25
D1351	Sealant - per tooth	40
D1354	Application of caries arresting medicament - per tooth	25
D1510	Space maintainer - fixed, unilateral - per quadrant	195
D1516	Space maintainer - fixed - bilateral, maxillary	295
D1517	Space maintainer - fixed - bilateral, mandibular	295
D1520	Space maintainer - removable, unilateral - per quadrant	195
D1526	Space maintainer - removable - bilateral, maxillary	295
D1527	Space maintainer - removable - bilateral, mandibular	295
D1551	Re-cement or re-bond bilateral space maintainer - maxillary	45
D1552	Re-cement or re-bond bilateral space maintainer - mandibular	45
<b>Procedure</b>	<b>Nomenclature</b>	
D1553	Re-cement or re-bond unilateral space maintainer - per quadrant	45
D1556	Removal of fixed unilateral space maintainer - per quadrant	50
D1557	Removal of fixed bilateral space maintainer - maxillary	50
D1558	Removal of fixed bilateral space maintainer - mandibular	50
D2330	Resin-based composite - one surface, anterior	95
D2331	Resin-based composite - two surfaces, anterior	105
D2332	Resin-based composite - three surfaces, anterior	120
D2335	Resin-based composite - four or more surfaces (anterior)	120
D2391	Resin-based composite - one surface, posterior	95
D2392	Resin-based composite - two surfaces, posterior	95
D2393	Resin-based composite - three surfaces, posterior	100
D2394	Resin-based composite - four or more surfaces, posterior	100
D2610	Inlay - porcelain/ceramic - one surface	400



D2620	Inlay - porcelain/ceramic - two surfaces	400
D2630	Inlay - porcelain/ceramic - three or more surfaces	500
<b>Procedure</b>	<b>Nomenclature</b>	
D2740	Crown - porcelain/ceramic	600
D2750	Crown - porcelain fused to high noble metal	500
D2910	Re-cement or re-bond inlay, onlay, veneer or partial coverage restoration	65
D2920	Re-cement or re-bond crown	55
D2930	Prefabricated stainless steel crown - primary tooth	120
D2931	Prefabricated stainless steel crown - permanent tooth	140
D2950	core buildup, including any pins when required	100
D2954	Prefabricated post and core in addition to crown	150
<b>Procedure</b>	<b>Nomenclature</b>	
D2962	Labial veneer (porcelain laminate) - indirect	1000
D3220	Therapeutic pulpotomy (excluding final restoration) - removal of pulp coronal to the dentinocemental junction and application of restorative material	100
D3221	Pulpal debridement, primary and permanent teeth	85
D3310	Endodontic therapy, anterior tooth (excluding final restoration)	400
D3320	Endodontic therapy, premolar tooth (excluding final restorations)	500
D3330	Endodontic therapy, molar tooth (excluding final restorations)	600
D3331	Treatment of root canal obstruction; non-surgical access	200
D3346	Retreatment of previous root canal therapy - anterior	500
D3347	Retreatment of previous root canal therapy - premolar	600
D3348	Retreatment of previous root canal therapy - molar	700
<b>Procedure</b>	<b>Nomenclature</b>	
D3910	Surgical procedure for isolation of tooth with rubber dam	45
D4210	Gingivectomy or gingivoplasty - four or more contiguous teeth or tooth bounded spaces per quadrant	300



D4211	Gingivectomy or gingivoplasty - one to three contiguous teeth or tooth bounded spaces per quadrant	200
D4260	Osseous surgery (including elevation of a full thickness flap and closure) - four or more contiguous teeth or tooth bounded	500
D4261	Osseous surgery (including elevation of a full thickness flap and closure) - one to three contiguous teeth or tooth bounded	400
D4265	Biologic materials to aid in soft and osseous tissue regeneration, per site	100
D4266	Guided tissue regeneration, natural teeth - resorbable barrier, per site	300
D4277	Free soft tissue graft procedure (including recipient and donor surgical sites) first tooth, implant or edentulous tooth position	850
<b>Procedure</b>	<b>Nomenclature</b>	
D4341	Periodontal scaling and root planing - four or more teeth per quadrant	75
D4342	Periodontal scaling and root planing - one to three teeth per quadrant	55
D4346	Scaling in presence of generalized moderate or severe gingival inflammation - full mouth, after oral evaluation	100
D4355	Full mouth debridement to enable a comprehensive periodontal evaluation and diagnosis on a subsequent visit	100
D4381	Localized delivery of antimicrobial agents via controlled release vehicle into diseased crevicular tissue, per tooth	95
D4910	Periodontal maintenance (cleaning)	95
D5110	Complete denture - maxillary	1000
D5120	Complete denture - mandibular	1000
D5211	Maxillary partial denture - resin base (including retentive/clasping materials, rests, and teeth)	550
D5212	Mandibular partial denture - resin base (including retentive/clasping materials, rests, and teeth)	600
D5213	Maxillary partial denture - cast metal framework with resin denture bases (including retentive/clasping materials, rests, and teeth)	1000
D5214	Mandibular partial denture - cast metal framework with resin denture bases (including retentive/clasping materials, rests, and teeth)	1000

D5225	Maxillary partial denture - flexible base (including retentive/clasping materials, rests, and teeth)	800
D5226	Mandibular partial denture - flexible base (including retentive/clasping materials, rests, and teeth)	800
D5410	Adjust complete denture - maxillary	50
D5411	Adjust complete denture - mandibular	50
D5421	Adjust partial denture - maxillary	50
D5422	Adjust partial denture - mandibular	50
D5511	Repair broken complete denture base, mandibular	120
D5512	Repair broken complete denture base, maxillary	120
D5520	Replace missing or broken teeth - complete denture (each tooth)	85
D5611	Repair resin partial denture base, mandibular	120
D5612	Repair resin partial denture base, maxillary	120
D5621	Repair cast partial framework, mandibular	150
D5622	Repair cast partial framework, maxillary	150
D5630	Repair or replace broken retentive clasping materials - per tooth	125
D5640	Replace broken teeth - per tooth	95
D5650	Add tooth to existing partial denture	100
D5660	Add clasp to existing partial denture - per tooth	120
D5730	Reline complete maxillary denture (direct)	200
D5731	Reline complete mandibular denture (direct)	200
D6010	Surgical placement of implant body: endosteal implant	795
D6057	Custom fabricated abutment - includes placement	450
D6066	Implant supported crown - porcelain fused to high noble alloys	750
D6076	Implant supported retainer for FPD - porcelain fused to high noble alloys	750
D6081	Scaling and debridement in the presence of inflammation or mucositis of a single implant, including cleaning of the impla	95
D6096	Remove broken implant retaining screw	175

D6105	Removal of implant body not requiring bone removal or flap elevation	120
D6190	Radiographic/surgical implant index, by report	250
D6210	Pontic - cast high noble metal	750
D6245	Pontic - porcelain/ceramic	600
D9999	All On 4 Per Arch	18995
D6740	Retainer crown - porcelain/ceramic	600
<b>Procedure</b>	<b>Nomenclature</b>	
D7111	Extraction, coronal remnants - primary tooth	45
D7140	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)	65
D7210	Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiosteal	120
D7220	Removal of impacted tooth - soft tissue	185
D7230	Removal of impacted tooth - partially bony	230
D7240	Removal of impacted tooth - completely bony	250
D7241	Removal of impacted tooth - completely bony, unusual surgical complications	
D7251	Coronectomy - intentional partial tooth removal, impacted teeth only	200
D7280	Exposure of an unerupted tooth	150
D7282	Mobilization of erupted or malpositioned tooth to aid eruption	
D7283	Placement of device to facilitate eruption of impacted tooth	175
D7310	Alveoloplasty in conjunction with extractions - four or more teeth or tooth spaces, per quadrant	250
D7311	Alveoloplasty in conjunction with extractions - one to three teeth or tooth spaces, per quadrant	200
D7320	Alveoloplasty not in conjunction with extractions - four or more teeth or tooth spaces, per quadrant	300
D7321	Alveoloplasty not in conjunction with extractions - one to three teeth or tooth spaces, per quadrant	250
<b>Procedure</b>	<b>Nomenclature</b>	

D7350	Vestibuloplasty - ridge extension (including soft tissue grafts, muscle reattachment, revision of soft tissue attachment and	1000
D7472	Removal of torus palatinus	450
D7473	Removal of torus mandibularis	400
D7921	PRF Membrane	\$75
D7922	Placement of intra-socket biological dressing to aid in hemostasis or clot stabilization, per site	25
D7951	Sinus augmentation with bone or bone substitutes via a lateral open approach	1200
D7952	Sinus augmentation via a vertical approach	700
<b>Procedure</b>	<b>Nomenclature</b>	
D7953	Bone replacement graft for ridge preservation - per site	400
D7961	Buccal / labial frenectomy (frenulectomy)	250
D7962	Lingual frenectomy (frenulectomy)	250
D9230	Inhalation of nitrous oxide / anxiolysis, analgesia	45
D9239	Intravenous moderate (conscious) sedation/analgesia- first 15 minutes	500
D9310	Consultation - diagnostic service provided by dentist or physician other than requesting dentist or physician	85
D9430	Office visit for observation (during regularly scheduled hours) - no other services performed	20
D9910	Application of desensitizing medicament	75
D9941	Fabrication of athletic mouthguard	500
D9945	Occlusal guard - soft appliance, full arch	450
D9970	Enamel microabrasion	95
D9972	External bleaching - per arch - performed in office	250
D9975	External bleaching for home application, per arch; includes materials and fabrication of custom trays	150