

Our Pure Dental Savings Plan will save you money while protecting your dental health. It's not insurance; it's smarter.

Now you can join our dental savings plan for a low membership fee which entitles you to discounted services and preventative dental care with NO out of pocket expense. Your enrollment will pay for itself almost immediately with:

- No Yearly Maximums
- No Deductibles
- No Claim Forms
- No Pre-Authorization Requirements
- No Pre-Existing Condition Limitations
- Immediate Eligibility (No Waiting Period)
- Free Consultations

OUR PHILOSOPHY IS SIMPLE:

The Pure Dental family wants you to be able to take care of you and your family. We believe that everyone should have access to affordable quality dental care. Despite not having dental insurance, you will qualify for the plan. Ask about our simple enrollment process. We are here to make you feel at ease, while giving you another reason to smile.



MANORVILLE 496 County Road 111, Bldg. F WADING RIVER 5962 Route 25-A

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PURE DENTAL SAVINGS PLAN



WITH PURE PLAN NO PLAN

DIAGNOSTIC

Consultation (no xrays)	n/c	75
Comprehensive Exam	n/c	125
Recement Crown	n/c	40
Emergency Exam	n/c	80
Periodic Exam (recall)	n/c	50
Diagnostic Casts	n/c	80
Oral/Facial Photographic Images	n/c	45
Full Mouth Xrays	n/c	80
Panorex	n/c	75
Oral Cancer Testing	n/c	65
Periapical Xray First Film	n/c	20
Periapical Xray Each Additional	n/c	20
Bitewing Xray Single Film	n/c	15
Bitewing Xray 2 Films	n/c	20
Bitewing Xray 4 Films	n/c	35
3D Cat Scan	n/c	450

PREVENTATIVE

Child Cleaning & Polish	20	95
Adult Cleaning & Polish	40	120
Topical Fluoride Treatment-Child	25	40
Topical Fluoride Treatment-Adult	25	45
Sealant (per tooth)	30	40
Occlusal Guard	300	650

PERIODONTICS

Periodontal Maintenance	110	150
Full Mouth Scaling & Debridement	125	200
Scaling & Root Planning (per quadrant)	110	200
Laser Gum Treatment/arch	300	500
Osseous Surgery (per quadrant)	585	795
Bone Graft (1st Site)	850	1025
Bone Graft (each add site)	500	700
Soft Tissue Graft	2000	2500
Gingivectomy (per tooth)	200	250
Gingivectomy (per quadrant)	420	445
Crown Lengthening	475	550

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COSMETIC

Cosmetic Bonding (per tooth)	340	425
Porcelain Veneer (laminate)	1500	2000
Zoom Deep Bleaching	695	895
Zoom Home Bleaching	325	395
Deep Bleaching Maintenance Kit	65	100

RESTORATIVE

Amalgam (silver) Fillings		
1 Surface	200	250
2 Surfaces	225	275
3 Surfaces	250	300
Composite (white) Fillings		
Anterior (front)		
1 Surface	200	250
2 Surfaces	255	300
3 Surfaces	300	350
Posterior (back)		
1 Surface	250	300
2 Surfaces	300	350
3 Surfaces	350	400

ENDODONTICS

Direct/Indirect Pulp Cap	100	250
Pulpotomy	200	300
Anterior Root Canal*	550	750
Bicuspid Root Canal*	725	1000
Molar Root Canal*	850	1700
Apico Anterior	975	1025
Apico Bicuspid	1100	1250
Apico Molar	1250	1450
*Initial root canal therapy only-Retreats not included		

ORAL SURGERY

Simple Extraction	250	350
Surgical Extraction	350	450
Soft Tissue Impaction	485	525
Partial Bony Impaction	500	575
Full Bony Impaction	475	550
Full Bony Complicated	625	700
Alveoplasty with Extraction	285	310
Alveoplasty without Extraction	385	515
Cyst Removal	300	410

ANESTHESIA

Local Anesthesia	n/c	n/c
Nitrous Oxide (per visit)	80	160
Conscious Sedation	800	1000
Deep Sedation	2500	3500

IMPLANT SERVICES

Endosteal Implant	995	1500
Custom Abutment	875	950
Crown-Porcelain*	995	1350
Permanent Implant Bridge		
(screw or cemented)	20,000	24,000

FIXED PROSTHODONTICS

Crowns (per tooth)

Crown-LAVA (zirconia)	1195	1600
Crown-PFM (Nobel Metal)	995	1400
Other		
Prefab Post & Core	450	550

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