



Advanced Credentialing Training for Diplomate VII

LIVE IMPLANT CORP

914 Emmett Street Kissimmee, FL 34741
www.LiveImplant.com Info@AskDrMongalo.com
Tel: 786.249.4510 • Fax: 786.249.4514

Date: _____
Doctor's Name: _____
Practice: _____
Street Address: _____
City: _____ State: _____ Zip: _____
Office: _____ Cell: _____ Fax: _____
Email: _____
DN License #: _____

Diplomat training consist of:

- 6 Days of preparation for oral and written exams,
- 6 Days of Live Surgeries on patients to fulfill clinical requirements by ABOI,
- 6 Days of Live Prosthetics and final restoration to fulfill clinical requirements by ABOI,
- 2 Days Review of clinical cases to be submitted
- 2 Days of Professional Dental Photography
- 250 CE hours in Oral Implantology.
- 6 Fully Documented clinical cases.
- Seating limited to 7 Doctors



Advanced Credentialing VII:

- **Live surgical session on patients: Module 1**
June 14-20, 2026 • Surgical Session • LIT Nicaragua \$20,000
- **Live prosthetic session on patients: Module 2**
December 6-12, 2026 • LIT Nicaragua. \$20,000
- **Preparation for oral and written exams: Module 3**
November 11-14, 2026 - Orlando. Florida: \$4,000
- **Case preparation, application for the oral exam: Module 4**
TBA - Florida \$4,000

Credit Card Authorization Form

Attending Doctor: _____
Name: _____
Billing Address: _____
Card Number: _____ Expiration Date: _____
Credit Card Billing Zip Code: _____
Signature: _____

All modules are required to be taken - Group discounts will be valid only when each module is taken by the attending group member. If a member cancels, discount will be forfeited for the entire group.

Tuition: \$48,000:

Payment schedule of 4 payments as follows
The total amount must be paid 1 month before the start of the course.

- **Modules 1** - January 30, 2026 : \$20,000
- **Modules 2** - July 15, 2026 : \$4,000
- **Module 3** - October 15, 2026 : \$20,000
- **Module 4** - September 15, 2027 : \$4,000

NOTE: In order to process payment Live Implant Corp requires the following:

- Copy front and back of credit card (attending doctor)
- Copy of Driver License
- Live Implant Corporation does not keep credit card numbers. Upon completion of the course this document will be shredded.
- No payments will processed without this information.

Live Implant Training does not accept wire transfers.
Please contact our office for payment information: 786-249-4510

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- Never send or accept bank information without first calling 786.249.4510 (Ethel)

COURSE DISCLAIMER AND CANCELLATION POLICY FOR ADVANCED CREDENTIALING TRAINING

Live Implant Training Institute, reserves the right to change these general security practices at any time without prior notice. This is a specialized training composed of 4 sessions:

SESSION #1

This is a 6-day externship hosted in Latin America.

*Pre-surgical documentation consisting of CBCT 3D virtual planning,

*clinical pre-op facial scanning and intra-oral scanning,

*Each attending doctor will operate 5 patients and our team will document the surgery. These 5 cases are part of 7 cases required to submit the ABOI oral examination application. The attending doctor must document the remaining 2 cases on their own time at their private practice.

*Lectures on advanced surgical techniques by board certified Oral Maxillofacial Surgeon, board certified Periodontist and accredited Oral Implantologists.

SESSION #2

This is a 3-day training hosted in Orlando, Florida. This session is a didactic training in preparation for the ABOI written and oral examinations and combines lectures with mock board. There are no patients involved in this session.

SESSION #3

This is a 6-day externship hosted in Latin America.

*Post-op documentation of final restorations consisting of laboratory steps, clinical photographs and X-rays at delivery time.

*Each attending doctor will take impressions, take vertical dimensions, scan abutments intraorally and deliver final prosthesis.

*The attending doctor is responsible for final restoration of their 2 private cases.

*Lectures on fixed and removable implant prosthesis will be conducted by board certified Prosthodontist and accredited Oral Implantologists.

SESSION #4

All 5 cases must be in function at least 2-year after being restored. This session is a 2-day online group meeting where Dr. Mongalo will present each attending doctor the 1-year follow up clinical photographs and X-rays.

The attending doctor must do the same with his/her 2 private cases.

*During this session Dr. Mongalo will assist the group in submitting the ABOI Diplomate application.

Keep in mind that we are dealing with patients that can:

1. Change their mind on the proposed treatment plan at the last minute
2. Sudden changes in medical status that will preclude from undergoing treatment
3. Problems with transportation or other personal issues that will result in no-shows
4. Have underlying health problems not detected during the screening process that can result in hemorrhage, poor bone quality which will change the proposed surgery or become anxious and making the surgery impossible

There are also other unpredictable factors such as:

5...Acts of God. These are defined as "an event that directly and exclusively results from the occurrence of natural causes that could not have been prevented by the exercise of foresight or caution; an inevitable accident. Courts have recognized various events as acts of God -tornadoes, earthquakes, death, COVID-19, extraordinarily high tides, violent winds, and floods. Many insurance policies for property damage exclude from their protection damage caused by acts of God". Such nature occurrences can affect the number of patients available for treatment during that training.

***Dr. Mongalo will not tolerate unprofessional behavior, this includes the following:

*Treating patients inhumanly, not following US standard of care. Leaving patient unattended while operating is not acceptable. While there is a surgery being performed, no person in the team (faculty, resident, attending doctors, assisting doctor) will be allowed to leave the room.



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*Inciting negative group comments without approaching Dr.Mongalo with your comments or complaints in private.

The faculty, surgical residents and other attending doctors cannot and will not solve any problems or concerns that attending doctors might have related to room assignment, patient selection, case distribution, expectations, facilities, etc... the only person that can and will solve these issues is Dr. Virgil Mongalo. In order for him to address any problems or concerns he must be notified early during the week. Any and all complaints must be presented to Dr. Mongalo no later than the 2nd day of the course, which is Monday at the end of the surgical day. If complaints are presented on Thursday-Friday it will be too late to correct them since the course is close to completion.

*Attend course after a night of alcohol beverages or narcotics consumption that will interfere with your abilities and/or exhibiting unprofessional behavior in ways you would not behave in your office.

*The course is taught in English. The faculty and residents will speak English during the course. The attending doctors are required to speak English as well even if you are working with someone that speaks your native language, this is considered disrespectful to the rest of doctors, faculty and residents.

Promotional Material:

Live Implant Training (LIT) reserves the right to use any photograph/video taken at any event sponsored by LIT, without the expressed written permission of those included within the photograph/video. LIT may use the photograph/video in publications or other media material produced, used, or contracted by LIT, including but not limited to social media channel, brochures, invitations, books, newspapers, magazines, television, websites, etc.

REFUND POLICY:

At Live Implant Training Institutes we are aware that we live in a world where plans can change and we know you have options for patients hands-on training and we appreciate you selecting Live Implant Training Institutes for your educational needs.

However, due to the nature of our teaching methodology which involves in-person courses, patient screening, commitments we make with our professors and venue partners, we have a strict cancellation policy.

ONCE YOU HAVE REGISTERED AND PAID MONIES FOR ANY LIVE IMPLANT TRAINING INSTITUTE COURSE, THERE WILL BE NO REFUND, OR EXCHANGED FOR ANY REASON.

* Upon informing in writing to our coordinator Ethel Pitochelli that you can not attend 90 days before course commencement we will reschedule your attendance to another course within 9 months since our courses sell out 6 months ahead of time.

*If you have an extreme emergency such as death of an immediate family member or acute hospitalization of yourself or your immediate family member such as wife, son, daughter, we will reschedule your attendance to the next available another course.

*Act of God: hurricane, tornado , earthquake, tsunami or outbreak of a pandemia, we will transfer your registration to the next available course.

*If you do not attend the course or cancel at the last minute, you will forfeit your entire tuition and there will be no transfer to another course.

It is crucial that you make your due diligence in selecting your implant training, be certain of your schedule and your desire to participate in the course before registering.

COVID-19 POLICY

If you are COVID 19 positive, you are required to submit via email at Ethel@askdrmongalo.com test results of SARS-CoV-2 RT-PCR.

LIT does not accept Rapid Test, because of high percentage of false positives.

If you fail to submit the results via email four weeks prior to your course commencement, your will forfeit your entire course payments.

If you send your test results of SARS-CoV-2 RT-PCR, your course will be reschedule within six months and your entire payment will be transfer to the selected course date.

In case of a country lock down the tuition for that course will be transfer to a later date, there will be no refunds under any circumstances

I have read, understand and accept Live Implant Corporation rules, regulations and cancellation policies.

Doctor's Name:

Signature:

Date / /



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