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ADA NEWS

APRIL 4, 2005

VOLUME 36 NO. 7

Georgia enacts tort reform

BY MARK BERTHOLD

Atlanta—"Probably the most comprehensive tort reform legislation enacted anywhere in the country," as described by the Georgia Dental Association, was signed into law Feb. 21, just a couple days after Gov. Sonny Perdue received Senate Bill 3 from state lawmakers.

The new law, which took effect the same day, places a cap of \$350,000 on non-economic damages in malpractice verdicts against health care providers.

See *GEORGIA*, page six

Fluoridation bill moves in Oregon

BY STACIE CROZIER

Salem, Ore.—The Oregon House of Representatives voted 36-22 last month in favor of a bill requiring cities with more than 10,000 people to fluoridate their water.

House Bill 2025 passed March 21 and now moves to the state Senate for consideration.

"We've still got a long way to go, but it's a big step in the right direction," said Dr. Janet Peterson, president of the Oregon Dental Association.

Dr. Peterson noted that the effort to bring fluoridation began with a core group of dentists and other interested

■ **Fluoridation symposium, page eight**

■ **Senate blocks Medicaid cuts, page six**

citizens, who worked city by city to get community water fluoridation started.

"The ODA felt that we might see more success if we took the initiative statewide," she said. "So the dental association helped provide some muscle for the campaign."

The activists—the "Healthy Smile Coalition"—worked long and hard to bring fluoridation to Oregonians. The chair of the Tri-County Fluoridation Forum, Dr. Kurt Ferré, says when he was a dental student at Northwestern University in Chicago, he thought most communities had fluoridated water.

"When I got to Portland in 1980 and started examining patients, I was shocked to learn that we didn't have fluoridated water," he remembered. "I've had a bee in my bonnet ever since because lack of community water fluoridation really amplifies

See *OREGON*, page eight

BRIEFS

HIPAA security: Dentists who are required to comply with the HIPAA security regulations by the April 20 deadline may be pleased by a recent message from the agency that will enforce the regulations.

In a March 25 Federal Register notice, the Centers for Medicare & Medicaid Services stated that it will try to resolve complaints about security violations by working with covered entities (those who must comply with HIPAA) to achieve voluntary compliance before considering fines.

CMS is the agency charged by the U.S. Department of Health and Human Services with HIPAA enforcement on electronic transaction and security standards under the Health Insurance Portability and Accountability Act of 1996.

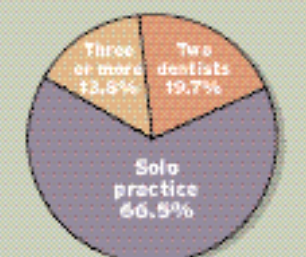
HIPAA security, like all HIPAA regulations, only applies to dental practices that submit or receive electronic transactions for which HHS has established a standard, either directly or through a vendor or clearinghouse. Electronic claims are the standard transactions most commonly used by dentists.

For questions about the HIPAA security regulation, or HIPAA overall, contact Patrick Cannady, senior projects assistant, ADA Council on Dental Practice. E-mail "HIPAA@ada.org" or call toll-free, Ext. 4608. ■

JUST THE FACTS

Private practices

Private practice dentists by size of practice, 2002.



Source: ADA Survey Center "survey@ada.org", Ext. 2548

2005 session

Philadelphia sets the scene for an historic meeting

BY STACIE CROZIER

Philadelphia—Philadelphia, the nation's birthplace and a symbol of America's heritage and freedom, will host the 146th Annual Session of the American Dental Association Oct. 6-9 at the Pennsylvania Convention Center.

"As ADA president, it is my distinct pleasure to welcome you to Philadelphia," says Dr. Richard Haught. "The Council on ADA Sessions has worked overtime to make sure that this meeting will exceed your expectations. I've toured both Philadelphia and the convention center and it is a wonderful place for our meeting. So come on and visit the city, take some of the outstanding courses and visit our exhibitors to see the latest in dental technology, equipment and materials.

See *PHILLY*, page 42

■ **Annual Session Preview, pages 28-37**

■ **Tour details, page 38**

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Belize in autumn

Reef diving, Caribbean travel, Mayan culture can enhance Oct. 21-29 dental mission trip

Now in its 12th year, the Belize Mission Project is planning a dental mission trip for Oct. 21-29.

Volunteers will set up clinics in a variety of areas in Belize, both on the mainland and on island locations to perform preventive and restorative dentistry. An average of 50 volunteers travel with the program each time, including dentists, physicians, physician assistants, nurse practi-

tioners, dental hygienists and assistants, nurses, dental laboratory technicians and general helpers.

For more information about the program or to download an application for the upcoming trip, log on to "www.belizeproject.com" or call Dr. Frank Whipps, Centralia, Ill., at 1-618-532-1821.

The ADA Center for International Development and Affairs also offers a new 78-page guide,

"International Dental Volunteer Organizations: A Guide to Service and a Directory of Programs." The guide contains an in-depth introduction to overseas volunteerism for dental professionals plus listings of some 80 international programs for dental professionals. The guide is free to ADA members, \$15 for nonmembers.

Contact the ADA Center for International Development and Affairs toll free at Ext. 2726 or by e-mailing "international@ada.org". More information is also available at "www.ada.org/goto/international". ■

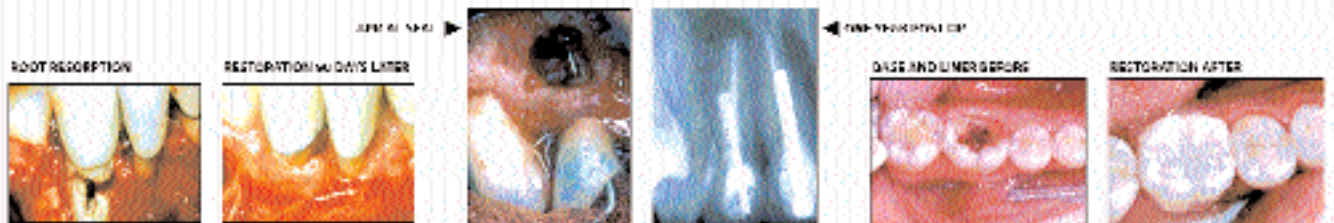
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Michael G. Maihofer, D.D.S.

They come in droves, delivered to our offices day after day, week after week. There's no stopping them. Some are sized 8 by 10 inches, some are much larger. Some come sealed in plastic, some in plain brown paper. They're all very attractive, loaded with lots of color photos and snappy ads.

Most contain convincing testimonials and "clinical case studies" from popular dental "experts." Packed with all the latest and greatest products and techniques, they promise to launch your practice into the 21st century. And, oddly enough, they're always free. Provided as a courtesy by the dental product manufacturing industry, there are never any subscription fees to pay for all this good stuff.

They flood our practices. They flood our consciousnesses. Some say they cloud our judgment. In fact, many worry that today's dentists are apt to give more credence to these quick-read, industry driven publications than our scientific, evidence-based journals.

Dentistry is increasingly inundated with new products and technology. Last year alone, more than 500 new dental products were introduced to our profession. It has been estimated that one out of five or about 20 percent of these new products can't actually perform what their manufacturers have claimed. So who are we to believe? Who can we rely on to make sense out of all this?

The ADA has tried. In 1932 it initiated the professional products component of the ADA Seal of Acceptance Program. In 2001, it created a "Dental Product Spotlight" feature in the Journal of the American Dental Association to describe the clinical characteristics of various products that had passed the ADA Seal's rigorous standards. Most of us, unfortunately, paid little notice.

Currently only a meager 11 percent of all professional use products in the marketplace are participating in the ADA's Seal Program. It's obvious that the vast majority of these products are never being submitted for the program's evaluation. And we all know why. After all, why willingly submit your new dental product or device to an independent third party with rigid, science-based guidelines for evaluation and possible rejection?

Many of today's dental manufacturers don't need to do that. They can introduce new products, often with little credibility, much faster and more easily by sidestepping such a process. Utilizing their glossy, all pervasive, pseudo-scientific, publication infrastructure, they can get their products on and off the market before long-term clinical trials are completed, which often translates into bigger and faster profits.

See MY VIEW, page five

LettersPolicy

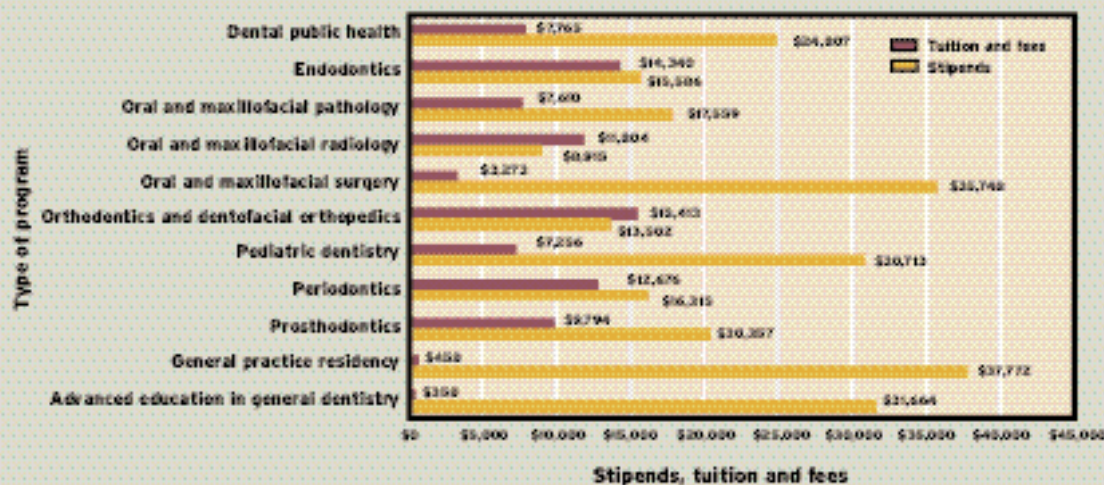
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SNAPSHOTS OF AMERICAN DENTISTRY

Dental education

Average first-year tuition and fees for advanced dental education vary considerably by program.

Average first-year stipends and tuition fees for programs: 2002/03



Source: American Dental Association, 2002/03 Survey of Advanced Dental Education.

Letters

Member experience

I recently enjoyed an "experience of a lifetime" event. I wanted to share it with our members and colleagues, and all who are connected with and contribute to dentistry.

Several months ago I received a call from a dentist friend of mine in a nearby city. He wanted to know if I would help with the upcoming ADA annual session in Orlando, Fla. I replied, "sure," not knowing what he really wanted me to do but, trusting our friendship, I wanted to be of service.

Over the next several months a group of dentists met and mapped out the plan to host the ADA annual session. These meetings gave me the opportunity to get to know these other fellow dentists on a deeper and more meaningful level than the casual "Hi, how are you?" at the local meetings.

Now it was time for the meeting itself and the experience of a lifetime. I got to see and experience a large group of dentists and allied personnel from our local area, along with the professionals from the ADA, coordinate a major event. All individuals pulled together as a team each morning to see that the speakers had everything they needed. Room hosts showed up and assisted with the pro-

grams and speakers. Wonderful food was provided by another group. Runners were sent hither, thither and yon with needed supplies, requests and errands which at times seemed without end. All performed wonderfully well.

Another group coordinated the exhibit hall and



exhibitors with all of their needs and requests. Every day, many people worked with and streamlined the thousands of attendees and helped them to their destinations—answering their questions and assisting in every way imaginable.

While I am sure something like this happens at all major events on a daily basis, I had never personally experienced it before.

From this event, I came away with several observations I want to share with you. I was thanked for my

efforts, but really it is I who want to thank you for letting me have the experience of a lifetime.

I worked with and got to know the true quality and character of those of whom I am a part. Dentistry truly has the finest people of any organization that exists. The commitment of hours and seemingly endless, untiring effort was given without complaint or compromise. The volunteers showed up each day with a broad smile and willingness to do whatever was needed or asked. The quality of this effort showed in the ultimate success we had at the Orlando annual session. I am truly proud to be associated with and part of organized dentistry. My membership in the ADA really gives me more than a card to carry—it allows me to be associated with the finest individuals in the finest organization in the world.

When you are asked to help, accept the request and you will have the experience of a lifetime as I did.

James D. Crandall, D.D.S.
Port Orange, Fla.

Scams

The March 7 ADA News is possibly the most enlightening issue that I have read in years. The articles in See LETTERS, page five

MyView

Continued from page four

So it was hardly surprising, and a little anticlimactic, when, last October, the ADA announced that its professional component of the ADA Seal Program had outlived its usefulness. It will now be replaced with a new evaluation program that better serves the needs of our members.

For as hard as it may be for some dental manufacturers to swallow, ADA research continues to show that members want product information that is scientifically supported, clinically relevant, concise and unbiased. They also want comparisons between competing dental products according to their performance in laboratory and clinical settings.

Consequently, the ADA plans to create a quarterly product evaluation newsletter. It will provide the results of ADA laboratory testing and clinical use data from practicing dentists to compare professional products within the same category and make recommendations.

To many that sounds like exactly what Clinical Research Associates has been providing for years to any dentist willing to pay its \$59 newsletter fee. Nevertheless, the ADA insists it can provide a more unique and valuable product. It cites its extensive experience in evaluating professional products, as well as its reputation as a reliable source of sound, scientifically objective, product information.

Let's hope the ADA is right. Dentistry needs credible, unbiased, professional product information now more than ever. Something like this, pro-

vided there's no additional member fee, could surely become one of our most-valuable benefits of membership.

Dr. Maihofer is the editor-in-chief of the Journal of the Michigan Dental Association. His comments, reprinted here with permission, originally appeared in the February issue of that publication.

Editor's note: The ADA Council on Scientific Affairs notes that the newsletter to which Dr. Maihofer refers is the "ADA Professional Product Report," a member benefit slated to launch in mid-2006.

ADA research shows overwhelming support for a science-based product evaluation program. In late 2004, the Board of Trustees approved the Council on Scientific Affairs' plan for such a program. The

quarterly newsletter will report laboratory testing results on three product categories per issue, plus clinician input. The ADA is currently seeking members willing to participate in this program.

The ADA Seal of Acceptance program will continue for professional-use products currently possessing the Seal through the end of 2007, but new submissions are no longer being accepted. The ADA Seal program will continue for over-the-counter products. Market research shows, and the ADA believes, that this component of the Seal program provides a valuable consumer benefit and is supported by members and many dental manufacturers.

For more information on the ADA Professional Product Report or to participate in clinical reviews and surveys, contact Dr. Ron Zentz at Ext. 2522 or "zentzr@ada.org".

Letters

Continued from page four

"Caution: Dental Offices Believe They Were Victims of Scam Artists" should be distributed to all graduating dental school students.

It will surely save them thousands of dollars after graduation and highlight just one of the many reasons to be an ADA member.

*Arthur M. Greenwald, D.D.S.
Edison, N.J.*

Editor's note: The ADA is pleased to report that all dental students receive the ADA News as a member benefit.

Insurance cards?

I have a question that I believe many dentists also wish to ask. Namely, can organize dentistry, at all levels, require that employers supply a dental insurance card for all employees who have eligible valid dental insurance?

Instead what we get, at our office, are medical insurance cards, hospitalization cards, pharmacy and optometric cards and so on. I cannot imagine walking into a physician's office and not being able to present a valid medical insurance card; that's the first thing they ask for.

It's very frustrating when patients claim they "don't have a card" and "were never issued one" as well as all the confusion that goes with it. Also the card should contain a group number and a mailing address. (Even though we send claims electronically, you still need the mailing address for any paper claims sent with X-rays.)

Many claims sent electronically will not go through without the group number, which almost always is not the Social Security number.

*Leonard M. Tomsik, D.D.S.
Parma Heights, Ohio*

Editor's note: The Council on Dental Practice responds: "Organized dentistry cannot require that insurance companies provide a benefit care to all members. While many companies do offer cards, the trend in the industry is to provide information online as a cost-containment measure. Companies do incur added expenses for offering a benefit card. Most employers pay for the benefit card for medical, however if they are making attempts to cut costs, they may opt to forego a card for dental.

"If the employer has medical and dental benefits with the same company, members usually have a card. Some national full-service plans are piloting 'smart cards' that include patient information—such as eligibility, benefits, even health information. The card can be swiped through a reader, making information immediately available to health providers. Unfortunately, smart cards are not in full use at this time."

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Dentistry 'heard loud and clear'

Senate vote blocks proposed cuts in federal Medicaid

BY CRAIG PALMER

Washington—We have a grassroots network we can be proud of, ADA leaders said in response to

a March 17 U.S. Senate vote blocking proposed reductions in the federal Medicaid budget of \$14 billion.

"Dentistry's message was heard loud and clear, Medicaid reform should not be driven by arbitrary cuts," ADA President Richard Haught and

Executive Director James B. Bramson said in "Victory" memos to leaders of Association grassroots action teams. "Cuts in Medicaid at the federal level will only lead to more cuts to dentistry across the states.

"Thanks to the hard work of ADA's action team leaders, along with that of other groups, the Senate passed an amendment, voting 52 to 48 to strike Medicaid cuts from the fiscal year 2006 budget proposal. The amendment, led by Sens. Gordon Smith (R-Ore.) and Jeff Bingaman (D-N.M.), replaced the Medicaid cuts with a reserve fund to set up an ADA-endorsed Bipartisan Commission on Medicaid Reform."

Dr. Bramson praised the legislative lobbying of grassroots action teams in a related message to ADA officers and trustees.

"Our members really rallied on this issue, and they were successful," he said. "Clearly, the Washington Leadership Conference helped charge up our members. I think we have a grassroots network that we can be proud of."

The ADA leaders urged continued grassroots dentist support for bipartisan reform of the federal-state Medicaid program as the House of Representatives takes up budget legislation. "We may need to call on you again to assist us in making sure the final bill does not include cuts to the program." ■



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Georgia

Continued from page one

The law also addresses key tort-related issues, including venue, expert affidavits, authorization to disclose protected health information, offer of judgment, apologies, expert witness, apparent agency, joint and several liability, emergency care and effective date.

"We were just absolutely pleased to get such broad legislation passed," says GDA Executive Director Martha Phillips, adding it "couldn't have been possible if not for the cooperative efforts between the business community and the health care community."

She also credits Georgia dentists, who came to the state capital building to lobby the bill.

"Having 30 to 40 dentists every single Tuesday was very effective," she says. "They were vocal and they were noticed."

Ms. Phillips hopes the stabilization of medical costs and premiums will have a significant impact on dentistry.

"Medical and hospital costs soak up so much of health care expenditures, especially in the Medicaid program," she says. "So anything we can do to stabilize medical costs and free up those resources will be an opportunity for money to go into dental care." ■



Ms. Phillips

Illinois dentist linked to White House

Meets President Bush after Jan. 5 speech on tort reform; son guards president

BY CRAIG PALMER

Collinsville, Ill.—Dr. and Mrs. Curtiss O. Floyd are standing backstage after the president's Jan. 5 speech on medical liability reform when President Bush turns to one of the men in black and says, "Floyd, go stand by your momma." The young man repositions himself as directed.

"We're back there with the counter-assault team and a few other dignitaries for pictures," said Dr. Floyd, a Springfield, Ill., dentist. "We get to the president. The guys in suits introduce us, and one of them says to the president, 'You remember Mike Floyd. He and his parents are here.'"

"My wife, Roberta, says to the president, 'He never minded his mother all the time, either.'" President Bush confessed publicly in his first health policy speech of the year that he doesn't always listen to his mother either, and the White House has it on record in a transcript of the event.

Reports Dr. Floyd: "The president says back to her, 'That's probably why he's on the CAT [counter assault] team. I'm going to watch your boy like a hawk.'"

"Then he chuckled and said, 'Of course, he's always watching me like a hawk,'" Dr. Floyd said.

Son Mike was on duty with the Presidential Protective Detail during the president's first trip of the year and the first visit to Collinsville by a sitting president of the United States.

Dr. Floyd, having vetted this moment with the tripartite profession, consulting in advance with the Illinois State Dental Society and the American Dental Association, said he told the president, "We're behind you in [the medical liability reform] effort."

The president replied, said Dr. Floyd, "Oh, that's very good to know."

Reports the dentist: "I said, 'One of the hidden costs you may not be aware of, this has a discouraging effect on the best and brightest entering our professions including medicine and dentistry.'"

"The president's response was, in a joking manner, 'Yeah, I know, they all want to become stockbrokers or lawyers.' My response," says Dr. Floyd, "tongue in cheek, was, 'Oh, God forbid.' Then we all had a nice chuckle." ■

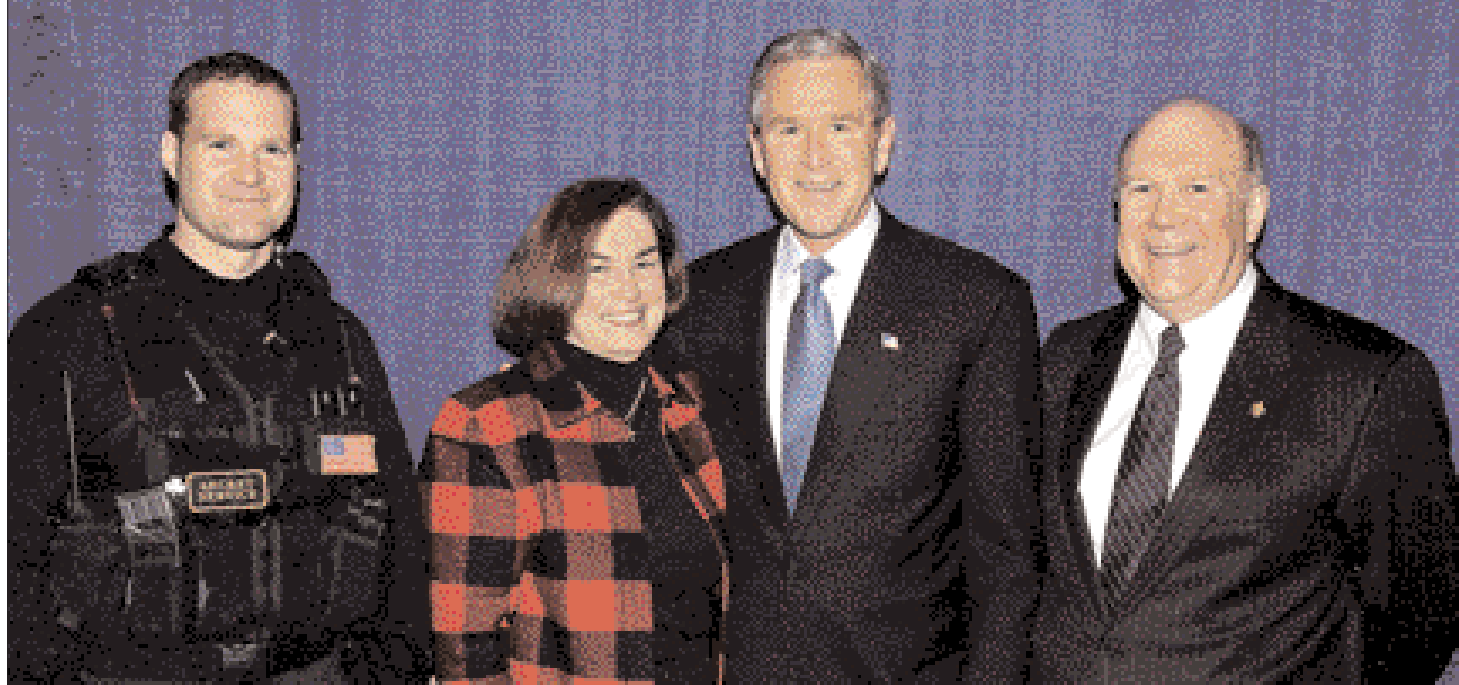


Photo op: Mike Floyd, a member of the Presidential Protective Detail, Roberta Floyd, President Bush and Dr. Curtiss O. Floyd pause backstage at the Civic Center in Collinsville, Ill., after the President's speech to health care providers on litigation reform.



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Celebrate fluoridation—and strategize—this summer

BY STACIE CROZIER

Sixty years ago, when Grand Rapids, Mich., turned on the taps with fluoridated water, the dreams of dental researchers and public health officials made a momentous splash in the public health arena.

This July, the ADA and a host of researchers, public health officials, community leaders and legislators will make another splash to celebrate the impact of community water fluoridation on three generations and an estimated 170 million citizens benefiting from fluoridated water right now.

The symposium will also offer strategies for

community leaders to bring fluoridation to their own cities and towns.

“Fluoridation is recognized as one of the top 10 public health measures ever enacted,” said ADA Executive Director James B. Bramson. “It’s appropriate that we stop and celebrate this event. But we cannot stop now: there are still lots of communities that do not have the benefit of fluoridated water. That’s where we need to concentrate in the future.”

The National Fluoridation Symposium is sponsored by the American Dental Association in conjunction with the Centers for Disease Control and Prevention.

The symposium, which runs July 13-16, will kick off with a 60th anniversary celebration at Chicago’s newest outdoor venue, Millennium Park, July 13.

A two-day symposium at ADA Headquarters July 14 and 15 will focus on a variety of issues, including:

- fluoridation benefits, safety and cost-effectiveness;
- how national and state organizations can support communities who want to initiate or continue fluoridation;
- public health law and legislation;
- the status of fluoridation today;
- how to bring fluoridation to your community,

and more.

On July 16, participants can sign on for a special fluoridation spokesperson training seminar and earn four hours of continuing education credit.

Online registration for the symposium is now open. Log on to “www.ada.org/goto/symposium” for more details and registration forms. Attendees who register for the 60th anniversary celebration, the two-day symposium and spokesperson training will receive a special package rate.

Special conference rates are also available at three Chicago hotels: The Ritz-Carlton, Doubletree Suites Chicago and Best Western Inn of Chicago.

Log on today for more information or call toll-free, Ext. 2879, to request a registration form. ■



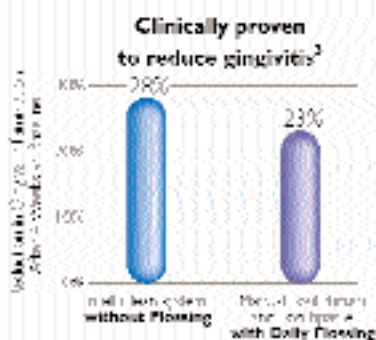
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3. Dental Clinics, Vol. 10, Issue 11, November 2004, pp. 15-19. Copyright © 2004 Philips North America Consumer Electronics, Inc.

PHILIPS

Oregon

Continued from page one

social inequities in preventive health care.”

Dr. Ferré, who also works as a volunteer for low-income individuals who need dental care, says the coalition has been active for more than five years, trying to initiate change and bring fluoridated water to more communities in the state. He credits the ADA for giving him lots of information and support for his cause.

In January, the ODA kicked off their efforts to bring fluoridation legislation to the state with a breakfast gathering of 100 dentists and legislators—all who came to hear former U.S. Surgeon General David Satcher, the first surgeon general to issue a report on the status of the oral health of the nation—discuss the dire need for adopting the preventive dental health measure of community water fluoridation.

The Healthy Smile Coalition also produced a briefing paper for lawmakers, outlining the state’s oral health needs. “About 20 percent of Oregonians drink fluoridated water,” it reads. “Oregon ranks 48th out of 50 states in terms of the percentage of citizens who drink water that has been adjusted with optimal amounts of fluoride. Only New Jersey and Hawaii fare worse.”

The briefing outlined the ODA proposal that all municipal water systems serving 10,000 or more customers should fluoridate their water—giving about 67 percent of the population access to fluoridated water when fully implemented.

The ODA also took its case to the citizens of Oregon by providing member dentists with a package of patient education materials on the safety and effectiveness of community water fluoridation. The dental association also asked dental offices to display counter signs and distribute brochures asking patients to contact their legislators in support of the bill.

Fluoridation has seen a flurry of legislative and legal activity in other areas nationwide in the past few months.

More than 35 communities voted to adopt or retain community water fluoridation during 2004. This month, voters in Fort Collins, Colo.; Carl Junction, Mo.; and Neosho, Mo., will also vote on fluoridation.

Four other states—Arkansas, Massachusetts, Nebraska and New Jersey—have initiatives in progress working toward state mandates or strengthened support for fluoridation. California’s Gov. Arnold Schwarzenegger signed Senate Bill 96 into law in September 2004, legislation designed to make it easier for communities to implement already mandated community water fluoridation. Alaska is also working to pass a resolution in its state legislature that will encourage communities to fluoridate public water systems.

Resources and assistance on fluoridation issues are available through the ADA Council on Access, Prevention and Interprofessional Relations. Call toll-free, Ext. 2858. ■



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Older Adults Initiative nets big response

BY STACIE CROZIER

When the ADA, the ADA Foundation and GlaxoSmithKline Consumer Healthcare put out a call for grant applications for programs that serve semi-dependent older adults, they expected some responses.

But they were overwhelmed when they found themselves sifting through 178 applications—all received in a six-week time frame.

“Judging by the huge response, GlaxoSmithKline is especially pleased to see the high number of submitted applications,” said Dr. Ronald L. Rupp, senior manager of GSKCH professional relations. “The response indicates many are inter-

ADA | FOUNDATION

American Dental Association Foundation

ested in improving oral health care for older Americans and confirms the rapidly growing concerns around addressing access to care for the fastest growing segment of the U.S. population.”

The new Access to Oral Health Care for Older Adults Initiative, established in a cooperative effort between the ADA and the ADA Foundation and funded by a \$250,000 grant from

GlaxoSmithKline Consumer Healthcare, will award four or more pilot programs grants of up to \$50,000 each.

An advisory committee for the program will select programs from the mountain of applications and notify funding recipients by May 15.

“The Foundation and its advisory committee are quite pleased with the extraordinary response

to the request for proposals,” said Dr. Frank C. Grammer, chair of the advisory committee for the project and ADA 12th District trustee. “The advisory committee has already begun the arduous task of evaluating the proposals.”

Unlike other age groups, few governmental programs cover dental services for semi-dependent older Americans—those who may live at home but have trouble getting to a dental office. Only about 22 percent of adults over age 65 have private dental insurance. However, as more people keep their teeth, more will be at risk for dental diseases and will need more preventive, restorative and periodontal services.

According to a report by the U.S. Centers for Disease Control and Prevention, only about half of adults age 65 and over visited a dentist in 2001, compared with the nearly 75 percent rate for children. About three out of 10 older Americans no longer have any natural teeth and over four out of 10 have gum disease. ■

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Connecticut fights for Medicaid

BY MARK BERTHOLD

Hartford, Conn.—The Connecticut Oral Health Initiative is pulling out the stops to help House Bill 5697, a bill for higher dental Medicaid reimbursement, get through the state legislature and into law.

The COHI, calling itself a “coalition of health professionals, business and community leaders dedicated to improving Connecticut’s oral health system,” gave testimony March 3 before lawmakers in support of the bill.

“There can be no fiscal health without physical health for our state’s residents. We know that smart dollars invested in preventive health care (and most dental problems are preventable) reap huge savings later in reduced need for emergency



Mr. Slate

care,” COHI Executive Director Robert Slate told members of the Human Services Committee.

Fewer than 5 percent of Connecticut’s 2,500 dentists accept Medicaid patients, he continued, partly because reimbursement rates are “hopelessly low” and haven’t been adjusted since 1989 for adults and since 1993 for children.

“The results?” Mr. Slate asked. “Medicaid waiting lists exceed one year. It has gotten so bad that the state is being sued in federal court for non-compliance with federal law.”

The COHI also has taken its cause public with the launch March 8 of a new Web site, “www.ctoralhealth.org.”

The site gives updates on legislative initiatives that affect dentists and more than 300,000 Medicaid recipients—two-thirds of whom are children. ■

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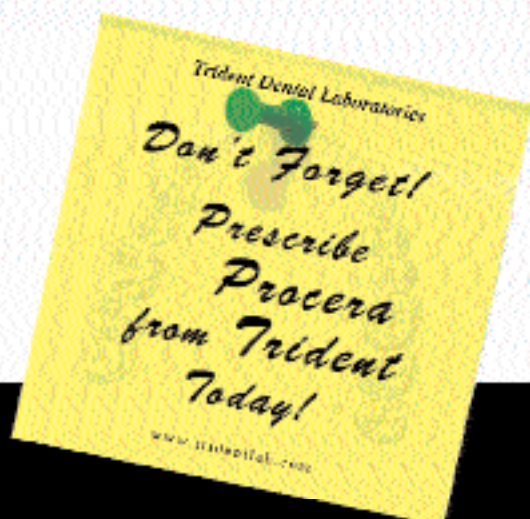
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ADAReport

Dr. Lander honored

BY STACIE CROZIER

Newly retired from the ADA Council on Access, Prevention and Interprofessional Relations, William W. Lander, M.D., received a Council's Choice Award in 2004 in recognition of a decade

of service to the council as well as his tireless efforts to build bridges between medical and dental professionals.

"Bill is a good friend and particularly a good friend to the dental profession," said Dr. David A.

Whiston, ADA commissioner on the Board of the Joint Commission on Accreditation of Healthcare Organi-



Thank you: Dr. Lauf (right) presents Dr. Lander with the Council's Choice award in December 2004 at ADA Headquarters.

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zations. "He's been a great help and constantly helps remind our medical colleagues that oral health plays a significant role in systemic health."

Dr. Whiston, a former ADA president (1997-98) and trustee, has served with Dr. Lander as a part of CAPIR throughout Dr. Lander's tenure on the council.

"Dr. Lander is an asset to our Association," said Dr. Robert Lauf, council chair. "His ability to serve our Association and the American Medical Association was invaluable. He brought forth a wealth of information and insight, and he not only understood the correlation between oral health and medicine, he practiced it. He was a voice of dentistry to our physician colleagues. It was a great pleasure and honor to have served on the council with him."

Dr. Lander received his medical degree from the University of Pennsylvania in 1949. After serving in the Navy from 1950-52, he completed a residency in internal medicine at the Bryn Mawr Hospital and later served as the hospital's medical staff president. Dr. Lander served on the governing council of the Pennsylvania Medical Society, was a PMS trustee, and currently serves as the society's president. He is the PMS delegate to the AMA house of delegates.

"He was invaluable on the floor of the AMA house of delegates whenever issues relating to dentistry surfaced," added Dr. Whiston. "He was able to explain these issues to our medical colleagues for the benefit of our professions and the public."

CAPIR chose to honor Dr. Lander for "his countless contributions to medical-dental interface and community health promotion, including his tireless devotion to promoting the connection between general health and oral health to organized medicine, organized dentistry and the patients they serve."

Dr. Lander worked to publicize and educate colleagues on issues like xerostomia caused by medications and the oral manifestations of tobacco use. ■

Group seeks musicians

Washington—The VA-National Medical Musical Group is seeking dental and medical professionals (and students) who are musicians or vocalists. For more information call 1-202-797-0700; e-mail "vanmmg@hotmail.com" or log on to "www.medicalmusical.com". Families and friends are eligible to apply. This year's schedule includes a Flag Day concert June 14 in Washington, a Veteran's Day concert Oct. 31 in Nashville and a concert tour of Germany immediately following the Veteran's Day concert. ■

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Howard Strassler, DMD, FADM, FAGD

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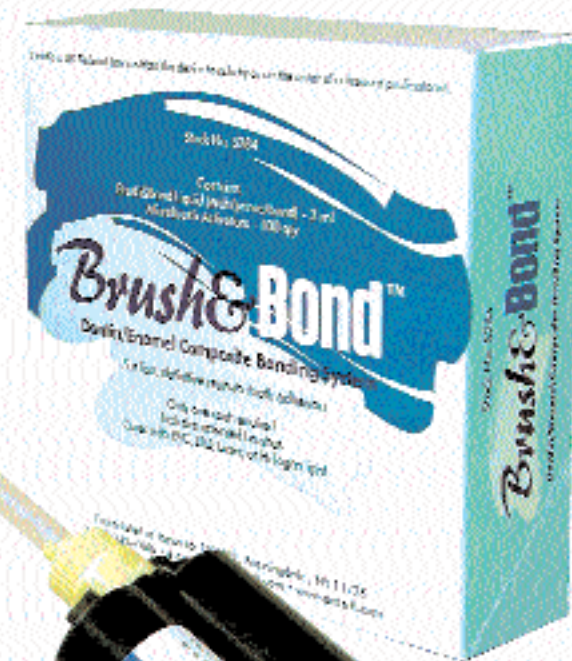
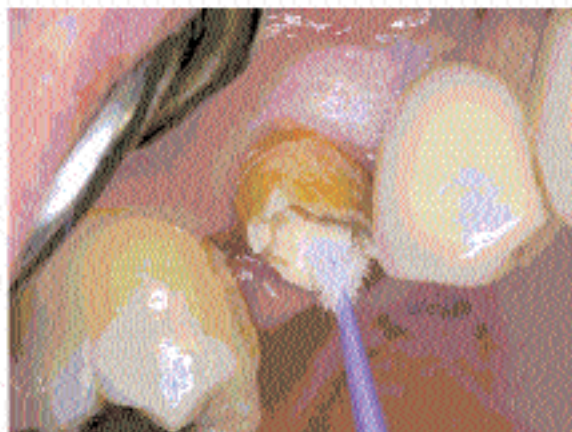
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ADA Institute for Diversity in Leadership seeks applicants

BY KAREN FOX

In September, the ADA Institute for Diversity in Leadership enters its third year.

Twenty dentists have participated in this three-part program designed to enhance leadership skills of dentists who belong to racial, ethnic and/or gender backgrounds that have been traditionally underrepresented in leadership roles.

ADAReport

Made possible by the ADA Foundation through corporate contributions from Colgate-Palmolive Co., GlaxoSmithKline, Procter & Gamble and Sullivan-Schein, the Institute "has been wonderfully

successful so far," said Dr. G. Kirk Gleason, ADA 2nd District trustee and member of the Board of Trustees Standing Committee on Diversity.

"The graduates continue to impress us, applying their leadership skills within their communities and serving as role models," said Dr. Gleason.

Integral to the program are the personal leadership projects that provide Institute class members

with hands-on experience in identifying and taking action on a civic or professional issue of personal importance.

"Hispanics for Dentistry" was the project Dr. Jose-Luis Ruiz selected. Dr. Ruiz, a 2004 Institute graduate and clinical instructor at the University of Southern California School of Dentistry, developed the recruitment program to increase the number of Hispanic applicants at USC and other dental schools across the country.

"One thing the Institute taught me is that we need to be able to bring other groups together if we're going to achieve ultimate success," said Dr. Ruiz.

"I had been working on this project on my own without much success," he added. "Then I tapped into resources and support from groups like the California Dental Association, Hispanic Dental Association, the ADA and USC. All of a sudden we have a program that is catching up very strongly."



Dr. Ruiz

Photo by Lighthouse Studio

The successful leadership projects show that "the caliber of the applicants is extraordinary," said Dr. Jeanne Strathearn, 1st District trustee and member of the Board's Standing Committee on Diversity.

"This makes the selection process difficult but allows for varied, ambitious and beneficial projects to be initiated," said Dr. Strathearn. "Past participants have been really excited about the course work offered by the Kellogg School of Management and have incorporated the material presented in the projects that they have led for their communities."

This year's session dates are Sept. 8-9; Dec. 12-13; and Sept. 7-8, 2006.

May 2 is the application deadline. For more information or to download forms, go to "www.ada.org/prof/events/featured/diversity.asp" or contact the ADA at "starsiaks@ada.org" or Ext. 4699. ■



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Hampton, N.H.—A new DVD helps dentists and their staff members learn strategies that can help in treating patients with autism.

Developed by Dr. David A. Tesini, "The D-Termined Program of Repetitive Tasking and Familiarization in Dentistry," offers five steps to help patients with autism acclimate to the dental environment.

The program uses five to six familiarization visits, after which a patient is usually able to accept dental treatment without sedation or physical stabilization. Dental team members play a significant role in working with the patient on repetitive tasking, minimizing the time required by the dentist during the familiarization process.

The program is available for a limited time at no charge, thanks to a grant from the NLM Family Foundation. Dentists and parents who request the DVD are asked to complete and return a short survey on the usefulness of the program.

For your free DVD or more information, log on to "www.specializedcare.com/detail.cfm?ID=328". ■

ADA-Kellogg program seeks dentists for executive training

BY KAREN FOX

When he graduated from dental school in 2001, Dr. Delon Gilbert had been accepted into the Kellogg School of Management, Northwestern University's prestigious MBA program.

"I was at a different stage in my life then," said the Portland, Ore., general dentist. "My wife was expecting our third child and I had a part-time practice. I just decided the timing wasn't right to begin an MBA program."

It's been said that timing is everything, and things fell into place for Dr. Gilbert when he heard about the ADA/Kellogg School of Management's "Executive Management Program" exclusively for dentists.

Now the owner of a three-dentist practice and father of children age 3, 7 and 10, Dr. Gilbert was one of the first to register for the Executive Management Program that has spurred well over 100 inquiries from ADA members.

The Executive Management Program features advanced business subjects such as management strategy, organizational behavior, leadership, marketing, economics, finance, accounting, information systems and quantitative methods for management. The curriculum is based on



means improving technology. This type of management training can certainly provide the skills

and knowledge needed to accomplish that."

To enroll in the Executive Management Program, dentists must be willing to attend three five-day sessions on Northwestern's Chicago campus. The sessions are July 23-27, Sept. 16-20 and Nov. 4-8. Participants completing the program will receive a certificate from the Kellogg

School of Management.

Those interested are encouraged to register by May 17. Enrollment will be capped at 45 participants. For more information, go to "www.ada.org/goto/kellogg" or contact Joe Martin, director, ADA Dental Society Services, at "martinj@ada.org". ■



Dr. Gilbert: "I've always had interest in the business side of dentistry and the dental industry. There is this whole entity outside of clinical, chairside practice that drives the profession. I have a vision into that but lack the familiarity with subject matter."

core courses taken by Kellogg MBA students.

The program is ideal for dentists contemplating a career change; those serving on a board for a non-profit or investor-owned corporation; those who own or are seeking to buy a non-dental business or franchise; or those who provide leadership in the dental insurance field, dental manufacturing or consumer goods, education, government, research or the military.

"I've always had interest in the business side of dentistry and the dental industry," said Dr. Gilbert. "There is this whole entity outside of clinical, chairside practice that drives the profession. I have a vision into that but lack the familiarity with subject matter."

Through the Executive Management Program, Dr. Gilbert said he hopes to "gain a degree of credibility with my peers and learn more about connecting with the dental industry and contributing to it on a higher level."

Added Dr. Gilbert: "In the future, clinical dentistry will be driven by efficiency, which

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Education

NYU dental school absorbs nursing college

BY KAREN FOX

New York—Can a nursing school exist within a dental school? Officials at New York University are about to find out.

In response to a call for interdisciplinary health research and education, on Sept. 1 the NYU Division of Nursing will become a new College of Nursing within the NYU College of Dentistry. The

combined school will be known as the NYU College of Dentistry.

"We are enthusiastic about building a new model of education that follows suggestions by the Institute of Medicine's report on 'Health Professions Education' and the ADA's own 'Future of Dentistry' report, which call for the development of interdisciplinary educational models and for closer

collaboration between dentistry and other health disciplines," said Dr. Michael C. Alfano, the NYU dental school dean who will serve as dean of the combined school. A dean of nursing will serve under Dr. Alfano.

While the move is designed to improve efficiencies related to funding, both dentistry and nursing at NYU are economically sound programs, added

Dr. Alfano, who emphasized that the change does not suggest the creation of a new "nurse-dentist" practitioner.

"Nursing will continue to be an independent program that meets its requirements for accreditation, and dentistry will run as an independent program meeting its requirements for accreditation," he said. "But there will be great synergies in research, educational methodologies and community service as dental and nursing educators come together to solve common problems."

For example, dental students and nursing students may learn physical diagnosis and ethics together and share faculty in research. In fact, Dr. Alfano noted a 30 percent overlap in core competencies between the two programs.

Collaborative research programs between the two disciplines thrive at NYU, he added—including catastrophe preparedness, the link between periodontal disease and pre-term birth, and the oral and nursing components of sleep apnea. Joint faculty will help explore "how dentists and nurses, in particular nurse practitioners, can work together to deliver better health care," said Dr. Alfano.

"We also think this will help ensure that dentistry keeps both feet firmly planted as a health profession," he said. "There's been a lot of drift into esthetics. We teach esthetics at NYU, too, but if carried to an extreme, we start to look more like an elective service as opposed to a health care service."

Many dental schools have collaborative programs with medicine and nursing, said Dr. Frank Catalanotto, immediate past president of the American Dental Education Association. But NYU is the first to formally include another discipline within its own college.

"Throughout the history of our and other health professions, change and innovation that result in better patient outcomes have resulted only when we have been willing to experience with new models of education and training," said Dr. Catalanotto.

Driving the NYU decision was the Institute of Medicine's report that addressed the nation's future health needs by identifying key competencies essential for health professionals: providing patient-centered care, working in interdisciplinary teams, employing evidence-based practice, applying quality improvement and using informatics.

"ADEA views moving the nursing program into the College of Dentistry as an opportunity to respond to the mandate from national policy institutions to implement enhanced interdisciplinary education and practice to meet the future health needs of all Americans," said Dr. Catalanotto.

The move is an alternative to an earlier plan that would have merged the Division of Nursing with the College of Dentistry. The merger was scrapped in January when talks resulted in protestations from the New York dental practice community.

"The New York State Dental Association is supportive of any initiative that entails training dentists in an interdisciplinary environment but emphasizes that doctors of dentistry are educated at a higher level than undergraduate nurses," said Roy Lasky, NYSDA executive director.

"This is not to show disrespect to the nursing profession, but dentists are not auxiliaries," he added. "They perform surgical procedures and have more in common with physicians than they do with nurses." ■



Dr. Alfano

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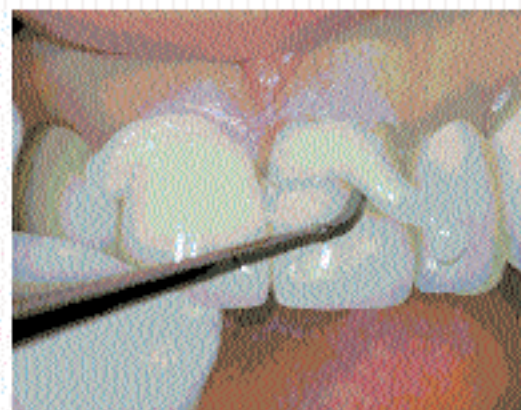
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TDOT schedule of appearances

Kentucky Dental Association	Louisville, Ky.	April 9
Missions of Mercy	Springfield, Va.	April 15-16
California Dental Association	Anaheim, Calif.	May 12-15
Community Outreach	Anaheim area	May 18-19
Ohio Dental Association	Columbus, Ohio	Sept. 15-17
ADA Annual Session	Philadelphia	Oct. 6-9
Greater New York Dental Meeting	New York	Nov. 27-30

TDOT update

High-tech dental-office-on-wheels traversing the country

If you live in Kentucky, Virginia or California, your chance to visit Tomorrow's Dental Office Today is just around the corner.

Billed as an "ADA educational experience in dental technology" and best known by its acronym TDOT, Tomorrow's Dental Office Today is a mobile dental-office-on-wheels that showcases a modern, fully integrated dental practice.

The exhibit, which debuted at the ADA's 2004 annual session in Orlando, Fla., is presented by the ADA and sponsored by dental products distributor Sullivan-Schein.

TDOT will roll into Louisville, Ky., April 9 for an appearance at the Kentucky Dental Association's annual meeting, which runs April 7-10.

From Louisville, TDOT will head northeast to Springfield, Va., to participate in a Missions of Mercy outreach program, April 15-16. This will mark the first time TDOT is used to provide actual patient care.

After its Virginia appearance, TDOT heads west for the California Dental Association's spring session, May 12-14, in Anaheim. Also in California, TDOT will participate in a community outreach program, treating children at a school May 18-19.

See schedule at left for upcoming TDOT appearances. ■

PR kit for dentists available

BY ARLENE FURLONG

Your practice record is flawless. Your office staff is friendly and efficient. Your patients are happy. Could you still use some good PR?

The ADA Council on Dental Practice says "yes."

Its guidebook, "The Ultimate Dental PR Kit," tells dentists how using public relations ideology helps patients as well as dentists.

In this information-driven society, the public is increasingly involved in managing its own health care. People want more information about oral health and wellness, advances in dentistry, dental benefits and community issues, such as fluoridation. The Ultimate Dental PR Kit tells dentists how to best provide this information and shape public opinion about their practices and the profession overall.

The book begins by defining PR for dentistry and simplifying key PR tasks. It delves into related ethical issues and spells out practical steps for creating a practice identity and planning a PR campaign.

Sample forms and practical resources for getting a dental practice noticed, from using the media advantageously to developing dental practice Web sites and public speaking techniques, are detailed in each chapter. Dense with ideas, information and tools, the comprehensive guidebook can help dentists in a myriad of activities, from gaining attention to a national dentistry issue to gaining new patients from a specific demographic region.

For more information about The Ultimate Dental PR Kit, call Susan Barthel, manager, CDP marketing, toll-free at Ext. 2927 or e-mail "barthels@ada.org". Call 1-800-947-4746 or visit "www.adacatalog.org" to order. ■

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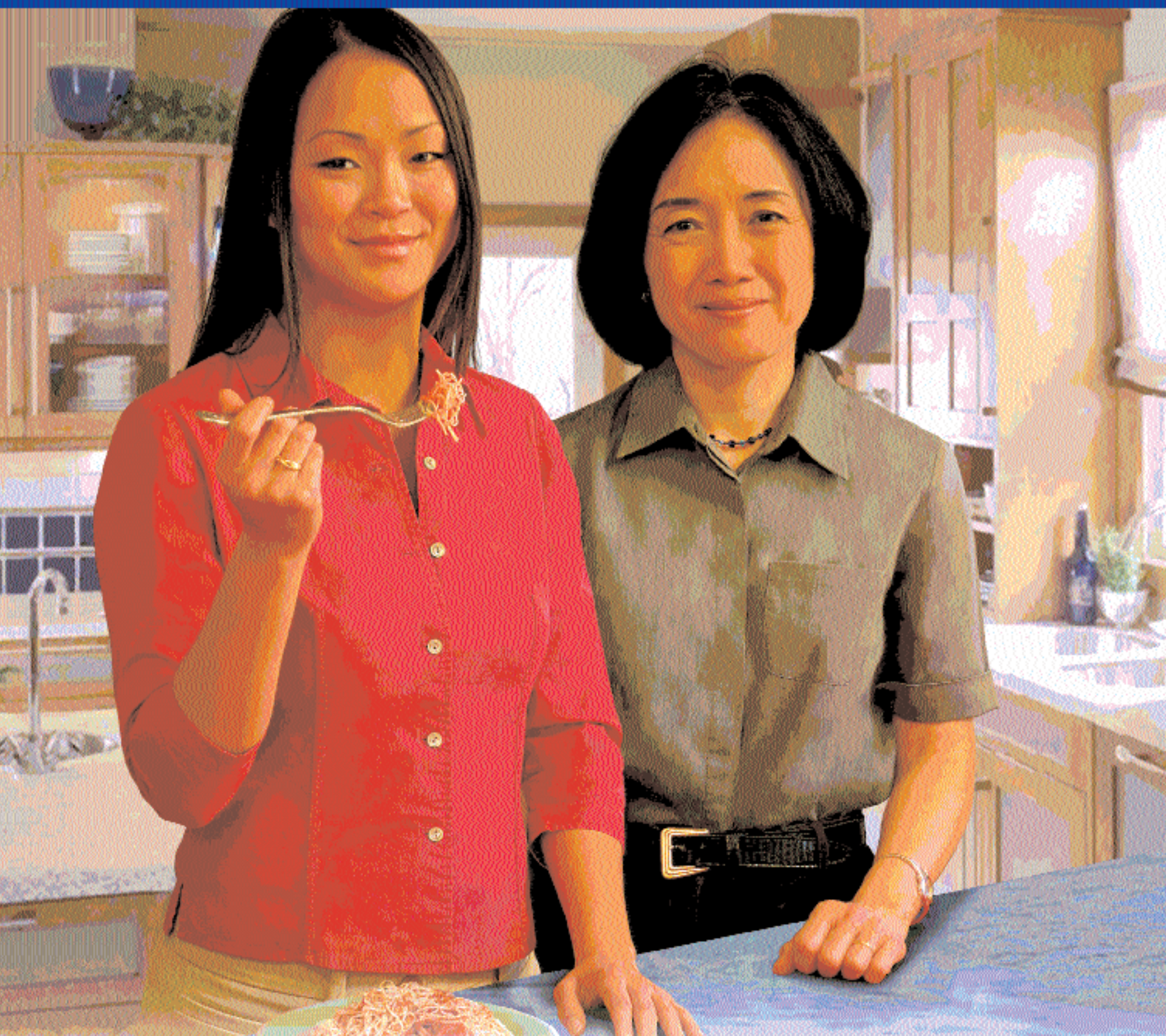
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Please see Brief Summary of Prescribing Information on the accompanying page.

Health & Science

CDC oral health grants

Twelve new topics for business research

BY MARK BERTHOLD

Bethesda, Md.—Here's a free offer from the Centers for Disease Control and Prevention. If you're a dentist with an idea but you need

the seed money for start-up, you might not have to look any further than the CDC's "Small Business Innovation Research" program.

Grants are available for research conducted

and related work to improve the safety of dental care delivery or the oral health of the nation. Plus, the CDC recently added 12 new items to its list of SBIR topics for which awards are being offered.



Dr. Cleveland: "The program is an excellent opportunity for dentists and nondental businesses to explore the feasibility, development and marketability of their ideas."

"SBIR grants are part of a set-aside program for domestic small business concerns to engage in research and/or research and development that has potential for commercialization," explains Dr. Jennifer Cleveland, dental officer/epidemiologist, CDC Division of Oral Health.

"The program is an excellent opportunity," she adds, "for dentists and nondental businesses to explore the feasibility, development and marketability of their ideas. The dental product Sonicare [powered toothbrush], for example, was developed with funding from an SBIR program of the National Institute of Dental and Craniofacial Research."

Each CDC SBIR award comes in two parts: Phase I research, considered the startup phase, and Phase II, the expansion of these results. Phase I grants are up to \$100,000 for about six months and support exploration of the technical merit or feasibility of an idea or technology. Phase II grants are up to \$750,000 for up to two years, and include research and development work and evaluation of the potential for commercialization.

There's also a Phase III, during which the innovation moves from laboratory to marketplace. This must be funded from the private sector.

"The SBIR program also promotes technology transfer," notes Dr. Cleveland. "A new technology that may be used to eliminate biofilm in municipal water systems, for example, may be applicable for dental unit waterlines. And vice versa, an agency such as NASA may be interested in a dental-specific technology that increases the bonding strength of dental materials."

The six new grant topics added under "Providing Safe Dental Care" include developing:

- surveillance systems and outcome measures for adverse events related to exposure to pathogens and other hazardous agents during dental treatment;
- methods or models for evaluating the effectiveness and cost-effectiveness of infection-control interventions;
- dental devices with passive safety features that meet or exceed performance criteria identified by the Centers for Disease Control and Prevention (visit "www.cdc.gov/oralhealth/infectioncontrol/forms.htm");
- accurate and passive devices to measure biofilm or bacterial contamination in dental waterlines;
- educational/training materials for dental assistants in dental infection control and quality assurance;
- educational/training materials for using the oral rapid HIV screening test in dental facilities to identify cases of HIV infection that may otherwise go undetected.

The six new grant topics under "Oral Health" include developing:

- accurate, non-invasive methods or devices to aid in diagnosis, measurement and recording of caries;

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Rethinking dental caries

Workshop examines new detection and assessment system

BY CRAIG PALMER

Baltimore—Clinical researchers and dental practice representatives set the stage at a March 12-14 workshop for “a fresh start” on understanding dental caries as a dynamic disease of progression, regression and arrest, reassessing even the nomenclature for a common chronic disease.

Caries diagnosis, for example, was “more accurately” described at the International Caries Detection and Assessment System Workshop as caries detection and assessment. The National Institute for Dental and Craniofacial Research, American Dental Association and International Association for Dental Research sponsored the workshop. The term “caries free” was said to be misleading, misunderstood and best avoided.

International participants called for accessible but precise terminology in describing “a complex process that should not be dichotomized into cavity or no cavity.” The 55 participants included cariologist, clinical research, pediatric and restorative dentistry, public health, biological sciences and dental organization representatives.

They proposed an international caries detection and assessment system to classify the caries process by stage:

- first visible signs of caries in enamel;
- distinct visible sign of dental caries in enamel;
- caries cavitations in enamel only;
- distinct (small) cavity with visible dentin;
- extensive cavity with visible dentin.

“The five stages reflect different steps in the development of dental caries in tooth surfaces and the different levels of care that would be required, ranging from preventive to operative care,” said Dr. Amid Ismail who is a member of the ADA Council on Scientific Affairs, a workshop organizer and a University of Michigan School of Dentistry professor. A Detroit study currently using the system involves 1,021 adult caregivers and their children, he said. “We have

trained local dentists to use the ICDAS criteria and they have achieved good to very good reliability.”

Indiana University School of Dentistry clinical researchers also use the system, said Dr. Domenick Zero, professor and associate dean for research. The system is “easy to use, practical and informative” for researchers and practicing dentists, he said. Dr. Zero chairs the ADA Council on Scientific Affairs.

“This is what makes the new system exciting

for dentists because it defines the range of appropriate care that dentists can provide for a carious tooth,” said Dr. Daniel Meyer, associate executive director, ADA Division of Science.

However, workshop participants agreed that reliance on simple clinical tools to classify a complex process has several limitations and called for further research on use of clinical, radiographic and emerging diagnostic tools to classify the carious state of a tooth. ■



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Early summer OSAP meeting

Denver—The Organization for Safety and Asepsis Procedures will hold “Base Camp OSAP: Prepare Yourself for a Higher Level of Safety” June 2-5.

The annual symposium will feature “OSHA Eye For The Dental Guy,” “Bioterrorism: How Can The Dental Community Respond?” and “Chairside Infection Control Education” among other presentations.

For more information, contact OSAP at 1-800-298-6727 or visit “www.osap.org”. ■

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Doctor Jack E. Lemons holds a PhD in metallurgy and materials science. He is a professor at the University of Alabama at Birmingham in both the Department of Biomaterials in the School of Dentistry and the Department of Surgery, Division of Orthopaedic Surgery, in the School of Medicine. Doctor Lemons is also the director of surgical laboratory research for the Division of Orthopaedic Surgery.

Topics presented by other speakers will include: Short Implants, Orthodontic Implants, Smiling Overdenture Components, Synthogral™ (Beta-Tricalcium Phosphate), Ion-Beam Assisted Deposition (IBAD) Surface Treatment, and Telescopic Immediate Load Dentures with narrow one-piece implants.



Credited pre-symposium courses are also available for restorative, periodontology, surgical, and laboratory specialists. Space is limited — don't miss out on this excellent opportunity!

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CDC

Continued from page 22

- methods or devices or identifying biomarkers to measure total fluoride exposure;
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- innovative fluoride delivery systems for home use among persons at increased risk for caries;
- innovative methods to defluoridate water with high natural fluoride concentrations;
- innovative sealant materials, supplies or equipment for use by sealant programs in non-traditional dental settings.

Applications may be submitted on Aug. 1 and Dec. 1.

For more information, visit “grants.nih.gov/grants/funding/sbir.htm” or contact Sharron Orum of the CDC's Procurement and Grants Office by phone at 1-770-488-2716 or e-mail “sorum@cdc.gov”. ■



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Ultimate 'extreme makeover'

Dentists work to raise awareness, help woman toward transplant

BY STACIE CROZIER

Alexander City, Ala.—Julie Smith, a local mother of three, needs a liver transplant.

Dr. Richard Darling, a dentist in California, knows where Julie is coming from. He has survived three liver transplants and a heart attack, among other serious health issues.

Dr. Darling heard of Julie's plight and he knew it was time to help Julie receive the best kind of "extreme makeover, one that would save her life."

Julie recently took her first step toward a trans-

plant, thanks to his efforts. She just received new dentures after being edentulous for almost two years, due to periodontal infection. But there are more hurdles she must jump before she can receive a transplant.

After a blood transfusion 17 years ago, Julie contracted hepatitis C, and her health has deteriorated ever since. She is too sick to work, yet she needs to raise enough money to pay half toward an estimated \$375,000 transplant surgery, plus enough money to cover her first year of anti-

rejection drugs, before Medicaid will consider a transplant.

Julie is weak and loses consciousness often and she requires frequent hospital stays to stabilize her condition. Julie's world right now is in her living room, where she stays mostly to her bed, surrounded by her children, Casey, age 11; Samantha, age 9; and Katherine, age 6.

As her illness progressed, Julie developed periodontal disease. She couldn't afford periodontal surgery, so she had all of her teeth removed.



Photo by Kelly Caldwell

New smile: Julie Smith, front row at right, shows off her new smile. With Julie are, in front, from left, her daughters Samantha and Katherine, and in back, her son Casey, Hal Abramson of Global Dental Solutions and Dr. George Hardy.

Although her mouth healed, she has been unable to follow the diet recommended by her doctor because she couldn't chew.

Dr. Darling started his quest to help Julie by "calling dentists in Julie's town. When I called Dr. [George] Hardy's office, I learned he was at a dental conference in New York, so I have to admit I may have inferred that I was a friend and got his cell phone number."

Meanwhile, Dr. Hardy was sitting in a New York restaurant when his cell phone rang.

"Dr. Darling introduced himself and told me Julie's story," Dr. Hardy said. "When he asked me if I could give her some pro bono help so she could chew food again, I told him I was in."

Dr. Hardy returned and got the ball rolling for Julie to have a life-saving dental makeover—one that could help her on her road to the transplant list.

Dr. Darling, in the meantime, found a dental laboratory in Atlanta, Global Dental Solutions LLC, that volunteered to donate the lab work for Julie.

A few weeks ago, Julie received her new dentures. "I'm still trying to get used to them," Julie said. "I can't really feel or taste the food yet, but they tell me that will get better soon. Before, I could only eat soft things, and I know that wasn't helping me feel any better."

Julie's next extreme makeover step will be to overcome the financial obstacles between her and a new liver.

"The biggest thing for me is that I want to be able to stay here and raise my kids," she said. "That's the hardest part for me. They are frightened. My children are the reasons I wake up and breathe right now."

Dr. Darling hopes that his dental colleagues will be touched by Julie's story and contribute financial support to her cause.

"If every ADA member just gave \$1, Julie could get a liver," he said.

To learn more about Julie or to make a donation toward her transplant, log on to "www.geocities.com/save_julie/".

Dr. Darling is author of "Coma Life," an autobiographical memoir about his experience as a coma patient, and founder of the Fair Foundation, an organization dedicated to redistributing medical research funding to address the diseases with highest mortality rates. His Web site details his life-threatening medical experiences, his foundation mission and work with organ donation: "http://fairfoundation.org". ■

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Annual Session

Integrating technology

Three annual session CE courses show you how

Philadelphia—Are you overwhelmed by the rapid proliferation of technology tools and resources for the dental practice? Have you invested in technology only to struggle with difficult-to-integrate components? Want to hear about the paperless office without a front desk?

The ADA has planned three free 1.5-hour continuing education courses to help you understand the importance of integrating office technology and how it can improve patient care and efficiency.

Courses will discuss intraoral cameras, digital imaging systems, laser technology, computerized treatment planning and records transfer, voice-activated clinical charting, using the Internet to help diagnose and treat, Web-based patient communications, online CE and more.

Dr. Titus Schleyer will present "Integrated Office Technology: Why Integration is Key for Dental Office Technology," Oct. 6, 2:45-4:15 p.m., course code: N543 (also presented Oct. 8, 2:30-4 p.m., course code: N748).

Dr. Paul H. Feuerstein will present "Integrated Office Technology: Can Technology Help You

Deliver Better Patient Care?" Oct. 6, 1-2:30 p.m., course code: N542 (also presented Oct. 9, 11 a.m.-noon, course code: N809).

Dr. Claudio Levato will present "Integrated

Office Technology: Putting Technology into Place—Successfully," Oct. 8, 10-11:30 a.m., course code: N727 (also presented Oct. 9, 9:45-10:45 a.m., course code: N808).

Watch your ADA News for more information about these special programs or log on to "www.ada.org/goto/session" for more information. ■

Table clinics

Apply now to present a clinic; attend session to earn CE credit

Philadelphia—When you attend table clinic presentations at annual session, you can receive continuing education credit and learn the latest developments in clinical dentistry.

The seven- to 10-minute clinics will be held Oct. 7, 11 a.m.-2 p.m. Those attending can receive two hours of CE credit.

You can also apply now to present a table clinic at annual session. Contact the Council on ADA Sessions by calling 1-312-440-2665 or e-mailing "annualsession@ada.org". You may also visit "www.ada.org/goto/session" and click on Scientific Session Table Clinic Application.

All applicants must be registered for annual session to be considered. The completed table clinic application, \$50 refundable application fee and a copy of the annual session registration form must be received at ADA Headquarters by June 3.

The International Association of Student Clinicians and the American Dental Association will also host a Master Clinician Program on Oct. 7.

The program offers SCADA associates an opportunity to remain active in their association by showcasing their continued interest in research. All SCADA associates are former participants in the ADA/Dentsply Student Clinician Program, or one of the other similar international programs open to dental students on five continents.

Applications for the Master Clinician program are also available online. ■

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- May 14 - New York, NY
- June 11 - Orlando, FL
- June 25 - Minneapolis, MN
- July 9 - Chicago, IL
- July 16 - Washington, DC
- August 6 - New York, NY

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May 21-22 - Oklahoma City, OK

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September 24 - New York, NY



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Session programs to salute federal dentists

BY STACIE CROZIER

Philadelphia—Attention!

Army, Air Force, Navy, U.S. Public Health Service, Veterans Affairs and civil service dentists who attend annual session Oct. 6-9 will be able to take advantage of a new continuing education track specially designed for them, attend a special reception and enjoy recognition for their dedication during the meeting's opening session.

All federal active duty members, reservists and retirees should plan to attend the ADA Opening Session on Friday, Oct. 7, at the Pennsylvania Convention Center Hall D, beginning at 8 a.m. Dr. Richard Haught, ADA president, will recognize the dedication of the thousands of federal service dentists serving the United States. The opening session is free to all registered attendees. Tickets are not required, but an ADA badge is required for entry.

On Friday evening, the ADA will hold a Federal Reception from 5:30-7 p.m. at the ADA Headquarters hotel—the Philadelphia Marriott, 1201 Market St., Grand Ballroom, Salon F.



ADA05 Philadelphia

FORGING OUR FUTURE

In addition to these festivities, annual session will present its first-ever educational track for federal dentists. Developed in cooperation with the Federal Dental Service Membership Advisory Group, the 11-course track features clinical programs as well as a special financial planning seminar. Fee courses will offer special pricing for federal dentists and many courses are free.

Continuing education choices include:

- "Emergency Medicine," by Dr. Stanley F. Malamed, Oct. 6, 2:15-4:45 p.m., advance tickets \$50 for federal dentists, \$60 for others, course code: L518.

- "Fixed Prosthodontics, Esthetics and Success," by Dr. Norman J. Hammer, Oct. 6, 2:15-4:45 p.m., free program, course code: N545.

- "Restorative Materials: What, When Where and How," by Dr. Charles W. Wakefield, Oct. 7, 9:45 a.m.-12:15 p.m., free program, course code: N643.

- "Successful Management of Acute Dental Pain: Part I," by Dr. Ken M. Hargreaves, Oct. 7, 10 a.m.-12:30 p.m., advance tickets \$60 for federal dentists, \$70 for others, course code: L604. Participants will have individual keypads for instant feedback during the course.

- "Managing Acute Endodontic Infections: Part II," by Dr. Ken Hargreaves, Oct. 7, 2:30-5

p.m., advance tickets \$60 for federal dentists, \$70 for others, course code: L618. Participants will have individual keypads for instant feedback during the course.

- "Nonsurgical Therapy for Management of Periodontal Disease," by Dr. Maria E. Ryan, Oct. 7, 10 a.m.-12:30 p.m., advance tickets \$50 for federal dentists, \$60 for others, (also presented Oct. 7, 2:30-5 p.m., course code: L625).

- "Treatment Planning Guidelines for Restorative and Prosthodontic Problems: Part I," by Dr. Terry T. Tanaka, Oct. 8, 10 a.m.-12:30 p.m., advance tickets for federal dentists \$60, for others \$70, course code: L710. Participants will have individual keypads for instant feedback during the course.

- "Treatment Planning Guidelines for Restorative and Prosthodontic Problems, Part II," by Dr. Terry T. Tanaka, Oct. 8, 2:30-5 p.m., advance tickets for federal dentists \$60, for others \$70, course code L717. Participants will have individual keypads for instant feedback during the course.

- "Developing a Financial Battle Plan for Military Dentists," by Dr. Hugh F. Doherty and Dr. Michael Hutchings, Oct. 9, 8:45-11:15 a.m., free program, course code: N820.

- "One Appointment Endodontics," by Dr. Eric M. Rivera, Oct. 9, 1:15-3:45 p.m., free program, course code L802.

- "Esthetic Failures: It's Not the Materials, It's the Occlusion," by Dr. Terry T. Tanaka, Oct. 9, 8:30-11 a.m., advance tickets for federal dentists \$60, for others \$70, course code: L802.

Visit "www.ada.org/goto/session" for complete program descriptions, information on presenters and more, or check out the Philadelphia05 Preliminary Program, coming soon to your mailbox. ■

Tickets a must for all session CE courses

Philadelphia—Don't forget to register for all the continuing education courses, special events and tours of your choice. All programs—both fee and free—require a ticket for admittance to help ensure that you have a seat for the programs of your choice.

Register soon—tickets are distributed on a first-come, first-served basis. ■

Not an ADA member?

Annual session has programs just for you

Using the Association's annual session as a venue to highlight all that organized dentistry has to offer, the ADA annual session this year will feature special events for nonmembers and first-time session-goers.

ADA data shows that 25 percent of all nonmembers reside in the 10-state area within a five-hour drive of Philadelphia, site of the 2005 ADA annual session.

"This creates a unique opportunity for the ADA as we strive to achieve the organizational goal of 75 percent membership market share," said Dr. Bernard Dishler, past member of the Council on Membership representing Pennsylvania.

"Annual session is one of our highlights as a member benefit, and we feel this is an opportunity to get to know some nonmembers and showcase benefits of membership," said Dr. Dishler. "We want them to enjoy the collegial atmosphere of the meeting, sample the Association and see that ADA membership is a great investment in their career and the profession."

A few planned activities include a hospitality booth and an Oct. 7 welcome reception for nonmembers and first-time attendees. There will also be a raffle where nonmembers will have a chance to win two airline tickets.

"Here in Pennsylvania, we're working hard to raise our market share above 70 percent, and annual session is a great way to enhance tripartite membership," said Dr. Joseph J. Kohler III, a member of the Council on Membership from Pennsylvania.

"Having the annual session in Philadelphia makes it a convenient travel venue for so many," said Dr. Kohler. "I encourage all members to invite a nonmember to the ADA annual session this year and show them what they're missing."

For more information on the ADA annual session, go to "www.ada.org/goto/session". ■

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It's What's Behind The Badge That Counts

How's your health? ADAF to offer 42nd Health Screening

Philadelphia—Back for its 42nd year, the ADA Foundation Health Screening Program will be held Oct. 6-9 during annual session.

Complementary screenings will include: blood pressure and weight; hemoglobin A1c; clinical chemistry with differential cholesterol; C-reactive protein; electrocardiogram; head and neck screening; hepatitis B virus serum markers; hepatitis C virus antibodies; latex hypersensitivity; *Legionella pneumophila* antibodies; periodontal screening recording; carpal tunnel syndrome; urinary mercury; and mental health.

In addition, the following optional screenings will be available at a greatly reduced cost: VAP cholesterol; prostate specific antigen; thyroid stimulating hormone; and N-telopeptide.

The HSP is made possible each year by the continued support of corporate and individual contributions to the ADA Foundation. The HSP will be conducted at the Philadelphia Marriott, Franklin Hall, Oct. 6-8, 8 a.m.-4 p.m. and Oct. 9, 8 a.m.-noon. For more information, contact Marcia Greenberg toll-free, Ext. 2535. ■



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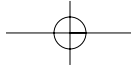
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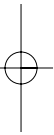
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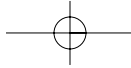
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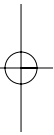


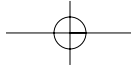
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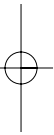


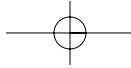
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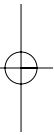


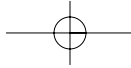
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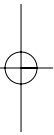


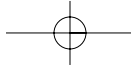
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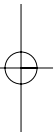


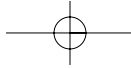
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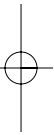


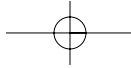
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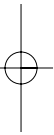


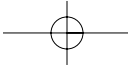
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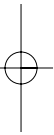


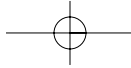
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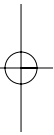


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AnnualSession

Tempting tours showcase Philly

Philadelphia—America's birthplace is filled with wonderful sights and pastimes, and the ADA has planned some 30 different tour opportunities to help you discover what makes Philadelphia and its surrounding areas one of the most enticing places in the country to explore. Tour options include:

- Historic Philadelphia—No trip to Philadel-

phia is complete without a visit to the "most historic square mile in the country." See the Liberty Bell, Independence Hall, Congress Hall, Franklin Court and more. Cost: \$38 per person, includes transportation, guide and admissions. Oct. 6, 8:30 a.m.-12:30 p.m., code: T2; Oct. 6, 1-5 p.m., code: T9; Oct. 7, 8:30 a.m.-12:30 p.m., code: F2; Oct. 8,

8:30 a.m.-12:30 p.m., code: S4.

- Candlelight Tour/City Tavern—Stroll through the Society Hill neighborhood's cobblestone streets as you learn about life in colonial Philadelphia. Dinner is served at The City Tavern, once called "the most genteel tavern in America" by John Adams. Cost: \$80 per person, includes trolley

transportation, guide, dinner (group seating) and admissions. Oct. 8, 6:30-10:30 p.m., code: S15.


- National Constitution Center and Federal Reserve—Check out the National Constitution Center—the only museum devoted entirely to the United States Constitution—that features state-of-the-art multimedia exhibits, live theater, selected artifacts and interactive programming. Then visit the "Money in Motion" exhibit, where you can trace the changes in our national currency from the early 1600s to today. View money from the original 13 colonies; examine a rare \$100,000 bill and more. Cost: \$43 per person, includes transportation, guide and admissions. Oct. 7, 9:30 a.m.-12:30 p.m., code: F6; Oct. 10, 9:30 a.m.-12:30 p.m., code: M2.

- National Constitution/National Liberty Museum—Spend some interactive time learning about the United States Constitution, then visit the National Liberty Museum, where more than 700 outstanding individuals of all ethnic backgrounds are honored. The museum also features a White House china display and the 20-foot glass "Flame of Liberty" by Dale Chihuly. Cost: \$52 per person, includes coach transportation, guide and admissions. Oct. 9, 2-5 p.m., code: U7.

- Cultural Connection—A guided tour will allow you to explore the treasures of the Philadelphia Museum of Art. America's third largest art museum contains over 300,000 paintings, drawings, sculptures and prints along with decorative arts, period rooms and an Oriental art collection. Then visit the Rodin Museum, which houses the largest collection of Rodin sculptures to be found outside Paris, including "The Thinker" and "The Gates of Hell." Cost: \$60 per person, includes transportation, guide and admissions. Oct. 8, 2-5 p.m., code: S12.

- Barnes Foundation and Museum—Enjoy one of the world's finest private collections of post-impressionist and early French modern art, including works by Renoir, Cézanne, Matisse, Picasso, Monet and Manet, plus antique furniture, ceramics hand-wrought iron and Native American jewelry. Cost: \$45 per person, includes mini-bus transportation, guide and admission. Oct. 7, 1-5 p.m., code: F10; Oct. 8, 1-5 p.m., code: S9; Oct. 9, 9 a.m.-1 p.m., code: U5.

- Battles on the Delaware—Take a ferry across the Delaware River to tour the U.S.S. New Jersey, one of the most decorated battleships in U.S. naval history, then head ashore to the Independence Sea-



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Impressions: The Barnes Foundation showcases many French Impressionist masterpieces in a stunning French provincial mansion.

port Museum. Cost: \$65 per adult, \$56 per child, includes coach transportation, guide and admissions. Oct. 8, 1-5 p.m., code: S10 (adult), S11 (child).

- Bears, Tigers and Sharks, Too—The first stop is Philadelphia Zoo and Horticultural Gardens—the nation's first zoo and home to more than 1,600 rare and exotic animals from around the world, 42 acres of Victorian gardens, outstanding art and historical architecture. Then visit Adventure Aquarium, including its 550,000-gallon shark tank. Cost: \$60 per person, includes transportation and admissions. Oct. 8, 10 a.m.-4 p.m., code: S7.

- Brandywine Valley—Stops include Longwood Gardens, one of the nation's most important horticultural showplaces, featuring water gardens, arboretum, fountain displays, rose gardens, bonsai displays, desert house and much more. Following lunch (on own) at the Terrace at Longwood, visit the Brandywine River Museum located in a 19th century gristmill along the Brandywine River. The museum houses a celebrated collection of American art including works by three generations of Wyeths. Cost: \$65 per person, includes coach transportation, guide and admissions. Oct. 9, 9 a.m.-4 p.m., code: U4; Oct. 10, 8:30 a.m.-3:30 p.m., code: M1.

- Cocktails to Go—Board an old-fashioned trolley for a tour through the streets of Philadelphia. Learn about the city's history, see the historic neighborhoods where many of our forefathers lived and worked, run up the "Rocky" steps and see Philadelphia from a different point of view. On board, your own private host will open the wine and serve the hors d'oeuvres. Cost: \$63 per person, includes transportation, guide, wine and hors d'oeuvres. Oct. 7, 6-7:30 p.m., code: F13.

- Fairmount Park—The largest landscaped city park in the country also has an outstanding group of authentic early American houses. Accompany docents from the Philadelphia Museum of Art on a tour of two homes on the Schuylkill River—Mt. Pleasant, built in 1763 by a Scottish privateer and once owned by Benedict Arnold, who was convicted of treason before he could occupy the house; and Lemon Hill, built in 1798 by Robert Morris, signer of the Declaration of Independence and the Constitution of the United States and a financier of the Revolution. Cost: \$47 per person, includes trolley transportation, guide and admissions. Oct. 6, 9:30 a.m.-12:30 p.m., code: T6.

- Franklin Mills—Shop 'til you drop at this mall with more than 150 stores conveniently located under one roof, offering top designer names at 20 to 70 percent below retail prices. Save even more since Pennsylvania has no sales tax on clothing, and use provided discount coupon books and shopping bags. Cost: \$40 per person, includes transportation, coupon books and shopping bags. Oct. 7, 10 a.m.-3 p.m., code: F9.

- Italian Market—A slice of history and a slice of cheese is yours at Philadelphia's Italian Market. Still predominantly Italian, it offers the best flavors of many cultures and cuisines. Sample old world tastes from vendors including the Termini Brothers Bakery and DiBruno Brothers' "House of Cheese." Cost: \$42 per person, includes mini-bus transportation, guide and admission. Oct. 6, 2-5 p.m., code: T11.

- Longwood Gardens—Savor the exquisite flowers, majestic trees and opulent architecture at this Du pont estate, where you will explore more than 1,000 outdoor acres and 20 indoor gardens. Cost: \$53 per person, includes coach transportation, guide and admission. Oct. 8, 12:30-4:30 p.m., code: S8.

- Medicine in Colonial Philadelphia—Sites include Pennsylvania Hospital, the nation's oldest hospital, founded in 1751 by Benjamin Franklin and Dr. Thomas Bond. Next, visit the Physick House, built in 1786 by a wealthy wine importer and later owned by Dr. Philip Syng Physick, known as the "father of American surgery." Then tour the Mutter Museum at the College of Physicians, the oldest honorary medical academy in the nation and a pathological and medical artifact museum. Cost: \$47 per person, includes trolley transportation, guide and admissions. Oct. 7, 1-5 p.m., code: F11.



Photos courtesy of Philadelphia Convention & Visitors Bureau

Oasis: Wind your way through 8,700 acres of creeks, trails, meadows and paths in Fairmount Park—the world's largest landscaped city park.

- Moonlight, Cheesesteaks and Lights of Liberty—The Benjamin Franklin Parkway, modeled after the Champs-Elysses in Paris, comes alive in the lights of the night. The tour will pass by the Franklin Institute, Rodin Museum and the Philadelphia Museum of Art where you can run up the "Rocky" steps. Continue on the Avenue of the Arts, Philadelphia's theater district; stop for an authentic cheesesteak sandwich; and then take a walking "Lights of Liberty" tour. This award-winning sound and light show depicts the beginning of the American Revolution through a series of animated scenes projected on the sides of historic buildings choreographed to a soundtrack with narration. Cost: \$65 per person, cost includes trolley transportation, guide, dinner (group dining) and admissions. Oct. 6, 6:30-10:30 p.m., code: T13; Oct. 7, 6:30-10:30 p.m., code: F14.

See TOURS, page 40

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Tours

Continued from page 39

- **Morning Fitness Walks**—A fitness expert will help you wake up each morning with a warm-up stretch followed by a group walk around a different area of Philadelphia each day. A great way to see the city! Cost: \$10 per person. Oct. 6, 6:30-7:30 a.m., code: T1; Oct. 7, 6:30-7:30 a.m., code: F1; Oct. 8, 6:30-7:30 a.m., code: S1.

- **Mystery Dinner Theatre**—Gather to pay your respects at Tony Alto's funeral. At this hilarious live dinner theater, you'll meet Tony's outrageous family—from his lovely wife to his senile old mother. Be part of the family as you help them solve this crime. Dinner is Italian style. Cost: \$80 per person, includes transportation, dinner (group dining) and admission. Oct. 6, 6:30-10:30 p.m., code: T14.



City and country: Enjoy a simpler lifestyle in nearby Bucks County, left, or experience the wonders of Philadelphia's history at night during a "Lights of Liberty" tour.

Photos courtesy of Philadelphia Convention & Visitors Bureau



- **New York, New York**—Spend Sunday in the Big Apple, where you can drive past the United Nations Building, Chinatown, Wall Street, Ground Zero and take the ferry to Liberty Island and The Statue of Liberty. Next stop is Ellis Island, a National Historic Landmark where you can trace your roots. Lunch and dinner on own. Cost: \$80 per person, includes coach transportation, guide, and admissions. Oct. 9, 8:30 am-8 p.m., code: U1.

- **Peddler's and Pearl's—A Trip to Bucks County**—Travel through the lush countryside of Bucks County to visit Green Hill Farms, the country estate of Pearl S. Buck, Pulitzer Prize winning author of "The Good Earth." Then on to Peddlers' Village, with over 70 unique shops set in an 18th century colonial style village. Lunch at Cock and Bull at Peddlers' Village. Cost: \$70 per person, coach transportation, guide, admission and lunch (group dining). Oct. 9, 8:30 a.m.-5:30 p.m., code: U2.

- **Pennsylvania Dutch Country**—Travel through the pastoral countryside of Lancaster County as your guide acquaints you with the customs and lifestyles of the Amish. Visit an Amish house/farm and enjoy a real Pennsylvania Dutch family-style lunch with all of the trimmings. Spend time shopping at Kitchen Kettle Village for Amish jams, relishes, quilts and other crafts. Cost: \$72, per adult, \$59 per child, includes coach transportation, guide, admissions and lunch. Oct. 6, 8:30 a.m.-4:30 p.m., code: T3 (adult), T4 (child); Oct. 7, 8:30 a.m.-4:30 p.m., code: F3 (adult), F4 (child); Oct. 8, 8:30 a.m.-4:30 p.m., code: S3 (adult), S4 (child).

- **Philadelphian High Style**—Stroll through Society Hill and its elegantly restored townhouses, hidden gardens, courtyards and historic Head House Square as your guide acquaints you with the customs and lifestyles of colonial residents. Tour the Physick House, once owned by Dr. Philip Physick, the father of American surgery, then the Powel House, home of the last colonial mayor of Philadelphia and its first mayor after the Revolution. Cost: \$39 per person, includes coach transportation, guide and admissions. Oct. 8, 9:30 a.m.-12:30 p.m., code: S6.

- **Philly's Kitchen**—Get a first-hand peek into the techniques and personalized secrets of one of Philly's renowned chefs. Your tour begins at Reading Terminal Market where you'll meet merchants

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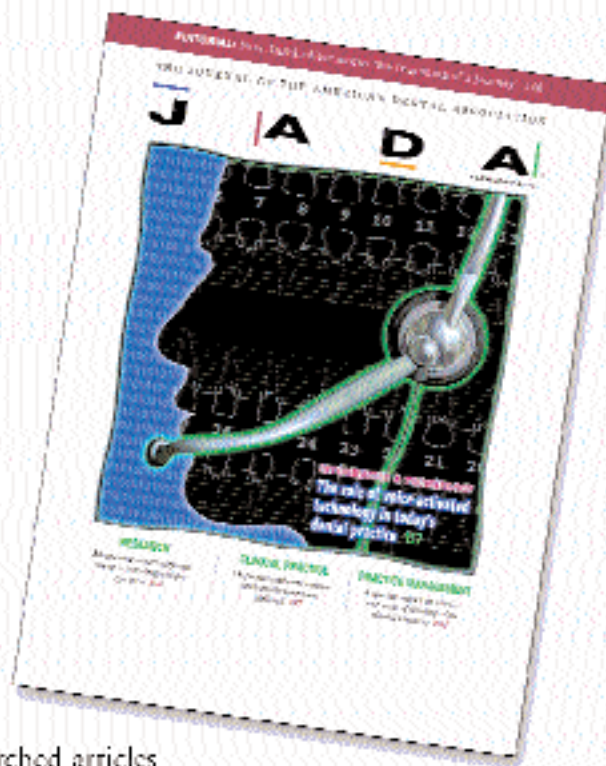
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The Journal of the American Dental Association seeks high-quality clinical research and critical reviews of the dental literature.

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- **Esthetic & Restorative Care:** Carefully researched articles on the latest developments in esthetic and restorative dentistry, including recent research and critical reviews of the literature.
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- **International Clinical Information:** Submissions from overseas researchers and clinicians providing information of interest to U.S. dentists.
- **Dental Specialties:** Updates and current research on dental specialty practice of interest to general dentists.



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Room D-860, Newark, NJ 07103-2400; E-mail: jadaoffice@ada.org

offering samples of their products. Then, off to the market's demonstration kitchen, where our local celebrity chef will host a cooking class and you will taste some delicious dishes. Cost: \$40 per person, includes guide, cooking demonstration and samples. Oct. 6, 9:30-11:30 a.m., code: T7.

- Rodin and PAFA—View the largest collection of Rodin sculptures outside Paris, then visit the Pennsylvania Academy of Fine Arts, the nation's first art museum and art school, which opened in 1876 to celebrate the Centennial. Cost: \$58 per person, includes trolley transportation, guide and admissions. Oct 6, 10 a.m.-1 p.m., code: T8; Oct. 7, 10 a.m.-1 p.m., code: F8.

- Restaurant School—Iron Chef—Don't miss this opportunity to become an "iron chef" for the evening. Join us at The Restaurant School, an internationally acclaimed culinary institute, for this unique cooking adventure! Following cocktails, appetizers and a brief introduction from your culinary coach, you will be divided into teams and each given a "black box" of ingredients. From these ingredients you will prepare a salad, accompaniments and entrée, all without recipes. The challenge is to prepare a delicious dinner that you are willing to consume. After the meal is prepared, you will all assemble in the Rooftop or Courtyard Restaurant to enjoy the fruits of your labor. Cost: \$135 per person, includes transportation and dinner (group dining). Oct. 8, 6-10 p.m., code: S14.

- Shopping in Manayunk—This 19th Century mill town has been transformed into a contemporary shopping, dining and recreational destination while preserving its historic integrity. Shop in Main Street's many boutiques specializing in men's, women's, and children's apparel and accessories, crafts, home furnishings, antiques and more. Cost: \$40 per person, includes trolley transportation. Oct. 6, 1-5 p.m., code: T10.

- Valley Forge—Of all places associated with America's War for Independence, none conveys the suffering, sacrifice and ultimate triumph more than Valley Forge, where thousands of American soldiers died during the bitter winter of 1777-78. Tour Washington's headquarters, soldier's huts, the Memorial Arch and the Memorial Chapel. Cost: \$43 per person, includes coach transportation, guide and admission. Oct. 9, 9 a.m.-1 p.m., code: U3.

- Welcome to Philadelphia Orientation—Get familiar with Philadelphia sights, museums, neighborhoods and restaurants and learn about ADA tours. A video that highlights the city and region will be followed by questions and answers. Orientation will be held at the Philadelphia Marriott, Room 301. Cost: \$5 per person. Oct 6, 9-10 a.m., code: T5; Oct 7, 9:30-10:30 a.m., code: F5.

- Winterthur Museum and Gardens—The country estate of Henry Francis Du Pont is now a world-class museum, with an unsurpassed collection of antiques and Americana displayed in exquisitely furnished period rooms. The tour also includes a tram ride through the 60-acre naturalistic Winterthur Garden (lunch on own) and time to browse in the extensive gift shop. Cost: \$60 per person, includes transportation, guide and admission. Oct. 8, 9 a.m.-2 p.m., Code: S5.

- Wok and Walk—Chinatown restaurateur Joseph Poon is a well-known personality in Chinatown, not only his food but also for his walking tour. See the historic friendship gate, a gift from China, learn about Chinese herbal medicine, visit a Chinese bakery and more. Also included is a tasting and cooking lesson at Mr. Poon's restaurant. Please wear comfortable shoes. Cost: \$53 per person, includes guide, tasting and lesson. Oct 7, 1:30-4:30 p.m., code: F12; Oct 10, 1:30-4:30 p.m., code: M3.

- Atlantic City—Spend the day or evening in the Las Vegas of the East. Atlantic City is a must if you've never been there and is always recommended for repeat fun. A breathtaking boardwalk beside the Atlantic Ocean, world-class entertainment, excellent restaurants and fabulous shopping offer endless adventures. Nine casinos line this four-mile boardwalk. You will begin your "luck" with the cash bonus given to you at Caesar's casino, which is located in the heart of all the action. Where you go from here is up to you. Entertainment and show



Cheesteaks and more: Philadelphia's Reading Terminal Market is a feast for the eyes as well as for the stomach.

information can be found at "www.atlanticcitynj.com" by selecting the Calendar of Events or by calling 1-888-228-4748. October headliners, times and ticket prices will be available for viewing beginning July 1. Participants must be 21 years of age. Cost: \$50 per person, includes coach transportation, escort and cash bonus. Oct. 6, 5 p.m.-1 a.m., code: T12; Oct. 7, 9 a.m.-5 p.m. code: F7; Oct. 8, 5 p.m.-1 a.m., code: S13.

Tour tickets can be purchased by filling out the form in your Preliminary Program or online. You must be registered for annual session to purchase tour tickets. Tours have limited availability, so order your tickets in advance to have the best chance to secure the tours of your choice.

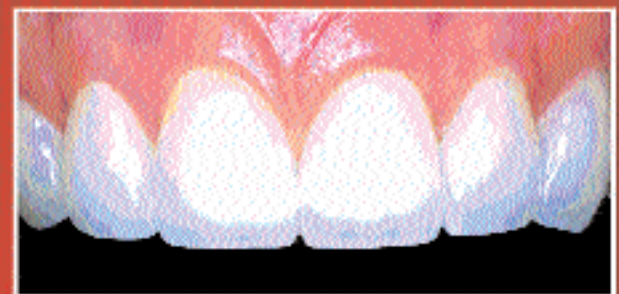
For more information and details on each tour, log on to "www.ada.org/goto/session" or check out the Philadelphia05 Preliminary Program, coming soon to your mailbox. ■

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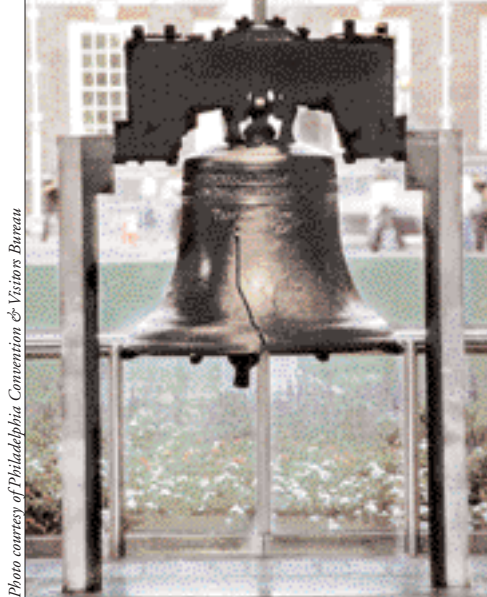
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Let freedom ring: The Liberty Bell is housed in a glass pavilion near Independence Hall.

Philly

Continued from page one

Let's 'Forge Our Future.'

It's easy to get to and get around Philadelphia. Dr. Judith McFadden, general chair of the council's committee on local arrangements, says the committee has been working overtime with volunteer training to help answer every visitor's questions and make you feel at home.

"Bring the kids and take a once-in-a-lifetime ADA guided tour through Lancaster County, where entire Amish families will be working in the harvest fields, or go east to the ocean and try your luck at the upscale casinos on the Atlantic City Boardwalk," says Dr. McFadden.

"But leave time for just walking through our great city and discovering its treasures. From the convention center and most ADA hotels you will be just blocks from Independence Hall, the new Liberty Bell Pavilion, the must-see Constitution Center, the Betsy Ross House and the charming cobblestone, gas-lit streets of 18th century Society Hill. If you're a 'foodie,' Philly is for you. Plan your dinners around our famous cheesesteaks, ask us about our favorite neighborhood BYOBs or make reservations at our world-class, four-star restaurants."

The ADA has secured discounts on airfare through ITS, its official travel agency. Philadelphia International Airport is linked by high-speed rail that arrives at the convention center every 30 minutes, or is a 25-minute cab or shuttle ride away from the city center.

Amtrak will also offer ADA meeting attendees discounts on rail fares arriving at the city's 30th Street Station, where you can catch a Southeastern Pennsylvania Transportation Authority, or SEPTA, regional train to the convention center for no extra charge.

Philadelphia, one of the most charming and walkable cities in the nation, gives visitors a chance to stroll at their own pace to historic landmarks, attractions, restaurants, shopping and the convention center from their downtown hotels, so you'll want to pack your comfortable shoes.

When you make hotel reservations through the ADA, you'll receive an ADA shuttle pass that allows you to travel between ADA hotels and the convention center. Visitors also have a multitude of commuter transportation options, including buses, trolleys, trains and taxis.

Take advantage of the ADA's special events and entertainment.

Join your ADA colleagues for the opening session Friday, Oct. 7, when Colin Powell, former U.S. secretary of state, will kick off the ADA Distinguished Speaker Series sponsored by Johnson & Johnson. On Saturday, Oct. 8, television news anchor Katie Couric will take the distinguished speaker podium.

"Philadelphia is rich in history and will be the ideal place to visit this fall," says Dr. James B. Bramson, ADA executive director. "Each year we try to make the meeting special in some way. In addition to new learning opportunities and exhibits, this year we are very excited to have Colin Powell and Katie Couric as our presenters for the Distinguished Speaker Series. Plus, we've partnered with Johnson & Johnson as this year's series sponsor."

Other ADA special events will include an evening with Grammy-winning pianist Peter Nero and the Philly Pops, Oct. 7 at 8 p.m. at the Kimmel Center for the Performing Arts; the ADA/Alliance of the ADA/Foundation for Dental Health Education Brunch and Fashion Show, Oct. 7 at 10 a.m. at the Philadelphia Loews Hotel, Millennium Ballroom; and the ADA Presidential Gala, Oct. 10 at 7 p.m. at the Philadelphia Marriott Grand Ballroom, featuring a dinner-time Broadway review of musicals past and present, plus after-dinner dancing.

"In 1863, the second meeting of the newly formed American Dental Association was held in the city of Philadelphia," says Dr. Paul F. Kattner, Council on ADA Sessions chair. "Philadelphia's rich history provides an ideal template on which to build our theme, 'Forging Our Future.' In Philadelphia we are offering a cutting edge scientific program, unsurpassed community building events and a world class technical exhibition—all this in a host city richer in American history than any other."

The annual session will feature four full days of scientific programming Oct. 6-9, including some 260 different continuing education courses that cover the latest clinical, practice management and personal development topics. All of them can be registered for in advance so your best bet is to register early.

"You'll see many well-known speakers—experts in their fields—returning to the ADA annual session this year," says Dr. Stanley D. Hite, program director. "You won't want to miss programs by fitness expert Kenneth

Cooper, M.D., and clinical experts like Drs. Frank Spear, Gerard Chiche and Clifford Ruddle."

The course lineup also features more than 50 hands-on participation workshops, and courses with interactive keypads that allow participants to evaluate clinical problems and select a diagnosis, giving them a more hands-on experience in a lecture course, Dr. Hite adds. More than 140 of the scientific programs are free lectures.

The ADA Marketplace technical exhibition will be open four days: Oct. 6, noon-5:30 p.m., Oct. 7 and 8, 9:30 a.m.-5:30 p.m., and Oct. 9, 9:30 a.m.-1 p.m. Visit the Marketplace to check out and buy the products and services of some 700 exhibitors, conveniently arranged in four color-coded categories to help you locate over the counter and pharmaceutical products, dental services, materials and infection control items, and instruments and equipment at a glance.

The Marketplace will also feature a new product showcase, special one-hour continuing education programs, exhibitor coupons and a special power breakfast Oct. 8 starting at 8:30 a.m. Also housed in the Marketplace will be the ADA Pavilion, your one-stop shop for all ADA member services, products and assistance.

While you're at the annual session, you will also want to take advantage of the ADA Foundation Health Screening Program. Receive 14 free screenings, plus a choice of four additional screenings offered at a greatly reduced cost. Take advantage of this complimentary and confidential service Oct. 6-8, 8 a.m.-4 p.m. and Oct. 9, 8 a.m.-noon at the Philadelphia Marriott, Franklin Hall. (See story, page 26.)

The ADA House of Delegates will meet Oct. 7, 2-5 p.m., Oct. 10, 8 a.m.-noon and 1-5 p.m. and Oct. 11, 8 a.m. to close of business. Reference committee hearings will be held Oct. 8 at staggered times.

Register early to secure your first choices of courses and hotels. Find more details starting on page 28 of this issue of ADA News or log on to www.ada.org/goto/session. ■



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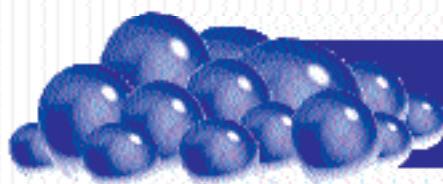


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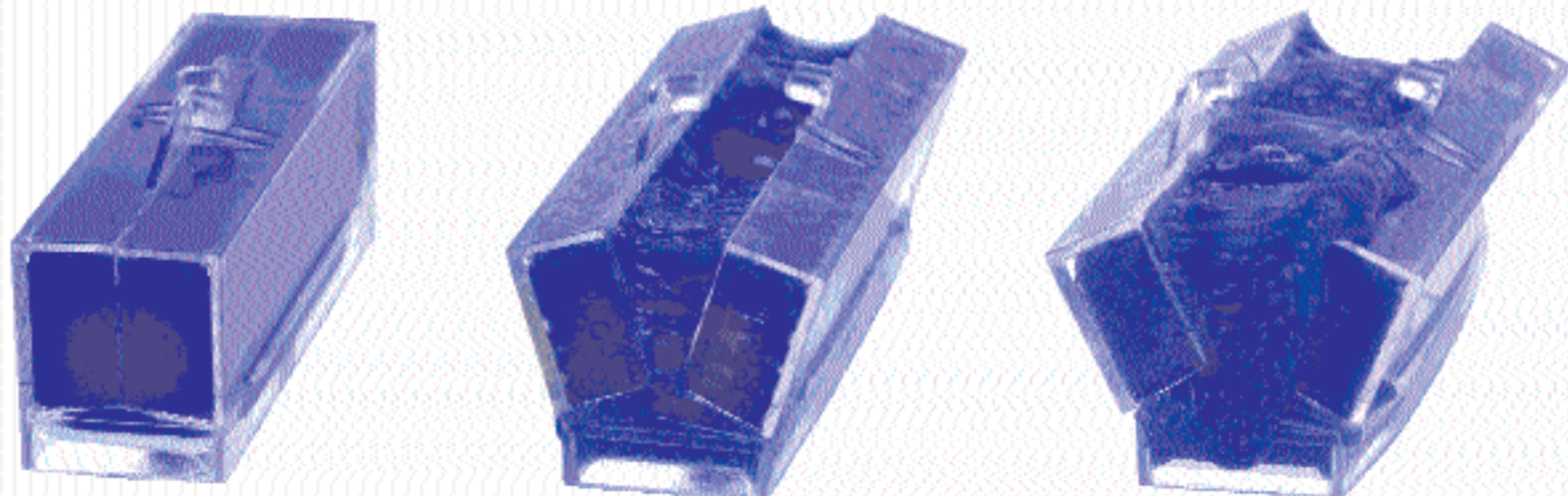
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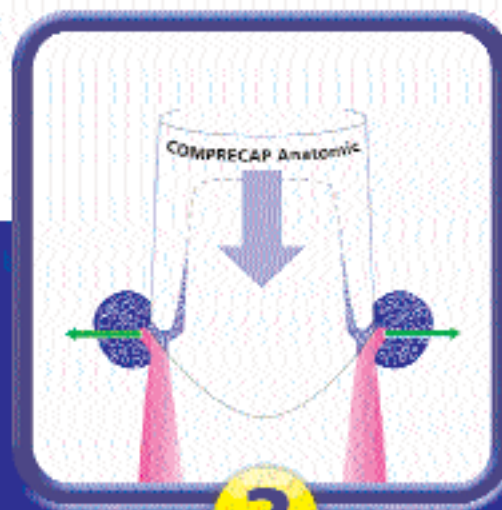
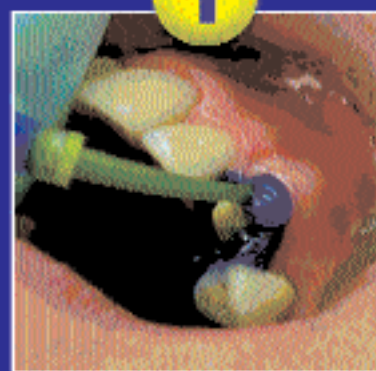
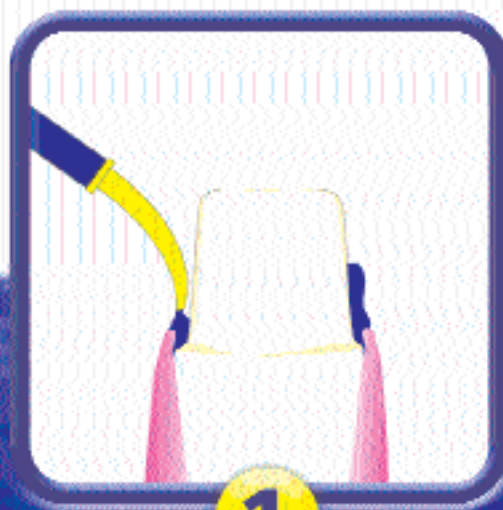


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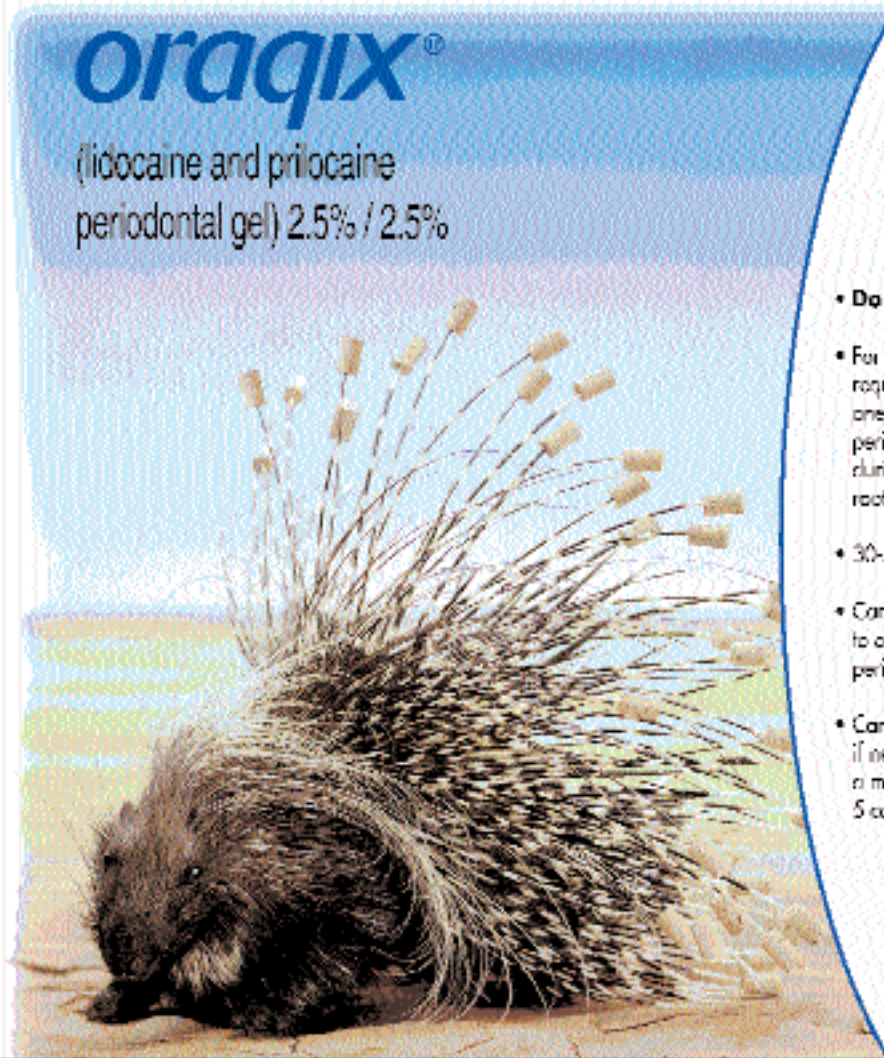
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NEW Needle-free, Patient Friendly Anesthesia for Scaling & Root Planing

Needle-free



oraqix[®]
(lidocaine and prilocaine
periodontal gel) 2.5% / 2.5%

- Do not inject
- For adults who require localized anesthesia in periodontal pockets during scaling and/or root planing
- 30-second onset
- Can be applied to one or several periodontal pockets
- Can be reapplied if needed up to a maximum of 5 cartridges

Don't Get Stuck Without It!

Oraqix provides pain relief and its needle free application avoids patient concern(s) regarding needles and injections.

- Oraqix should not be used in those patients with congenital or idiopathic methemoglobinemia.
- Novel formulation allows Oraqix to change from a liquid to a gel at body temperature.
- Oraqix is contraindicated in patients with hypersensitivity to amide type local anesthetics or any other product component.
- The most common adverse reactions in clinical studies were application site reactions, headaches and taste perversion.

Please see the accompanying brief summary of the prescribing information.

To order or for more information on Oraqix, contact OraPharma at 1.866.273.7846 or visit our website at www.oraqix.com

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PK4Oraqix-0036 11/04

Do not use Oraqix[®] (lidocaine and prilocaine) periodontal gel in patients with known hypersensitivity to amide type local anesthetics. Do not use Oraqix[®] in patients with known hypersensitivity to amide type local anesthetics. Do not use Oraqix[®] in patients with known hypersensitivity to amide type local anesthetics.

Oraqix[®] (lidocaine and prilocaine) periodontal gel is indicated for adults who require localized anesthesia in periodontal pockets during scaling and/or root planing.

Oraqix[®] (lidocaine and prilocaine) periodontal gel is contraindicated in patients with hypersensitivity to amide type local anesthetics or any other product component.

Information for Patients: Patients are cautioned to avoid injury to the treated area, or exposure to extreme hot or cold temperatures, until complete sensation has returned.

Drug Interactions: Oraqix[®] should be used with caution in combination with dental injection anesthetics, other local anesthetics, or agents specifically related to local anesthesia, e.g., Class I antiarrhythmics such as procaine and etidocaine, as the toxic effects of these drugs are likely to be additive and possibly synergistic.

CONTRAINDICATIONS, PRECAUTIONS, AND WARNINGS: Do not use Oraqix[®] (lidocaine and prilocaine) periodontal gel in patients with known hypersensitivity to amide type local anesthetics. Do not use Oraqix[®] in patients with known hypersensitivity to amide type local anesthetics. Do not use Oraqix[®] in patients with known hypersensitivity to amide type local anesthetics. Do not use Oraqix[®] in patients with known hypersensitivity to amide type local anesthetics.

In patients with known hypersensitivity to amide type local anesthetics, Oraqix[®] (lidocaine and prilocaine) periodontal gel should be used with caution. Do not use Oraqix[®] in patients with known hypersensitivity to amide type local anesthetics.

USE IN PREGNANCY: Oraqix[®] (lidocaine and prilocaine) periodontal gel is Pregnancy Category D. Treatment of rabbits with 10 mg/kg (100 mg/m²) produced evidence of maternal toxicity and evidence of delayed fetal development, including a non-significant decrease in rate weight (TW) and an increase in minor skeletal anomalies (skull and vertebral defects, reduced ossification of the pharynx). The effects of lidocaine and prilocaine on post-natal development was examined in rats treated for 6 months with 10 or 20 mg/kg, i.e., lidocaine or prilocaine 100 mg/m² and 100 mg/m² on a body surface area basis, respectively up to 1.4-fold the maximum recommended dose for a single procedure. The time period encompassed 6 mating periods. Both doses of either drug significantly reduced the average number of pups per litter surviving until weaning, or offspring from the first 6 mating periods. There was, however, no adequate and well-controlled studies in pregnant women. Because animal reproduction studies are not always predictive of human response, Oraqix[®] should be used during pregnancy only if the benefits outweigh risks.

Caution: Oraqix[®] (lidocaine and prilocaine) periodontal gel should be used with caution in patients with known hypersensitivity to amide type local anesthetics.

Warnings: Oraqix[®] (lidocaine and prilocaine) periodontal gel should be used with caution in patients with known hypersensitivity to amide type local anesthetics. Do not use Oraqix[®] in patients with known hypersensitivity to amide type local anesthetics.

Caution: Oraqix[®] (lidocaine and prilocaine) periodontal gel should be used with caution in patients with known hypersensitivity to amide type local anesthetics.

ADVERSE REACTIONS: In clinical studies, the most common adverse reactions are application site reaction (including pain, soreness, irritation, numbness, discoloration, vesicles, scabs, abscess, color changes, redness) and taste perversion.

Caution: Oraqix[®] (lidocaine and prilocaine) periodontal gel should be used with caution in patients with known hypersensitivity to amide type local anesthetics.

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Item No. PK4 Oraqix 0036 11/04

Local anesthetic for periodontal use in adults. Not for injection.

oraqix[®]

(lidocaine and prilocaine periodontal gel) 2.5% / 2.5%

Brief Summary of Prescribing Information

INDICATIONS AND USAGE

Oraqix[®] (lidocaine and prilocaine) periodontal gel 2.5% / 2.5% is indicated for adults who require localized anesthesia in periodontal pockets during scaling and/or root planing.

CONTRAINDICATIONS

Oraqix[®] is contraindicated in patients with hypersensitivity to amide type local anesthetics or to any other product component.

Warnings

Patients with known hypersensitivity to amide type local anesthetics, particularly in combination with methemoglobinemia, should be used with caution. Do not use Oraqix[®] in patients with known hypersensitivity to amide type local anesthetics. Do not use Oraqix[®] in patients with known hypersensitivity to amide type local anesthetics. Do not use Oraqix[®] in patients with known hypersensitivity to amide type local anesthetics.

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Information for Patients: Patients are cautioned to avoid injury to the treated area, or exposure to extreme hot or cold temperatures, until complete sensation has returned.

PRECAUTIONS

Caution:

DO NOT INJECT

Oraqix[®] (lidocaine and prilocaine) periodontal gel should be used with caution in patients with known hypersensitivity to amide type local anesthetics.

Manufactured by OraPharma, Inc. or DENSPLY PHARMACEUTICAL, Park Hill, MO

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