

NODA News

Volume 32 | Number 1

Article 1

1994

NODA News January 1994

Follow this and additional works at: <https://commons.ada.org/noda-news>

Recommended Citation

(1994) "NODA News January 1994," *NODA News*: Vol. 32: No. 1, Article 1.
Available at: <https://commons.ada.org/noda-news/vol32/iss1/1>

This Full Issue is brought to you for free and open access by the State & Local Dental Publications at ADACCommons. It has been accepted for inclusion in NODA News by an authorized editor of ADACCommons. For more information, please contact commons@ada.org.

NODA News

MISSION STATEMENT

To establish and maintain a cohesive organization that serves to promote the art, science, and professionalism of dentistry, and to communicate the value of oral health to the community.

VOL. XXVII JANUARY '94 NO. 1

Bowden Conference

**January 21
session to cover
patient relations**

The 27th annual L. H. Bowden Conference is slated for Friday, January 21 at the Crown Sterling Suites Hotel in Baton Rouge, Louisiana. Featured speaker will be Ms. Robin Wright, M.S., president of Wright Communications, a nationally recognized communication expert on the topic "Protecting Patient Relations In Controversial Times."

The program will begin at 8 a.m. and end at 4:30 p.m., with an hour break for lunch. Cost of the program is \$60 for LDA member dentists and \$40 for dental auxiliaries and spouses.

This seminar is designed for general practitioners, specialists, dental assistants, dental hygienists, office managers and receptionists.

Ms. Robin Wright is the author of numerous award-winning publications in dentistry. She has presented over 300 dental seminars internationally on health care marketing and communication. Prior to starting her own company, Ms. Wright managed public relations and marketing for the American Dental Association for five years.

The program will focus on how issues facing dentistry today, including AIDS, mercury in silver amalgam, and handpiece sterilization, require new skills in patient communication. This seminar will help dentists and their office staffs to provide good answers to tough questions, while reaping the benefits of patient satisfaction and practice success.

JANUARY 19 MEETING

Dealing with
OSHA

The Occupational Safety and Health Administration – known far and wide as OSHA – is a presence much in the consciousness of virtually every business person and professional in the nation.

It is concerned with conditions in the work place, especially in the area of health safeguards and care in the protection of employees.

Dr. Pat McCrossen, who speaks at the NODA general membership meeting Wednesday, January 19 at 7 p.m. at the LSU Dental School, is an authority on OSHA. Joining him on the podium will be an official representative of OSHA. The topic will be "OSHA – A Cookbook Approach."

Obviously, this is a NODA session not to be missed. Just to make sure you attend, the regular monthly drawing for a \$50 dues rebate will be held and refreshments will be served.

Dr. McCrossen has assisted and consulted with many corporations in planning related to occupational medicine and occupational health and safety compliance. At the NODA meeting he will cover hazardous communication regulations as they relate to the dental office.

Dr. McCrossen is both a dentist and a physician. He received his BA in biological sciences from the University of New Orleans, his DDS from the LSU School of Dentistry, and his MD from the LSU Medical School.

He also holds a Master of Public Health degree in international health and occupational/environmental medicine. After internship at Charity Hospital in New Orleans, he completed



DR. McCROSSEN

his residency in preventive/occupational medicine at Tulane University Medical Center and School of Public Health and Tropical Medicine.

This meeting is being sponsored by the Paine Webber brokerage and investments firm. Be sure to stop by and thank their representative for supporting NODA

DEQ MAKES REVISIONS IN RADIATION PROTECTION STANDARDS

Notice was sent November 16, 1993 from the Louisiana Radiation Protection Division of the Department of Environmental Quality to all Louisiana Radioactive Material Licensees and Registrants advising of the revision of Chapter 4 of the "Standards for Protection Against Radiation" which will become effective for all Licensees and Registrants on January 1, 1994.

According to the LDA, these regs have little or no impact on dental offices with radiograph equipment. However, the DEQ maintains that dentists need to keep an updated copy of the revised Chapter 4 regs in the dental offices and make certain their offices are in compliance with the new regs if applicable.

The LDA has advised that the revised

Chapter 4 will not be available until January and the LDA has requested a copy as soon as it is available.

The LDA plans to have copies printed and available for member dentists on request and will mail a copy at a nominal charge to cover

(Continued on page 3)

President's Message

BY FRANK G. MARTELLO, DDS

Happy New Year to all of our devoted members, their families and staffs. I hope you enjoyed the holiday as much as I did.

A special thanks to Mr. Fred Siegel, who gave an informative update on the stock market and its future at our December general meeting. Most agreed that Mr. Siegel should be invited back and given more time to present his analysis of our economic future and proper management of our financial portfolios.

January's general membership meeting will be held on Wednesday, January 19 at 7 p.m., and will feature Patrick McCrossen, DDS, MD, MS, and an OSHA representative.

This meeting will give all of us the chance to ask questions on a topic critical to our daily practice. Many changes in regulations have occurred and it is essential to stay current and to avoid government fines.

Also this month is the L.D. Bowden Conference, to be held at the Crown Sterling Suites in Baton Rouge on January 21. The speaker will be Ms. Robin Wright, president of Wright Communications, a nationally recognized communications expert, on the topic "Protect Patient Relations in Controversial Times."

The program will last from 8 to 4:30, and the cost is \$60 to LDA members.

Changes in the State Dental Practice Act regarding anesthesia, dental hygienists' duties, and advertising are upon us. Attending the Louisiana State Board of Dentistry meetings gives you the chance to provide input on these important issues. Please call or write the State Board with your comments.

As many of you know, I have been volunteering my time for many years with the treatment of handicapped children. Our Kenner Center for Dentistry for the Handicapped is in urgent need of dentists willing to volunteer whatever time they can to treat these needy children.

They are so grateful for your help. This is your chance to donate your highly specialized talents and skills to those most in need of them. Remember that we are doctors who treat that part of the body that no other professional can treat.

If you are interested, please contact me at my office (891-9119) or Mona at the Central Office.

Please remember to renew your dues in organized dentistry. Make sure that you check off those committees that you wish to become active in. Furthermore, please read that portion of the dues form related to non-deductibility of your dollars spent on lobbying expenses. I suggest that you make a copy of this form for your tax records.

May God bless you throughout the New Year.

Frank Martello, DDS

Astronomy Note: A Quiet Month . . .

. . . Except for the Hubble Telescope's ophthalmologists. This is a great month to visit the Planetarium and Observatory at the Freeport-McMoRan Daily Living Science Center in Kenner. For hours, programs, or other information, call Mike Sandras, astronomy director, at 468-7229.

ABD Program: Join early for lower payments

Wouldn't you rather pay your 1995 NODA/LDA/ADA dues in relatively small monthly installments instead of one lump sum?

We're talking about 1995 dues, not 1994 dues which are payable in full right now.

Here's how it works:

Join NODA's Automatic Bank Draft Program (ABD) early in the year (preferably this month) and a monthly amount will be automatically

deducted from your checking account through the end of the year.

Then, when January 1995 rolls around, you will be paid up (NODA, LDA and ADA dues) in full for 1995. Easy and painless. No invoices, no checks to write.

You can join the plan simply by writing or calling Mona Whittington at the Central Office (834-6449) and requesting the necessary forms. She'll take it from there.

MEETING SCHEDULE FOR 1994

NODA GENERAL/ELECTION MEETING

New Member Dinner - Smilie's Restaurant

Wed., Feb. 23, '94 - 7 p.m.

(Guest Speaker - To Be Announced)

NODA SEMINAR - LSUSD

Wed., Mar. 9, '94 - 6:30-9:30 p.m.

"Facial Deformities & Airway Obstruction"

Dr. Michael C. Kinnebrew

NODA INSTALLATION DINNER

Sat., Mar. 26, 1994

Southern Yacht Club - 7 p.m.

Dr. Debra C. Arnold

NODA/LSUSD TABLE CLINICS

Wed., Apr. 13, '94 - LSUSD - 7 p.m.

Dr. Richard S. Walker, Chairman

NODA CRAWFISH PARTY/DANCE

Fri., Apr. 15, '94 - 7 p.m.

American Legion Home

RSVP Required - 834-6449

NODA GENERAL MEETING - LSUSD

Wed., May 18, '94 - 7 p.m.

"Selling Dentistry With Video & Camera"

Demos By: Oral Vision, Polaroid, & Others

ADOPT-A-SCHOOL

Help kids to lifetime dental health.

See Page 5

DENTAL DATA

CONGRATULATIONS ARE IN ORDER

Dr. John Mosteller, veteran mobile practitioner, Loyola grad and friend of many NODA members, is now the dean of American dental editors.

He has been re-elected to a two-year term as editor of the Alabama Dental Association. He has been editor since 1956.

Dr. Mosteller has been a long-time booster of the New Orleans Dental Conference. ■

SURVEY SHOWS RISE IN COMPUTER USE

New national research conducted by the Gallup organization and sponsored by Healthcare Communications, a practice management software developer, indicates that over half (53 percent) of all dental offices are computerized.

Of those computerized, 81 percent use their computers for word processing and various practice-management activities such as billing, accounting, management reports, insurance claims and electronic scheduling. Survey results were published in the September 1993 *Proofs, the Magazine of Dental Sales and Marketing*.

Office managers reported they spent an average of 62 percent of their day interacting with their computer system. The average age of computer systems was 3.5 years.

DEQ REGULATIONS

(Continued from page 1)

printing and postage. For a copy, or for further information, contact Cindy Bishop at the LDA office in Baton Rouge at 1-800-388-6642.

In the same offices, dentists were on a computer only 8 percent of the time.

When asked about electronic submission of insurance claims, 32 percent of the office managers said they were unaware of the process.

Forty-five percent of the computerized offices said the ability to electronically submit claims was available with their current computer system, but only 9 percent of those aware of electronic claims reported using it. ■

"Today the real and controlling resource and absolutely decisive factor of production is neither capital nor land nor labor. It is knowledge."

Peter Drucker

SMALL SEGMENT ACCOUNTS FOR 30% OF HEALTH EXPENDITURES

According to a new study by the Agency for Health Care Policy and Research, 1 percent of Americans – mainly the elderly and those in poor health – account for 30 percent of health care expenditures.

If health care reform includes insurance expansions to provide unlimited coverage of the high-cost and often experimental technologies used by this small group, health care costs may remain concentrated among a few, according to Alan Monheit, PhD, AHCPR economist, and

Mark Berk, PhD, director of the Project HOPE Center for Health Affairs.

On the other hand, a minimum benefit package that covers preventive and routine care and encourages those who do not use health care services to obtain some care may distribute health care expenses more evenly among the whole population, the authors note.

Drs. Berk and Monheit analyzed data from AHCPR's National Medical Expenditure Survey to update earlier work which found that the most dramatic shift of health care expenses to a small percentage of the population occurred during the 1960s.

Details are in "The concentration of health expenditures: An update," which appears in the Winter 1992 issue of *Health Affairs*. ■



YEAR OF ORAL HEALTH IS DESIGNATED

The World Health Organization has designated 1994 as the "Year of Oral Health." In keeping with this, the 82nd Congress of the Federation Dentaire Internationale in Vancouver, Canada October 2-8, 1994, has chosen "World Focus on Oral Health" as its theme. ■

"The less we are stuffed with pride, the more we shall be filled with love."

St. Augustine

TOOTHBRUSHES ARE BIG MONEY NOW

A study compiled for *The Wall Street Journal* ranked toothbrushes fourth on a list of the fastest-growing products in supermarket sales, after cooking sauces, prepared salads and coffee creamers, reports the editor of the *Journal of Clinical Orthodontics*.

In another report, writes Larry W. White, DDS, tooth-conscious Americans were said to have spent more than \$368 million for toothbrushes in the last 12 months – a jump of 28 percent.

The average price went up from \$1.71 to \$1.90 as manufacturers competed for sales in this lucrative market with "innovative" features such as efficient shapes, shock-absorber handles, even glow-in-the-dark colors. ■

Coming in February!

New Member Dinner
Election of Officers for 1994
Speaker to be announced

Wednesday, Feb. 23 7 p.m. Smilie's Restaurant

More on Disabilities Act

(Third of a series)

The following is excerpted from an ADA booklet. The booklet is offered free to NODA members. Call 1-800-621-8099.

EFFECT OF THE LAW ON DENTAL PRACTICES

What does all of this mean to me in my practice?

Effective January 26, 1992, the Act prohibits you from discriminating against persons with disabilities in providing dental care. You are required to make reasonable modifications to facilitate access to your office by persons with disabilities. Modifications may include rearranging part of your office and changing policies that have the effect of excluding disabled persons from receiving care in your office. For example, an office policy against treating persons who are deaf is prohibited. You may also have to provide at your expense what the law refers to as auxiliary aids and services, when necessary to serve persons with disabilities. Examples of auxiliary aids and services are discussed below.

What must I do?

You must take steps to ensure that persons with disabilities are not denied services or treated differently because of the absence of auxiliary aids and services, unless it can be shown that taking those steps would result in an "undue burden" or fundamentally alter the nature of the services you provide.

What are auxiliary aids?

Qualified interpreters, assistive listening devices, notetakers, telephone handset amplifiers, written materials for persons with hearing impairments, qualified readers and telephones compatible with hearing aids are examples of auxiliary aids.

What is an undue burden?

It is defined in the law as a "significant difficulty or expense." There is no formula in the law or regulations for determining what constitutes significant difficulty or expense, but several factors should be considered. These factors include the overall size and financial resources of the business, the nature of the business and the nature and cost of the accommodation needed. In situations in which you must determine whether an auxiliary aid or service will be provided, your records should reflect what is done, what is offered and the rationale for determinations that certain items represent significant difficulty or expense.

You must take steps to ensure that persons with disabilities are not denied services or treated differently because of the absence of auxiliary aids and services, unless it can be shown that taking these steps would result in an "undue burden" or fundamentally alter the nature of the services you provide.

How did I know whether I must make an accommodation that in my opinion seems like an undue burden?

A minor administrative burden probably is not an undue burden (e.g., rearranging an office schedule; spending extra time communicating with a hearing-impaired patient). However, significant financial expenses are valid evidence of undue burden. Be flexible; find out the actual cost associated with an accommodation (e.g., ramp to replace steps) and document those costs; determine whether less expensive alternatives might work and determine whether those alternatives are feasible.

May I continue to ask patients' HIV status on the health history?

Yes. You need to take a complete and accurate health history **in order to provide appropriate care to your patients**, and asking about a patient's HIV status is a valid part of taking that history. You should be aware that **using the information to deny services to persons who have HIV may prompt a charge of discrimination.**

Must I treat all disabled persons who come to my office?

The law requires that you treat disabled patients on the same basis as you treat non-disabled patients. If the treatment required by a disabled patient is something your currently perform in your practice, you must treat the disabled patient just as you would a non-disabled patient. However, if the disabled patient requires a procedure for which you would ordinarily refer a non-disabled patient, you may legally refer the disabled person as well. Persons with disabilities are not excused from meeting their responsibilities to you. If a disabled person misses multiple appointments, fails to meet financial responsibilities, disregards your professional opinions or treatment recommendations or does other things that would justify dismissing a non-disabled person

from the practice, you may dismiss the disabled patient. However, dismissing a disabled patient because of a single missed appointment, especially if the patient missed for a reason related to his or her disability, could subject you to charges of discrimination.

What if the dental treatment needed by a disabled patient is something I routinely provide in my practice, but the patient needs an additional service, such as parenteral sedation or general anesthesia, and I don't use sedation or general anesthesia in my practice?

Assuming there are no other facts, you may refer the patient to a dentist who provides these services. Before making the referral, however, you should carefully evaluate whether the patient in fact needs this or other additional services, and whether you can provide them. If you do decide to refer the patient, you should fully explain the medical necessity for the referral and assure the patient that you will cooperate with the other practitioner, including providing copies of your records.

What if there is a dentist in my town who markets his or her practice to disabled persons and wants referrals of disabled patients. May I refer these patients to that dentist?

Making such a referral can be problematic if it is interpreted as expressing a preference not to treat persons with disabilities. If you do offer the referral, you should make it very clear to the disabled person that you are willing to treat him or her and that the referral is not a refusal to provide services. Let the patient make the choice. **Document the fact that you expressed your willingness to treat the patient. If the person accepts the referral, document that fact.** Certain disabled persons may be offended by the offer of such a referral, so your discussion with the patient and documentation of that discussion are very important.

(More next month)

Infection Control Corner

(Fifth of a series)

STERILIZATION AND DISINFECTION

Sterilization is the process by which all forms of microorganisms are destroyed, including viruses, bacteria, fungi, and spores. Although methods of sterilization include the use of steam under pressure (autoclave), dry heat, chemical vapor, ethylene oxide gas, or immersion in chemical sterilant solutions, the use of the latter is discouraged.

Immersion in a chemical sterilant solution instead of the use of physical means of sterilization is not recommended for several reasons: sterilization by chemical solutions cannot be monitored biologically; instruments sterilized by chemical solutions must be handled aseptically, rinsed in sterile water, and dried with sterile towels; and instruments sterilized by chemical solutions are not wrapped and, therefore, must be used immediately or stored in a sterile container.

Disinfection is generally less lethal to pathogenic organisms than sterilization. The disinfection process leads to a reduction in the level of microbial contamination and covers, depending on the disinfectant used and treatment time, a broad range of activity that may extend from sterility at one extreme to a minimal reduction in microbial contamination at the other.

Disinfection may be accomplished by using a chemical disinfectant according to the directions on the product label. When chemical solutions are used for disinfection, manufacturers' instructions must be followed carefully.

Particular attention should be given to dilution requirements (if any), contact time, temperature requirements, antimicrobial activity spectrum and reuse life. A chemical agent for disinfection (other than sodium hypochlorite) in the dental setting must be registered by the Environmental Protection Agency (EPA) as a hospital disinfectant, and must be tuberculocidal. Virucidal efficacy must include, as a minimum, both lipophilic and hydrophilic viruses.

The use of a rust inhibitor solution on instruments prior to autoclaving can be helpful in avoiding corrosion problems. Manufacturers should be consulted on appropriate sterilization or disinfection of specific products.

Instruments and equipment. Surgical and other instruments that normally penetrate soft tissue or bone (e.g. forceps, scalpels, bone chisels, scalers, and surgical burs) must be sterilized after each use or discarded.

Instruments that are not intended to penetrate oral soft tissues or bone (e.g., amalgam condensers, and plastic instruments), but that may come into contact with oral tissues should also be sterilized after each use. Some plastic instruments will not withstand sterilization and should be discarded after each patient.

Instruments that are metal or heat-stable should be sterilized between use by steam under pressure (autoclave), dry heat, or chemical vapor. If instruments are to be stored after sterilization, they should be wrapped or bagged before sterilizing, using a suitable wrap material such as muslin, clear pouches, or paper as recommended by the manufacturer of the sterilizer.

The wrap or bag should be sealed with appropriate tape. Pins, staples, or paper clips should not be used as these make holes in the wrap that permit entry of microorganisms. After sterilization, the instruments should be stored in the sealed packages until they are used. Process indicators should be used with each load. Biological monitors should be used routinely to verify the adequacy of sterilization cycles.

Weekly verification should be adequate for most dental practices. Instruments that are not heat stable should be sterilized by immersion for 6 to 10 hours in an EPA-registered chemical sterilant, according to manufacturers' instructions.

Instruments and equipment that come in contact with intact skin, that may be exposed to spatter or spray of body fluids, or that may have been touched by contaminated hands (e.g., physical measurement devices, amalgamators) should be disinfected.

Instruments and equipment intended for sterilization or disinfection procedures must first be carefully prepared. Patient debris and body fluids must be removed from the instruments and surfaces before sterilization or disinfection. This can be done by scrubbing the instruments with hot water and soap or detergent or by using a device such as an ultrasonic cleaner with an appropriate cleaning solution.

After cleaning, the instruments should be dried before being wrapped or packaged, especially if dry heat or ethylene oxide sterilization is to be used. Dental personnel responsible for handling instruments should wear heavy-duty utility gloves to prevent hand injuries.

(To be continued)

NATIONAL CHILDREN'S DENTAL HEALTH MONTH

February 1994

Dudley™ says . . .



Brush & Floss
Each Day

Eat Nutritious Foods
Visit Your Dentist

DUDLEY™ ©1993
American Dental Assn.

Talk to kids, members urged

Adopt-a-School.

This is a main feature of NODA's participation in National Children's Dental Health Month February 1-28, 1994. It's also a plea to NODA dentists to call a school near their homes or offices and offer to make a little talk on dental care.

"Many dentists take a day or a few hours off during the week," said Dr. Jim Roethele, CDHM chairman. "Why not give up some of that time during February to speak to kids about lifetime care of their teeth?"

"You'll find most schools will quickly agree," said the chairman. "For schools in the inner city or disadvantaged neighborhoods we expect to have free toothbrushes and other material you can give away."

Dr. Roethele said the campaign is focusing on the second grade, but the principal or school nurse might combine several grades for the program.

Marcy Celino, Vera Marse and other members of the NODA Alliance are working on a complete list of area schools to assist in matching up dentists and schools.

Other activities planned:

- A month-long exhibit on dental care, nutrition, and orientation to the dental office at the Louisiana Children's Museum on Julia St.

- Special programs at the permanent NODA/LSUSD exhibit at the Freeport-McMoRan Daily Living Science Center in Kenner.

- Appearances by dentists on radio and television shows.

- A professionally-produced public service TV spot.

- A seminar for school nurses and teachers January 28 at LSUSD.

BULLETIN BOARD

SHARED OFFICE SPACE AVAILABLE: 3796 Veterans Blvd. Plumbed and partially equipped treatment rooms. Central vacuum, compressor, nitrous and more. Call Teresa 885-8869.

(Classified ads are \$25 each. Send ads to Dr. Kristi Soileau, 2820 Napoleon Ave., Suite 470, New Orleans, LA 70115 Deadline for February issue is January 10.)

NODA News is published every month with the exception of June, July and August. Deadline for ads and editorial material is the 10th of the month preceding publication. Ads and news should be sent to Dr. Kristi Soileau, 2820 Napoleon Ave., Suite 470, New Orleans, LA 70115.

Dr. Soileau is editor and chairman of the NODA News Committee. Members are Drs. John Braud, Jr., Steven Collins, David DeGenova, Barry Goodspeed, Frank Herbert, Hector Maldonado and Wallace Serpas III.

WE WANT YOUR NEWS

Anyone knowing of any dentist who has made a significant contribution, written an article, delivered a paper, initiated or completed research, or rendered unusual public service, please call or write Dr. Kristi Soileau, 2820 Napoleon Ave., Suite 470, New Orleans, LA 70115. Phone: 899-2255.

Continuing Education Corner

In an effort to keep the membership attuned to available C.E. opportunities at the L.S.U. School of Dentistry, this area will be devoted to informational updates.

DATE	COURSE TITLE		COST
Jan. 14-16	"Expanded Duty Dental Assistant"		\$369.00
Jan. 19-23	"Comprehensive Review Course in Periodontics"	3-day 5-day	\$650.00 \$925.00
Feb. 12	"Radiology for Dental Auxiliaries"	Auxiliary	\$ 95.00
March 3-6	"Expanded Duty Dental Assistant"		\$369.00
April 15 & 16	"F. Harold Wirth Lecture" Dr. Henry Tanner Dr. Ronald Presswood	Friday Saturday	T.B.A. T.B.A.

*** Please call (504) 948-8584 for fees not listed or for further information.

LA Toll Free No. 1-800-223-1569

T.B.A. = To Be Announced

Risk prevention is topic of February 4 seminar at Westin

"Risk Prevention for Physicians and Dentists," a seminar sponsored by The Medical Protective Company, will be held Friday, February 4 at the Westin Canal Place Hotel.

Registration will be from 1 p.m. to 2 p.m. with risk management presentations from 2 p.m. until 5 p.m. Refreshments will be provided.

Costs are as follows:

- Risk Management Seminar only, \$30.00
- Optional Tennenhouse Self Study Program, \$50.00
- Seminar and Tennenhouse Self Study Program, \$80.00

According to Dale Weaver, general agent,

policyholders of The Medical Protective Company who attend the seminar and who successfully complete the Tennenhouse Self Study program with a grade of 75% or better will receive a 5% per year premium credit for two years. However, the premium credit does not apply to the Louisiana Patient's Compensation Fund surcharge.

Seating is limited to 100. For registration form(s), contact Shirley Itson, Baton Rouge, at 1-800-344-1899. Dentists receive six hours of continuing dental education credit from the Academy of General Practice when course is passed, according to seminar material.

NODA News

Suite 153
2121 N. Causeway Blvd.
Metairie, LA 70001
834-6449

Kristi Soileau, Editor

NON-PROFIT ORG.
U.S. POSTAGE
PAID

Permit No. 455
New Orleans, La.

Officers of NODA:

Francis G. Martello – President
Debra C. Arnold – President-Elect
Jim Gaubert – Secretary
Sam P. Miano – Treasurer
Mona Whittington – Executive Secretary