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BRIEFS

ADA Humanitarian Award nominations due Sept. 15

Would you like to recognize an ADA member dentist whose extraordinary volunteer efforts have changed lives in the U.S. and worldwide?

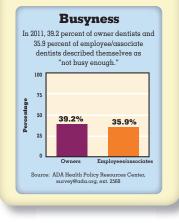


The Association is seeking nominations for the seventh annual ADA Humanitarian Award. Nomination materials must be submitted on or before Sept. 15 to international@ ada.org.

The award will be given to an ADA member dentist who has contributed to alleviate human suffering, demonstrated significant leadership, served as an inspiration to others and established a legacy that is of ongoing value and benefit to those in

See AWARD, Page 23

JUST THE FACTS



ERs seeing increase of people visiting with dental problems

BY KELLY SODERLUND

More people are heading to the emergency room with dental problems, an increase largely driven by young adults who don't have dental benefits, according to the ADA Health Policy Resources Center.

The number of dental emergency

AHRQ on emergency department dental care, Page 8

room visits in the U.S. increased from 1.1 million in 2000 to 2.1

million in 2010, according to the National Hospital Ambulatory Medical Care Survey. The survey also showed dental ER visits as a percent of total ER visits increasing from 1.06 percent in 2000 to 1.65 percent in 2010—a change HPRC cites as statistically significant. HPRC cited the survey in a research brief titled "Dental-Related Emergency Department Visits on the Increase in the United States." Lead authors Thomas Wall and Kamyar Nasseh, Ph.D., analyzed

See ERS, Page 9



Oral health on track: NASCAR's Greg Biffle and children from the Boys and Girls Clubs of Lenawee County, Mich., get together during a GKAS/NASCAR dental education event June 15 at Michigan International Speedway. Greg sped to victory in the Quicken Loans 400 June 16 in his No. 16 3M Ford Fusion, which featured the Give Kids A Smile paint scheme. See story, Page 22.

2014 budget proposal seeks no dues increase 'Exceptional' year reinforces financial progress, member programs

BY JUDY JAKUSH

The ADA Board of Trustees agreed at its June meeting that it won't be asking delegates to consider a dues increase when they meet in New Orleans this fall.

While it adopted a preliminary budget proposal in June with a net deficit of \$1,443,000, the Board has also informed delegates it will ADA customizes EBD program for Stony Brook, Page 20

amend the budget proposal to cover the deficit when more definitive information on anticipated nondues revenue becomes available. The draft 2014 budget projects expenditures of \$124,237,000 million against \$122,794,000 million in anticipated revenue. The dues recommendation is to remain the same as the current year at \$522.

Dr. Ron Lemmo, ADA treasurer, says the financial picture is good for

ADA launches online dental job board

Clearwater, Fla.—Finding or filling a dental career position is a just a click away for ADA members when they log on to CareerCenter.ADA.org, a new dental industry job board launched by the ADA in collaboration with Russell Johns Associates.

ADA CareerCenter provides a versatile recruitment platform for dentists and dental professionals and is available to ADA members as well as all dental employers and job seekers.

"ADA CareerCenter is our brand new online interactive job board for dentists and other dental professionals and is part of our new recruitment classifieds advertising program," said Michael Springer, ADA senior vice president for Business and Publishing. "We are enhancing the way our members and all those seeking dental careers interact with potential employers and recruiters by supplying them with the resources to find the right job opportunities in their field."

ADA CareerCenter is a dynamic job board where employers can post jobs, banner advertisements or upgrade to Featured Employer accounts with unlimited job postings and bonus exposure. Job seekers can search, view and apply to jobs, receive new job alerts for postings that match specific search criteria and post resumes and CVs.

Niche industry job boards have become a powerful way for employers and recruiters to reach qualified job seekers and an effective use of recruitment budgets. ADA CareerCenter provides a single online source for dentistry employers and recruiters to reach a highly tar-

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geted audience of ADA members and other dentistry job seekers.

"ADA CareerCenter features jobs that are solely relevant to job seekers in the dentistry profession," said Heloise Povey, Russell Johns Associates president. "With the ability to connect with many quality opportunities, both employers and employee candidates will benefit from this highly focused recruitment resource."

The launch of ADA CareerCenter runs parallel with the launch of ADA Marketplace, a new online product and service classifieds website. Both sites are part of the new recruitment and classifieds advertising program that debuts with the July issue of The Journal of the American Dental Association and the Aug. 5 issue of ADA News. The ADA's recruitment hub, which connects employers and recruiters with qualified dental job seekers, is made up of recruitment classifieds advertising in JADA and on ADA CareerCenter. Learn more at CareerCenter.ADA.org.

Dental assistants groups seek applicants for new scholarships

The American Dental Assistants Association and the Dental Assisting National Board have launched a new scholarship program to help dental assistants turn their professional development plans into reality.

The ADAA/DANB Scholarship will be awarded to dental assistants who demonstrate a strong commitment to career growth and lifelong learning. The winner or winners will be able to use the scholarship money for professional activities, such as continuing dental education courses, DANB exams or certification, some expenses associated with the ADAA Fellowship or Mastership programs, or registration for a dental conference, among other possible activities.

To be considered for the scholarship, applicants should download and complete the application and submit a letter of intent, along with any required documentation. The scholarship is open to all paid ADAA members and student members in good standing.

Applications will be accepted through Aug. 31, and the winners will be announced at the 2013 ADAA Annual Session in October. To learn more about the scholarship requirements and deadlines, download the application at www. dentalassistant.org or www.danb.org



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ADA standards committee to meet in October

New Orleans—The ADA Standards Committee on Dental Informatics will meet Oct. 28-30 at the Hilton New Orleans Riverside. Here are meeting details:

• Oct. 28: A joint meeting of Digital Imaging and Communications in Medicine Working Group 22 and SCDI Working Group 12.1 will take place at 9 a.m.

• Oct. 29: The IHE Dental Domain will meet at 2 p.m.

• Oct. 30: The SCDI Plenary meeting takes place at 8:30 a.m.

• Oct. 30: A special panel discussion and presentation on the Integrating the



Healthcare Enterprise Connectathon will take place for dental imaging and practice management system vendors at 2 p.m. The ADA Department of Standards suggests that all vendors send a representative to this session, which will demonstrate the importance of system validation through testing at the IHE Connectathon.

The American National Standards Institute accredits the ADA to develop national standards for products and information technology for the dental profession and consumers. The ADA currently is developing or revising more than 70 national standards.

For additional information about the meeting, contact Paul Bralower at ext. 4129 or by email at bralowerp@ada.org.

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VIEWPoint

MyView

Yes, I still believe



rdinarily I don't comment on a letter to the editor. However, I've had my say and it is the reader's turn. A letter concerning my screed, "Is Dentistry Still a Good Career Path?" in the September/October issue of the CDS Review—wherein I stated that becoming a dentist is a good business decision—merits a reply. First, the letter:

Walter F. Lamacki, D.D.S.

D.D.S. in the Chicago suburbs. I get the CDS Review and read the articles fairly regularly. Your

You don't know me but I'm a young dentist

article spoke to a growing concern of mine, and I have been looking for an outlet that might be able to not only answer my question but also hopefully ease my concerns. I am happy to read that you are optimistic about the future of our profession, but as a general dentist in practice for two years in this market, I have an outlook of pessimism. I have been reading the history of dental education, specifically, the output of practitioners by dental schools. It concerns me that while I keep hearing that, there is a shortage of dentists. Has anyone ever had difficulty finding a dentist within 55 miles of Chicago? I understand that nationally it may be a different picture, but along with astronomical tuition rates (it used to be under \$10,000 per year at the University of Illinois at Chicago College of Dentistry), there is a dentist on every block in the Chicagoland area, and many of those dentists are saddled with massive debt loads. And now we must face a massive influx of competitors from the Midwestern University College of Dental Medicine, where class size is 125 students.

The American Dental Association's figure of \$194,000 as the average income is, I think, misleading in the Chicago area. I know none of my colleagues are even in that range on the high end. I have a hard time believing with supply costs going up and demand going down (much higher ratio of dentists to population), and subsequently reimbursement rates for procedures going down, that my generation and the ones that follow will be able to compete in a completely oversaturated market.

Both offices in which I work are associate-to-sale situations, and it is a very intimidating time to consider investing in a dental office with my outlook.

—Name withheld upon request

Our young dentist has a point; there seems to be no shortage of dentists in Chicagoland, especially in the more affluent neighborhoods. And he is right, of course, 125 new graduates of the Midwestern University College of Dental Medicine will be entering the profession in three years. Nationwide, eight new dental schools have either broken ground or have blueprints in hand, impacting an already fragile economic landscape for dental practice.

Our young dentist has trouble believing that the average general dentist nets \$194,000 per year, according to a 2009 survey by the American Dental Association. The Department of Labor is less sanguine; in a 2010

See MY VIEW, Page 5

LETTERSPolicy

ADA News reserves the right to edit all communications and requires that all letters be signed. The views expressed are those of the letter writer and do not necessarily reflect the opinions or official policies of the Association or its subsidiaries. ADA readers are invited to contribute their views on topics of interest in dentistry. Brevity is appreciated. For those wishing to fax their letters, the number is 1-312-440-3538; email to ADANews@ada.org.

SNAPSHOTS OF AMERICAN DENTISTRY

Median gross billings per hour

In 2011, median gross billings per hour were \$356 for solo general practitioners and \$488 for solo specialists in private practice.



Source: American Dental Association, Health Policy Resources Center, 2012 Survey of Dental Practice

Letters

MetLife woes

his letter to the editor is in regard to the recent article in the May 20 ADA News titled, "CDBP Assists Dentists With MetLife Issue."

MetLife acted in an irresponsible and reprehensible manner. The appropriate and professional action would have been to call the dentists' office or the state board and find out the validity of the current license. Perhaps paperwork was delayed or lost in the mail. Instead, MetLife does what

Instead, MetLife does what it does best; delay or in this case deny payment. And in the process they falsely accused the dentist of a crime while casting suspicion on the dentist in the eyes of his patients.

The ADA, for its part, should have been exponentially more proactive. Somewhere in the ADA someone knows an administrator at MetLife. Phone calls should have been made with a finite time limit as to the resolution of the problem.

MetLife once again was the 800-pound gorilla in the room. It sits wherever it wants.

Its up to the ADA to take a firm and aggressive and proactive stance. Watch what happens to membership and retention rates when you do!

Dr. Arthur Feldsott Pittsford, N.Y. Editor's note: The article cited several instances in which the ADA responded to the dentist's issues with the insurer and was an active participant in resolving the issue. The ADA encourages dentists to report such issues via the toll-free number, as that is how ADA gains awareness of such activities.

The silent opinion

his opinion stated by me is not going to affect my practice or career at this time, but my conscience compels me to express it.

I have been practicing for over

40 years. My dental education began at a dental school known for its disciplined restorative clinical training. This was followed by two years in the Naval Dental Corps; pediatric specialty training obtained at a prestigious University Hospital certification program.

In the past few years, the demand by the public has antiquated the amalgam restoration. The question to be asked from this revolution, "What has this brought to pediatric dentistry"?

My observation of my own practice and that of others has witnessed with the exclusive use of composite restorations an increase in failures of interproximal restorations with resulting pulpotomies and stainless steel crowns. Presently, the marketing of esthetic primary crowns is the rage.

This new millennium of pediatric restorative dentistry has brought a perceived increased need for pediatric sedation dentistry. Is this a necessity or self-inflicted by the new approach in restorative pediatric care?

Speaking to colleagues on a oneto-one basis, they express the same concerns and offer their own clinical anecdotal experiences.

Where is the silent majority on this issue? A response to this view would be appreciated and welcomed.

See LETTERS, Page 5

MyView

Continued from Page 4

analysis, it pegs the figure at \$146,920. They estimate that income growth in the next 10 years will be 21 percent higher for dentists than the general workforce.

I called this young dentist to learn more about him. What I found is typical of many of our young colleagues. He works in two high-volume, low-fee practices. He is recently married, and although his dental school debt is manageable, together he and his wife have sizable educational debt. His classmates have similar experiences.

I asked if he attends his branch meetings: "I've gone to some," he said. Do you have an accountant familiar with the business of dentistry, I asked. "No, not really," he responded.

"I'm familiar with your branch and am certain you would be warmly welcomed. You can not underestimate the value of networking with your colleagues and being mentored by more experienced dentists," I told him. I also gave him the name of an accounting firm that has vast expertise in associating, buying and selling dental practices.

"I will hound you to death, if you do not follow up," I added.

Yes, I still believe dentistry is a good business decision. More dentists are retiring than entering practice and the scope of dentistry is expanding. Whether the income of a dentist is \$194,000 or \$147,000, it is higher than most other professions. However, young dentists will need to make informed choices to succeed. Unfortunately, good business practices are not taught in dental schools whose curricula are overcrowded. It has to be learned in continuing education, course by course, by experience and by mentorship.

Letters

Continued from Page 4

Leonard J. Carapezza, D.M.D. Associate Clinical Professor Tufts University School of Dental Medicine Wayland, Mass.

Affordable Care Act

t was interesting to read the article dealing with Obamacare's so called Affordable Care Act involvement with dentistry in the sense that it was falling short of needs for people.

While the article does not state the ADA is endorsing the ACA, I think we as a profession need to be very careful about wanting to be included in any aspect of the ACA as it's going to be a train wreck and the dental profession does not need to be on it.

What should have been done was to simply copy the two-tiered tort reform bills passed in Texas during the last 10 years. The first was a limit on noneconomic damages for medical malpractice lawsuits. This brought an enormous influx of medical personnel of all types to the state because they could survive economically. The second bill passed a couple of years ago was a losers pay system where in many suits, the losing party pays the legal fees of the other party. This has seen a dramatic drop in frivolous lawsuits, greatly reducing business costs on many levels.

If national lawsuit abuse legislation were to be enacted, we could see the same economic results as evidenced by Texas's experience. *Dr. James P. Economos*,

Bartlett, Ill.

I was pleasantly surprised when he emailed back a few days later telling me he had made an appointment with the accountant and asking how to start in organized dentistry. I will call him from time to time to see how he's progressing.

The longest journey begins with the first step. Reach out and help a young colleague. It will benefit you both.

Dr. Lamacki is the editor of the CDS Review, the journal of the Chicago Dental Society. His comments, reprinted here with permission, originally appeared in the December 2012 issue of that publication.

Editor's note: The Commission on Dental Accreditation notes the growing emphasis on

teaching practice management skills in dental schools, and indicates that this has become increasingly important in recent years. For example, Standard 2-18, Practice Management and Health Care Systems of the Accreditation Standards for Dental Education Programs implemented July 1, requires that graduates be "competent in applying the basic principles and philosophies of practice management, models of oral health care delivery, and how to function successfully as the leader of the oral health care team." Standard 2-18 was enhanced from its prior version, which required that graduates acquire learning at the understanding level. For more information, visit ADA.org/sections/educationAndCareers/ pdfs/predoc_2013.pdf.

ADA Dental Product Guide available online

The ADA Dental Product Guide is an online easy-access directory to supplies, equipment and services available to help make your dental practice a success. The guide is a comprehensive resource of more than 150 categories of products and services, from equipment to therapeutics to dental materials. It features many integrated research capabilities including product and service videos. For more information, go to ADA.org/ productguide.aspx.



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GOVERNMENT

'Bring loan rates down,' ADA urges Senate

BY CRAIG PALMER

Washington—Urging Senate support for "a long-term solution to bring graduate loan rates down," the Association said educational debt plays a major role in postgraduate career planning.

"It can influence whether a recent graduate will choose to enter private practice, focus on underserved communities or pursue a career in public service, teaching, research and/or public health," the Association told Senate leaders in a June 26 letter. Senate members were planning to leave town June 28 for the Fourth of July recess having failed to address a scheduled July 1 increase in student loan interest rates after weeks of negotiations. Rates could be revised retroactively and that appeared to be an aim of at least some of the senators engaged in loan rate negotiations.

"The ADA respectfully requests that as

leaders of the United States Senate you support legislation to keep Stafford Loans at or as close to 3.4 percent as possible and work on a long-term solution to bring the graduate rates down," said the letter to Senate Majority Leader Harry Reid, D-Nev., and Minority Leader Mitch McConnell, R-Ky.

"As you know, on July 1, the fixed interest rate on subsidized Stafford Loans for undergraduates is set to double from 3.4 to 6.8 percent. This would significantly add to the educational debt burden of students entering dental school," said the letter signed by ADA President Robert A. Faiella and Executive Director Kathleen O'Loughlin.

The average educational debt for graduating dental school seniors in 2011 was \$180,557, the Association said. "Factoring out the 11.2 percent of dental school seniors who graduated with no debt, the average debt per graduating dental school senior was \$203,374 (\$177,795 for graduates from public dental schools and \$245,497 for graduates from private and private state-related dental schools)."

"Keeping student interest rates low is crucial to mitigating the catastrophic level of debt for those entering this important health care profession," the Association said.

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ACA merges data banks

BY CRAIG PALMER

Washington—National Practitioner Data Bank query fees will remain the same and reporting requirements "essentially the same with some minor technical changes to ensure consistency in reporting" after the bank's May 6 merger with the Healthcare Integrity and Protection Data Bank, bank officials said.

The 2010 Affordable Care Act required the elimination of duplication between the two data banks. Although the data banks were established for different purposes, overlap existed in some reporting and querying requirements and Congress intended to streamline operations in a single bank. NPDB operations were consolidated with those of the former HIPDB and information previously collected and disclosed by the HIPDB is now collected and disclosed by the NPDB.

The June 2013 Data Bank News at www.npdb-hipdb.hrsa.gov/enews/ June2013enews.jsp offers merger information and links to resources including "Interpreting Self-Query Results– A Guide for Practitioners" at www. npdb-hipdb.hrsa.gov/pract/hasA ReportBeenFiledOnYou.jsp and a "How to Get Started" guide for practitioners at www.npdb-hipdb.hrsa.gov/pract/ howToGetStarted.jsp.

The NPDB or Data Bank, as it is identified post-merger, is a confidential information clearinghouse created by Congress under three primary statutes with the goals of improving health care quality, protecting the public and reducing health care fraud and abuse. The NPDB contains reports on health care practitioners, health care entities, providers and suppliers, which are submitted by certain eligible entities as required by law.

If the Data Bank receives a report on a dentist or physician, for example, the bank will offer the reported professional an opportunity to view the report. A Notification of a Report in the Data Bank and information about how to access the report are mailed to the subject



My summer with the ADA Meet the 2013 ASDA externs

Capital experience: My name is Chau Leminh, and I am a secondyear student at the Indiana University School of Dentistry. It may seem like an overwhelming task deciding where to start learning about national policy and organized dentistry. However, the key is to conquer limitations in your own knowledge, and don't be afraid to start! The American Student Dental Association Washington, D.C., National Health Policy Externship has given me the opportunity to better understand the legislative process and the significance of lobbying efforts. It is essential to realize that current issues, such as the Medical Device Excise Tax or the Dental Insurance Fairness Act, have significant implications on the cost of dentistry. Passion directed towards taking political action and passing this spirit on to others can create a cascade of change that allows us to put our patients and their access to care as a top priority.



Newfound knowledge: My name is Adrien Hamedi-Sangsari, and I am a third-year student at University of California, Los Angeles, School of Dentistry. I am very passionate about organized dentistry and believe that it is the foundation of our profession. It allows us to provide the highest quality clinical care to our patients while also maintaining a viable small business. I have taken on leadership roles during my dental education because the attributes that I acquire today will be expected of me in my future practice. My training to earn a D.D.S. degree relies on my ability to gain academic and clinical competency, while secondarily becoming a leader for my school and profession. The ADA and American Dental Political Action Committee provided me with four exciting weeks; with this newfound knowledge, I have an increased sense of respect for the day to day operations of organized dentistry and an increased urge to fight for this profession. I learned that the relationships built with legislators need constant attention and that change occurs only with the fervent desire to seek it.

CE Online course helps with new HIPAA rules

New rules under the Health Insurance Portability and Accountability Act require covered dental practices to make changes to how they comply with the law.

The new rules took effect March 26, and dental practices must be in compliance with most of the new rules by Sept. 23. ADA CE Online is offering a new online course to assist dental practices with compliance. Dental Practice HIPAA Compliance: An Overview of Changes in the 2013 Omnibus Final Rule was developed by the ADA's legal division and will be offered by ADA CE Online.

The course, which will award participants one hour of continuing education credit, will give a brief history of HIPAA; discuss 2013 final rule changes to HIPAA privacy, security, breach notification and enforcement that are most likely to affect dental practices; describe resources; and how to access the rules. It will also help dentists understand what is required of their practices, including:

• revising the Notice of Privacy Practices and providing the new notice to patients;

• updating breach notification policies and procedures;

• including the new provisions in business associate agreements and revising your existing agreements;

• obtaining written patient authorization before making certain marketing communications or selling patient information. For more information on HIPAA, visit www.hhs.gov/ocr/privacy. To take the CE

Online course, visit www.adaceonline.org.

Data banks

Continued from Page 6

of the report for review for accuracy.

Whether or not a report has been filed, there are two basic ways for dentists and other practitioners and organizations to interact with the Data Bank: the self-query and report response processes. A dentist or other health care practitioner, entity, provider and supplier may self-query the Data Bank at any time. The bank offers a self-query service and a help guide entitled How to Interpret Your Self-Query Results at http://www.npdb.hrsa.gov/ resources/selfQueryResponseGuide.jsp.**m**



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ERs: 'Cannot provide definitive dental treatment'

BY CRAIG PALMER

Rockville, Md.—Use of emergency departments for dental conditions may reflect system inefficiency in the delivery of dental care, the Agency for Healthcare Research and Quality said in health care quality and disparity reports.

The reports also note that although access to care "is getting worse for most groups," one of the few income-based disparities improving over time is dental visits by poor children compared with high income children ages 2-17.

Each year since 2003, the AHRQ has reported on progress and opportunities for improv-

ing health care quality and reducing health care disparities as mandated by the U.S. Congress. The 2012 reports, issued in May, emphasize the need to accelerate progress toward optimal health care if the nation is to achieve higher quality and more equitable health care in the future, the agency said.

One approach to containing the growth of health care costs is to improve the efficiency of the health care delivery system, and one of the efficiency measurements in the reports is preventable emergency department visits, the reports said.

Both reports discuss emergency treatment c

for dental conditions. "Dental health requires periodic oral exams and timely treatment of tooth decay and gum disease. When patients do not access outpatient dental services, dental disease may progress and necessitate emergent treatment and even hospitalization. EDs cannot provide definitive dental treatment and can only provide medication for pain and infection. Hence, use of EDs for dental conditions may reflect system inefficiency in the delivery of dental care."

According to the reports (with supporting charts):

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ADA American Dental Association[®] America's leading advocate for oral health In 2009, the rate of ED visits for dental conditions was 307 per 100,000 population.
Males and females had similar rates of ED visits for dental conditions.

• Residents of the highest income quartile had lower rates of ED visits for dental conditions compared with residents of lower income quartiles.

• Children ages 0-17 and adults age 45 and over had lower rates of ED visits for dental conditions compared with adults ages 18-44.

• Residents of small metropolitan, micropolitan and noncore areas had higher rates of ED visits for dental conditions compared with residents of large metropolitan areas.

The AHRQ reports chart the 2009 rate of emergency department visits with a principal diagnosis related to dental issues per 100,000 population by age and residence location.

"Part of the discussion about how to improve efficiency involves the question about how best to measure it," the reports said. Preventable emergency department visits are among the efficiency measures presented.

The AHRQ reports also discuss trends in patient perceptions of need, including perceived difficulties or delays in obtaining care and problems getting care as soon as wanted. Among the findings:

• In 2009, 11.1 percent of people were unable to get or delayed in getting needed medical care, dental care or prescription medicines.

• In 2009, Asians (6.5 percent) and American Indians/Alaska Natives (8.1 percent) were less likely than whites (11.6 percent) to report that they were unable to get or delayed in getting medical care, dental care or prescription medicines.

• In all years from 2002 to 2009, Hispanics were less likely than non-Hispanic whites to report that they were unable to get or delayed in getting medical care, dental care or prescription medicines.

• In all years the percentage of people who were unable to get or delayed in getting needed medical care, dental care or prescription medicines was significantly higher for poor, low-income and middle-income people than for high-income people.

• In all years, people with less than a high school education and people with a high school education were more likely than those with any college education to report they were unable to get or delayed in getting needed care.

• In all years, people ages 18-44 were more likely than people age 65 and over and, in seven of eight years, people ages 0-17 to be unable to get or delayed in getting needed medical care, dental care or prescription medicines.

• Uninsured people and people with public insurance were more likely than people with private insurance to be unable to get or delayed in getting needed medical care, dental care or prescription medicines.

• In all years, uninsured people and people with public insurance were more likely than people with private insurance to be unable to get or delayed in getting needed medical care, dental care or prescription medicines. In 2009, for people under age 65, the percentage of people who were unable to get or delayed in getting needed medical care, dental care or prescription medicines was more than twice as high for people with no health insurance as for people with private insurance (20.3 percent compared with 8.7 percent).

Data sources include AHRQ's Healthcare Cost and Utilization Project Nationwide Emergency Department Sample, 2009, and Medical Expenditure Panel Survey, 2002-2009. ■

Continued from Page 1

dental utilization data and looked at how different age groups approached their dental care.

"The deterioration in private and public dental benefits coverage for adults has clearly created significant financial barriers to dental care-especially among young adults," Mr. Wall said.

"Our results strongly suggest that the increase in financial barriers to dental care for younger adults could have led to a substitution of dental ER visits for dental office visits."

More people taking their dental issues to the emergency room, rather than a dental office, creates a strain on the health care system and one that the Affordable Care Act cannot support, HPRC said.

"[Emergency rooms] nationwide are under pressure to provide care for more patients," Mr. Wall wrote in the research brief.

"Inappropriate and continuous use of EDs for nontraumatic dental visits strain the health care system, contribute to overcrowding, increased care costs and longer wait times for patients with urgent health conditions."

Based on various estimates on the average cost of a dental ED visit, it cost the health care system anywhere from \$867 million to \$2.1 billion to treat dental conditions in hospital emergency rooms in 2010, according to HPRC.

"Unfortunately, the **Affordable Care Act did little** to address the issue of dental utilization in emergency departments."

Previous studies have shown that patients who take their dental issues to the emergency room are more likely to be young or middleaged adults and more likely to have Medicaid or no health insurance, HPRC said. In previous research briefs, HPRC has reported that the percent of adults between the ages of 19 and 49 with private dental benefits declined from 2000-10.

"Unfortunately, the Affordable Care Act did little to address the issue of dental utilization in emergency departments," Mr. Wall said.

"The ACA does not mandate dental benefits for adults, nor are dental benefits likely to be included in the essential benefit packages in insurance plans sold through most states' exchanges under provisions of the law."

The ADA's research supports what's happening on the ground. Nicole Singleton, a community dental health coordinator at Morton Comprehensive Health Services in Tulsa, Okla., said she sees patients every day who have waited too long to seek dental care.

Often, they've visited the emergency room and received antibiotics as a temporary treatment but haven't followed up with a dentist to completely resolve their problem, she said.

"To me, it's just a true lack of education when it comes to oral health," Ms. Singleton said.

Calvin Hoops, a CDHC at Esperanza Health Center in Philadelphia, has seen similar behavior at his dental clinic.

While he can't track how many patients visited the ER before going to Esperanza Health Center or how many go to the emergency Dental emergency department visits as a percent of total dental visits by age in the United States, 2000-10



Sources: ADA Health Policy Resources Center analysis of National Hospital Ambulatory Medical Care Survey, NCHS: Medical Expenditure Panel, AHBO; and U.S. Census Bureau data.

room instead of visiting a dentist, Mr. Hoops said he does see many patients who forgo routine dental treatment, even when they have cavities.

"We just know that the longer patients delay treatment, the more likely something fairly routine can become something like a dental abscess with potentially severe swelling and pain that might cause somebody to visit the emergency room instead of the dentist," Mr. Hoops said.

HPRC is calling on oral health advocates to find innovative ways to increase access to dental care so that fewer people are taking their oral health problems to the emergency room.

"Without further interventions from policymakers, dental [ER] visits are likely to increase in the future, straining our health care system and increasing overall health care costs," the research brief said.

"Now more than ever, innovative solutions are needed to improve access and oral health."

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Posturing for relief

ADA Conference on Dentist Health and Well-Being poised to help dentists with ergonomic problems

BY KELLY SODERLUND

The statistics don't lie. In fact, they tell a story. But it's a painful tale.

According to data collected at the ADA's Health Screening Program at the 2012 An-

nual Session in San Francisco, 70 percent of dentists and dental team members examined reported neck or back pain. Of that group, 79 percent reported symptoms that were worsening or unchanging.

It's unfortunately not news that given the

way they work and the posture they exhibit during the day, dentists are prone to ergonomic problems.

"You think about their day, and it's just such bad posture all day," said David Pleva, a physical therapist at Community Physical Therapy in Addison, Ill. "Spending hours in that position is not a good thing."

It's a daily struggle for many and one that prompts ergonomics experts and physical therapists to help dentists figure out the best ways to manage and treat their pain.

"It puts dentists in the class of assembly workers at General Motors or furniture manufacturers-people who do manual labor," said Robert Werner, M.D., a professor of physical medicine and rehabilitation at the University



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of Michigan and chief of physical medicine and rehabilitation at the Veteran's Affairs Ann Arbor Healthcare System. "Dentists are on the higher end of complaints, which you would not expect for a relatively white collar, sedentary group of workers."

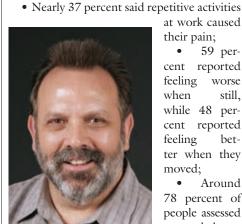
Dentists who attend the ADA Conference on Dentist Health and Well-Being Sept. 19-20 at ADA Headquarters in Chicago will have the opportunity to attend ergonomics workshops and meet with physical therapists that can assess individual symptoms and recommend a course of action. The conference also promises a lineup of speakers who will provide personal and anecdotal stories to help dentists lead a healthier life. Stephen J. Pasierb, the president and CEO of the Partnership for a Drug Free America, will deliver the keynote address. To register or for more information, visit ADA.org/8519.aspx.

Tim Caruso, a physical therapist and founder of Chicagoland Performance Consultants, and Mr. Pleva will conduct range of motion clinics on both days of the wellness conference. Mr. Caruso coordinated the ergonomics section of the Health Screening Program and shared some statistics he collected:

• 30 percent of the people screened have had symptoms for more than 10 years;

• 10 percent reported functional disability at work;

• Nearly 32 percent noted improvement after correcting their sitting posture;



at work caused their pain; 59 percent reported feeling worse when still while 48 percent reported betfeeling ter when they moved; Around

78 percent of people assessed responded pos-

itively to me-

Mr Caruso

chanical therapy. With his patients, Mr. Caruso said he first tries to get them to self-treat their problems through individualized exercises. He's been lecturing and consulting with dental professionals about back and neck posture for more than 20 years and said many dentists' first instinct is to seek out a surgeon.

"When you go to a surgeon, they usually recommend surgery, which may not be the most appropriate or beneficial first step," Mr. Caruso said. "A lot of these folks don't know how or from whom to seek out a conservative treatment approach."

Mr. Caruso recommends the McKenzie Method, which prescribes a series of exercises tailored to each patient based on an individualized assessment and their symptom response to a series of static and dynamic movements. The emphasis is on active patient involvement, which minimizes the number of visits to the doctor, according to the McKenzie Method website, www.mckenziemdt.org.

"The beauty of the approach is we know within two or three visits whether it's going to work for somebody," Mr. Caruso said. "We have found that of all the treatment approaches that appear to be available, this seems to be the most portable, simple way to categorize people with back pain and also offers a treatment plan so they can help themselves."

The ADA-sponsored Disability Income Protection Insurance Plan offers protection for member dentists against the occupational risk of disability. Disability insurance provides the

Fake Yellow Pages company scamming dentists

BY KELLY SODERLUND

It starts with a bill.

It's a couple hundred dollars. Sometimes more. It's from a familiar-sounding company. Yellow Pages something.

Then it progresses. Threatening letters are sent using words like "collection agency" and "legal action" and "bad credit rating."

Phone calls to the company in question lead to murkier waters. Now there's a recording with a dental team member agreeing to the service in question.

Dentists across the country have the same story. And it's all a scam.

Fake companies posing as an online Yellow Pages service have been targeting businesses, including dentists, saying they owe money on an Internet phone book listing they allegedly purchased. The scam begins when the scammers cold call businesses, ask a series of yes or no questions and often record the respondent's answer.

"The scam works because fraudsters convince the person who picks up the phone that they're just 'verifying' an arrangement the company already has with the directory," according to an article on the Federal Trade Commission's website.

The scammers then start sending urgentsounding invoices for hundreds of dollars, threatening to turn the unpaid bill over to a collection agency if the business owner doesn't pay. Then the calls start, and the scammers play a recording of a staff member agreeing to the fees in question. But, in reality, they just electronically spliced the staff member's previous yes or no answers with questions on the bill, ultimately trying to "prove" the business agreed to pay the bill.

It happened at Dr. Mark Sands' office in Midland, Mich. Deborah Sands, office manager, started receiving faxed invoices from a company called Online Local Yellow Pages with an address in Maryland.

"I knew I never worked with them or requested services from them, so I threw the invoices in the garbage," Ms. Sands said.

On March 15, she received a faxed collection notice for \$676.80. Ms. Sands said she called the number listed, and an employee

Ergonomics

Continued from Page 10

financial security ADA members need to protect against financial loss because of a disabling injury or illness that prevents them from practicing dentistry.

The ADA Members Disability and Office Overhead Expense Plans are designed exclusively for member dentists and preserve the true own occupation definition of disability. The disability plan can pay disability benefits up to age 65 and members who become totally disabled from their special area of dental practice will receive full benefits, even if they choose to work in another area of dentistry or a new profession.

ADA eligible members may apply for up to \$15,000 per month in coverage to replace future net earnings. The ADA-sponsored members disability and office overhead expense insurance plans are underwritten and administered by Great-West Financial. For more information, including the cost of the insurance, coverage limitations and terms for keeping coverage in force, visit http:// insurance.ada.org or call 1-888-463-4545.

played her a recording of one of Ms. Sands' coworkers agreeing to list with the company.

"There's no question it was my coworker's voice," Ms. Sands said. "But I said, 'This is a scam, and your company has inserted my staff's yes or no responses and edited it into a spiel asking if they wanted to purchase advertising with Online Local Yellow Pages."

On April 15, Ms. Sands re-



ceived another faxed invoice indicating their bill was transferred to Online Local Yellow Pages' pre-legal department. The balance had increased after incurring legal, administrative and interest charges, she said.

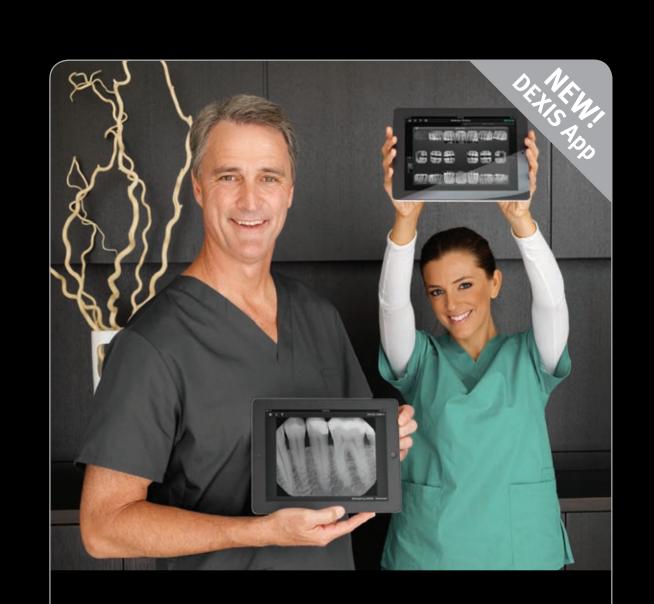
"It was very time consuming and a lot of follow-up," Ms. Sands said.

The same thing happened to Julie May, office manager at Dr. Daniel Burton's office in Grand Rapids, Mich. As of mid-June, the office had received five phone calls from Local Business Yellow Pages trying to collect \$747.40 and threatening to turn the bill over to a collection agency.

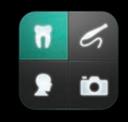
"It's just wrong. It's totally wrong. I don't even think they exist," Ms. May said. "They are technically harassing us at this point for an amount that they manifested."

Upon the advice of the Michigan Dental Association, Ms. May and Ms. Sands planned

See YELLOW, Page 13



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DQA develops leaders to promote its mission

BY KELLY SODERLUND

They arrived knowing about the Dental Quality Alliance's mission and left knowing how to spread the word.

The DQA held a conference, titled Improving Dental Quality Through Measurement, at ADA Headquarters June 28-29 to develop and mentor some 125 leaders from around the country. The goal was to engage them as dental quality ambassadors to promote quality improvement and educate the dental community. The DQA selected a broad and diverse group of people who have the ability to impact priority and underserved populations across the country with significant health care disparities.

"A number of heavy hitters within



dentistry applied to participate in this conference," said Dr. Ronald Hunt, representative of the American Dental Education Association and DQA chair. "Dentists need to understand the importance of quality measurement, and these ambassadors are the per-

fect people to help them comprehend what it means to have consistent measures in dentistry. This conference was a significant step forward in engaging the community to learn about quality measurement and the DQA."

The DQA received a grant (R13HS021842)



Collaborative environment: Dr. Jim Crall, DQA member, right, listens to Dr. Allan Charles, left, during a breakout session. Attendees broke into small groups to brainstorm at the DQA conference June 28-29.

from the federal Agency for Healthcare Research and Quality to host the conference, which United Concordia Dental also sponsored as a part of their continued commitment to improving oral health, the company said.

The DQA, formed in 2008 through a request from the Centers for Medicare and Medicaid Services, is comprised of multiple stakeholders from across the oral health community who are committed to development of consensus-based quality measures.

"While the DQA is gaining credibility and streamlining efforts to develop quality measures, there continue to be several others engaged in this activity. As a profession, we must take the lead in developing measures for oral health," said Dr. A. David May, chair of the American Dental Association Council on Dental Benefit Programs. "It is important that the ADA have input in the development of dental quality measures and we are doing this through the DQA. The ADA will strive to ensure that appropriate quality measures are advanced for oral health."

The focus on quality measures started almost a decade ago, and while the DQA has tried to craft appropriate measures, it has taken its time to ensure they are of the right caliber.

"It took us almost two years to develop the first set of measures," said Dr. Jim Crall, who represents the American Academy of Pediatric Dentistry on the DQA and serves as chair of its Measure Development Committee. "Developing appropriate measures takes a lot of thought and effort, and we believe that the rigor of our testing meets the highest standards for measure development."

The DQA is continuing to strive to engage with other agencies developing measures for oral health to become the recognized leader.

The first set of measures developed by the DQA will be finalized at their meeting July 19. These are programmatic measures and they will be used by health plans and programs such as Medicaid to evaluate their performance. Poorly performing plans may then put in place quality improvement programs to address poor performance. Practitioners will be critical players in improving quality for the population enrolled within the health plan.

"As the health care system evolves and the financing systems look to become more outcomes-based, it is of utmost importance to advance appropriate quality measures. These measures will become the basis for some of the future payment models," said Dr. W. Ken Rich, representative of the Medicaid-CHIP State Dental Association and chair-elect of the Alliance. "Dentists must pay attention to this evolving field so they understand the measures and can both contribute and prepare for the changing environment."

For more information on the DQA, visit ADA.org/dqa.

Meeting promotes collaboration between dentists and consultants

BY KELLY SODERLUND

Lake Buena Vista, Fla.—It's no secret that the relationship between dentists, insurance companies and consultants can be strained at times.

But many believe it doesn't have to be that way, and leaders in all the respective communities are working to change the dynamic between the groups. The meeting of the American Association of Dental Consultants May 15-18 was a continuation of that effort.

The theme was "Connect Collaborate Consult," and a number of dentists spoke about quality measurement, claims review, and the role of dental consultants, among other topics. Dr. David Preble, director of the American Dental Association Council on Dental Benefit Programs, gave the keynote address titled "Bridging the Gap, Connecting Providers and Consultants."

"I wanted the audience to start thinking about ways they could facilitate a more positive coordination and communication between providers, consultants, the ADA and the AADC," Dr. Preble said. "It's important to recognize ways we can connect and anticipate potential pitfalls, especially during a time when dental care financing and the role of dentists are changing."

Dr. James Richeson, former CDBP chair, also presented at the meeting and discussed "Top 10 Dentist Concerns: Looking for Solutions." Using information collected from the thousands of phone calls and emails the ADA receives on the Code on Dental Procedures and Nomenclature, third-party issues and claim submissions, Dr. Richeson provided the dentists' perspective on what concerns they find important.

"I wanted to give the dental consultants in attendance a glimpse into dentists' minds," Dr. Richeson said. "For everybody to make educated decisions, it's imperative for all sides—dentists, dental consultants and insurance companies—to understand how the other group thinks and what is important to them. The ADA is committed to helping dental consultants understand what our member dentists need to best serve patients."

The ADA and the AADC have a few projects in the works to facilitate better collaboration, Dr. Preble said.

50% OF SALIVA MAY BE LOST **BEFORE** PATIENTS COMPLAIN

Waiting for complaints isn't enough. Patients may lose up to half of their protective saliva before they become aware of their discomfort.¹ Many patients don't even realize they are coping with reduced saliva,¹ and frequently carry candies or sip water throughout the day.

If Dry Mouth goes unmanaged, it can lead to bad breath, mouth infections, and a 3x greater risk of cavities. ²⁻⁴ That's why it's important to be proactive, and talk to patients about doing more than coping.

Asking the right questions is the first step. In fact, the ability to identify Dry Mouth can increase from 54% to 75% when patients are asked three questions besides oral dryness.⁵ Do they regularly do things to keep their mouth moist? Are they getting out of bed at night to drink fluids? Does their mouth become dry when they speak? Knowing these answers can help you identify Dry Mouth patients before it's too late.

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 Kline
 1) Guggenheimer J, Moore PA. Etiology, recognition and treatment. JADA. 2003;134:61-69.
 2) Papas AS, et al. Caries prevalence in xerostomic individuals. J Can Dent Assoc. Feb. 1993;59(2):171-9.
 3) Wind DA. Management of Xerostomia: An overview. Jnl Prac

 Kline
 Hygiene Sept/Oct 1996:23-27.
 4) Cassolato SF, Turnbull RS. Xerostomia: clinical aspects and treatment. Gerodontology.2003;20:64–77.

 S) Dry Mouth The Malevolent Symptom: A clinical Guide. Ed. Sreebny LM, Vissink. Blackwell Publications 2010;pg 55





DANB offering new certification program

BY KELLY SODERLUND

The Dental Assisting National Board is offering a new certification program for dental assistants that will allow them to broaden their professional skills.

Certified Restorative Functions Dental Assistant is made up of six component exams: Anatomy, Morphology and Physiology; Impressions; Temporaries; Isolation; Sealants; and Restorative Functions. To earn the certification, dental assistants must pass all six exams within three years.

There are eligibility requirements for the restorative functions exam and for earning and maintaining the certification as a whole. Earning the certification will not only put dental assistants in a better spot professionally but it will help them meet any requirements set forth in their state. To continue to use the certification, dental assistants must meet annual DANB recertification requirements, including holding a current CPR, basic life support or advanced cardiovascular life support certificate and completing at least 12 hours of continuing education.

"There are many states that require some type of examination, a certain amount of clinical experience and basic knowledge in order for a dental assistant to do restorative functions," said Dr. Frank Maggio, DANB board chair. "Some dental assistants will be interested in this certification because it's a requirement in their respective state.

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Others will enroll because they want to advance their career in dental assisting."

The first certifications were issued in January, and there are currently dental assistants working in 26 states who have earned the new certification.

To learn more about this certification, visit the "Exams and Certifications" section of DANB's website, at www.danb.org, or call 1-800-367-3262.

—soderlundk@ada.org

Yellow

Continued from Page 11

to file complaints with the Michigan Attorney General's office, Maryland Attorney General's office and the FTC.

"We're telling dentists not to pay the bills. Make the scammers take you to collections," said Grace DeShaw Wilner, managing vice president of professional affairs for the Michigan Dental Association.

The FTC has already taken action against one fake Yellow Pages scammer. In 2012, a federal court ordered a European-based operation to pay more than \$10.2 million for tricking small businesses and nonprofit organizations into paying for unwanted listings in online business directories, according to a FTC news release.

In July 2011, the FTC filed a complaint against Jan Marks; Yellow Page Marketing B.V., which also did business as Yellow Page B.V. and Yellow Page (Netherlands) B.V.; Yellow Publishing Ltd.; and Yellow Data Services Ltd. They allegedly ran the scheme from Palma de Mallorca, Spain, using English and Dutch corporations, according to the release.

Dr. C. Kip Beals has sought the assistance of the Ohio Dental Association for his fight against Yellow Book, which sent him a bill for \$496.89. Like many other dentists, Dr. Beals advertises in the legitimate Yellowbook.com, whom he contacted to determine whether they were mailing him a bill under a similar name.

"They couldn't pull up anything by the account ID that was on my bill," Dr. Beals said. "The two companies had similar logos, so I can see how people would be confused."

The FTC's Bureau of Consumer Protection offers tips for how businesses can protect themselves from this scam:

• Train your staff to spot the scam. Talk to everybody who may answer the phone.

• Inspect your invoices. Depending on the size and nature of your business, consider implementing a purchase order system to make sure you're only paying legitimate expenses. At a minimum, authorize only a small group of employees to approve purchases and pay the bills.

• Verify to clarify. Before paying invoices, investigate the companies listed to determine whether they are legit. This can be done for free at the Better Business Bureau's website, www.bbb.org.

• File a complaint. Visit www.bbb.org to complain to the Better Business Bureau and let the FTC know by filing a complaint at www.ftc.gov or by calling 1-877-FTC-HELP.

For more information on this scam, visit http://business.ftc.gov/documents/ alt024-throwing-book-business-directoryscams. The ADA legal department also offers "How to Avoid Becoming Victim to a Sales Scam," at www.ada.org/8797.aspx.

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ANNUAL SESSION

2012 ADA Annual Session nets honors

BY STACIE CROZIER

If you haven't attended an ADA Annual Session recently, you might want to consider catching up on the continuing education innovations you've been missing.

The 2012 Annual Session netted three E.X.C.I.T.E. Awards June 19 at the Expo Next Conference in Baltimore: the Editor's Choice E.X.C.I.T.E. Award for best overall event, along with wins in Best Application of Content/Education on the Showfloor and Best Use of Audiovisual to Enhance an Event.

Expo magazine is a leading publication serving the trade show industry, offering news, trends and best practices for trade show and event organizers.

"As the Chair of the 2012 ADA Annual Session, it is very exciting and a great honor to learn that our meeting was selected by E.X.C.I.T.E. for these prestigious awards," said Dr. Kent H. Percy, of Kennesaw, Ga. "Of course the credit for this meeting is shared by many people, especially the ADA staff whose advice and ideas contributed so much."

Dr. Percy also acknowledged the pivotal roles played by his fellow council members and volunteers to make the 2012 ADA Annual Session a successful event.

"It is impossible to say enough about the members of the Council on ADA Sessions who are selected from all ADA districts for their expertise in meeting planning," Dr. Percy said. "This group worked tirelessly to

provide the members of the ADA with the best dental meeting in our country. The ADA Annual Session truly is America's premier dental meeting. The council members all accomplished their duties exceptionally well. Dr. Mark Huberty, the 2012 program Dr. Percy

chair,

deserves

special recognition. I have attended almost 20 ADA meetings, and the program he developed and speakers who were invited were the best I have ever seen. Dr. Dennis Shinbori, the 2012 chair, Committee on Local Arrangements and his volunteers from the California Dental Association and the students from both San Francisco dental schools were all outstanding and kept the meeting running smoothly."

"This is wonderful recognition for the Council on ADA Sessions, the Division of Conferences and Continuing Education staff, volunteers, lecturers and our vendor, Freeman," said James Goodman, managing vice president for the ADA Division of Conferences and Continuing Education. "It was

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Live patient learning: Dr. James McKee presents the Education in the Round Course, Examination, Diagnosis and Treatment of the Restorative TMD Patient Oct. 20, 2012, at the Moscone Center in San Francisco.

truly a team effort and everyone offered hard work and dedication to put on a great Annual Session. We are honored and humbled to be recognized with these awards."

The awards recognize a variety of continuing education innovations, including the ADA's unique Education in the Round courses first launched in 2007. EIR programs showcase live-patient procedures in a fully functional dental operatory, giving participants the opportunity to experience step-bystep procedures from diagnosis to treatment. Another notable CE innovation at the ADA Annual Session includes state-of-the-art education on the exhibit floor.

"These awards showcase programs that are the result of years of research and collaboration," said Richard Schuch, Ed.D., ADA director of Continuing Education and Industry Relations. "Starting in 2006, we began to focus on building cutting-edge educational settings designed to deliver the unique, high-end education that our members need and desire. These settings provide education designed to have an immediate impact on dentists' ability to better treat their patients and grow their practice. We are continuing to develop and launch new educational opportunities each year to meet the needs of our members."

Dr. Percy said he looks forward to seeing the same level of excellence at the 2013 ADA Annual Session, which will convene at the New Orleans Ernest N. Morial Convention Center Oct. 31-Nov. 3.

"Dr. Michael Blicher, chair for the 2013 meeting, is working with many of the same people who planned the 2012 Annual Session; and with Dr. Robert Barsley, New Orleans Chair, Committee on Local Arrangements and his Louisiana volunteers," said Dr. Percy. "They have another best-ever ADA Annual Session planned. In addition to the outstanding educational opportunities and exciting exhibits, the meeting will begin on Halloween, so it also promises to be a lot of fun. It has been just over a decade since the ADA meeting was in New Orleans, so make plans to join us in New Orleans.'

For more details on the 2013 ADA Annual Session, visit ADA.org/session. Visit the Expo website, expoweb.com, for more information on the ADA's E.X.C.I.T.E. awards.

Annual Session CE includes hands-on cadaver workshops at LSU Health Science Center

New Orleans

American Dental Association

ANNUAL SESSION

New Orleans-Dentists seeking a hands-on workshop to hone their clinical skills will find state-of-the-art facilities and courses in the ADA's Hands-on Cadaver Workshop series at the ADA Annual Session.

Seven three-hour cadaver workshops will be held at the Louisiana State Uni-

versity Health Science Center Oct. 31-Nov. 3. "The facility at LSU will allow participants and instructors to maximize all of the teaching tools available in a true clinical learning application," said Dr. Alan W. Budenz, clinical director for the series and the presenter of one of the workshops. "This is not theoretical information; it is focused on improving your daily practice of dentistry.

Dr. Budenz and Dr. Mel Hawkins will

present Local Anesthesia Human Cadaver Dissection Workshop Nov. 2 from 8:30-11:30 a.m. (course 7231). The workshop will cover the anatomy, landmarks, skull locations, penetration points and needle insertion path-OCTOBER 31 - NOVEMBER 3, 2013 ways for the IA, advanced mandibular blocks and V2 maxillary quadrant block

and analyze accessory innervations, complications and problem-solving.

"By combining dissection with a review of anesthetic injection techniques and their landmarks, practitioners will have a unique opportunity to visualize exactly where the needle needs to go," Dr. Budenz said. "With better understanding come greater success and comfort for both the dentist and the patient.'

Summaries of ADA News stories published online

Seeking dentists' help with unidentified woman

he National Center for Missing & Exploited Children is asking for dentists' help in identifying a woman found near an abandoned farm in 2008.

uickTakes

The woman, estimated to be between 15 and 21 years old, was found on Nov. 23, 2008, near an abandoned farm off Skyline Drive, which is about one mile north of Highway 28 and east of Interstate 41 in Fond du Lac County, Wis. The woman is thought to be white, but authorities have not ruled out Hispanic or Native American. She had long light brown to dark blonde hair and was between 4 feet 10 inches and 5 feet 4 inches tall, weighing between 110-135 pounds, the center said.

Her teeth were in good alignment and she had fillings in four of her bottom molars. Anyone with information should contact the National Center for Missing & Exploited Children's Forensic Services Unit at 1-800-843-5678 and reference NCMEC number 1115220 or National Missing and Unidentified Person System case number 3043.

To read more about this case and view photos of the woman's dental Xrays, visit ADA.org/news/8686.aspx.■

Loma Linda appoints fifth dean to head school of dentistry

oma Linda University School of Dentistry has appointed Executive Associate Dean Ronald Dailey, Ph.D., to serve as its fifth dean.

He started at Loma Linda University in 1975 as an instructor in the Department of Preventive and Community Dentistry as he completed a Master of Arts degree in educational psychology at Walla Walla College. He was promoted in 1978 to assistant professor and became director of admissions and student af-

Other Hands-on Cadaver Workshops are:

• Crown Lengthening Workshop: A Hands-On Cadaver Course, by Dr. Jon Suzuki, Oct. 31, 11 a.m.-2 p.m. (course 5230);

• Soft Tissue Grafting with Autogenous and Allogenic Tissue-A Hands-On Cadaver Course, by Dr. Peter Shatz, Oct. 31, 3-6 p.m. (course 5231);

• Anatomy of the Masticatory System: Clinical Application and Dissection-A Hands-On Cadaver Course, by Dr. Henry Gremillion, Nov. 1, 8:30-11:30 a.m. (course 6230);

• Mini Dental Implants: A Hands-On Cadaver Course, by Raymond Choi, Nov. 1, 2-5 p.m. (course 6231);

• Cadaver Dissection of the TMJ and Associated Structures, by Dr. Mark Piper, Nov. 2, 8:30-11:30 a.m. (course 7230);

• Biopsy Techniques for the General Practitioner: A Hands-On Cadaver Course, by Dr. Denis Lynch, Nov. 3, 8:30-11:30 a.m. (course 8230).

Each course is \$795 and includes shuttle transportation to and from LSU and light snacks. Shuttles pick up participants from the convention center 45 minutes before the start time and depart LSU 15 minutes after the end of each workshop.

For more information on these or other continuing education courses, visit ADA. org/session.

fairs (later retitled assistant dean in 1986). He obtained his Ph.D. in higher and professional education from the University of Southern California in 1994. Loma Linda promoted him to associate professor in the Department of Dental Educational Services and named him chair in 1995. After 15 years as associate dean for academic affairs, Dr. Dailey became executive associate dean in 2009.

For the complete story, visit ADA.org/ news/8747.αspx.

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The University of Puerto Rico School of **Dental Medicine appoints acting dean** The University of Puerto Rico School

of Dental Medicine has appointed Dr. Noel J. Aymat as acting dean.

Dr. Aymat received his dental degree from the University of Puerto Rico and a certificate in Pediatric Dentistry from Columbia University Presbyterian Medical Center. He also holds a law degree from the University of Puerto Rico.

He has served as director of the uni-

versity's Pediatric Dentistry Advanced Program and has led its accreditation efforts.

Over the past eight years, he procured three grants from the federal Health Resources and Services Administration to improve academic programs in maternal and infant oral health care, special needs populations and Head Start advocacy

Visit ADA.org/news/8756.aspx for more details.∎

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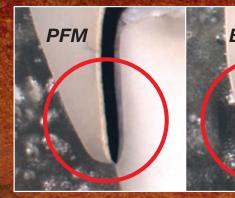
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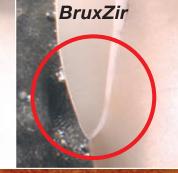


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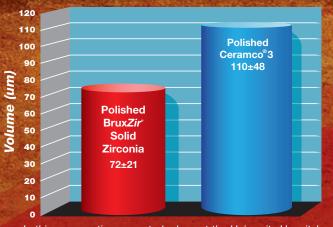
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Biotech Dental Prosthetics ...



This image represents the typical PFM prep we receive with a PFM and a BruxZir^{*} crown in place. Because BruxZir is a monolithic crown and can be milled to a feather edge, there is no bulk of material, or "speed bump," at the margin. Dentists tell us their explorer cannot detect where the tooth ends and the BruxZir crown begins.



In this comparative wear study done at the University Hospital Tübingen in Germany, the antagonistic (Steatite balls) wear shows BruxZir Solid Zirconia only with 72±21 micron, which is significantly lower than Ceramco3, with 110±48 micron. To view the full report, visit www.bruxzir.com

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Mobile Dental Design, Inc.**			
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Parkway Dental Lab	Opelika	AL	800-239-3512
Scrimpshire Dental Studio	Huntsville	AL	800-633-2912
Walker Dental Laboratory, Inc			
Green Dental Laboratories, Inc.	Heber Springs	AR	800-247-1365
Continental Dental Laboratory	Phoenix	AZ	800-695-0155
Dentek Dental Laboratory, Inc.	Scottsdale	AZ	877-433-6835
Denticon			
DW Dental Laboratory	Phoenix	AZ	602-973-2166
Lafayette Dental Lab			
Lakeview Dental Ceramics			
New West Dental Ceramics**			
Progressive Dental Services Laboratory	Phoenix	AZ	800-516-0789
A & M Dental Laboratories**	Santa Ana	CA	800-487-8051
Advanced Dental Technology**			
Atlas Dental			
BDL Prosthetics**			
Beverly Hills Dental Studio	Beverly Hills	CA	800-215-5544
Bigler Dental Ceramics**			
Calibre Dental Ceramics	Santa Monica	CA	310-394-0464
Continental Dental Laboratories	orrance	CA1	800-443-8048
Creative Porcelain	Oakland	CA	800-470-4085
Crowns R Us	Brea	CA	866-315-8338
DentalLab.com	North Hollywood	CA	877-437-4647
Dental Masters Laboratory	Santa Rosa	CA	800-368-8482
G & H Dental Arts, Inc.**	Torrance	CA	800-548-3384
Glidewell Laboratories**			
Great Smile Dental Lab	Northridge	CA	877-773-8815
Hogan Dental Laboratory	Huntington Beach	CA	800-622-9592
Ikon Dental Design			
Iverson Dental Laboratories			
Mr. Crown Dental Studio			
Nash Dental Lab, Inc	Temecula	CA	877-528-2522
NEO Milling Center	Cerritos	CA	562-404-4048
Nichols Dental Lab	Glendale	CA	800-936-8552
Noel Laboratories, Inc.			
PCS Dental Lab			
Perfect Smile Dental Ceramics, Inc	San Diego	CA	877-729-5282
Polaris Dental Laboratory**			
Precision Ceramics Dental Laboratory**	Montclair	CA	800-223-6322
Riverside Dental Ceramics**	Riverside	CA	800-321-9943
Robertson Dental Lab	Lompoc	CA	800-585-3111
San Ramon Dental Lab	San Ramon	CA	800-834-4522
So Cal Dental Lab	Colton	CA	909-633-6462
Solitaire Smile Dental Laboratory LLC	San Diego	CA	619-819-7526
Williams Dental Laboratory			
World Lab U.S.A.	Irvine	CA	800-975-3522
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Zinser Dental Lab, Inc.	Westminster	C0	303-650-1994
Yankee Dental Arts Laboratory	Wethersfield	CT	800-447-3941
Dodd Dental Laboratories			
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Knight Dental Group	Oldsmar	FL	800-359-204
TLC Dental Laboratory	Orlando	FL	800-262-254
Daniel Dental Laboratory	Macon	GA	478-997-020
New Image Dental Laboratory**	Morrow	GA	800-233-678
Oral Arts Dental Lab Georgia	Chamblee	GA	800-229-764
Ridge Craft Dental Laboratory	Lagrange	GA	800-516-028
The Lab 2000, Inc	Columbus	GA	800-239-394
Eclipse Dental	Waterloo	IA	
Oral Arts Dental Lab Iowa	Dubuque	IA	800-747-352
Eastside Crown & Bridge Inc	Pocatello	ID	208-237-252
Accudent Dental Laboratory	Lansing	IL	800-895-356
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Dental Arts Laboratories, Inc.			
Dental Arts Lincolnshire	Lincolnshire	IL	800-779-508
Distinctive Dental Studio, Ltd			
Prosthotech**	Sugar Grove	IL	630-466-83
Quad City Dental Laboratory Inc			
Rockert Dental Studio			
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Ito & Koby Dental Studio			
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Heumann & Associates Dental Laboratory		KS	
Heumann Dental Laboratory	Fairway	KS	800-888-19
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After: As concerned as the patient was about the esthetics of the new crown, I was more concerned with the strength of the restoration I would be placing on this lower first molar. According to lab statistics, crowns on first molars fracture more than any other crown, so I chose a BruxZir Shaded crown for its combination of strength and esthetics. Nearly all of the more than 200 Authorized BruxZir Labs now exclusively use the BruxZir Shaded material.



Buccal After: While these BruxZir Shaded crowns won't be mistaken for enamel when compared to the surrounding natural dentition, it does a very good job of blending in with these teeth. And it certainly doesn't stick out like an esthetic sore thumb like a PFM restoration with a metal coping might. I consider solid zirconia to be the best blend of strength and esthetics for molar restorations.

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Wornson-Polzin Dental Lab			
Becker Dental Lab, Inc.			
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Mallow-Tru Dental Studio			
Midwest Dental Laboratory			
Stewart Dental Laboratories			
Oral Tech Dental Laboratory			
Western Dental Arts			
Carolina Outsource Inc			
Drake Precision Dental Laboratory			
Sirona InfiniDent			
Natural Ceramics Inc			
The Freeman Center Kiess Kraft Dental Laboratory		NC	800-059-7030
H & O Dental Laboratory			
Excel Berger Dental Laboratory			
Ceratek Dental Laboratory			
Ideal Dental Laboratory			
Core 3D Centres, LLP			
Crown Dental Lab, LLC	Las veyas	NV	702-432-4012
Digital Dental Studio	Honderson	NV	702-432-4012
Las Vegas Dental Studio		NIV	800-455-1508
Las Vegas Dental Studio Las Vegas Digital Dental Solutions**	Las Vegas	NV	800-936-1848
Americus - New York			
Creo Dental			
DP/Mt. Vernon Dental Laboratory			
Elegant Dental Laboratories			
GP Dental Lab			
Smile Design Dental Laboratory			
AccuTech Dental Lab			
Dresch/Tolson Dental Laboratory	Sylvania	OH	800-843-4110
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Abel Dental Laboratory			
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Dental Services Group of Pittsburgh		PA	800-322-7080
Dynamic Dental Group: Toothsmiths			
Innovative Dental Arts			
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Muth & Mumma Dental Laboratory			
Newtech Dental Laboratories Shu Dental Laboratory, Inc		PA	000 000 0040
Thayer Dental Laboratory			
Windl Dental Laboratory	New Castle	PA	800-645-4576

LABORATORY	CITY	STATE	PHONE
Sherer Dental Laboratory	Rock Hill	SC	800-845-11
Bauer Dental Studio			
Dental Prosthetics Lab			
Hermitage Dental Lab			
Peterman Dental Laboratory	Nashville	TN	800-476-16
Rogers' Dental Laboratories	Athens	TN	800-278-60
Affordable Cosmetic Laboratories			
C & J Dental Lab	El Paso	ТХ	915-564-38
Crystal Dental Ceramics	Richardson	ТХ	972-680-16
Dental Dynamics Laboratory Inc.	Arlington	ТХ	800-640-81
MDA Studio, Inc	Corpus Christi	ТХ	888-544-33
Natural Arts Dental Laboratory	San Antonio	ТХ	800-322-62
Oral Designs Dental Laboratory, Inc.**	an Antonio	ТХ	800-292-55
PCB Dental Lab	ichardson	ТХ	972-671-38
Rose Dental Laboratory	Stafford	ТХ	281-565-36
Stern Empire Dental Laboratory	Houston	ТХ	800-229-02
Stern Reed Associates Dental Laboratory	ddison	ТХ	800-888-83
Stern Tyler Dental Laboratory	Tyler	ТХ	800-926-13
Accudent Dental Lab			
Arrowhead Dental Laboratory	Sandy	UT	800-800-72
Crown Laboratories Inc	Sandy	UT	800-574-19
Crystarr Dental Design			
Epic Dental Studios**	American Fork	UT	801-756-11
Evolution Dental Studio	Draper	UT	801-432-74
Precision Milling Center			
Treasure Dental Studio	Salt Lake City	UT	800-358-64
Via Digital Solutions			
Art Dental Lab			
NexTek Dental Studios			
The Point Dental Studio, LLC			
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McElvain Dental Laboratory			
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Gessler's Dental Laboratory			
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SCIENCE

ADA Foundation awards prizes in annual high school science competition

BY JEAN WILLIAMS

Phoenix—Three high school students won ADA Foundation-sponsored Special Awards May 12-17 at the 2013 Intel International Science and Engineering Fair.

Student competitors qualify for Intel ISEF 2013 based on previously winning top prizes in local, regional, state or national science fairs. The annual competition, a partnership between Society for Science & the Public and the Intel Foundation, awards a variety of prizes, including scholarships, summer internships, equipment grants and trips, to student winners in the ninth through 12th grades.

Winners of the ADA Foundation's Special Awards are Bryant Jo Heckart, Hope Louise Didier and Niyanthesh A. Reddy.

Mr. Heckart, 17, a student at Seneca High School,



Top honors: Dr. Jae Hyun Park stands with Hope Louise Didier (left) and Bryant Jo Heckart (right), ADAF-sponsored Special Award winners of the Intel ISEF 2013, at the awards ceremony in Phoenix in May. Not pictured is winner Niyanthesh A. Reddy.

Seneca, Mo., won first place and a prize of \$2,000 for his project Determining Antimicrobial and Synergistic Properties of Select Plant Essential Oils against Clinical Isolates of Grampositive *Staphylococcus aureus* and Gramnegative *Escherichia coli*: Phase II.

Ms. Didier, 15, a student at McIntosh High School, Peachtree City, Ga., won the second prize of \$1,000 for her project The Effects of *Synsepalum dulcificum* on the Taste of Foods at Different pH Levels.

Mr. Reddy, 15, a student at Vanguard High School, Ocala, Fla., won the third award and \$500 for his project Genetic Analysis of Oral Periodontal Pathogens in the Development of Atherosclerotic Vascular Disease.

Dr. Jae Hyun Park, associate professor and chair of the Postgraduate Orthodontic Program, and Dr. Morrie Reisbick, professor and director of Integrated Human Sciences and Student Research, both of the Arizona School of Dentistry & Oral Health, A. T. Still University, served as competition judges for the ADAF's Special Award category.

For more information, visit societyforscience. org/isef/. For more information about the ADAF, visit adafoundation.org. ■

ACA penalties get delayed

BY CRAIG PALMER

Washington—The Obama administration, in a blog posted at the Treasury Department website July 2, announced a one-year delay to 2015 in penalties for employer failure to provide coverage for employees under the Affordable Care Act. The law requires employers with the equivalent of 50 or more full-time workers to offer health benefits or pay a per employee penalty.

"We have heard concerns about the complexity of the requirements and the need for more time to implement them effectively," the Treasury blog said. "We recognize that the vast majority of businesses that will need to do this reporting already provide health insurance to their workers, and we want to make sure it is easy for others to do so. We have listened to your feedback. And we are taking action."

Further regulations will be proposed this summer "after a dialogue with stakeholders," the administration said. But any "shared responsibility payments" from employers with 50 or more employees will not apply for 2014 as scheduled. Most dental employers have fewer than 50 employees.



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New and Emerging Speaker Stage

Pain management, TMJ disorders expert to lead Columbia dental school

New York-Columbia University College of Dental Medicine has tapped pain management and temporomandibular joint and muscle disorders expert Dr. Christian S. Stohler to lead the school as dean. He also will serve as senior vice president of Columbia University Medical Center.

Currently dean of the University of Maryland School of Dentistry in Baltimore, Md., Dr. Stohler will succeed Dr. Ira B. Lamster

Dr. Richard T. 'Terry' Grubb of Washington, past ADA vice president, dies

Wenatchee, Wash .- Dr. Richard Terry Grubb, a past ADA vice president (2000-01) and past president of the Washington State Dental Association, died June 20 in Eastern Oregon. He was 74 years old.

Dr. Grubb, known as Terry, was a lifetime resident of Wenatchee, Wash., where he practiced dentistry for 46 years. He also was a past president of the North Central Dental Society and a fellow in the American College of Dentists, the International College of Dentists and the Pierre Fauchard Academy.

"Terry was an exceptional individual,"



said Stephen A. Hardymon, executive director of the Washington State Dental Society. "Professionally he mentored dozens of young dentists to take leadership roles in their profession and com-

munity. Personally,

Dr. Grubb

he was a friend and mentor to me for more than 20 years. He will be missed terribly by his friends and colleagues."

Dr. William Ten Pas, a former ADA president and trustee, said he had known Dr. Grubb for about 25 years. "The thing that always comes to mind is his smile and his positive attitude and his love of his family," Dr. Ten Pas said. "He loved the profession. He loved his family. He always had a positive attitude, and he always had a smile. He was always looking for a solution, not a problem. He lived life the way he wanted to: I hope we all can say that, at that time. He was a remarkable man.'

Dr. Grubb is survived by his wife, Sharen; his children; and his brother.

A memorial service for Dr. Grubb was held Monday, July 1, at Wenatchee Free Methodist Church.

In lieu of flowers, memorial contributions can be made in Dr. Grubb's honor to the Washington Oral Health Foundation, 126 NW Canal St., Seattle, WA, 98107, or to Seattle Children's Hospital Foundation, M/S S-200, P.O. Box 5371, Seattle, WA, 98145-5005.

Condolences may be sent to his wife at the following address: Mrs. Sharen Grubb, 2010 Edgewood Lane, Wenatchee, WA 98801-8122.

as Columbia's dental school dean on Aug. 1. Dr. Lamster stepped down in 2012 after a decade and Dr. Ronnie Myers, vice dean for administrative affairs, has served since then as interim dean.

Dr. Stohler earned his D.M.D. from the University of Bern in Switzerland, where he also earned his doctoral degree in hematology and certificates in oral surgery and prosthodontics.

Prior to joining the University of Maryland in 2003, Dr. Stohler was a professor at the University of Michigan School of Dentistry in Ann Arbor, Mich., for 20 years. He was also director of research, a professor and chair of the Department of Biologic and Materials Sciences and a research scientist at the university's Center for Human Growth and Development.

At Maryland, Dr. Stohler oversaw the dental school's expansion in size and global presence and administered the introduction of dental services to the Health Center on Maryland's College Park campus.

He helped lead National Institutes of Health-funded pain studies that focused in particular on patients with temporomandibular joint and muscle disorders. More than 120 of his articles and book chapters have been widely cited.

Columbia's school of dental medicine was established in 1916. Current major research projects at school include the use of stem cells for craniofacial reconstruction and the relationship between oral health and system-

ic diseases.

Dr Stohler

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ADA customizes EBD for Stony Brook General dentistry department inspired by Loma Linda account

BY JEAN WILLIAMS

Stony Brook, N.Y .--- If you're going to take a bite of time out of busy dentists' schedules, you better make sure it's for something worth stealing away to do.

Stony Brook University School of Dental Medicine had that covered when it summoned its entire general dentistry department for a daylong EBD education program customized by the ADA Center for Evidence-Based Dentistry. The department's faculty had been asking for it after an article appeared in the ADA News about a customized workshop at another dental school.

"It was an article where Loma Linda had an EBD workshop customized," said Dr. Mary Truhlar, associate professor and chair of the Department of General Dentistry. "I saw that and some of my faculty said, 'We'd really like some thing like this.' That's how it all started."

The article described how Loma Linda University School of Dentistry successfully tapped the ADA Center for Evidence-Based Dentistry to design and teach a two-day workshop to its faculty in June 2012.

Dr. Truhlar worked with the ADA to develop objectives and a workshop course, which was part of a daylong program on April 3 in conjunction with Stony Brook's new Alan Alda Center for the Communication of Science.

Julie Frantsve-Hawley, Ph.D., senior director of the ADA Center for Evidence-Based Dentistry, was an instructor at the Stony Brook workshop along with Dr. Robert Weyant, professor and chair of the Department of Dental Public Health at the University of Pittsburgh School of Dental Medicine.

"We took the time to really understand their needs and what the Stony Brook faculty wanted as part of their workshop," said Dr. Frantsve-Hawley. "We worked with Dr. Truhlar and others closely to develop a unique program that was engaging and interactive. Together, we were able to navigate to some amazing resources available at their own institution."

Dr. Truhlar said that her faculty was familiar with the basic EBD terminology and that 10 to 20 percent already employ EBD in practice. A central focus of the Stony Brook customized workshop was learning to tap the available resources to practice EBD.

"What they really came away with and loved that day is that they learned about their health sciences library, which is on campus, and has all these resources that they had not really been fa-



that the ADA customized for Stony Brook University School of Dental Medicine.

they walked away very excited as to what's out there. They just didn't have knowledge on how to access it.

Ultimately, the Stony Brook course was "hugely successful," Dr. Truhlar said.

"We ran it as a continuing education," she said. "We got rave reviews from faculty that they want more. They want follow-up and implementation and we're going to start doing some of that later on this summer before we start our next academic year."

Dr. Ray Williams, dean of the dental school, commended Dr. Truhlar's efforts and success with the ADA in designing a successful CE program on EBD, especially as Stony Brook looks to add new EBD curricular initiatives, Dr. Williams said. The course successfully attracted and engaged the dental school's largest department, the Department of General Dentistry, he said.

"In essence, I applaud Mary Truhlar for bringing evidence-based dentistry to her faculty, and to teach and educate them in the concepts and principles of evidence-based dentistry, including the use of systematic reviews for getting to the essence of the evidence," Dr. Williams said.

For more information on customizing EBD workshops for your institution, contact Erica Vassilos, manager, ADA Center for Evidence-Based Dentistry, at ext. 2523 or email vassilose@ada.org.

Advanced EBD fall course at ADA

The ADA Center for Evidence-Based Dentistry is planning an advanced EBD course Oct. 21-25 at ADA Headquarters in Chicago. Sept. 15 is the application deadline for Advanced Evidence-Based Dentistry Workshop: Assessing the Quality of Evidence. To apply, visit www.ada.org/advancedEBD.aspx. All interested candidates must complete an application form.

Kudos for Georgia students' Dentists for Della

BY KELLY SODEBLUND

Augusta, Ga.-A student service organization that provides oral hygiene to nursing home residents has received an award for being Georgia Regents University's best new student organization.

Dentists for Della began around two years ago and is a project named in honor of Dr. Victor Della-Guistina, a founding faculty member of Medical College of Georgia, retired community dentist and resident of the Georgia War Veterans Nursing home, where dental students assist in providing care.

"It has blossomed into this program where we raise money to subsidize the treatment patients receive and we have a required weekly rotation for third-year dental students, who visit the residents and help provide basic dental treatment at no cost," said Dr. Katherine Ciarrocca, who specializes in geriatrics and serves as the faculty adviser. "It's been a really great process to go from very simple intervention to something that's greatly affecting the patients' quality of life."

EBD insight: Dr. Robert Weyant, professor and

chair of the Department of Dental Public Health at

the University of Pittsburgh School of Dental Medi-

miliar with," Dr. Truhlar said. "They developed

a working knowledge of their own resources

here on campus. So they'll be more successful

here on this campus, but understand nationally

what dentistry's doing and become more famil-

iar with the ADA and its resources because we

also dovetailed it with 'how to get to your ADA

"It was a really nice combination, and I think

cine, lectures in EBD at Stony Brook.

resources.²

The Horizon Award is presented to a new student organization that has demonstrated excellence in programming, leadership and overall enthusiasm during its first years. Organizations must be chartered for no more than two academic years to qualify.

In the spring semester, dental students provided nearly \$5,700 worth of free dental treatment on 65 people, Dr. Ciarrocca said.

"Dentists for Della partnered with the nursing home because its residents generally do not have dental insurance or other oral health care benefits and do not regularly see a dentist," Dr. Ciarrocca said. "Dexterity can also be impaired in the elderly population so tasks such as brushing teeth or cleaning dentures can be difficult or impossible. In addition, residents cannot easily be transported to a dental office because of lack of mobility or their inability to afford the cost of transportation."

The students and faculty who participate in Dentists for Della continue to raise money to support the project. Dr. Della died in March and, in lieu of flowers, his family asked that money be donated to Dentists for Della.

To contribute to Dentists for Della, contact Dr. Ciarrocca at kciarrocca@gru.edu.

Annual member panel provides feedback on ADA Catalog products

BY JEAN WILLIAMS

They may practice in locations across the nation, but they came together for two days in June to serve on the ADA's Panel Advisory Committee—a think tank of members who critique ADA professional resource and patient education products available for purchase through the ADA Catalog.

The panel reviewed patient education brochures, professional resource products and other ADA Catalog offerings. They also provided feedback on new products that the ADA Department of Product Development and Sales has in development.

Panelists included Drs. Biao Li of Salem, Ore.; Carlos Garza-Gongora of Atlanta; Chang Shieh of Arcadia, Calif.; Emmanuel Delano of Boca Raton, Fla.; Katie Vincer Sears of Columbus, Ohio; Padmaja Koya Mutyala of Bakersfield, Calif.; Sarah Cimino of Springfield, Mo.; Takeisha Presson of Upper Marlboro, Md.; and Jaclyn Riveria of Phoenix.

Each member was chosen for the panel because he or she had previously purchased ADA Catalog products. ADA staff listens carefully to feedback so that product revisions reflect the needs of members.

In the series of patient education brochures, all due to be revised in 2014, lively discussions centered on Seal Out Decay (W191), Healthy Smiles for Mother & Baby (W196), and Healthy Mouth, Healthy Body: Making the Connection (W203), and the best-selling ADA brochure, Periodontal Disease: Don't Wait Until It Hurts (W121).

For the Healthy Mouth, Healthy Body: Making the Connection patient education brochure Dr. Padmaja Koya Mutyala of Bakersfield, Calif., wanted to know, "Can the diseases be put in bold so that we can instantly capture the attention of the patient looking at it, rather than reading through the whole paragraph: diabetes, stroke,



Think tank: ADA's Panel Advisory Committee members, from left, Drs. Carlos Garza-Gongora, Emmanuel Delano and Takeisha Presson discuss ADA Catalog products.

blood pressure, all those things?

"Also, I've noticed that patients, in fact, spend more time with the dentist than they do with the physician. Physicians have them five minutes. Nobody talks with them about dry mouth, about the medications that can cause the dryness, and that can lead to decay. That's a very important link that we're missing. I think that could be a good point to add here."

Another product that the panel reviewed is the popular Dental Coding Made Simple (J443).

"I think this is the greatest resource," said Dr. Katie Vincer Sears, who practices in Columbus, Ohio. "I purchased this because I run into questions about coding a lot. Every front desk should have this."

When discussing ways that Dental Coding Made Simple might be improved, the panel made a few suggestions, including one from Dr. Takeisha Presson, who practices in Upper Marlboro, Md., that the book should address oral surgery codes. It could be just like the detailed and highly illustrated section on dental implants, she suggested.

Some of the panelists also suggested that Dental Coding Made Simple is best suited for front office staff and is a necessary resource that will pay for itself.

"I think price is not the issue," said Dr. Chang Shieh, who practices in Arcadia, Calif. "It's value."

In a moment of levity, Dr. Sears chimed in, "The title should be called 'Worth Every Penny.'"

"Also, you could maybe mention that it will help insurance claims from being rejected," Dr. Sears said. "That is very time-consuming for me to pay someone to handle that kind of stuff. If you code it right the first time, it's not an issue."

Other practice management resources that the panel reviewed included The ADA Practical Guide to Frequently Asked Legal Questions (L756), The ADA Practical Guide to Patient with Medical Conditions (P031), The ADA Practical Guide to Dental Office Design (P091).

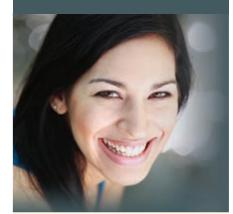
"I wish I had known about that before I started my practice, because I had a lot of questions," said Dr. Li in his assessment of The ADA Practical Guide to Frequently Asked Legal Questions.

But Dr. Sarah Cimino of Springfield, Mo., saw the guide differently. "I just don't know if you would seek it out to buy it," she said. "But if it were put with a new dentist or starting-a-practice package, I'd say, 'Okay, that's something that they think I'm going to need,' and maybe I will. But if you're nitpicking: I need this one; but that one, maybe not."

Dr. Cimino also commented on the new The ADA Practical Guide to Dental Office Design, expressing desire for the addition of a place to make notes, while Dr. Sears wanted more robust financials of office design for those establishing a new practice and those remodeling an existing practice, and more case studies.

"I would say that with the case studies, I really liked them," Dr. Sears said. "I would liked to have seen more, especially for if you buy a practice."

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2013 keynote: ADA President Robert A. Faiella May 24 addresses graduates of the University of Texas School of Dentistry at Houston. Saying he was honored to be part of the graduation, Dr. Faiella, noted, "You should all be proud of your accomplishments. But you come of age in the profession at a time of significant professional challenges, and your generation must find a path to respond to these challenges." The same week he also spoke at the commencements at Case Western Reserve University School of Dental Medicine and the University of Medicine and Dentistry of New Jersey. And on May 31, Alumni Day 2013, he was presented the Distinguished Alumnus Award from the Harvard School of Dental Medicine.

NASCAR's Greg Biffle races to victory with Give Kids A Smile paint scheme

Education at Michigan International Speedway reaches 6,000

BY STACIE CROZIER

Brooklyn, Mich.—Greg Biffle's victory at Michigan International Speedway on Father's Day June 16 capped off a great weekend for the Give Kids A Smile/NASCAR oral health education campaign.

For this race, Greg's No. 16 3M Ford Fusion sported the GKAS logo, and he lauded the program from victory lane.

"It is a pretty special day for us all together," said the NASCAR star and GKAS ambassador. "We were able to make a lot of kids smile with our Give Kids A Smile car today. It was Emma's first Victory Lane on Father's Day, so that was even more special. This program is great in that it helps teach parents and kids about good dental care for children, and provides education, screenings and treatment for thousands of kids in need each year. It's an honor to be part of Give Kids A Smile and to take them to Victory Lane."

"It was a great day for the Give Kids A Smile program," said Dr. Robert Faiella, ADA president. "You can see the enthusiasm that Greg Biffle has for this program and the way he shares that message with fans of all ages is incredibly powerful. The partnership with Greg and with NASCAR helps shine the spotlight on the need for dental care among our underserved children. And the children we connect with through NASCAR learn lifelong smart oral health habits that will truly impact their lives."

Dr. Faiella joined representatives from the ADA, the Michigan Dental Association, 3M and Henry Schein June 19 to see the GKAS booth in action. About 6,000 fans heard the Ad Council oral health message to brush for two minutes two times a day (2min2x.org) and received ARM & HAM-MER Spinbrushes, donated by Church & Dwight.

On June 15, 30 children from the Boys and Girls Clubs of Lenawee County, Mich., spent the day at the track. Not only did they hear a presentation from Greg Biffle and GKAS co-founder, Dr. Jeff Dalin, they received oral health education and goody bags with education materials, floss, toothpaste, Trident sugar free gum, a die-cast model of Greg's No. 16 3M car with the GKAS logo and an ARM & HAMMER Spinbrush.

Mr. Biffle and GKAS NASCAR sponsors the ADA Foundation, Henry Schein Cares, CareCredit and 3M ESPE Dental—are reach-



Father's Day victory: NASCAR's Greg Biffle and his daughter show off their smiles before the start of the Quicken Loans 400 at Michigan International Speedway on June 16. Mr. Biffle won the race in his No. 16 3M car that featured a Give Kids A Smile paint scheme.



Smiles: Dr. Robert Faiella, ADA president, left, and Dr. Jeff Dalin, Give Kids A Smile cofounder, right, present NASCAR's Greg Biffle with the dinosaur teaching tool used at the GKAS/NASCAR dental education booth during race weekend at Michigan International Speedway.

ing out to race fans during 11 NASCAR race weekends nationwide this season, offering fun family activities and oral health education at the 3M display in the track midways. They expect to reach more than 600,000 people with oral health messages during this season.

"Greg's victory not only brought national attention to his incredible driving

Applications due July 29 for Northwestern University Executive Management Program

The ADA/Kellogg Executive Management Program is inviting applicants for its three-week intensive business education program designed for dentists to learn the core principles of a Master of Business Administration program. Applications are due July 29.

The program offers dentists the opportunity to learn business management principles along

side their peers in dentistry with a curriculum that challenges participants to think creatively.

The same top business professors who teach in Kellogg's MBA program will cover the principles required to manage a successful business. Courses include operations, business strategy, organization leadership, marketing, finance, accounting, economics and statistics.

Participants attend three sessions at Northwestern University's Chicago campus on Sept. 27-Oct. 2, Oct.17-22 and Nov. 14-19. A certificate is received upon completion.

For more information and to apply online by July 29, visit ADA.org/Kellogg or call 1-312-440-3541.



Important message: Greg Biffle's No. 16 3M car helps highlight the importance of children's dental health by sporting the GKAS logo for the Father's Day race at Michigan International Speedway.



ADA American Dental Association®

skills and the No. 16 3M Give Kids A Smile Ford Fusion car, but also to the critical importance of good oral health and hygiene," said Michele Penrose, director of Professional Relations for Henry Schein Dental, the exclusive professional products sponsor for the ADA Give Kids A Smile Day program. "All of us at Henry Schein were proud to watch Greg drive home this important message."

John Stefanick, director of Industry Relations for 3M ESPE, hailed the event as a great success.

"The collaboration between the ADA, Henry Schein Cares, the Michigan Dental Association and 3M ESPE was quite evident during the Michigan NASCAR weekend," he said, "as all of us came together to man the GKAS booth to educate thousands of race fans with Greg Biffle's endorsement of the Ad Council's message of brushing your teeth twice a day for two minutes. Greg's support for the GKAS program has grown stronger as our NAS-CAR program has expanded to 11 tracks this year and we were pleased to be a part of his celebration in Victory Lane where he spoke of his No. 16 GKAS car and of the many kids that participated in the weekend activities."

The next GKAS/NASCAR event will rev up Aug. 23-24 at Bristol Motor Speedway in Bristol, Tenn.

In addition to following Greg's accomplishments on the track, race fans of all ages can put themselves in victory lane with him. Visit 3MESPE.com/givekidsasmile to create a photo with Greg Biffle on pit road or with the race-winning trophy in Victory Lane.

For more smart dental tips, visit 2min2x. org, MouthHealthy.org and facebook.com/ GiveKidsASmile. ■

Budget

Continued from Page 1

many reasons. "This is an exceptional year, and by that I mean 'different.' We are also benefitting from good management, from good decisions the Board and House made in 2012 and from good return on investment. But we need to remember that we can't expect to have these things happen every year, so our budget planning should reflect that."

Dr. Robert Faiella, ADA president, agreed, noting that while the Board is not seeking a dues increase this year, the fact remains that fixed costs increase each year. "We need to be mindful of the sustainability of our financial future, to be sure we are able to meet our obligations and rising expenses with modest but regular dues increases. We always strive to be less dependent on dues for our operating budget and to increase our nondues revenues while maintaining our integrity as a membership organization.'

Dr. Charles Norman, ADA president-elect, believes the budget speaks for itself. "We were able to fully fund the strategic initiatives necessary to continue to deliver value to our members and support the next important strategic planning cycle," he said.

"We will not have the final figures until after the August Board meeting, but I am fully confident that we will be able to submit a balanced or surplus budget to the House without a dues increase," Dr. Norman said.

Dr. Lemmo, who is serving his first term as ADA treasurer, is energized when talking about the budget process and how the House is represented each step of the way through councils.

"We are becoming a more strategically driven organization, and the budget reflects that. About 60 percent or our resources are dedicated to member success, our strategic goal No 1. This is directly related to member value," he said.

The future demands that the Association emphasize long-term sustainability given the current situation of zero member growth, Dr. Lemmo added.

"We are not seeing growth in active members," Dr. Lemmo said, "and every year we budget to the previous year's decline. We are trying to bend that curve by investing in several different programs, through target marketing and tripartite alignment to stimulate growth in the active membership category. We are using the budget process to stimulate the

Award

Continued from Page 1

need both in the U.S. and abroad.

The award, one of the highest honors bestowed by the ADA Board of Trustees, recognizes individual volunteer commitment and leadership over a period of at least 10 years that has had a broad impact on oral health and the improvement of the human condition.

Dr. Shinn, a general dentist in Tacoma, Wash., and founder of three international dental charities, is the 2013 ADA Humanitarian Award recipient. Dr. Shinn will receive a personalized award and a \$5,000 donation to his charity, For World Wide Smiles, Oct. 31 at the ADA's 154th annual session in New Orleans.

The 2014 recipient will be honored at the 155th ADA Annual Session, Oct. 9-12, 2014, in San Antonio, and receive a \$5,000 donation to the charity of his/her choice.

To nominate an ADA member, download the nomination packet at: ada.org/1477.aspx, or contact the ADA Division of Global Affairs at 1-312-440-2726 or international@ada.org.

outreach efforts. We must be competitive in the marketplace and we must be best in class in all we offer members. "We are financially stable and our reserves are at our target level of 50 percent," said Dr. Lemmo, who sends a quarterly report to

conversation and our

the House as well as the Board. "We are Dr. Faiella

managing the finances to enhance the services and programs for our new systems in place that allow for approprimembers as we look to the future. We have

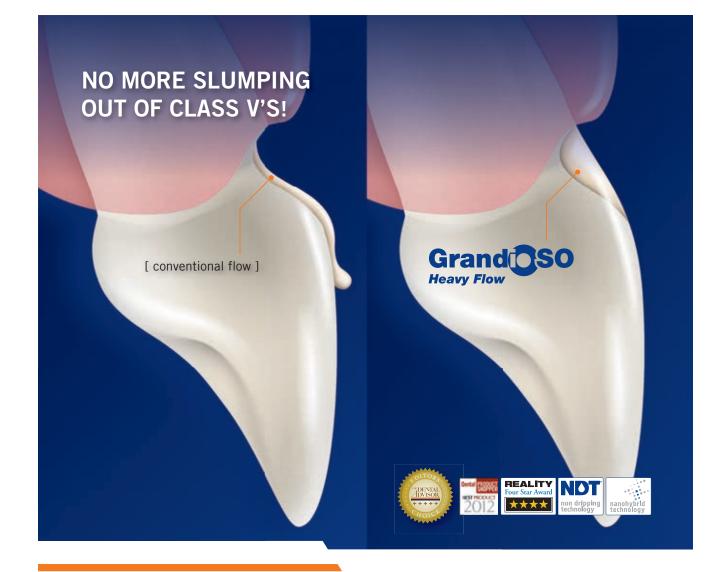
Dr. Norman

ate and timely financial information to the

Board and House." In short, being strategically driven means that "the Association can focus its finances on key member needs," said Dr. Norman, who will be installed as president before the House on Nov. 5. "Our job is to ensure that the ADA is the leading advocate for our members and our patients, and the improvements we continue to

make to managing our finances support these efforts."

Dr. Lemmo



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