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AMERICAN DENTAL ASSOCIATION WWW.ADA.ORG ANA MAY 19, 2014

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ADA 2014 special events sparkle

Plan some time for fun during ADA 2014—America's Dental Meeting by attending the Welcome Celebration Oct. 9 and the ADA Foundation Give Kids A Smile Gala Oct. 10.

ADA meeting-goers can experience a Texas-style tailgate and dance party Oct. 9, 6:30-9:30 p.m. at Historic Sunset Station.

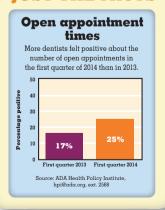


"The Welcome Celebration is a great way for everyone to experience an authentic Texas party," said Dr. Risé Martin, chair of the 2014 Committee on Local Arrangements. "This will give our guests a chance to kick up their heels and have fun and experience Texas hospitality like they never have before.

Tailgating dates back to the very first college football game between Rutgers and Princeton in 1869, when fans traveled to the game by carriage, grilling sausages and burgers at the "tail end" of

See EVENTS, Page 12

JUST THE FACTS



A MESSAGE FROM THE ADA PRESIDENT

Working together for the benefit of all our members

Dear Colleagues:

am excited to tell you about a new common vision we have created to make sure the ADA, at every level of our organization, is strong and vibrant for years to come. The ADA is widely considered to be a powerful force as the voice of dentistry, and we intend to continue to take action-together-to stay strong, and to help you succeed in your daily practice.

As our world and our profession change, we have examined what we need to do to stay relevant and grow. Dr. Maxine Feinberg, our president-elect, and I worked with the Board of Trustees to write an open letter to the leadership of state and local dental societies. We invited these leaders to





ADA President Charles Norman, D.D.S.

join us in taking a fresh look at how we serve you, our members. I'm happy to report that hundreds of local, state and national leaders signed the letter. You can see the letter and names of people who joined us by visiting ADA. org/powerofthree.

See TOGETHER, Page 5

ADA delivers **Action for Dental Health report** to Congress

'Dentists are making a difference'

BY CRAIG PALMER

Washington-Dental leaders delivered a report to Congress during the May 19-21 Washington Leadership Conference describing Action for Dental Health initiatives across the country and urging lawmakers to cosponsor legislation to support this "grassroots movement to solve the dental health crisis in America."

The ADA-backed Action for Dental Health Act, HR 4395, would authorize grants totaling \$20 million annually to state and local dental societies and other organizations at local and state levels to implement ADH initiatives to reduce barriers to care.

'To support this effort, we are asking Congress, health policy

See CONGRESS, Page 8

Resources fashioned with your practice in mind

A look at ADA's awardwinning product line

BY JAMES BERRY

he sheer volume of products and services the ADA offers its members today would mesmerize the dentist who treated you as a child.

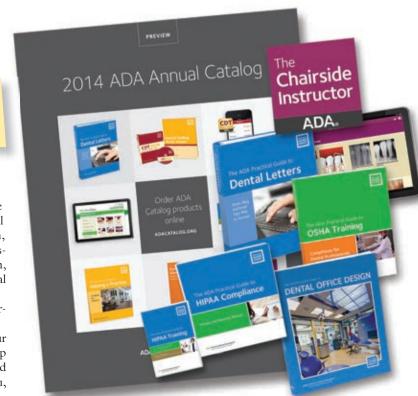
Award-winning publications in print and online, a revised and renewed website, the ADA Member Service Center, the Center for Professional Success, the Center for Evidence-Based Dentistry, business

First in α series on ADA products and services for members

resources, practice resources, mobile apps, patient education materials, contract analysis, insurance plans, travel services, professional advocacy, international outreach, an ethics hotline and the profession's premier dental convention, 2014—America's Dental Meeting.

And that barely scratches the sur-

Over the coming months, your ADA News will offer a close-up review of the many products and services your ADA offers for you,



ADA introduces new Health Policy Institute

BY KELLY SODERLUND

This month the American Dental Association launched the new Health Policy Institute. Formerly the Health Policy Resources Center, the Health Policy Institute aims to be a thought leader and trusted source for critical policy knowledge related to the U.S. dental care system. Staff members, which include researchers, statisticians and economists, gen-

erate and disseminate research on the impact

of the Affordable Care Act on the dental care

sector; utilization and access to dental care for

key populations; dental practice economics; dental care service delivery and financing; and the economics of dental education, among many other topics relevant to policymakers and health care advocates.

"The work of the Health Policy Institute—



Health Policy Institute

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†Data on file. / * Buy any 2 boxes of Enamel Pro Prophy Paste, get 1 bag of 2pro Disposable Prophy Angles free (soft/short, purple cup sent unless otherwise requested). Limit one per office. Contact your dealer for details. Offer valid through 5/31/14. ®ARM & HAMMER is a registered Trademark of Church & Dwight Company. under its previous incarnation as HPRC—has been nothing short of transformational," said ADA President Charles Norman. "Throughout all three levels of organized dentistry, the work of the Institute has been instrumental in guiding strategic discussions about the future of the dental profession and has helped drive alignment across all levels of organized dentistry."

Much of HPI's research will be incorporated into the ADA's work on the Power of 3—a campaign to align the local, state and national dental societies to provide the best possible member value experience.

In addition to the work the Health Policy Institute does within the Association, its work has had far reaching impact nationwide, is routinely used in various health policy forums and has been cited in major media outlets such as the Wall Street Journal, USA Today, and the New York Times.

"The Institute has recently launched a comprehensive research program to provide policy insight into the impact of the Affordable Care Act on the dental care sector," said Dr. Kathy O'Loughlin, ADA executive director. "Many trend lines show that the U.S. dental care system is in a period of transition. Shifting dental care utilization patterns, changing practice models and the Affordable Care Act are among the many factors that are bringing significant change to the dental care landscape. It is vital that the ADA and the oral health community have the forward-looking, cutting edge data and evidence needed to guide policy decisions affecting the U.S. dental care system."

For more information on the Health Policy Institute visit ADA.org/hpi. ■

—soderlundk@ada.org

Volunteer in Tanzania

The American Dental Association, in cooperation with Health Volunteers Overseas, is assisting dental faculty at the Muhimbili University of Health and Allied Sciences in Dar es Salaam, Tanzania, by developing programs to provide chairside instruction and lectures to undergraduate and postgraduate students, as well as continuing education for the faculty.



ADA and HVO are seeking licensed dentists and oral and maxillofacial surgeons to spend two weeks mentoring and training the students at this site. Areas of focus are oral and maxillofacial surgery, orthodontics, preventive and restorative dentistry and pediatric dentistry.

HVO, with support from the Henry Schein Cares Foundation, will offer volunteers up to \$1,500 toward expenses associated with serving at this site. Nonfunded opportunities are available in Cambodia, Kenya, Nicaragua and Rwanda.

For more information contact Barbara Edwards at b.edwards@hvousa.org or 1-202-296-0928. See more about the programs at hvousa.org and about Muhimbili University at muchs.ac.tz.

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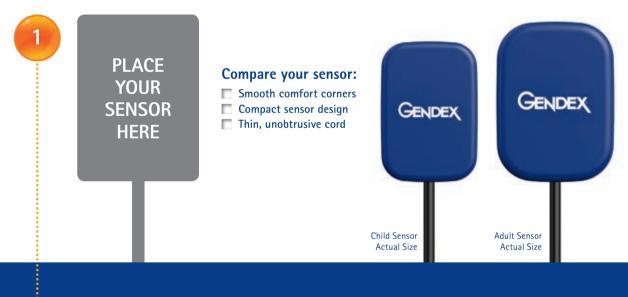
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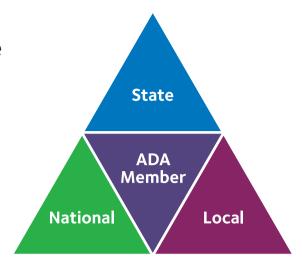
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Arizona Dental Association House of Delegates (80) – AZ
Council on Ethics, Bylaws and Judicial Affairs
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Together

Continued from Page 1

Essentially, the open letter outlines a shared vision at the local, state and national levels to provide the best experience possible for every member and to ensure that you are the central focus of our work. We want to further increase collaboration and partnerships among state and local societies and the national ADA, and work across all three levels to offer the right mix of benefits and services to you.

We have been working with state and local societies to identify the best ways to join together seamlessly to deliver superior member value. Each level will focus on what it does best-if the state or local societies deliver a product or service better than the national association, the national association will step back and support them. And we hope they will let us share their efforts as an example to other societies

I'm excited that so many of your leaders are enthusiastic about this shared vision. But of course there is hard work ahead, so the question is "What's next?" Together we are actively looking for opportunities to collaborate, and we have already begun initiatives in three key areas:

• Operations. We are transitioning to a single technology platform that will help us stay in touch with each member more

The timing is right as we complete the new strategic plan scheduled to launch in 2015. We've named the plan "Members First 2020," and you will hear more about it in the coming months leading up to the official launch at the Annual Meeting in San Antonio.

effectively. The rollout will be complete by 2016, and we've already received good feedback from the states who have adopted it. In addition, we are identifying specific ways to help small local societies who may not have staff-potentially serving as their "back office" to help them present a seamless experience for their members. Strong operations are essential to guarantee that we communicate effectively and provide you with the best, most responsive service so that you get the most value form your membership.

• Dental students and new dentists. We are focusing our collaborative attention on building a stronger bridge from dental student to new dentist in the face of the changing landscape for the dental profession. Student and more recently graduated dentists are the future of our profession and our association. We are looking at ways to communicate with them more effectively to help them understand the benefits of their membership. Our new technology will help us stay in touch with them as they move to become established in their careers, and we have a number of other programs in the works to enhance our relationship with them and help them succeed in our profes-

Action for Dental Health. We launched Action for Dental Health a vear ago, and today-May 19-we issue our

See facing page for list of

first Report to Congress. Action for Dental Health is a suite of solutions proposed by the ADA to address the dental health crisis in our country, and every state has at least one program in play. These programs fall under three categories: Provide care now to people who are suffering from untreated disease; strengthen and expand the public/ private safety net; and get education into the communities about dental health and

disease prevention. This initiative is a living example of how all local and state societies, and the ADA, along with individual dentists in their communities, can work together on programs like community water fluoridation, emergency room referral efforts, Give Kids A Smile, volunteerism and other ways.

The timing is right as we complete the new strategic plan scheduled to launch in 2015. We've named the plan "Members First 2020," and you will hear more about it in the coming months leading up to the official launch at the Annual Meeting in San Antonio. In the meantime, I hope you'll work with all your leaders—at every level—by telling us what you value most about your membership and how we can best contribute to your success today and in future years. Together we will continue to be your voice, your resource and the preeminent professional association in the world.

Regards,



Charles H. Norman, D.D.S. **ADA President**



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GOVERNMENT

GAO assesses dental research funding

BY CRAIG PALMER

Washington—Government auditors relate chronic dental disease to funds allocated for dental research in a report requested by Congress to inform the annual appropriations process.

Untreated dental caries is the fourth most prevalent disease/condition for adults and fiscal year 2013 funding for dental/oral and

craniofacial disease was \$480 million by one fresh but imprecise measure, according to the U.S. Government Accountability Office

Rep. Jack Kingston, R-Ga., who chairs the House Appropriations subcommittee responsible for crafting the nation's biomedical research budget, requested the GAO "performance audit" of research funding related to diseases and health conditions that are the leading causes of death or the most prevalent chronic conditions.

The April 23 GAO report is based on a sophisticated text data mining system developed for the National Institutes of Health and Centers for Disease Control and Prevention data and gives congressional appropriators a fresh look at funding allocations for various

research, condition and disease categories.

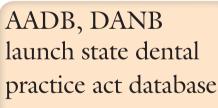
It offers congressional appropriators a CDC ranking of diseases and conditions alongside fiscal year 2013 funding for the corresponding NIH Research, Condition and Disease Categorization category. The computer-based text-mining tool recognizes words and phrases in project descriptions to assign NIH projects to any of 237 applicable "closest match" categories, such as untreated dental caries, to the broader dental/oral and craniofacial disease category.

The National Institutes of Health does not budget by disease category but rather by its 27 institutes and centers, each of which is charged with a specific mission and generally focused on a specific disease, a particular organ or a stage in life. The National Institute of Dental and Craniofacial Research, which provides the lion's share of funding for research to improve dental, oral and craniofacial health, had a FY 2013 budget of \$386.9 million, less than the \$480 million estimate developed for the House Appropriations Committee.

The RCDC system displays the annual support level for dental/oral and craniofacial disease research and for 12 other CDC-ranked diseases and conditions based on grants, contracts and other funding mechanisms across the National Institutes of Health and includes dental research supported by other institutes and centers. NIH officials told government auditors that the RCDC was not designed to be able to estimate a total, non-duplicated amount of funding specific to a given disease or condition because RCDC categories are neither mutually exclusive nor exhaustive. But combined with the CDC data, it gives congressional appropriators a new look at research funding related to disease and health condition.

The NIH Funding Report, GAO-14-490R, is available at GAO.gov. ■

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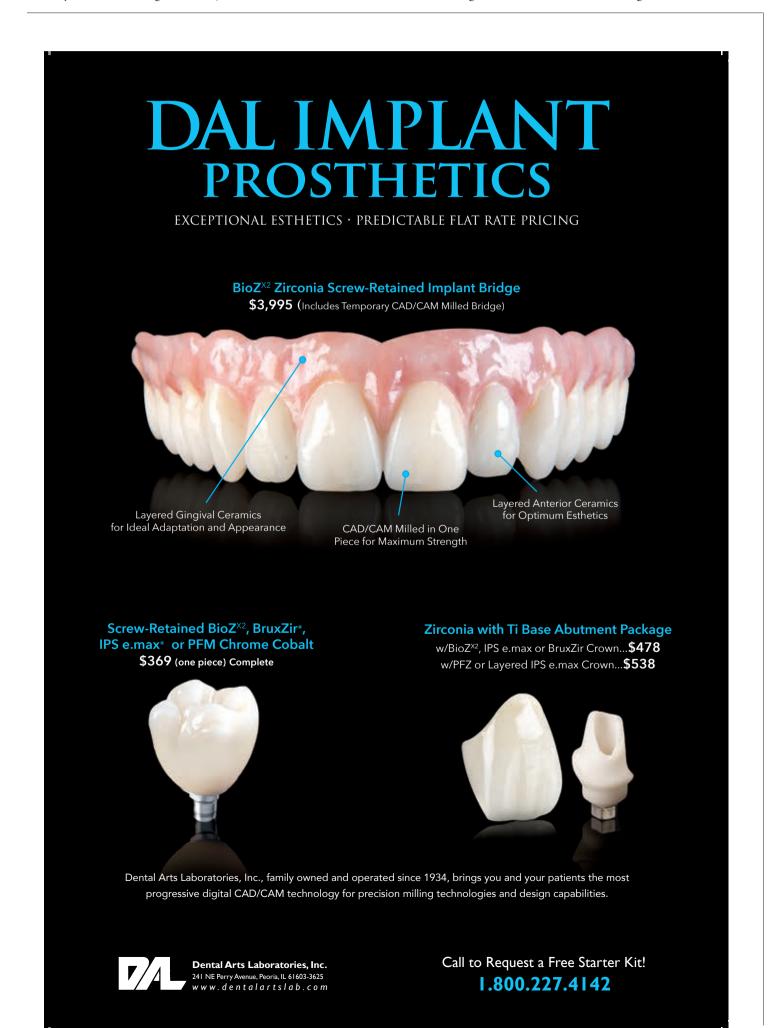
To help make locating a state's dental practice act and dental board administrative rules and regulations easier, the Dental Assisting National Board, Inc. and the American Association of Dental Boards launched a new database for AADB members and state regulators.

"Currently, dental practice acts, rules and regulations can be difficult to find, with states differing in the location and accessibility of documents," said DANB Executive Director Cindy Durley, M.Ed.

With the database, they hope to bring together the material in one place. Through the resource, AADB members and state regulators can select a state to find its statutes, regulations and administrative rules governing the practice of each member of the dental team.

"Our members often reference other state's practice acts, rules and regulations in the course of their work," said AADB Executive Director James Tarrant. "We are excited for this collaboration to bring a new and valuable resource to our membership."

To access the database, visit DANB at danb.org or AADB at dentalboards.org.





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Continued from Page 1

organizations, community leaders and ADA member dentists to support the Action for Dental Health Act," said a letter from the president of the American Dental Association, Dr. Charles Norman, introducing Year One: 2014 A Report to Congress. The Association launched Action for Dental Health: Dentists Making a Difference at the National Press Club on May 15, 2013.

"Action for Dental Health, in keeping with the American Dental Association's mission to advance the oral health of the public, encourages the creation of enduring, self-sustaining solutions to remove barriers to good dental health," Dr. Norman told Congress in the letter of introduction. "It is a community-based, three-pronged approach to provide care now to people who suffer from untreated dental disease, to strengthen and expand the public/private safety net and to bring disease prevention and education into communities."

The Year One Report to Congress describes nine ADH initiatives under the three-pronged approach with "bold goals" to achieve them and includes certain baseline information and target dates. Dentists, community partners and patients also tell their stories of Action for Dental Health:

• "The community recognizes a great need

Action for DENTALHEALTH>

ADA American Dental Association®

for dental care but doesn't necessarily know who to turn to for advice and direction on the topic," says Jenna Linden, a Community Dental Health Coordinator based in Green Bay, Wisconsin. "We can connect them to the care they need."

• "There is no shortage of kids who don't have access to care," says Dr. Jeff Dalin, co-

founder of Give Kids A Smile. "And it gets worse and worse as our economy is rough and people lose jobs and don't have dental coverage and just can't afford dentistry. And it's one of those things that they have to give up. If you have to choose between food or going to get dental care—food there is never a shortage of kids who

wins. So there is never a shortage of kids who need our help."

- "[Emergency departments] really aren't equipped to provide any dental services," says Mark Crawford, vice president of Community Health Services at Bronson Battle Creek, a community hospital in Southwest Michigan. "And so the best that we can do for a patient with those kinds of dental issues is to provide pain relief. But most of these patients have no dental insurance. They have no regular dentists. They were very likely to have continued pain and to make a repeat visit to our emergency department."
- "Dental health for one of our nation's most vulnerable populations, nursing home residents, is at a crisis point," says Dr. Sarah Dirks, a San Antonio, Texas, dentist. "They have less access to care than any other group in our country, and delays in treatment could lead to serious, even life-threatening infections. We must turn our attention to these issues before it's too late."

These and other ADH initiatives are more fully described in the Year One Report to Congress and at ADA.org/action. The website offers an Action for Dental Health map



for tracking emergency room referral initiatives, Give Kids A Smile events, Community Dental Health Coordinators, fluoridation, Medicaid reform, federally qualified health centers, nursing home programs and collaboration with other health professionals and organizations.

"A year ago, the American Dental Association started a nationwide, grassroots movement to solve the dental health crisis in America," the Year One Report to Congress said. "One year later, we are proud to report that Action for Dental Health: Dentists Making a Difference has taken root in every state in our nation."

The report includes "a special thanks to ADA member dentists who are bringing Action for Dental Health to life in communities across the country. Over the past year, each state dental society has embraced Action for Dental Health and found ways to advance it at the grassroots level, with all states involved in at least one Action for Dental Health initiative in some capacity."

The invitation to Congress is clear: "We hope you will join us in our efforts to ensure that all Americans have access to good dental health."

Rep. Robin Kelly, D-Ill., introduced HR 4395 April 3 to advance dental initiatives by amending the Public Health Service Act "to improve essential oral health care for lower-income individuals by breaking down barriers to care." The proposed Action for



Addiction seminar set for June 15-20

BY KELLY SODERLUND

Salt Lake City—Sessions on traumatic brain injury and addiction, current drug trends and cultures and recovery strategies for chemically dependent patients top the agenda for the 63rd annual session of the University of Utah School on Alcoholism and Other Drug Dependen-

The six-day school is scheduled for June 15-20 and has sections for dentists, pharmacists, nurses and physicians, among others. The goal is to educate medical professionals about addiction within themselves and their colleagues; teach how to spot and handle it in their patients; and provide training and resources for interventions, treatment and professional guidance.

Featured topics this year include:

- "Stark Raving Crazy: The Dangers of Synthetic Drugs," presented by Dr. Pat Sammon, emeritus professor at the University of Kentucky College of Den-
- "Clinical Spirituality in the Treatment of Addictive Diseases," presented by Dr. Ed Reading, a Catholic priest who works for the Professional Assistance Program of New Jersey.

The American Dental Association has taken an active roll in supporting well-being among dentists and sends a staff representative to the Utah School, which allows the Association to work with constituent dentist well-being program directors to better serve their needs. For information on the program and how to register, visit medicine. utah.edu/uas/.

Those with questions can contact Dr. Murray at dent74@aol.com, the University of Utah's Susan Langston, at Susan. Langston@hsc.utah.edu, or Alison Siwek, ADA manager of dental health and wellness, at siweka@ada.org.

Congress

Continued from Page 8

Dental Health Act 2014 would authorize grants to support volunteer dental projects and for public-private partnerships to improve oral health education and dental disease prevention and Medicaid and Children's Health Insurance dental programs. HR 4395 was referred to the House Energy and Commerce Committee.

Entities eligible for grants to support volunteer dental projects offering free dental services for underserved populations could include state or local dental associations, state oral health programs or a dental education, dental hygiene education or postdoctoral dental education program accredited by the Commission on Dental Accreditation or a community-based organization that partners with an academic institution.

Entities eligible for public-private partnership grants could include a state or local dental association or a state dental association foundation that partners with public and private stake holders to facilitate the provision of dental services for underserved populations.

-palmerc@ada.org

Register beginning June 1 to review information on relationships between health care providers and manufacturers

Beginning June 1, dentists can register on a federal government website that will allow the public to see information about relationships between health care providers and various manufacturers or group purchasing organiza-

Registration is voluntary and gives dentists the opportunity to review information about the dentist before it's posted on the public website and to dispute inaccurate information.

The Open Payments program was estab-

lished by the Center for Medicare & Medicaid Services under the Physician Payment Sunshine Act, part of the Affordable Care Act. The Sunshine Act requires certain manufacturers to report CMS payments and other transfers of value to health care providers and teaching hospitals and requires CMS to post the information on a public website.

Ownership interests held by health care providers and their family members in certain manufacturers and group purchasing organizations will also be reported. The purpose of the act is to create greater transparency around the financial relationships of manufacturers, group purchasing organizations, physicians and teaching hospitals.

Dentists can register in the Enterprise Portal of the CMS Open Payments website beginning June 1. The public website is scheduled to go live before Sept. 30. To learn more or to register, visit cms.gov/Regulations-and-Guidance/ Legislation/National-Physician-Payment-Transparency-Program/index.html.

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EDUCATION

UIC dental school publishes book celebrating its proud past

BY KIMBER SOLANA

Recounting the rich history of the University of Illinois at Chicago College of Dentistry, the dental school published a color, 226-page book titled "Celebrating a Proud Past."

The book includes hundreds of photos with supplementing text, a section with notable faculty of the past and another portion highlighting current faculty, alumni, staff and friends of the school.

The book is dedicated to all the stakeholders, including faculty, administrators, patients, donors and students, who have led to the



Roaring Twenties: A photo of a University of Illinois at Chicago College of Dentistry clinic in the 1920s

success of the dental school, said Dr. Bruce Graham, who was dean from 2000-13.

"Leadership is a constant theme throughout our history," said Dr. Graham. "From being the first dental school in the nation to have electric-driven dental engines and floor-mounted units, to inventions including the high-speed hand-piece and ammoniated toothpaste, to founding national dental organizations, to setting the baseline standard for oral radiation safety, and even to inventing Flag Day, leadership always has been the word defining our college."

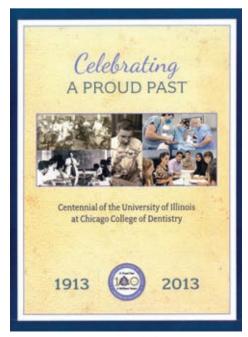
The University of Illinois at Chicago College of Dentistry evolved from the Columbian Dental College, which was founded in 1891 in Chicago and informally affiliated with the University of Illinois in 1901. It changed its name to the University of Illinois College of Dentistry in 1905 and was charted as an official college of the university in 1913. The school celebrated its centennial last year. It kept that name until 1982 when it was changed to the University of Illinois at Chicago College of Dentistry.

The book includes sections for each of the dental school's specialty departments, interesting facts about the college and a list of award-winners.

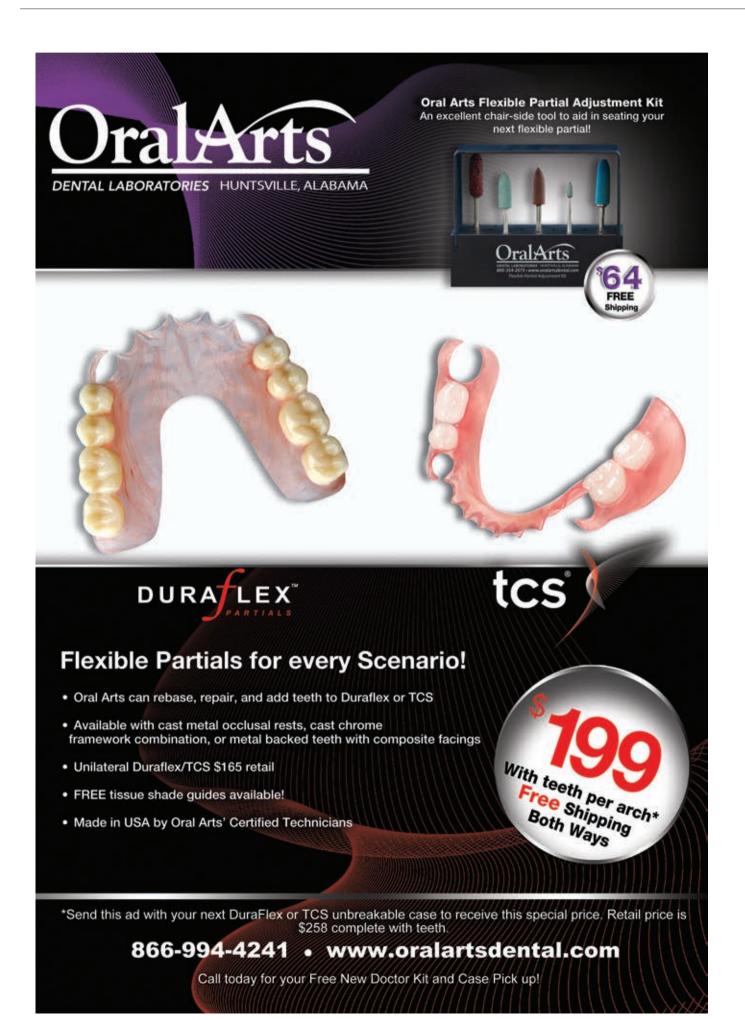
In addition, the book contains articles about changes in the facility, curriculum and research mission; the importance of private support; social life at the school; student organizations; African-Americans and women in the dental profession; and reflections by retired staff members.

To purchase a copy of "Celebrating a Proud Past" (available for \$40), contact William S. Bike, of the Office of Advancement and Alumni Affairs, at 1-312-996-8495 or billbike@uic.edu. ■

—solanak@ada.org



History book: The cover of "Celebrating a Proud Past," a 226-page book on the history of the University of Illinois at Chicago College of Dentistry.





Class of 2017: Members of the A.T. Still University of Health Sciences and the Missouri School of Dentistry & Oral Health inaugural class of 2017 turning the soil during a groundbreaking ceremony April 25 for a new 79,000-squarefoot dental education and oral health clinic in St. Louis. After spending two years on the Kirksville, Mo., campus, ATSU-MMOS-DOH students will relocate to St. Louis for third-year and fourthyear clinical experiences at the newly constructed clinic operated in partnership with Grace Hill Health Centers, Inc.

Tufts University opens new clinic to treat people with disabilities

Worcester, Mass.—Tufts University School of Dental Medicine announced on April 30 the opening of its new dental clinic serving people with developmental and acquired disabilities.

The Tufts Dental Facility at Worcester is the eighth Tufts University dental clinic in Massachusetts that provides comprehensive oral health care for people with special

"The important work of the Tufts Dental Facilities reflects the School of Dental Medicine's commitment to ensuring that diverse communities have access to excellent oral health care," said Dr. Huw F. Thomas, dean of Tufts University's dental

"The new clinic in Worcester will provide vital services for people with disabilities in Central Massachusetts and offer our faculty, staff and students opportunities to promote and protect the oral health of vulnerable populations."

In 2012, Tufts University researchers published a study in the Journal of the American Dental Association that found people with intellectual and developmental disabilities are more likely to have poor oral health-including periodontal disease, untreated tooth decay and missing teeth—than the general

The Tufts Dental Facilities is a network of clinics across the state that treats individuals with disabilities.

In all, the network treats more than 7,000 patients with disabilities each year. They are operated in partnership with the Commonwealth's Department of Developmental Services and the Department of Public Health.

The new Tufts Dental Facility at Worcester is housed in a newly renovated building owned and operated by the Seven Hills Foundation, which provides support for adults and children with disabilities.

The clinic has two dentists, three dental hygienists and one dental assistant—all with specialized training in caring for people with disabilities.

The facility also has four treatment chairs, and patients will be eligible for comprehensive oral health care, including examinations, preventive and restorative dentistry, periodontal care, endodontics, prosthetic dentistry and tooth extraction.

For more information on the Tufts Dental Facilities clinics, visit dental.tufts.edu/ tdf. ■





Service learning: Dr. Greg Chadwick, dean of East Carolina University School of Dental Medicine (Left), tours the new ECU dental community service learning center on March 24 in Lillington, N.C., with ECU Chancellor Steve Ballard. ECU community service learning centers are facilities that combine clinical education and patient care where fourth-year dental students will spend nine-week clinical rotations at the centers. General dentistry residents will also hone their dentistry skills at the centers. The centers will provide dental care to Medicaid enrollees and other members of the community who lack regular dental



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Past ASDA president mourned

New York—The American Student Dental Association, the ADA and all of dentistry join the family of past ASDA President Jiwon Lee in mourning her death. Ms. Lee was 29 years old.

"ASDA is about the dental profession and creating policy, but more than anything, it is about people," said ASDA President Kristopher Mendoza in a statement.

"It is about our community, our family known as ASDA that brings us closer than any words on a document can. Please keep Jiwon and her family in your thoughts and prayers during these difficult times."

Ms. Lee's family confirmed her death on May 4 on a Gofundme.com Web page originally set up by her brother to raise money for a private investigator to find her after she was reported missing April 1

The Web page has since been renamed the Jiwon Lee Memorial Scholarship Fund (gofundme.com/840ci8).

Ms. Lee served as the 2013-14 president of ASDA. During her term, ASDA saw nearly 90 percent market share and the implementation of an advocacy alert system.

She served as an appointed member of the ADA's Joint Commission on National Dental Examinations and as a member of ASDA's delegation to the 2013 ADA House of Delegates.

A memorial service was held May 12 for Ms. Lee at Columbia University in New York. ■

Events

Continued from Page 1

the horse.

Guests can enjoy the sights, sounds and excitement of game day at ADA 2014 with friends and colleagues. This special event will feature interactive games, live music and dancing during the first night of the meeting.

The cost is \$65 for adults and \$35 for children under 12 and includes round-trip transportation from ADA hotels, party admission, Texas-style tailgate fare and two drink tickets for beer, wine, soft drinks and bottled water.

The ADA Foundation Give Kids A Smile Gala will be held Oct. 10, 7-11:30 p.m., at the San Antonio Marriott Rivercenter.

ADA attendees are encouraged to join their friends and colleagues for a light-hearted evening honoring ADA President Charles Norman and the ADA Board of Trustees, while celebrating the national success of Give Kids A Smile.

Tickets are \$250, and \$100 of each ticket is a tax-deductible charitable donation to the ADA Foundation for future support of the Give Kids A Smile program. Price includes dinner and dancing.

For more information or to register for ADA 2014—America's Dental Meeting and these special events, visit ADA.org/ meeting. ■

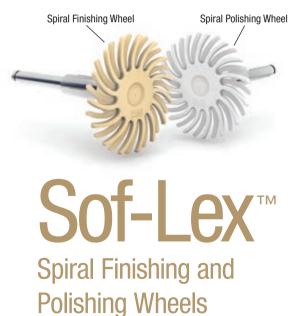


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SCIENCE

Panel shines spotlight on antibiotics, *C. diff* danger and dentistry at SCDA annual meeting

BY JEAN WILLIAMS

The Centers for Disease Control and Prevention in a 2013 report estimated that a minimum of 250,000 Americans annually take antibiotics and become ill due to resulting infection with the bacterium *Clostridium*

difficile—or C. diff. Some 14,000 die each year as a result of these infections, the report said.

Dentist-prescribed antibiotics trigger some of these outcomes, panelists advised at the Special Care Dentistry Association annual meeting April 12 in downtown Chicago.

Panel members made it clear: the discussion wasn't meant to take dentists to task regarding their prescriptions of antibiotics. Rather, it was a call for caution and communication. They implored dentists to keep in mind that

gastrointestinal symptoms in patients who have been prescribed antibiotics, particularly to elderly patients and other at-risk patients, may be a sign of *C. diff*.

"What I would suggest here is not that you need to know how to treat it," said Sandro Cinti, M.D., a clinical associate professor in the Division of Infectious Diseases at the University of Michigan Hospitals and Health Centers. "We don't think that. We don't think there is inappropriate use of antibiotics here, either. You do want to use antibiotics appropriately. But you guys generally do, and you do it for patients who need it. It's realizing yourselves that if a patient calls with GI symptoms, it's not just the side effects. It might be *C. diff.* And, also, what we're getting at here is telling these patients: 'This is a risk factor. Do not disregard these symptoms.'"

Joining Dr. Cinti as panelists were Dr. Samuel Zwetchkenbaum and Diane Lehman Wilson. Dr. Zwetchkenbaum is a geriatric dentistry fellow and clinical instructor in the Department of Restorative Dentistry at Rutgers School of Dental Medicine. Ms. Wilson is a lawyer and a regulatory specialist at the University of Michigan Medical School; she shared the story of her elderly father's nearly fatal *C. diff* infection when he was prescribed prophylactic antibiotics following an oral surgery.

Advanced age itself is a risk factor for developing *C. diff*, and the infections are often more severe in the elderly and other special needs patients.

Aside from age, Dr. Cinti cited other risk factors. "There are people who are hospitalized, who can get infected in the hospital," he said. "PPIs—these are the antacid medications—may increase the risk. Even young folks with inflammatory bowel disease, they're at very high risk right up front of getting *C. diff.* Steroid use has been associated with it. Chemotherapy [too] because it changes the gut mucosa and the gut flora."

Though less likely, *C. diff* can strike even those outside of high-risk groups with deadly force.

"The first case of severe *C. diff* that I saw was about six or seven years ago when a 50-year-old guy came into the hospital for a scheduled procedure to have a disc repaired in his neck," Dr. Cinti said. "He came in on a Thursday, had surgery on a Friday, had preop antibiotics by the surgeons, developed extended abdomen on Saturday. We didn't get called until Sunday. He was dead on Monday. That really woke us up. We were seeing more of these cases around the country."

A main point the panel hoped to make is that *C. diff* has become a more formidable and potentially deadly foe as its epidemiology evolves. "When I was a resident many years ago, *C. diff* was a nuisance," Dr. Cinti said. "Patients used to get diarrhea. We'd stop the antibiotic and say, 'Let's wait it out.' Something's changed about *C. diff* at this point. Part of it is the genetics of the bug has changed, and so we're seeing worse bugs occurring."

While some antibiotics may be more prone to incite an infection, any broad spectrum antibiotic can become the culprit, Dr. Cinti

"Fluoroquinolones are a common risk factor now," he said. "We didn't know that before. I don't know how often you guys use





AAE introduces root canal safety Web page

The American Association of Endodontists launched a new Web page that provides information about root canal safety and that debunks myths.

The AAE introduced the Web page in April, during Root Canal Awareness Week. It provides endodontists, general dentists, dental media, industry partners and patients with information about the safety of endodontic treatment.

The AAE root canal safety Web page includes a root canal safety fact sheet, tooth saving tips and videos that educate patients about endodontic specialists and root canal procedures. It also includes patientfocused information in an attempt to debunk myths that root canals cause cancer or other health problems.

"As dental professionals, we know there is no evidence of a link between root canal treatment and cancer or other diseases," said Dr. Gary R. Hartwell, AAE president. "Unfortunately, claims to the contrary, with sensational headlines, continue to make their way through social media and can be persuasive to a small portion of the public."

To view the AAE's root canal safety Web page, visit aae.org/rootcanalsafety.

Time to talk: Expert panelists discuss the dangers of C. diff and antibiotics at the Special Care Dentistry Association annual meeting April 12 in Chicago. Panelists, from left, are Diane Lehman Wilson, a lawyer and a regulatory specialist at the University of Michigan Medical School; Dr. Samuel Zwetchkenbaum, a geriatric dentistry fellow and clinical instructor in the Department of Restorative Dentistry at Rutgers School of Dental Medicine; and Sandro Cinti, M.D., a clinical associate professor in the Division of Infectious Diseases at the University of Michigan Hospitals and Health Centers.

these. I know you probably use clindamycin, augmentin and amoxicillin much more than you use fluoroquinolones. But be aware that they can cause that, too."

He also warned that old ways of thinking about antibiotics can be dangerous-for instance, assuming that a patient's symptoms are indicated side effects.

"Onset is, most of the time, a few days after taking antibiotics," he said. "But then look at the range. It can happen one day later. Imagine if somebody comes in. You give them clindamycin. They call you the next day and say, 'I have diarrhea,' and your inclination is to think, 'Oh, it's a side effect of the medication.' It could be C. diff, and so they have to know that. You have to know that. It could be 10 weeks later. Maybe they call you three or four weeks later and you say, 'Oh, it can't be because you're not on the antibiotic.' It could be. This could happen two months later."

Dr. Zwetchkenbaum suggested dentists should develop a protocol that promotes safety when prescribing antibiotics to elderly patients. As a dentist whose focus is geriatric patients, Dr. Zwetchkenbaum often administers various cognition tests to help him determine a patient's ability to follow post-op instruction.

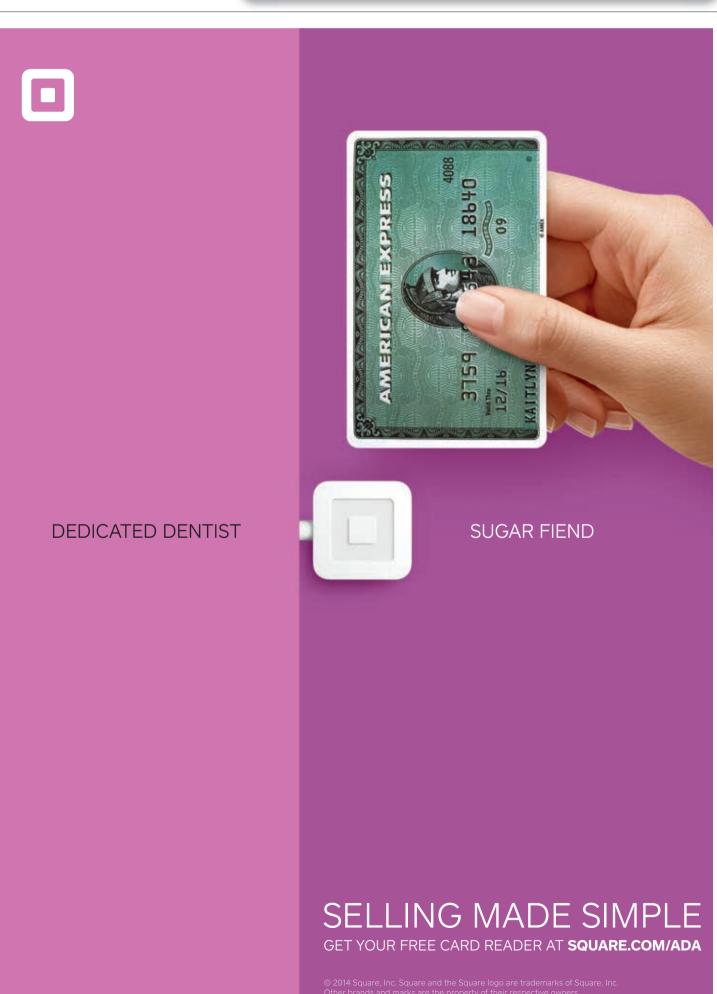
He advised dentists to provide patients with printed material that expressly addresses potential complications related to use of antibiotics. "We write out multiple things for our patients," he said. "We communicate with family, whether it's treatment plans, instructions for dentures or instructions related to potential side effects of drugs."

Dr. Zwetchkenbaum suggested that dentists consider patterning their own antibiotics precaution letter—using large, easy-to-read print—on one included in the ADA Practical Guide to Dental Letters.

"Many of you have seen from the American Dental Association their book of dental letters," he said. "We recently submitted to this latest edition a sample letter that a dentist provides to patients who have been prescribed antibiotics.

The ADA Practical Guide to Dental Letters: Write. Blog and Email Your Way to Success (J053) is available to members for \$59.95; retail price, \$89.95. Save 15 percent with promo code 14135 through June 30. Visit adacatalog.org to place your order.

—williamsj@ada.org



Standards committee offers new courses at ADA 2014

BY JEAN WILLIAMS

San Antonio-The ADA Standards Committee on Dental Informatics will offer two new courses Oct. 9-11 at ADA 2014—America's Dental Meeting.

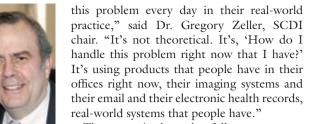
SCDI will present the courses in partnership with the ADA Practice Institute.

Exchanging Digital Images and EHR Data for Patient Treatment is a free course worth one hour of continuing education credit. The course will demonstrate the transmission of a Health Insurance Portability and Accountability Act compliant email with an attached patient dental image through a third-party

health information service provider, or HISP, which will provide encryption and will meet all necessary HIPAA requirements.

The course reflects the Standards Department's response to a House of Delegates request to standardize the secure ex- Dr. Zeller change of patient data between parties.

"It's what the House of Delegates requested on behalf of practicing members that face



The course is planned as follows:

- Thursday, Oct. 9, 11:30 a.m.-12:30 p.m. (course 5360) and 3-4 p.m. (course 5361);
- Friday, Oct. 10, 10:30-11:30 a.m. (course 6360) and 2-3 p.m. (course 6361);
 - Saturday, Oct. 11, 10:30-11:30 a.m.

Identifying Disaster Victims: Standards for Electronic Dental Patient Data also is a free course and is worth two hours of continuing education credit.

A panel of leading experts will instruct participants on the collection and coding of forensic dental data for exchange between national and international agencies and how standards help overcome the difficulty of exchanging this information.

The course is planned as follows:

- Thursday, Oct. 9, 12:30-2:30 p.m. (course 5310) and 4-6 p.m. (course 5311);
- Friday, Oct. 10, 11:30 a.m.-1:30 p.m. (course 6310) and 3-5 p.m. (course 6311);
- Saturday, Oct. 11, 11:30 a.m.-1:30 p.m. (course 7310).

"We've spent a lot of time working with the National Institute of Standards and Technology as well as national and international law enforcement groups like the FBI and Interpol, governments and forensic identification professional associations," Dr. Zeller said. "So everybody's come together to develop a way to exchange dental information on disaster victims and missing persons that need identification in a way that we can do it electronically and in a way that can be analyzed electronically to try to get matches."

To register for these courses, visit ADA. org/meeting. ■

-williamsj@ada.org

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ADA standards committee to meet Oct. 6-8

San Antonio—The ADA Standards Committee on Dental Informatics will gather here for its biannual meeting Oct. 6-8, just prior to ADA 2014—America's Dental Meeting, at the Marriott Rivercenter Hotel.

Here are meeting details:

- Oct. 6: 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. 6-7: SCDI working groups will meet, covering such topics as track and trace for biologics, electronic health records and data and system security.
- Oct. 8: The SCDI Plenary session takes place at 8:30 a.m.
- Oct. 8: The SCDI and the Dental Trade Alliance will co-sponsor a special workshop on universal device identifier regulations and technologies.

SCDI meetings require registration. The Dental Trade Alliance requires separate registration for the UDI workshop.

For full schedule and meeting information, contact Paul Bralower at ext. 4129 or by email at bralowerp@ada.org. For additional information about the UDI Workshop, go to dentaltradealliance.org or call 1-703-379-7755.

Discounted hotel reservations are available. For hotel and registration information, contact Marilyn Ward at ext. 2506 or by email at wardm@ada.org.

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 is developing or revising more than 70 national standards.





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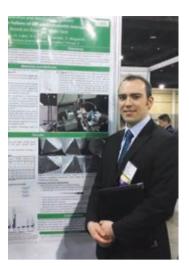
Charlotte, N.C.-ADA Foundation and ADA scientists and researchers presented eight scientific abstracts and other works March 19-22 during the 43rd annual meeting of the American Association for Dental Research and the 38th annual meeting of the Canadian Association for Dental Research

Scientists from the ADA Foundation Dr. Anthony Volpe Research Center, located in Gaithersburg, Maryland, and from the ADA Division of Science, presented the following:

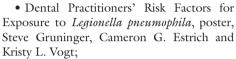
- A Universal Function for the Edge Chip Resistance of Materials, oral presentation, George Quinn, a consultant to the Volpe Research Center; Anthony Guiseppetti and (the late) Janet B. Quinn, Ph.D.;
- 3-D Imaging Method for Measuring Shrinkage and Marginal-gap Formation, oral presentation, Jirun Sun, Ph.D.; Evalyn Myerly (college summer intern); Dr. Gary Schumacher; and Sheng Lin-Gibson, Ph.D., a National Institute of Standards and Technology employee;
- Novel Dental Resin Composites with Improved Service Life, oral presentation, Dr. Sun.

Members of the ADA Division of Science projects included:

• Apparatus and Method to Evaluate Cyclic Fatigue Failure of Rotary Endodontic Instruments Based on Rotating Beam Test, poster, Daniel Halpin; Henry Lukic; Henry Shepelak; and Spiro Megremis, Ph.D.;



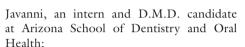
Endo tool: Daniel Halpin presents Apparatus and Method to Evaluate Cyclic Fatigue Failure of Rotary Endodontic Instruments Based on Rotating Beam Test.



- Surface Temperatures of Electric Handpieces Under Various Operating Conditions, poster, Mr. Lukic and Dr. Megremis;
- Energy Required to Fracture an Endodontic Instrument and Its Stiffness in Twisting, oral presentation, Dr. Megremis with Mr. Lukic, Victoria Ong and Celine



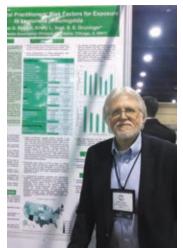
Handpieces: Henry Lukic presents Surface Temperatures of Electric Handpieces Under Various Operating Conditions.



• Shear Bond Strength of Self-Etch Adhesive Cements on Alloys, poster, by Amer Tiba, Ph.D.; Ms. Estrich; Dr. Gregory Zeller, associate dean for clinical affairs, professor of oral health, University of Kentucky College of Dentistry; intern Amie Patel, a D.M.D. candidate at Roseman University of Health Sciences, College of



Fracture potential: Spiro Megremis, Ph.D., presents Energy Required to Fracture an Endodontic Instrument and Its Stiffness in Twisting.



Risk factor: Steve Gruninger poses with his poster Dental Practitioners' Risk Factors for Exposure to Legionella pneumophila.

Dental Medicine, South Jordan, Utah; and intern Daniel Areepong, a D.M.D. candidate at Arizona School of Dentistry and Oral Health.

For more information, about the ADA Division of Science posters and presentatations, contact the ADA by email at science@ada.org.

For more information about Dr. Anthony Volpe Research Center posters and presentations, call the VRC at 1-301-975-6806 or email VRC@ada.org.



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ADA standards drafts available for review and comment

BY JEAN WILLIAMS

Seven proposed standards in draft status are available for review and comment through July 3.

Developed and approved for circulation through the ADA Standards Committee on Dental Informatics and the ADA Standards Committee on Dental Products, the proposed standards span the areas of restorative materials, manual toothbrushes, impression materials, tooth bleaching and digital resources related to dentistry.

The ADA has played a key role in the development of dental standards since 1928 and

is an American National Standards Institute accredited standards developer. ADA Standards Committees volunteers work together on documents that establish requirements for safe and effective dental products and technologies through a consensus-based process.

Diverse experts representing dental practitioners, industry, government and academia comprise the working groups that develop ADA standards. The ADA Standards Committees encourage professionals from all areas of interest to participate. Involvement is open to anyone who would like to contribute his or her expertise, anywhere from the initial planning phase through reviewing final drafts.

The seven draft proposals open to review and comment are:

• Proposed ANSI/ADA Standard No. 27 for Polymer-based Restorative Materials will be a modified adoption of ISO 4049:2009 Dentistry-Polymer-based Restorative Materials. This standard specifies requirements for dental polymer-based restorative materials supplied in a form suitable for mechanical mixing, hand-mixing, or intra-oral and extraoral external energy activation, and intended for use primarily for the direct or indirect restoration of cavities in the teeth and for luting.

The standard covers polymer-based luting materials intended for use in the cementation or fixation of restorations and appliances such as inlays, onlays, veneers, crowns and fixed partial prostheses.

- Proposed ANSI/ADA Standard No. 119 for Manual Toothbrushes will be a modified adoption of ISO 20126:2012 Dentistry-Manual Toothbrushes-General Requirements and Test Methods and ISO 22254:2005 Dentistry-Manual Toothbrushes-Resistance of Tufted Portion to Deflection and will revise and replace the current ADA Standard No. 119:2008. This standard describes requirements and test methods for the physical properties of manual toothbrushes in order to promote the safety of these products for their intended use. This standard also specifies a test method for determining the resistance of the tufted portion of manual toothbrushes to deflection. This test method is applicable to toothbrushes having a conventional, flat trim design and may not be applicable to toothbrushes with other designs.
- Proposed ANSI/ADA Standard No. 128 for Hydrocolloid Impression Materials will be an identical adoption of ISO 21563:2013 of the same name and specifies the requirements and tests for helping determine whether the elastic aqueous agar and alginate hydrocolloid dental impression materials, as prepared for retail marketing, are of the quality needed for their intended purposes. The standard also specifies requirements for labeling and instructions for use.



- Proposed ANSI/ADA Standard No. 136 for Products for Tooth Bleaching will be an identical adoption of ISO 28399:2011 of the same name and specifies requirements and test methods for external tooth bleaching products. The standard covers products intended for use in the oral cavity, either by professional application (in-office tooth bleaching products) or consumer application (professional or nonprofessional home use of tooth bleaching products), or both. The standard also specifies requirements for packaging, labeling and instructions for use.
- Proposed ADA Technical Report No. 1030 for Dental Providers Guide to the Electronic Dental Record will provide information for dentists about key concepts of the electronic dental record; what can be done with computer-based systems that cannot be done with paper-based, analog records; and implementation issues surrounding the computer-based oral health record.
- Proposed ADA Technical Report No. 1041 Content of Electronic Laboratory Prescription will provide guidelines for the format and content of patient data disseminated offsite to the outsourced dental laboratory. The paper explains security concepts and the risks associated with the maintenance of data in storage and transit and over an Internet connection. The dental laboratory needs to ensure a proper data integrity, storage and accessibility protection plan, which involves



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You may be at risk

May is Disability Insurance Awareness month

A disabling illness or accident that prevents a member from practicing dentistry is often a life-altering event with financial consequences that few are ever really prepared for.

May is Disability Insurance Awareness Month, and the ADA Council on Members Insurance and Retirement Programs-which oversees the ADA-sponsored Members Disability Income Protection and Office Overhead Expense Insurance Plans-wants members to be aware of the risk of disability.

"No matter what stage of your career—new or established—the inability to practice dentistry and a potential loss of future income is a risk not many seriously consider. Yet, it can happen to anyone—anytime. In fact, becoming disabled-even partially-is more common than one may think," said Dr. Robert

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Dr. Coleman

Coleman, CMIRP chair. According to Great-West Life & Annuity Insurance Co., underwriter and administrator of the ADA Members Insurance Plans, "1 out of 4 dentists will be disabled long enough to collect benefits at some point retirement." before

(Odds of disability determined by Great-West Life in 2013 after studying years of disability claims submitted by insured ADA members.)

The ADA Members Disability Income Protection Plan defines member value in its offering of best in class insurance protection at low cost, ADA member-only rates. Moreover, the ADA plan, designed exclusively for ADA members features a true "own occupation" definition of disability which means that if a member becomes unable to practice in his/ her area of dental practice, full benefits can be paid up until age 65, even if the dentist member chooses to work in another area of dental practice or enters a new occupation.

"Even temporary disabilities are enough to deplete a family's savings and change a dentist's financial outlook, which is why the Council on Members Insurance and Retirement Programs is raising awareness among its members, including new dentists and student dental members, of the risk of disability and the need for adequate insurance protection," said Dr. Coleman.

For younger dentists with student debt, a disability could prevent them from establishing a practice or limit their future earnings potential—which could be life changing after making a personal commitment and investment in a dental career.

The ADA dental student members are automatically eligible for the no-cost ADAsponsored Student Disability Insurance Plan, which provides a monthly income and student loan repayment benefits in the event of disability while completing their dental education, including residency programs. Additionally, upon graduation from dental school, ADA student members are eligible for automatic conversion, without medical underwriting, to the ADA Members Disability Insurance Plan for practicing dentists at ADA members-only premiums.

May is a good time of year to get focused on the importance of guarding against the risk of disability. Insurance is the cornerstone of a solid financial plan, and ADA dentist and student members have access to the best in class member products to protect against the risk of disability.

For information on the ADA Members Insurance Plans visit insurance.ada.org or call an insurance plan specialist at 1-866-607-5338. ■

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Standards

Continued from Page 20

creating, investing in and meticulously adhering to a well thought-out system, including proper archiving. The standard provides differing storage requirements by state for data.

Proposed ADA Technical Report No. 1043 for Use of Computer-based Resources for Access to Information Supporting Oral Health Care will assist dental practitioners in understanding how to effectively access and utilize digital and Web-accessible knowledge resources for professional development and to support clinical decision-making and patient education. These new technologies for publishing have made it possible for false or highly biased information to be readily accessible. It is important for health care providers and patients to be cognizant of potential pitfalls related to the spectrum of the quality and the potential for conflicts in information found online and to be able to effectively appraise it. This report provides examples of computer-based resources (Web-enabled and other digital resources) of interest to those involved in oral health care, and it discusses issues related to the searching and utilization of computer-based resources to facilitate the effective transfer of oral health knowledge.

Copies of the draft standards are available by calling the ADA toll-free number, ext. 2506, or sending an email request to standards@ada.org. To learn more about ADA standards committees, visit ADA.org/dentalstandards.

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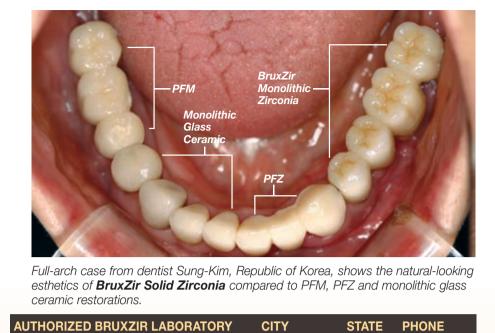
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Aronovitch Dental Laboratory	Owings Mills	MD	800-441-6647
Eliason Dental Lab			
Port City Dental Lab Inc.			
Artistic Dental Lab**			
Coulter Dental Lab			
D.H. Baker Dental Laboratory			
Davis Dental Laboratory			
Davison Dental Lab Dental Art Laboratories			
K & M Dental Lab			
LaDouce Dental Lab.			
Nelson Dental Laboratory	-		
Olson Dental Laboratory			
Spartan Dental Lab			
U.S. Dental Laboratories			
Xcel Dental Studio			
Boos Dental Laboratory			
Custom Crown Craft	-		
Dental Services Group			
Dimension Dental Design			
Excel Dental Studios Inc.			
Harrison Dental Studio			
Saber Dental Studio	.Brooklyn Center	MN	800-264-3903

results are looking even more impressive!



BruxZir Solid Zirconia has become the new high-strength, biocompatible option for fixed restorations, from single-unit crowns to full-arch implant-supported prostheses.



Caramics Dental Lab La Crescent.				
Trachsel Dental Laboratory	AUTHORIZED BRUXZIR LABORATORY	CITY	STATE	PHONE
Trachsel Dental Laboratory	Small Ceramics Dental Lab	La Crescent	MN	507-895-2307
Trachsel Dental Studio** Schoolseter MN 800-248-9943	Thoele Dental Laboratory	Waite Park	MN	800-899-1115
Webster Dental Laboratory Saint Paul MN 800-621-3350 Wormson-Polzin Dental Lab North Mankato MN 800-950-5079 Becker Dental Lab, Inc. Herculaneum MO 800-633-6931 Keller Laboratories, Inc.** Fenton MO 800-333-3063 Keller Laboratories, Inc.** Fenton MO 800-325-3065 Mallow-Tru Dental Studio Lee's Summit MO 800-325-8011 Stewart Dental Laboratory St. Louis MO 300-325-8011 Stewart Dental Laboratories Columbia MO 886-724-5509 Verch Dental Caramics Ellisville MO 888-868-3724 Oral Tech Dental Laboratory Pearl MS 800-321-8201 Western Dental Arts Billings MT 406-652-1652 Carolina Outsource Inc. Charlotte NC 704-814-0644 Drake Precision Dental Laboratory Charlotte NC 704-814-0644 Drake Precision Dental Laboratory Charlotte NC 800-475-771 Natural Ceramics Inc. Fayetteville N	Trachsel Dental Studio**	Rochester	MN	800-831-2362
Wormson-Polzin Dental Lab North Mankato				
Becker Dental Lab, Inc.	Webster Dental Laboratory	Saint Paul	MN	800-621-3350
Creative Dental Arts, Inc. Raytown MD 800-633-4083 Keller Laboratories, Inc.** Fenton MO 800-325-3056 Mallow-Tru Dental Studio Lee's Summit MO 800-344-3685 Midwest Dental Laboratory St. Louis. MO 800-325-8016 Stewart Dental Laboratory Ellisville MO .866-724-8010 Verch Dental Caramics Ellisville MO .866-724-8010 Western Dental Arts Billings MT .406-852-816 Western Dental Arts Billings MT .406-852-816 Western Dental Arts Billings MT .406-852-816 Western Dental Arts Roc. .704-814-0644 Drake Precision Dental Laboratory .704-814-0644 Drake Precision Dental Laboratory .704-814-0644 Drake Precision Dental Laborator .704-814-0644 Drake Precision Dental Laborator .704-814-0644 NC .800-476-2771 Matural Caramics Inc. Fagetteville NC .800-689-8020 Rearney NC .800-689-80736 Real Time Dental Lab Rocky Mount NC .80				
Keller Laboratories, Inc.**				
Mallow-Tru Dental Studio	Creative Dental Arts, Inc.	Raytown	MO	800-633-4083
Midwest Dental Laboratory				
Stewart Dental Laboratories				
Verch Dental Ceramics Ellisville MO 888-868-3724 Oral Tech Dental Laboratory Pearl MS 800-321-6201 Western Dental Arts Billings MT 406-652-1652 Carolina Outsource Inc. Charlotte NC 704-814-0644 Drake Precision Dental Laboratory Charlotte NC 800-476-2771 Natural Ceramics Inc. Fayetteville NC 910-425-8296 Real Time Dental Lab Rocky Mount NC 807-630-4770 Sirona InfiniDent Charlotte NC 800-659-5977 The Freeman Center Stallings NC 800-659-567636 Integrity Dental Arts Kearney NE 308-659-2200 Kiess Kraft Dental Laboratory Omaha NE 800-553-9522 Kiess Kraft Dental Laboratory Morth Brunswick NJ 800-543-4312 Excel Berger Dental Laboratory North Brunswick NJ 800-433-3334 Laxin Dental Lab USA Inc. Iselin NJ 732-372-4412 Ceratek Dental Laboratory Roswell NM				
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Abel Dental Laboratory				
Albensi Laboratories**				
DeLux Dental Laboratory	Abel Dental Laboratory	Uniontown	PA	800-524-1106
Dental Services Group of PittsburghPittsburghPAPA800-322-7080				
	Dental Services Group of Pittsburgh	Pittsburgh	PA	800-322-7080

AUTHORIZED BROXZIN LABORATORT	OHI	SIAIL	PHONE
Innovative Dental Arts	North Huntingdor	1PA	866-305-543
Maverick Dental Laboratories			
Muth & Mumma Dental Laboratory			
Newtech Dental Laboratories			
Shu Dental Laboratory, Inc			
Thayer Dental Laboratory			
Windl Dental Laboratory	New Castle	PA	800-645-457
Sherer Dental Laboratory	Rock Hill	SC	800-845-111
Associated Dental Lab Inc	Rapid City	SD	605-343-743
Bauer Dental Studio			
Dental Prosthetics Lab			
Hermitage Dental Lab			
Peterman Dental Laboratory			
Rogers' Dental Laboratories			
Affordable Cosmetic Laboratories	Arlington	TX	860-258-067
C & J Dental Lab	El Paso	TX	915-564-380
Concert Dental Lab	Richardson	TX	800-449-351
Crystal Dental Ceramics	Richardson	TX	972-680-166
Dale Dental, Inc.**	Richardson	TX	888-438-325
Dental Dynamics Laboratory Inc	Arlington	TX	800-640-811
Mascola Esthetics	San Antonio	TX	877-490-553
MDA Studio, Inc			
Natural Arts Dental Laboratory			
Oral Designs Dental Laboratory, Inc.**			
PCB Dental Lab			
Rose Dental Laboratory			
Stern Empire Dental Laboratory	Houston	TX	800-229-021
Stern Reed Associates Dental Laboratory			
Stern Tyler Dental Laboratory			
Accudent Dental Lab			
Crown Laboratories Inc.			
Crystarr Dental Design	Salt Lake City	UT	800-343-248
Epic Dental Studios**	American Fork	IIT	801-756-111
Evolution Dental Studio			
Swift Lab			
Treasure Dental Studio			
Via Digital Solutions			
Art Dental Lab			
Marine Dental Lab			
NexTek Dental Studios			
The Point Dental Studios			
Choice Dental Laboratory			
Pacific Dental Arts			
Ziemek Aesthetic Dental Lab			
Gessler's Dental Laboratory			
Lord's Dental Studio			
Nakoma Dental Laboratory			
Saber Dental Studio			
Winnebago Dental Lab			
Midtown Dental Laboratory			
Standard Dental Laboratory			
Fincher/Butler Dental Laboratory	South Charleston	ı WV	800-225-469
INTERNATIONAL LABS SERVICING THE U.S.			
Smith-Sterling Dental Laboratories**		. Costa Rica	800-479-520
EPS Dental Studio			
Pacific Edge Dental Laboratories**			

Pacific Edge Dental Laboratories**Baja California Mexico...... 800-889-9323



\$387,093.50 total care provided



2,835 procedures including:

752 Exams

553 Surgical procedures

393 Fillings

270 Cleanings

269 Medications delivered

266 X-rays

205 Fluoride treatments

50 Partials

35 Sealants

17 Endodontic procedures

8 Denture repairs

7 Add teeth to prosthetic

5 Upper and

3 Lower dentures

1 Enamelplasty

1 Palliative (emergency) treatment of dental pain







Select photos courtesy of EZ Event Photograph

Thanks from patients:

"I am so thankful for the services and friendliness of everyone here. It went fast and smoothly. Everyone was professional and knowledgeable. Very generous of you all. May God bless you all." — Cindy, New Orleans, LA

"This was a great experience. Everyone was so professional and helpful. I felt respected and safe. I wish I had this experience early in life. Most dental experiences terrified me. Thanks for this clinic!"

— June, Gray, LA

"This was wonderful. To see so many people getting helped by all these dentists from all over the country. Getting to meet and talk to them was exciting. I was helped with a teeth cleaning and referred for more help. This was a blessing for many people. Thanks so much all of you."

— Gail, New Orleans, LA

Thanks to CareCredit for supporting GKAS at the MOM Event:

"Give Kids A Smile has accomplished great things. Not only have we connected with underserved children across the country, encouraging them to brush, floss and take care of their teeth, we've also aligned GKAS with amazing partners like those involved with this national MOM program. The past GKAS events have been educational and inspiring. CareCredit is pleased, as the Founding Donor of the ADA Foundation GKAS Fund, to be able to help the ADA's GKAS Program continue to positively impact children's oral health and lives.

Cindy Hearn
 Sr. Vice President Branding & Communications,
 CareCredit



Funding in part by a grant from the ADA Foundation.

ADA American Dental Association® Mission of Mercy

Watch the video: ADA.org/action.

Be a part of the 2014 MOM volunteer experience in San Antonio on October 12! Visit ADA.org/MOM for details.

Products

Continued from Page 1

your practice, your staff and your patients.

That journey begins in this issue with a look at the work of Product Development & Sales, a department within the Publishing Division, headed by Michael Springer, publisher and senior vice president for Business and Publishing. The division also manages The Journal of the American Dental Association and ADA News, and is a major contributor to the Association's website.

Nine PDS staff members, including Senior Director Heather Burns, produce and maintain an ever-evolving, frequently updated cache of more than 500 products in three broad categories: professional resources, patient education and "personalized" products that bear the dentist's name. All products are described in the ADA Catalog (available online at adacatalog.org) and are offered to member dentists at substantial discounts.

"ADA Catalog products focus on the areas that mean the most to members—from practice management information to patient education," says Mr. Springer.

Staff learned in May that three PDS products had earned EXCEL Awards from Association Media & Publishing, a trade group managing "the largest and most prestigious awards program that exclusively recognizes excellence and leadership in nonprofit media," as a news release on the awards declares.

The ADA's winning entries, among 960 submissions from 110 organizations, included:

- The 2014 ADA Annual Catalog (Gold EXCEL);
- The ADA Practical Guide to Dental Office Design (Gold EXCEL);
- The ADA Practical Guide to Dental Letters: Write, Blog and Email Your Way to Success (Silver EXCEL).

The patient education materials PDS offers include 67 brochures designed for dentists to use in discussing dental care and procedures with patients. How those brochures are updated and maintained exemplifies how all PDS materials are managed year-to-year to keep them current.

Carolyn B. Tatar, senior manager, Product Development, notes that all patient brochures are evaluated and updated every three years.

"Products are added and subtracted as demand and topics change," she says. "We have streamlined the product line over the years.

Earning awards for excellence

Product Development & Sales, a department within the ADA Publishing Division, was notified this month that three of its leading publications had earned awards from Association Media & Publishing, a trade group for association publishing.

The EXCEL Awards bestowed on ADA products include two gold and one silver.

- The 2014 ADA Annual Catalog
- The ADA Practical Guide to Dental Office Design (Gold):
- The ADA Practical Guide to Dental Letters: Write, Blob and Email Your Way to Success (Silver).

The ADA winning entries were among 960 submissions from 110 organizations.

New topics are added as members point out what they need and what we don't have."

In the interim between revisions, all feedback from members is tracked in the ADA's Aptify database.

fore a brochure is revised, PDS seeks input from a panel of member dentists identified as high-volume users and representing a cross-

section from ADA districts. The panel also receives a copy of the original brochure for re-

"We get a lot of feedback from the panel, especially about how we can improve the images to make

them more scientifically accurate," says Ms. Tatar.

A brochure under scrutiny also is sent for

review to the ADA councils of Scientific Affairs, Dental Practice and, when appropriate, Access, Prevention and Interprofessional Re-

With input from users, the member panel and the councils, the brochure manuscript then goes to a researcher charged to update it as needed. Once required changes are made, ADA staff scientists and dentists, as well as appropriate specialty organizations, give the manuscript a final review.

Among its many products on the professional side, PDS is helping the ADA members engage in the electronic age. The department offers a wide range of digital products,

See PRODUCTS, Page 28



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ADA HIPAA kit helps practices adhere to federal laws, regulation

Having the right tools when it comes to the Health Insurance Portability and Accountability Act can make the difference between toeing the line and big trouble. The ADA Complete HIPAA Compliance Kit can help save practices a lot of legal drama.

The ADA Complete HIPAA Compliance Kit (J598) has three key products and a service that support a comprehensive HIPAA compliance program:

- The ADA Practical Guide to HIPAA Compliance: Privacy and Security Manual;
 - The ADA Practical Guide to HIPAA

Training

• A three-year subscription to the HIPAA Compliance Update Service.

Included in the kit, The ADA Practical Guide to HIPAA Compliance: Privacy and Security Manual outlines privacy, breach notification and security compliance in a step-by-step format. In CD-ROM format, the practical guide contains a revised sample Business Associate Agreement; a revised sample of Notice of Privacy Practices; a sample policies and procedures; sample forms designed especially for dental practices; and a

glossary of key terms.

The ADA Practical Guide to HIPAA Training also comes with the kit. It is a CD-ROM that features two levels of training. Level 1 targets dental office per-

sonnel with the basics of HIPAA compliance. Level 2 targets managers to help them develop and implement a HIPAA compliance program for their offices.

The practical guide enables those who use

them to earn one hour of continuing education credit for Level 1 and two hours of CE credit for Level 2.

The three-year subscription to the HIPAA Compliance Update Service advises subscribers whenever federal HIPAA laws change.

The ADA Complete HIPAA Compliance Kit (J598) is \$300 for members. Retail price is \$450. Use promo code14126 to receive a \$50 savings on the kit through June

Visit ADAcatalog.org or call 1-800-947-4746 to order. ■



October 9-14 · San Antonio

Education: October 9-12 • Exhibition: October 9-11 House of Delegates: October 10-14



Register now! Visit ADA.org/meeting

Leading resources for dentists

The top 10 professional resources available through the ADA Catalog (adacatalog.org) include:

- Dental Therapeutics online;
- CDT 2014 Kit;
- ADA Practical Guide to Dental Letters: Write, Blog and Email Your Way to Success;
- The ADA Practical Guide to Expert Business Strategies: Advice from Top Dental Consultants:
- The ADA Practical Guide to Effective Infection Control;
- The ADA Complete HIPAA Compliance Manual;
- The Complete OSHA Compliance Kit;
- The Practical Guide to Valuing a Practice: A Manual for Dentists;
- The Practical Guide to Associateships: Success Strategies for Dentistowners and Prospective Associates;
- \bullet The Practical Guide to Dental Office Design. \blacksquare

Products

Continued from Page 27

including a digital sixth edition of the ADA/ Physicians Desk Reference [to] Dental Therapeutics—which replaced the 1,000-page print edition.

For dentists just starting out, ADA offers a New Dentist Kit providing, as noted in the catalog, a guide to "all the critical components of establishing a successful practice, from HIPAA and OSHA compliance and training to developing an employee office manual with consistent rules and policies."

Increasingly popular are e-books—down-loadable to office or home computers, iPads and iPhones—exploring professional topics from dental therapeutics codes to practice management and more.

Also available are apps for electronic devices on the 2014 CDT Codes; The Chairside Instructor, a visual guide to case presentations; and Toothflix, a patient-education video tool.

"Central to the ADA's mission is helping dentists establish and maintain successful practices that serve their patients well," said Mr. Springer. "By offering products that address both professional and patient needs, PDS plays a key role in that effort."

—berryj@ada.org

50th meeting of young scientific minds puts spotlight on dental research

BY JEAN WILLIAMS

Gaithersburg, Md.—The 50th Annual Dental Students' Conference on Research attracted 39 dental students April 13-15 to the ADA Foundation Dr. Anthony Volpe Research Center and the Bethesda North Marriott Hotel & Conference Center. Colgate-Palmolive Co. cosponsored the conference with the ADA Foundation. The three-day event opened with a welcome reception followed by a dinner where Dr. Volpe was guest speaker.

The students traveled from across the U.S. and Canada to hear from scientists and researchers from the VRC, the ADA, academia, the National Institute of Standards and Technology, the National Institute of Dental and Craniofacial Research and the oral health industry.

Among the prominent speakers who addressed the students were: Sheng Lin-Gibson, Ph.D., deputy chief, Biosystems and Biomaterials Division Leader, Biomaterials Group, Materials Measurement Laboratory, NIST; Dr. Amid Ismail, dean, Maurice H. Kornberg School of Dentistry, Temple University; Dr. Mary P. Walker, associate dean for research and graduate programs, School of Dentistry, University of Missouri-Kansas City and an ADA Foundation board member at large; Dr. Teresa A. Dolan, vice president and chief clinical officer, DENTSPLY International; and ADA Executive Director Kathleen O'Loughlin.

ADA Foundation Executive Director Gene Wurth, ADA Foundation President David A.

director of administration, also were on hand to welcome the students and learn about their individual research projects.

Presenters from among the ADAF Volpe Research Center team included Woitek Tutak, Ph.D.; Nancy Lin, Ph.D.; Daneli Lopez-Perez, Ph.D.; Diane Bienek, Ph.D.; and Dr. Jeffrey Kim, Ph.D.

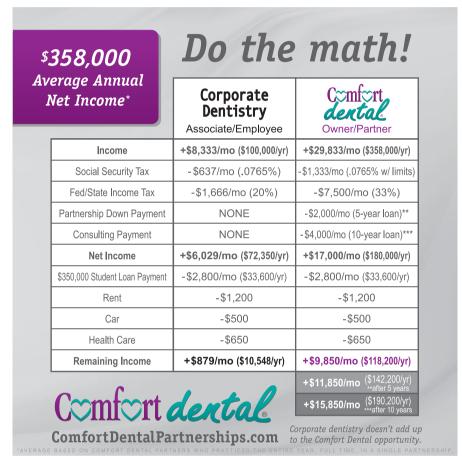
Every dental school in the U.S. and Canada

is invited annually to select a student representative to send to the Dental Students' Conference on Research. These students are either actively involved in a research project or have expressed interest in pursuing a career in research. Some participants presented results of completed research projects and engaged in a discussion of their research, presented as posters, at the conference.

—williamsj@ada.org



Meeting of the minds: Student researchers Sarah Baxter and Lindsey Fox discuss Ms. Baxter's poster presentation Metabolic and Markers of Caries in Saliva and Plaque of Toddlers at the 50th annual Dental Students' Conference on Research. Ms. Baxter is a dental student at University of Michigan School of Dentistry.



DGPA announces name change

Denver—The Dental Group Practice Association, a nonprofit industry association representing more than 30 dental support organizations, announced May 13 that it changed its name to the Association of Dental Support Organizations.

The organization made the name change to better emphasize its mission and focus to support DSOs, said Dr. Quinn Dufurrena, ADSO executive director.

ADSO provides support to affiliated dental practices with nonclinical functions, including accounting, human resources, legal and marketing. DSOs also help improve practice efficiency, according to ADSO.

"Our mission is to provide world-class business and technology support services to dentists, a partnership that lets dentists focus on what they do best, which is serving their patients," Dr. Dufurrena said.

Today, through the DSOs the group represents, ADSO supports an estimated 7,000 dentists who operate in about 4,000 dental practices.

For more information on ADSO and the DSO model, visit theadso.org.

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* Based on food particle migration vs. no adhesive (1) TNS Info Plan, Usage and Attitude Study, Japan 2009. (2) Chapman Group, Denture care quality of life research; Canada 2005. (3) The Use of Soluble Denture Adhesives to Prevent Food Particles From Becoming Trapped Under Full Upper and Lower Dentures, Study L3920658, 2010. (4) A Study of Denture Adhesives in Well-Fitting Dentures, Study L3510566, 2008.

Dentist takes personal crusade to the next level

ADA policy supports dentist involvement in bone marrow registry drives

BY STACIE CROZIER

Grand Rapids, Mich.—Dr. Steven Conlon has been fighting for those with leukemia or lymphoma since he lost his father-in-law, Dr. Thomas A. Bowles, to acute myeloid leuke-

Dr. Bowles, a general dentist in Flint, Michigan, died before he could receive a bone marrow transplant.

Since then, Dr. Conlon's involvement has grown from fundraising in his practice and his community to spearheading bone marrow donor drives in a statewide program sponsored by the Michigan Dental Association, and even helping launch similar programs in Georgia and New York.

'Shortly after my father-in-law died, I learned I had a patient with the same disease, and he survived because he received a bone marrow donation," Dr. Conlon said. "I learned more about bone marrow donation and found it would be pretty easy to have dentists register potential donors right in their own offices.'

Dr. Conlon pitched his idea to the Michigan Dental Association. In drives held in May 2012 and November 2013, dentists participating in the "Take A Bite Out of Cancer" program registered more than 3,000 potential donors, resulting in seven lifesaving transplants to date—a statistic Dr. Conlon says is unusually high. The MDA program was conducted in cooperation with Delete Blood Cancer DKMS with support from The Leukemia & Lymphoma Society of Michigan.

"When Dr. Conlon approached the MDA about getting involved with a bone marrow drive through dental offices, we immediately thought it was a good fit for our members," said Dr. Marty Makowski, MDA president. "What better way to educate the public and our patients about the importance of becoming a part of the bone marrow registry than through dental offices? It was a natural fit."

In 2012, the ADA House of Delegates



In-office drive: Jennifer Pohlman hands off her oral swab to Dr. Steve Conlon in Grand Rapids, Mich., for submission to become a registered bone marrow donor.

passed a resolution encouraging patients to participate in bone marrow matching pro-

Resolution 162H-2012 states "that the ADA urges members to support participation in the bone marrow matching program by providing appropriate literature in their offices, gathering samples and forwarding them for registration.

Since it isn't necessary for a medical or dental professional to conduct the swabbing, dentists can also encourage patients to obtain kits, swab their own cheeks and mail the samples and information to a bone marrow

The process is simple, Dr. Conlon said. Dentists can sign up on Delete Blood Canwebsite (DeleteBloodCancer.org/ Dental) to participate. The organization will provide complete registration materials (with instructions, swabs and return labels) and support to participating dentists' offices.

Dentists also receive simple talking points and educational materials they can use to explain the process to their patients. Office staff can walk patients through the registration form and cheek swab and return completed forms and swabs to Delete Blood Cancer for typing.

"According to the Leukemia and Lymphona society, there are 1.5 million people in the U.S. living with or in remission from a form of blood cancer," Dr. Conlon said. "The response in Michigan has been wonderful. Swabbing a patient is easy to incorporate into a hygiene visit. Dentists can really make a difference and save lives because the majority of patients they see are in the target ages of donors, ages 18-55. Blood cancer patients who need transplants only have about a 25 percent chance that a related sibling is a match, so they depend on worldwide registries to find a life-saving match."

Increasing the donor base is even more critical for population groups that are under-



Advocating: Rep. Gail Haines, R-Waterford, Mich., chair, House Health Policy Committee, swabs her cheek to register as a bone marrow donor during a 2013 news conference in the Michigan Capitol to kick off the Michigan Dental Association bone mar-

represented in donor registries, Dr. Conlon said. According to the National Marrow Donor Program, minority donors are particularly needed. The make-up of the national registry is 67 percent Caucasian, 10 percent Hispanic/Latino, 7 percent African-American, 7 percent Asian, 4 percent multi-ethnicity, 1 percent Native American / Alaskan Native and 0.2 percent Native Hawaiian/other/Pacific

Cheek swab samples are typed to determine their unique Human Leukocyte Antigen profile, and physicians can search these profiles to identify a possible match for patients who don't have a compatible donor in their family.

'Very few registered individuals are ever called on to donate their bone marrow." Dr. Conlon added. The odds of being contacted for a medical workup for a potential donation are less than 1 percent. Registrants who do end up donating may be asked to do so via two methods: the peripheral blood stem cell donation method uses a machine to extract blood from one arm, separate out the stem cells and return the blood to the other arm, while the surgical method uses a special syringe to extract bone marrow from the back of the pelvic bone.

"It was incredibly gratifying to know that we made a difference," said Dr. Makowski. "As a result of our two campaigns, seven bone marrow transplants were facilitated. It's nice to know that we had a major impact on the lives of people in need.'

"I was surprised to see how easy it was to get patients in Michigan to participate," Dr. Conlon said. "Patients trust us and they are happy to get behind a program that could save lives. My goal is to take this program nationwide."

This month, the Georgia Dental Association and the New York State Dental Association are also conducting statewide bone marrow donor drives in their members' offices.

"We are proud to partner in a campaign to save lives," said Dr. Marshall Mann, GDA president. "Dentists are on the forefront of detection and prevention for a wide range of health concerns. This partnership between

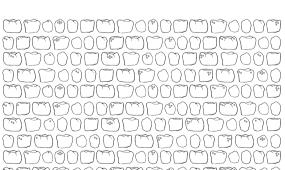


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References: 1. Bartlett DW et al. J Dent 2013; doi.org/10.1016/j. dent.2013.08.018. [Epub ahead of print]. 2. Bartlett DW et al Clin Oral Invest 2008; 12(Suppl 1): S65-S68



[∞] Tooth wear



May 28 is **World Blood Cancer Day**

New York—Delete Blood Cancer DKMS will mark the debut of World Blood Cancer Day on May 28. The aim of the observance is to have an international day of awareness and action against blood cancers and blood disorders for more than 14,000 U.S. patients annually seeking a matching donor outside their family.

Delete Blood Cancer DKMS was founded in the U.S. in 2004 and is the U.S. arm of DKMS, the German bone marrow donor center. A family whose search for a donor inspired 68,000 people to register in just one year started DKMS. Today, Delete Blood Cancer and DKMS make up the world's largest bone marrow donor center with branches around the globe that have registered more than 4 million donors and provided more than 40,000 patients with lifesaving transplants.

In the U.S., Delete Blood Cancer has registered more than 500,000 potential donors and facilitated just over 1,500 life-saving transplants.

The inaugural World Blood Cancer Day will include a donor registration drive in New York City, art competitions, social media efforts all focused on elevating information and dispelling misconceptions about what everyone can do to delete blood cancer.

Visit deletebloodcancer.org/ worldbloodcancerday for more details.

Bone marrow

Continued from Page 30

the GDA and Delete Blood Cancer DKMS will highlight the relationship between oral health and overall health and the important role dentists play as health care providers. We know that Georgia dentists are health care professionals who care. This campaign will help us underline that fact."

NYSDA extended its member registration period due to increasing interest, with more than 50 offices responding by the end of April. Throughout May and June, participating dental offices will offer interested patients the opportunity to self-swab and register as potential bone marrow donors.

'We are excited and proud to partner with Delete Blood Cancer DKMS to register dental patients as potential bone marrow donors for people diagnosed with blood cancers," said Dr. Joel M. Friedman, NYSDA president. "A number of NYSDA members, some touched by relatives and friends with blood cancers, had themselves registered as potential bone marrow donors. Building on the experience of the Michigan Dental Association, we are hopeful that participation in this program will grow and result in an increased availability of bone marrow donors to aid in combatting these insidious diseases."

For more information on how dentists and dental societies can get involved, visit deletebloodcancer.org.

–croziers@ada.org



NYU raises nearly \$62,000 for oral cancer research

BY STACIE CROZIER

New York-More than 875 walkers, including oral cancer survivors and their families, dental and nursing students, residents and faculty of New York University Colleges of

See ORAL CANCER, Page 33

Spanning the bridge: Hundreds of participants cross the Williamsburg Bridge into Brooklyn, N.Y., during the 2014 NYC Oral Cancer Walk, April 27.



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- ADA by State provides information on specific state and local dental societies.
- New interactive Action for Dental Health map shows state-by-state information on the Action for Dental Health movement.

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States, communities receive fluoridation awards

BY STACIE CROZIER

Fort Worth, Texas-In honor of 69 years of community water fluoridation, the ADA, the Association of State and Territorial Dental Directors and the Centers for Disease Control and Prevention honored 130 states and communities with 2013 Fluoridation Awards at the National Oral Health Conference April 29 at the Omni Fort Worth Hotel.

Storm Lake, Iowa; Hounsfield Water District No. 5, New York; and Bradford, Vermont, were recognized with Community Fluoridation Initiative Awards for passing water fluoridation initiatives during 2013.

Another 30 communities in 13 states received Fluoridation Reaffirmation Awards for defeating initiatives to discontinue fluoridation or approving initiatives to maintain fluoridation, including: Anchorage, Alaska; Brooksville, Florida; Davenport, Des Moines and Hampton, Iowa; Duxbury, Templeton and Woodland, Massachusetts; Columbia and Forsyth, Missouri; Santa Fe, New Mexico; Delhi Village, Lyndonville Village, Springvillle Village, Walden Village and Yorktown Village, New York; Durham, Graham Mebane Water System, Orange Water and Sewer Authority and Raleigh, North Carolina; Scappoose and The Dalles, Oregon; Tyrone, Pennsylvania; South Blount County Utilities District, Tennessee; Clarksburg, Keyser and Martinsburg, West Virginia; and Holmen, St. Croix Falls and Waupaca, Wisconsin.

California received the State Fluoridation Initiative Award as the state having the greatest increase in population receiving fluoridated water in 2013.

Arkansas, Delaware, Illinois, Indiana, Massachusetts, Maine, Rhode Island, Nevada and West Virginia received State Fluoridation Quality Awards for maintaining the quality of fluoridation and optimal fluoride levels.

Eighty-five water systems in 29 states received Fifty Year Awards for achieving 50 years of continuous water fluoridation during the past calendar year, including: Lafayette Water Works, Alabama; Arkadelphia Waterworks, Arkansas; Cal-American Water Company (Rosemont), California; FKAA Florida City Plant and Fort Pierce Utilities Authority, Florida; Douglas, Gwinnet County and Waynesboro, Georgia; Audubon Water Supply, Bancroft Water Supply, Burlington Municipal Water Works, Independence Water Department, Lamoni Municipal

Supplies, Monticello Water Supply and Villisca Municipal Water Department, Iowa; Citizens River Grange Division, McHen-Pittsfield, Potomac and Rock Island, Il-



linois; Anderson Water Department, Evansville Water Utility and Richmond-Indiana American Water Company, Indiana; Jackson Municipal Water Works, Lebanon Water Works Company, Morgantown Water System and Paris Water Works, Kentucky; Bar Harbor Water Division, Bridgton Water District and Old Town Water District, Maine; Bowie, Maryland; Fenton, Harbor Springs and Lansing Board of Water & Light, Michigan; Aitkin, Excelsior, Marshall and Northfield, Minnesota; City of Cleveland and Town of Union, Mississippi; Clinton, Hayti, Jefferson City, Marceline and Savannah, Missouri; Willingboro Municipal Utilities Authority, New Jersey: City of Batavia and City of Jamestown. New York; Eden City, Elizabeth City, Monroe, Roxboro and Sanford, North Carolina; Velva, North Dakota; City of Logan and City Company and Lubeck Public Service District; West Virginia; and Albany, Brooklyn, Durand, Frederic, Jefferson, North Freedom, Park Falls Waterworks and Plain, Wisconsin.

The Tampa Bay Times and Pinellas County Dental Association, Upper Pinellas County Dental Association and Pinellas County Oral Health Coalition received Fluoridation Merit Awards for their efforts to reinstate fluoridation in Pinellas County, Florida, after county commissioners voted to stop fluoridating in 2011. The Tampa Bay Times received a Pulitzer Prize last year for their pro-fluoridation editorials and the local dental associations and oral health coalition were instrumental in mounting a grassroots effort to bring fluoridated water back to almost 1 million people in the county.

of Upper Sandusky, Ohio; Pennsylvania-American Water Company Montrose, Pennsylvania-American Water Company Moshannon and West Manchester Township Municipal Authority, Pennsylvania; City of North Augusta and City of Seneca, South Carolina; Franklin, Humboldt and Livingston, Tennessee; Bell County Water Control & Improvement District No. 1 and Temple, Texas; Proctor Water Department, Vermont; Town of Front Royal, Town of Salem, City of Staunton and Town of Wytheville; Virginia; Anacortes, City of Battle Ground Water Department, Raymond Water Department and Vancouver, Washington; Beckley Water

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Abstracts sought for national domestic violence conference

Washington—The 7th Biennial National Conference on Health and Domestic Violence is planned for March 19-21 at the Renaissance Washington, D.C. Downtown Hotel, and planners are currently seeking abstracts from health professionals, advocates, health policy leaders and more.

The call for abstracts is open from now until June 27.

The conference provides professional education on the latest health research, practice, policy, prevention and advocacy responses to domestic and sexual violence in the U.S. and around the world. The ADA is a co-chair for the conference.

The conference attracts the nation's leading medical, public health and family violence experts from across the U.S. and around the globe. Workshops, scientific

WITHOUT VIOLENCE

posters, and plenary sessions highlight the latest research and most innovative clinical responses to domestic violence, with a focus on the work being done by dentists, physicians, physician assistants, nurses, nurse midwives, mental and behavioral health providers, social workers, domestic violence experts, researchers and others. The conference includes an exhibit hall to feature local and national resources.

Conference planners seek abstracts that highlight health research reports, practice innovations, advocacy initiatives, educational advances, and/or community programs that address one or more aspects related to domestic/sexual violence in the U.S. and around the world. This includes adolescent relationship abuse and other forms of violence that overlap with D/SV, including child abuse and trauma, trafficking and bul-

The Conference is a program of Futures Without Violence's National Health Resource Center on Domestic Violence. The Center is funded by a grant from the Family Violence Prevention & Services Program, Family & Youth Services Bureau, Administration for Children and Families, U.S. Department of Health and Human Services.

For more information and to submit an abstract, go to futureswithoutviolence.org/ nchdv. ■

Oral cancer

Continued from Page 31

Dentistry and Nursing participated in New York City's Ninth Annual Oral Cancer Walk April 27 to raise awareness of oral and pharyngeal cancer, a disease that kills over 8,000 American men and women each year.

This year's inter-borough walk took a record number of walkers on a four-mile route over the Williamsburg Bridge from Tompkins Square Park in Manhattan to Bushwick Inlet Park in Brooklyn. Participants raised nearly \$62,000 for the Oral Cancer Foundation, a national public service, nonprofit entity designed to reduce suffering and save lives through prevention, education, research, advocacy and patient support activities.

"We are pleased to announce that we exceeded our \$60,000 goal," said Jacqueline F. Green, NYC Oral Cancer Walk 2014 co-chair and NYU College of Dentistry D.D.S. candidate, 2014. 'Special thanks to some of our top fundraisers: Dr. Ivy Peltz, Candace Lee, the Saving Smiles Charity event and our winning clinic, Peltz and Associates, which raised over \$19,000. And, special thanks to our two speakers who are oral cancer survivors, Natalie Carillo and Eva Gravzel. Your stories are inspirational and by sharing them, you have helped to benefit others.

The Smiling Faces, Going Places dental van offered free oral cancer screenings, provided by NYU College of Dentistry students and faculty with the assistance of the Bronx-Lebanon Hospital Center team. More than 30 people had oral cancer screenings during the event.

"The OCF channels the walk's donations into worthy research projects with meaningful results," said Dr. Alexander R, Kerr, NYU College of Dentistry Oral Cancer Walk chair. "As an example, the work of Dr. Maura Gillison, a major research force behind the discovery of the association between HPV 16 and oropharyngeal cancer, has been funded by the OCF. It is inspirational to see how Khadine Alston, a senior dental student in 2005, began it all, and now Jackie Green and Yelena Lange are passing on the torch again. Our wonderful students are to be congratulated for their dedication and activism; it is across the span of their collective careers that they will surely make a difference in the fight against oral cancer." •



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INDUSTRY Watch

News from the dental industry

3M ESPE earns accolade, appoints new leader

St. Paul, Minn.—3M ESPE is celebrating an industry award for innovation and a new president and general manager.

For the ninth consecutive year, 3M ESPE won recognition from the Anaheim Group as the most innovative company in the dental industry worldwide. The Anaheim Group published the recognition, based on new product approvals and international patents, in the 2013 Dental Industry Review. 3M ESPE earned 63 new product approvals and international patents in 2013, including two new product



clearances for the U.S. market, 36 U.S. patents, and 25 patents from the European Patent Office and the World Intellectual Property

Mr. Ingebrand

Organization. Also, 3M ESPE Dental appointed

James Ingebrand as its new president and general manager, responsible for the strategic direction and overall operations of 3M ESPE. In his 30-year career with 3M, Mr. Ingebrand has focused on health care, including dental. His previous positions within 3M include roles as president and general manager of 3M Drug Delivery Systems, global business director for 3M ESPE Dental and as the marketing director for the 3M Infection Prevention Division.

Mr. Ingebrand started his career at 3M in 1984 as a marketing analyst in the Corporate Marketing Research Department.

Ormco raises money for orthodontic foundation

Orange, Calif.—Ormco Corporation raised more than \$275,000 over the past four years to help the Smile for a Lifetime Foundation provide free orthodontic care to young patients in need.

Ormco Corporation manufactures and provides advanced orthodontic and technology. The company hosted Smile for a Lifetime Foundation's Smilent Aunction at its annual Damon Forum in Phoenix. where more than 1,100 orthodontists gathered to learn about the latest advancements in orthodontic treatment.

Ormco is a primary sponsor of the Smile for a Lifetime Foundation and provides free brackets to orthodontists who award and treat the foundation's scholarship recipients.

The Smile for a Lifetime Foundation also receives donations of cash, services and products from more than 20 other orthodontic businesses and organizations.

In the last five years, S4L chapters have donated more than \$1.8 million in orthodontic services to awarded scholars in North America.

S4L will provide orthodontic scholarships to 1,200-1,500 children this year. \blacksquare

Zimmer to acquire Biomet

Warsaw, Ind.—Zimmer Holdings Inc. will acquire Biomet Inc. in a cash and stock transaction valued at about \$13.4 billion, including the assumption of net debt, the companies announced.

The transaction, which is subject to cus-

tomary closing conditions and regulatory approvals, is expected to close in the first quarter of 2015.

The combined company is expected to deliver growth by offering a more comprehensive portfolio of solutions with enhanced cross-selling opportunities. In addition, the combined company is expected to advance innovation to benefit health care stakeholders, and stockholders are expected

to benefit from a more diversified and predictable revenue mix consistent with the comprehensive portfolio.

Upon closing, the transaction is expected to be double digit accretive to Zimmer's adjusted diluted earnings per share in the first year. Cash flows from operations are expected to increase by 1.5 times Zimmer's standalone estimates.

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May 28 is **World Blood Cancer Day**

New York—Delete Blood Cancer DKMS will mark the debut of World Blood Cancer Day on May 28. The aim of the observance is to have an international day of awareness and action against blood cancers and blood disorders for more than 14,000 U.S. patients annually seeking a matching donor outside their family.

Delete Blood Cancer DKMS was founded in the U.S. in 2004 and is the U.S. arm of DKMS, the German bone marrow donor center. A family whose search for a donor inspired 68,000 people to register in just one year started DKMS. Today, Delete Blood Cancer and DKMS make up the world's largest bone marrow donor center with branches around the globe that have registered more than 4 million donors and provided more than 40,000 patients with lifesaving transplants.

In the U.S., Delete Blood Cancer has registered more than 500,000 potential donors and facilitated just over 1,500 life-saving transplants.

The inaugural World Blood Cancer Day will include a donor registration drive in New York City, art competitions, social media efforts all focused on elevating information and dispelling misconceptions about what everyone can do to delete blood cancer.

deletebloodcancer.org/ worldbloodcancerday for more details.

Bone marrow

Continued from Page 30

the GDA and Delete Blood Cancer DKMS will highlight the relationship between oral health and overall health and the important role dentists play as health care providers. We know that Georgia dentists are health care professionals who care. This campaign will help us underline that fact."

NYSDA extended its member registration period due to increasing interest, with more than 50 offices responding by the end of April. Throughout May and June, participating dental offices will offer interested patients the opportunity to self-swab and register as potential bone marrow donors.

'We are excited and proud to partner with Delete Blood Cancer DKMS to register dental patients as potential bone marrow donors for people diagnosed with blood cancers," said Dr. Joel M. Friedman, NYSDA president. "A number of NYSDA members, some touched by relatives and friends with blood cancers, had themselves registered as potential bone marrow donors. Building on the experience of the Michigan Dental Association, we are hopeful that participation in this program will grow and result in an increased availability of bone marrow donors to aid in combatting these insidious diseases."

For more information on how dentists and dental societies can get involved, visit deletebloodcancer.org.

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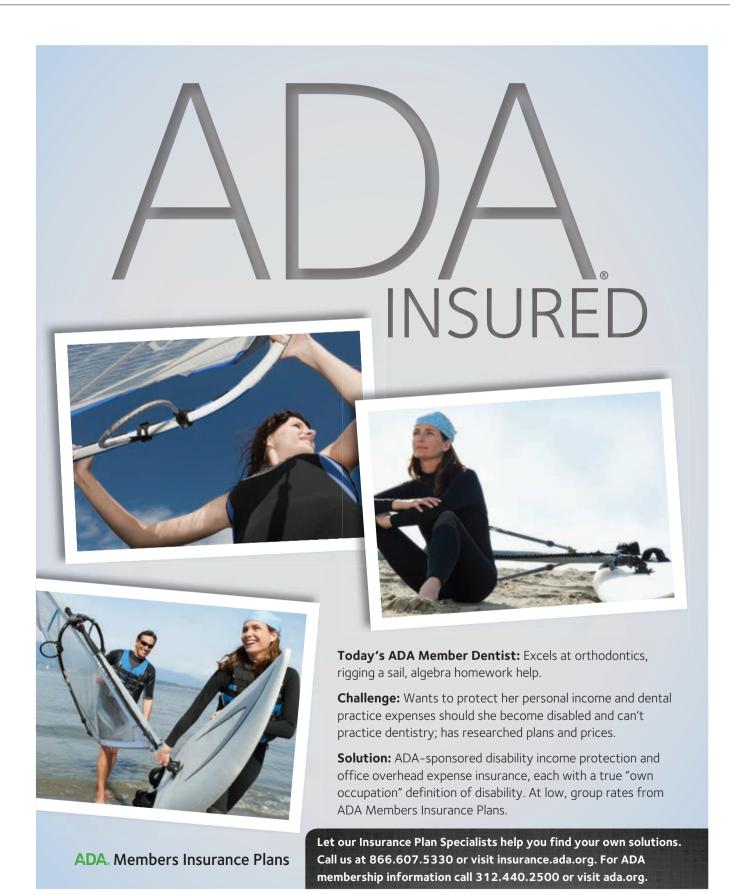
NYU raises nearly \$62,000 for oral cancer research

BY STACIE CROZIER

New York-More than 875 walkers, including oral cancer survivors and their families, dental and nursing students, residents and faculty of New York University Colleges of

See ORAL CANCER, Page 33

Spanning the bridge: Hundreds of participants cross the Williamsburg Bridge into Brooklyn, N.Y., during the 2014 NYC Oral Cancer Walk, April 27.



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