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# ADA News Letter - 06/07/1965

American Dental Association

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# CONNECTICUT OKAYS FLUORIDATION LAW (See Page 2)

Vol. 18, No. 12 *Monday, June 7, 1965 published by the* AMERICAN DENTAL ASSOCIATION 222 East Superior Street • Chicago, Illinois 60611

# CRITICIZE CONGRESS FOR 'VETOING' JOHNSON REQUEST ON CHILD DENTAL CARE

ADA Secretary Harold Hillenbrand last week criticized drafters of the pending Social Security bill for "virtually vetoing" a Presidential request. He urged Congress to revise the bill in conformance with the President's

wishes and thus help alleviate "the continuous epidemic of dental disease that exists among the indigent." The revision, he said, would require the states to include dental care as one of the benefits for needy children to be extended under part 2 of Title I of the bill. "If the new Social Security bill is to provide health care for indigent children, it is only rational to include treatment for the one condition common to nearly all of these children--dental disease," Dr. Hillenbrand said.

He praised Senator Abraham A. Ribicoff (D-Conn.) for introducing amendments to the pending measure (HR 6675) that would "bring the bill into conformance with what dental experts agree is necessary and with what President Johnson called for." In his special health message of Jan. 7, the President urged broadening of the public assistance program. He asked Congress "to permit specific federal participation in paying costs of medical and dental care for children in medically needy families."

Dr. Hillenbrand noted that in its present form "the bill ignores the fact that 60 per cent of the nation's children between the ages of five and 14, who are members of families with annual incomes of less than \$2,000, have never seen a dentist.

#### See Criticize Congress, Page 4

## Florida Raises Dues For Scholarships

In a unique move, the Florida State Dental Society has unanimously voted to increase annual dues by \$10 to increase a loan fund for Florida dental students. Assessment of additional dues will enable the loan fund, first established in 1961, to expand its program from approximately \$4,000 annually to \$24,000. The program provides for:

-- Loans up to the amount of \$2,000 annually;

-- Re-awarding of loans from sophomore through senior years;

-- Repayment of loans not later than one year after graduation at the rate of 3 per cent interest per year.

Four students are currently receiving \$1,000 for the 1965 school year.

### **Early Airline Reservations Urged**

Dentists and guests planning to attend the 106th ADA annual session in Las Vegas Nov. 8-11 are urged to make airline reservations well in advance. Although there are seven major airlines servicing Las Vegas, the number of daily flights from the midwest and the east is limited. Flights from many cities in the east also make connections with the six daily flights leaving Chicago.

# **Connecticut Okays Fluoridation Law**

Connecticut became the first state in the nation to approve a statewide fluoridation law when Gov. John N. Dempsey on May 28 signed a bill which requires fluoridation of water supplies in all communities with 20,000 or more population. The state Public Health Council had previously issued a similar regulation which had the effect of law. However, state legislators indicated that they wished to act on the matter. The bill received overwhelming approval in both houses of the legislature. Under the new law, all communities in the 20,000 to 50,000 class with fluoridedeficient water will be required to initiate fluoridation by Oct. 1, 1967 while communities over 50,000 will be required to begin by Jan. 1, 1967.

ADA President Fritz A. Pierson sent the following telegram to Gov. "On behalf of the officers Dempsey: and trustees of the American Dental Association, I wish to congratulate you on your epochal action of making Connecticut the first state in the nation to pass a state-wide fluoridation law. You and the state legislators are to be commended for the wisdom and foresight in making available to your citizens the lifelong dental health benefits of this proven measure. I am convinced that your action will have far-reaching effect on the progress of fluoridation in this country and that other states will be encouraged to take similar steps. Your state has won the distinction of having contributed in a large degree to the day when fluoridation will be as common as the chlorination of water."

# Dr. Norton Named To Council

Dr. Robert A. Norton, Springfield, Ill., has been appointed by President Fritz A. Pierson to an adinterim position on the Council on Dental Health. He will fill the vacancy created by the death of Dr. Clifton B. Clarno, Peoria, Ill. Dr. Norton's term will end with the 1965 annual session, at which time the House of Delegates will elect a dentist to complete the unexpired term which ends in 1966.

# AFDE Contributions Reach \$28,000

The American Fund for Dental Education's May campaign more than doubled the funds received in 1964. Dr. Gerald D. Timmons, chairman of the Fund's third annual campaign, announced that over \$28,000 has been received in the first four weeks of "I feel the real pothe campaign. tential of this campaign is beginning to be realized this year. We have already received double last year's returns and more are coming in each dav. Contributions ranging from \$5 to \$500 are coming in from dentists, hygienists and dental assistants all over the country," Dr. Timmons said. Over \$600 has been received from the Columbia University School of Dental and Oral Surgery faculty and staff. Drs. Albert R. Cerveris and E. Bruce Clark, both of Pittsburgh, contributed checks totalling \$750 which they received for conducting an oral rehabilitation seminar for J.F. Jelenko & Co., New Rochelle, New York. Dr. Timmons urged all dentists and auxiliary personal to send contributions to the Fund. "Send in your contribution this month is you have not already done Every dollar is a professionso. al endorsement which enables the Fund to seek a matching \$10 from national foundations and corporations."

# Virginia Forms Dental Service Corp.

The establishment of Virginia Dental Service Plans has brought the total of existing dental service corporations in the nation to Dental service corporations 23. are now established in Arkansas, Georgia, Kentucky, Mississippi, Missouri, Nebraska, Oklahoma, Pennsylvania, Rhode Island, South Dakota, Virginia, West Virginia and Wisconsin. Dental service corporations with operating programs are in California, Colorado, Connecticut, Hawaii, Michigan, New York, Ohio, Oregon, Washington and Maryland. States with enabling legislation include Massachusetts, Minnesota, New Hampshire, New Mexico, North Carolina, North Dakota and Tennessee.





DENTAL LABORATORIES ACCREDITED BY THE JOINT COMMISSION ON ACCREDITATION OF DENTAL LABORATORIES

June 1, 1965

Classification designation for the laboratories signifies the following: (a) Complete Dentures; (b) Removable Partial Dentures; (c) Fixed Prosthodontics; (d) Ceramics; and (e) Orthodontics

California: Pacific Dental Laboratory of Palo Alto, Palo Alto (a,c) Pacific Dental Laboratory of San Francisco, San Francisco (a,b,c,d) U. S. Public Health Service Central Dental Laboratory, San Francisco (a,b,c,d) \*UNITED STATES ARMY REGIONAL DENTAL ACTIVITY, Alameda (a,b,c,d,e) \*LETTERMAN GENERAL HOSPITAL DENTAL LABORATORY, San Francisco (a,b,c) \*U. S. ARMY DENTAL LABORATORY, Fort Ord (a,b,c,d)

Colorado: \*PROSTHODONTIC AND CROWN AND BRIDGE LABORATORIES, FITZSIMONS GENERAL HOSPITAL, Denver (a,b,c,d)

District of \*U. S. ARMY REGIONAL DENTAL ACTIVITY, WALTER REED ARMY MEDICAL CENTER, Columbia: Washington (a,b,c,d)

\*DENTAL LABORATORY, DENTAL SERVICE, WALTER REED GENERAL HOSPITAL, WALTER REED AMC, Washington (a,b,c)

Delaware: Climax Dental Supply Company, Inc. of Delaware, Wilmington (a,b,c,d,e)

Florida: Anderson's Laboratories, Orlando (a,b,c,d) Schwartz Dental Lab, Sol, Miami (a)

- Georgia: Anderson Dental Laboratory, Macon (a,b,c,e)
  \*U. S. ARMY REGIONAL DENTAL ACTIVITY, Fort McPherson (a,b,c,d)
  \*UNITED STATES ARMY DENTAL LABORATORY, Fort Benning (a,b,c,d,e)
  \*PROSTHETIC LABORATORY, DENTAL DETACHMENT, U. S. ARMY SCHOOL/TRAINING CENTER,
  Fort Gordon (a,b,c)
- Illinois: American Dental Company-Laboratories, Chicago (a,b,c,d,e)
  Austenal Company, Division of Howe Sound Company, Chicago (a,b,c,d)
  Cruse Dental Laboratory, Inc., Linn B., Decatur (a,b,c,d)
  Duncanlite Laboratory, Inc., Villa Park (a,b,c,e)
  Ideal Dental Laboratory, Chicago (a,b,c,d)
  Kennedy Co., Joseph E., Chicago (a,b,c,d,e)
  Major-Monroe Dental Laboratory, Inc., Chicago (a,b,c)
  Naughton & Company, M. E., Chicago (Alsip) (a,b,c)
  Nobilium Processing, Inc., Chicago (b)
  Smith Dental Laboratory, A. E., Macomb (a,c)
  South Shore Dental Laboratory, Inc., Chicago (a,b,c,d)
- Iowa: Lamb Dental Laboratory, Inc., Chauncey H., Des Moines (a,b,c,d) Mitchell Dental Laboratory, Fort Dodge (a,b,c,d)

Louisiana: \*PROSTHETIC DENTAL CLINIC AND LABORATORY, Fort Polk (a,b,c)

Maine: Eliason Dental Laboratory, Inc., Portland (a,b,c,e)

- Maryland: Baltimore Dental Laboratory, Inc., Baltimore (a,b,c) Co-operative Dental Laboratories, Baltimore (a,b,c,d,e) Rothstein Dental Laboratories, Inc., Silver Spring (a,b,c,d) \*DENTAL LABORATORY, U. S. ARMY DENTAL DETACHMENT, Fort George G. Meade (a,b,c,e)
- Massachusetts: Massachusetts Dental Prosthetics, Inc., Boston (a,b,c,d) Westover Air Force Base Area Dental Laboratory, Westover AFB (a,b,c,d)
- Michigan: \*DAVIS LABORATORY COMPANY, Grand Rapids (a,b,c,d) Ferguson-Schreiber Dental Laboratories, Inc., Royal Oak (a,b,c,d) Kirsten-Sanders Dental Laboratories, Inc., Detroit (a,b,c,d,e) Schumacher Dental Laboratory, Inc., Ferndale (a,b,c,d)

\*Dental laboratories accredited by the Joint Commission since the last published list.

JOINT COMMISSION ON ACCREDITATION OF DENTAL LABORATORIES 200 E. ONTARIO ST. / CHICAGO, ILL. 60611 / AREA CODE 312 / 943-8755

Minnesota: Boos Dental Laboratories, Inc., Henry P. - Duluth Branch, Duluth (a,b,c,d,e) Boos Dental Laboratories, Inc., Henry P., Minneapolis (a,b,c,d,e) Mississippi: Dental Prosthetic Laboratory, Air Force Base, USAF Hospital, Keesler (a,c) Missouri: Dental Arts Laboratory, Inc., St. Louis (c,d) \*U. S. ARMY REGIONAL DENTAL ACTIVITY, St. Louis (a,b,c,d) Nebraska: Kiess Dental Laboratory, Omaha (a,b) Nevada: Bonanza Dental Laboratory, Inc., Reno (a,b,c,d) Oral-Arts Dental Studio, Reno (a,b,c,d) \*GAR-DENT STUDIO, Paterson (a,c,d) New Jersev: Superior Dental Laboratories of New Jersey, Inc., Erlton (a,b,c,d) Victory Dental Laboratories, Camden (a,b,c,d) \*FORT DIX DENTAL LABORATORY, Fort Dix (a,b,c) New York: Austenal Company-Division of Howe Sound Company, New York (a,b,c,d) \*MOUNT VERNON DENTAL LABORATORY, INC., Mount Vernon (a,b,c,d,e) \*PEDODONTIC SERVICE, INC., Charlotte (c,e) North Carolina: Woodward Prosthetic Company, Greensboro (a,b,c,d,e) \*U. S. ARMY FORT BRAGG CENTRAL DENTAL LABORATORY, Fort Bragg (a,b,c,e) Oklahoma: \*INSTALLATION DENTAL LABORATORY, U. S. ARMY DENTAL DETACHMENT, Fort Sill (a,b,c,d) Ohio: Covedent Laboratory, Covington (c) \*THE ROE MILLER DENTAL LABORATORY, Cleveland (a,b,c,d) Oregon: Dahlin Dental Laboratories, Inc., Portland (a,b,c,d) Dental Arts Company, Portland (a,b,c,d,e) Western Casting Laboratories, Portland (b,c,d) Pennsylvania: Climax Dental Supply Company, Inc., Laboratory Division, Philadelphia (a,b,c,d,e) Criterion Dental Laboratories, Philadelphia (a,b,c,d) Gracey Dental Laboratory Inc., Pittsburgh (a,b,c,d,e) Hartman Laboratories, Inc., Pittsburgh (a,b,c,d) Muth & Mumma Dental Laboratories, Inc., Harrisburg (a,b,c,d) Rodin Dental Laboratory Inc., Philadelphia (a,b,c,d,e) Superior Dental Laboratories of Allentown, Allentown (a,b,c,d,e) Superior Dental Laboratories of Philadelphia, Inc., Philadelphia (a,b,c,d,e) \*WILLIAMS-DENTAL-LABORATORY, Erie (a,b,c,d) S. Carolina: \*U. S. ARMY DENTAL LABORATORY, Fort Jackson (a,b,c) Tennessee: DeCorse-Attaway Dental Laboratory, Memphis (a,b,c,d,e) Texas: \*U. S. ARMY REGIONAL DENTAL ACTIVITY, Fort Sam Houston (a,b,c,d) \*PROSTHETIC LABORATORY, DENTAL SERVICE, WILLIAM BEAUMONT GENERAL HOSPITAL, El Paso (a,b,c,d) \*CENTER DENTAL LABORATORY, Fort Bliss (a,b,c,d) \*POST DENTAL LABORATORY, Fort Hood (a,b,c) \*RHOADES DENTAL LABORATORY, BROOKE GENERAL HOSPITAL, RHOADES DENTAL CLINIC, Fort Sam Houston (a,b,c) Virginia: Capitol Dental Laboratories, Richmond (c,d) Johnson-Miller Dental Laboratory, Inc., Arlington (a,b,c) Peninsula Dental Laboratory, Newport News (a,b,c) Precision Dental Laboratory, Richmond (a,b,c,d) Rothstein Dental Laboratories, Inc., Charlottesville (a) Virginia Laboratories, Norfolk (a,b,c,d) \*POST DENTAL LABORATORY, DENTAL CLINIC #1, USA, Fort Lee (a,b,c) \*HARRISON DENTAL LABORATORIES, INC., Seattle (a,b,c,d) Washington: \*HARRISON DENTAL LABORATORIES, INC., Tacoma (a,b,c,d) \*FORT LEWIS DENTAL LABORATORY SERVICE, Fort Lewis (a,b,c,d,e) The dental laboratories listed have voluntarily applied for, and received accreditation of

The dental laboratories listed have voluntarily applied for, and received accreditation of their operations and facilities by the Joint Commission on Accreditation of Dental Laboratories. The omission of any dental laboratory from the list does not necessarily indicate that such a laboratory has failed to meet accreditation standards.

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#### AMENDMENTS NOS. 189 AND 190

Mr. RIBICOFF. Mr. President, I submit, for appropriate reference, two amendments to H.R. 6675, the Social Security Amendments of 1965 now before the Finance Committee.

The first amendment extends equal treatment under the bill to the dentists of the Nation. As written, the bill would deny the right of a patient to select an oral surgeon to perform oral surgical procedures that would be covered if performed by a physician or an osteopath.

Now, many dentists who have completed internships and residencies in oral surgery regularly remove oral tumors, take biopsies, reduce jaw fractures, and perform other services not involving what might be described as routine dental work. Throughout the country, there are hundreds of dentists admitted to hospital practice. Nearly 40 percent of the Nation's hospitals have formalized dental services and virtually all hospitals permit dentists to admit patients for oral surgical services. All contracts under the Federal Employees Health Benefits Act recognize the rights of dentists in this regard as do other private insurance plans.

It is only simple equity to allow patients to have their oral surgery performed by qualified oral surgeons, and that is what this amendment would accomplish.

The second amendment relates to dental care for needy children under part 2 of title I, grants to States for medical assistance.

In its present form, the bill requires State plans to include five kinds of services for persons eligible for medical assistance in order to qualify for Federal participation. Dental care is not one of these five services. I believe strongly that in the case of needy children it should be.

Not too long ago the Director of the poverty program described the care received by a youngster from one of the great cities of this Nation who joined the Job Corps. During the first days he was there, the boy simply refused to eat. The officials of the center were, naturally, concerned and did their best to find out what caused the boy to act in this way. They believed, I suppose, as most of us would have, that the boy was apprehensive or lonely or confused by the changes that had taken place in his life. The explanation was simpler than thatsimpler but in many ways more tragic. The boy wouldn't eat because it hurt him to eat. His mouth was so diseased, his teeth so riddled with cavities that it pained him to eat nourishing food.

What a sad story. Even sadder, I believe, are the studies which show that this boy's problem is shared by many others. Just a few statistics document this. For example, 60 percent of the children between the ages of 5 and 14 who are members of families whose income is below \$2,000 a year have never seen a dentist. Even if you go up the income scale as high as \$4,000 a year.

there are still 40 percent of the children who have never received dental care.

And irrespective of income, 24 percent of urban children between the ages of 5 and 14 have never seen a dentist; nor have 29 percent of the same age group in rural nonfarm families or 42 percent of those in rural farm areas.

Think of the huge sums spent on dentifrice advertising. Yet hundreds of thousands of our children are without dental care. A society that can afford toothpaste ads can afford a dental care program for needy children.

The need for including dental care as one of the required benefits for needy children is clear. In his health message of January 7, President Johnson asked Congress to adapt the Kerr-Mills program "to permit specific Federal participation in paying costs of medical and dental care for children in medically needy families." I believe we should honor the President's recommendation and the amendment I am submitting would do so.

I ask unanimous consent that the amendments be printed at this point in the RECORD.

The ACTING PRESIDENT pro tempore. The amendments will be received, printed, and appropriately referred; and, without objection, the amendments will be printed in the RECORD.

The amendments were referred to the Committee on Finance, as follows:

#### AMENDMENT No. 189

On page 127, line 17, after "State plan" insert "(except to the extent required by Clause (A) (ii) of paragraph (13))

On page 129, line 7, strike out "clauses (1) through (5)" and insert in lieu thereof "(1) clauses (1) through (5), and (11) in the case of dependent children, clause (10)".

#### AMENDMENT NO. 190

On page 64, line 18, strike out "Association" and insert in lieu thereof "Association, or, in the case of an intern or resident-in-training in the field of dentistry, approved by the Council on Dental Education of the American Dental Association"

On page 82, line 2, immediately after the period insert "Such term, when applied to professional services performed by a dentist, shall be limited to dental services and oral surgery of the following types: (A) prompt repair of accidental injury to natural teeth, (B) reduction of fractures of the jaw or facial bones, (C) removal of stones from sali-vary ducts, (D) excision of oral cysts or (E) other cutting surgery on tissues of the mouth, other than gums, when not performed on page 82, line 6, after "surgery" insert

", or dentistry,". On page 83, line 5, after "(6)" insert "(A)".

On page 83, line 7, strike out "and". On page 83, between lines 7 and 8, insert

the following:

"(B) dental prosthetic devices, but only under circumstances when such devices are required for the prompt repair of accidental injury; and".

On page 88, line 21, strike out "or"

On page 88, line 24, strike out the period and insert in lieu thereof a semicolon followed by the word "or". On page 88, between lines 24 and 25, insert

the following:

"(12) where such expenses are for dental services other than those described in the second sentence of section 1861 (q).

# JCADL ACCREDITS 33 MORE DENTAL LABORATORIES; TOTAL NOW AT 93

Thirty-three additional dental laboratories have been accredited by the Joint Commission on Accreditation of Dental Laboratories, Dr. J. Eugene Ziegler of Hollywood, Calif., Commission chairman, announced June 1. Dr.

Ziegler said that the accredited dental laboratories now number 93, in 31 states, and added, "the success of this program is surpassing our expectations." The Joint Commission was created to conduct a national program of accreditation of dental laboratories in order to develop and maintain a mutually helpful relationship between the profession and the dental laboratories in the best interest of the health of the public. He pointed out that the accreditation program "is voluntary and surveys are conducted only upon request of the dental laboratory."

Dr. Ziegler expressed gratitude to the dental societies and dental laboratories in each state "for their excellent degree of cooperation." A complete listing of all accredited dental laboratories and their specific classification of accreditation is included in this <u>News Letter</u>. Newly accredited dental laboratories are in capital letters.

### WHO Unit Acts On Fluoridation

The directing council of the Pan American Health Organization at a recent session in Mexico City adopted a resolution urging 21 nations in Central and South America to intensify their efforts to spread the use of water fluoridation. The council called on public health ministries in these countries to deal directly with the various agencies responsible for public water supply installation and to pass laws which would make fluoridation compulsory. The council noted that the "dental problem in Latin America takes on dramatic proportions."

### Fluoridation Gains, Loses

Fluoridation chalked up one gain and one loss in recent actions. In Clinton, S.C., with a population of 9,100, fluoridation was placed in operation, while in New Castle, N.Y., voters defeated the measure at the polls.

# Health Check Offered At Session

The Health Evaluation Program will be offered again this year at the 106th annual session in Las Vegas. It will be available to all registered dentists who are members of the ADA or the National Dental Association. The program will be conducted from noon Sunday, Nov. 7, to noon Thursday, Nov. 11, in the Las Vegas Convention Center.

Screening tests will include x-rays of chest, jaws and teeth; electrocardiogram; test for glaucoma and blood chemistry analysis. Results of the EKG and glaucoma test will be available immediately; x-rays of jaws and teeth the following day, and chest x-rays will be mailed to the dentist a week after the examina-Consulting areas staffed by tion. physicians and dentists will be available for any dentist whose findings are questionable or not within the normal range.

At the 105th annual session in San Francisco last year, 1,223 dentists took the examination.

### Fluoridation Benefits School Children

Significant reductions in tooth decay have been achieved by fluoridating school drinking water in communities lacking a central water supply system, according to Dr. Donald J. Galagan, assistant surgeon general and chief of the Division of Dental Public Health and Resources of the U.S. Public "This is an im-Health Service. portant step in efforts to combat tooth decay among children in rural areas," he said. Elementary school children in St. Thomas, Virgin Islands, where the study was conducted, had 22 per cent less decay than children in the same area drinking non-fluoridated water. Similar studies are being conducted by the PHS in Kentucky and Pennsylvania.

## Dental Editors Workshop June 13-17

The ADA Council on Journalism will sponsor a second Dental Editors Workshop at the Ohio State University, Columbus, June 13-17. Funds for the workshop are pro-vided by the National Institute of Dental Research, Ohio State University and the ADA. Twenty-five editors have been invited to participate in the course, and a critique on each editor's publication has been prepared in advance. Faculty members for the workshop include: Campbell B. Titchener, workshop director; James F. Hudson, codirector; Robert McGiffert; Thomas Gaumer; John Lemmon; Paul Barton, and Frank Norton, all of the University's School of Journalism.

Edward A. Shaw, ADA managing editor, and Drs. Carl O. Boucher and Thomas F. McBride of the University's College of Dentistry will assist the faculty. Courses to be offered will include: principles of writing; editorial writing; problems of editing; speech writing; news writing; content of state journals; layout and illustration; book reviewing; relations with printers; organization and outline; readability and visuals.

### ... Criticize Congress (Cont. From Page 1)

Even if you go up the income scale as high as \$4,000 a year," he went on, "There are still 40 per cent of the children who have never received dental care. This is a shocking commentary on a nation whose general health standards are so high. Congress has an opportunity now to begin remedying this situation."

The dental leader said that the Association's support of this section of the bill does not indicate any change in its attitude toward the health care of the aged portions of the bill. "We continue to consider them ill-advised," he said, "and we oppose them. While the medicare sections extend care without regard to need, the section to which I am referring is quite specific in taking need into account."

## Physicists To Study Decay

Scientists at New York University will utilize techniques and instruments of modern physics to study dental caries and degeneration of supporting bone. An initial grant of \$102,003 has been awarded by the National Institute of Dental Research to the University. "The instruments and techniques of the solid state physics laboratory will be used for the first time in this project to explore the chemistry and physics of the structure of enamel and bone at the molecular level," said Dr. Luther L. Terry, surgeon-general of the U.S. Public Health Service. The National Advisory Dental Research Council has recommended support for the project for three years. Dr. Morris H. Shamos, Ph.D., chairman of the physics department of New York University, is project director. Dr. Leroy S. Levine, chief of orthopedic surgery at Long Island Jewish Hospital and head of the department of orthopedic surgery at the State University of New York is co-director.

# Dr. Zipkin Heads Conference

Dr. Isadore Zipkin, assistant chief of the Laboratory of Biochemistry, National Institute of Dental Research, has been appointed chairman of the Gordon Conference, "Chemistry, physiology and structure of the bones and teeth," scheduled in Meriden, N.H., in July 1965.

### **Dental Insurance Article**

The June issue of <u>Better Homes</u> and <u>Gardens</u> carries an article on prepaid dental care. The article was prepared in cooperation with the ADA Councils on Dental Health and Insurance and the Bureau of Public Information.

### **Ribicoff Amendments Reprinted**

This <u>News Letter</u> contains a reprint from the <u>Congressional Record</u> listing the two amendments to the Social Security bill which were introduced by Sen. Abraham Ribicoff (D.-Conn.) at the request of the ADA. One amendment concerns dental care for indigent children while the other concerns oral surgery performed by a dentist.