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I just returned from Belgrade, Serbia, having attended the biannual meeting of the European Academy of Pediatric Dentistry (EAPD). This was a first, in that, the main Congress was a joint symposium of the EAPD and the AAPD. The topic was *Transatlantic Perspectives on Sedation and General Anesthesia*. The European perspectives were presented by Dr. Marie Therese Hossy, professor and chair of pediatric dentistry at Kings College in London and Dr. Monty Duggal, professor and chair of pediatric dentistry at Leeds’ Dental Institute in the United Kingdom. Dr. Bobby Thikkurissy, professor and director of the pediatric dental residency program at Cincinnati Children’s Hospital and I, in private practice using in-office sedation for over 33 years, gave the United States perspective.

The European model for in-office sedation and general anesthesia (GA) is quite different than the U.S. model. For the most part, in Europe, there are significantly more restrictions to providing in-office sedation and advanced behavior management techniques. For our European colleagues, the ability to do in-office sedation using nitrous oxide and an oral or IV sedation is essentially not allowed. As you can imagine, this has shifted a significant number of general anesthetics to provide dental care to very young and/or medically compromised patients. In the U.K., relative to pediatric dentistry, general anesthesia can only be delivered by a physician in a hospital that must have pediatric intensive care services. This even further limits their options in smaller communities.

The majority of the GA cases are of an urgent nature and are primarily limited to extractions. Their availability to do comprehensive restorative care during that case is much more unlikely and, if granted, will usually require a second GA.

The U.K. presenters were the first to admit that their system is broken. The overall cost to their National Health Care Services for pediatric dental care is exploding and their ability to focus on prevention is compromised due to the overwhelming burden of just treating dental disease.

From my personal experience, the U.S. model is also quickly eroding. The availability to utilize hospital; or surgery center-based GA is getting squeezed. This primarily relates to the medical/dental reimbursement levels for our public assistance patients and the increasing insurance deductibles for many families. In the U.S., this is putting increased pressure to provide in-office sedation services, which also has its challenges. There are a host of factors influencing the challenges facing in-office sedation. Leave it to say that discussion would require another article.

In the U.S., with these issues on the table, I can tell you the AAPD is focusing on a number of ways we can help both our members and the patients we treat.

This past year, we have completely updated our comprehensive course *Safe and Successful Sedation of the Pediatric Dental Patient*. Besides an updated curriculum, we have added additional video clips that visually highlight important topics. When it comes to training in the management of office medical emergencies, the state-of-the-art is high fidelity mannequin simulators. The Academy has an outstanding hands-on course to receive the ultimate experience. An assistant’s role is critical during in-office sedation. There is also a course specifically for them to enhance patient safety and fulfill many state regulatory requirements. In addition to our live courses we are expanding our web-based offerings through our Education Passport. I encourage you to utilize these resources. Here are a few of those one-hour webinars:

- Clinical Use of Capnography in Pediatric Procedural Sedation
- Pediatric Behavior Management: A Little Art, A Little Science, & A Little Medicine
- Pediatric Sedation Emergencies: Can They Be Avoided?

Also, the entire AAPD Annual Session recording and slides for the past several years are a comprehensive resource for virtually all topics.

In the regulatory area, the AAPD has devoted significant resources to assist our state members. As we all know, politics are local. Therefore it is critical that your state pediatric chapter have an active AAPD Policy Public Advocate (PPA). This is the most effective way the AAPD can assist with regulatory issues within your individual state. Your PPA is a member selected by your state chap-
A Message from your President
July PDT 2016

ter that works strongly with a host of resources the AAPD provides. It is targeted specifically for policy and regulatory matters within your state, in addition to supporting AAPD on national issues. Each PPA meets face-to-face annually for training and networking with all other states PPAs. While in Washington, D.C., all the PPAs and a significant number of members and residents meet with their state congressmen and senators to ask for support on a variety of issues. This past year we continued to request corrections in the Affordable Care Act that have had a negative impact on dental care for children. We again asked for support for Title VII funding for education and loan repayment funds for our members going into academics.

In addition, the PPAs have regular conference calls and can contact the appropriate resource at the AAPD for any assistance.

We ask that each state PPA is also active in their State ADA Chapter to further leverage our members’ voices.

Things change, and unfortunately, if I were to predict the future as it pertains to sedation and GA in the United States, I would say that an increase in regulations is highly likely. Therefore, it is critical for all members to take an active role in your states, allowing us all to provide the optimal care for our patients.
HIGHLIGHTS OF ACTIONS TAKEN BY THE AAPD BOARD OF TRUSTEES

• To direct the Council on Clinical Affairs to develop a policy or guideline on use of silver diamine fluoride (SDF). This will be submitted for approval at the 2017 General Assembly.

• To approve the renaming of the Reference Manual items for the 2017-2018 edition to reflect clinical practice guidelines, which would include the evidence-based guidelines, and best practices/recommendations, which would include the current clinical guidelines or guidelines that have not undergone the EBD process.

• To charge the Council on Clinical Affairs and the Council on Scientific Affairs to identify clinical practice guidelines with sufficient evidence to undergo the EBD process and make recommendations to the EBD Committee for consideration.

• To obtain forms from the AAP Section on Oral Health on referral from physician to pediatric dentist and charge the Council on Clinical Affairs to review the forms and give recommendations for revision as needed.

• To solicit topics, authors, and articles in response to JADA's request for pediatric dental articles relevant to the general practitioner.

• To move forward on a workforce study, with a budgetary impact of up to $80,000.

• To approve the draft request for proposals for a pediatric dental workforce study.

• To endorse the letter put forward by the DSG (Dental Specialties Group), requesting a change to [CODA] standards to reflect a specialist to be responsible for training predoctoral students in the specialty discipline, with “and/or clinical experience”.

• To allow the Council on Membership and Membership Services to explore modalities to disseminate brief descriptions of the AAPD councils and committees to new pediatric dentists and residents prior to the Annual Session, upon registration, so that they may have an opportunity plan to visit any meeting that they may be interested in becoming involved.

• To charge the Council on Government Affairs to develop a plan to incorporate new young members with an interest in government affairs.

• To approve the 2016-2017 council charges as revised.

• To approve the 2016-2017 council and committee appointments.

• To approve the appointment of Dr. Lynn Fujimoto as chair of the Local Arrangements Committee for the 2018 Annual Session [in Hawaii].

• To request that Mr. Litch, Dr. Rutkauskas, and Dr. Miller propose a plan to bring state and district leadership and state PPAAs together for a joint meeting/conference with the intent to foster and strengthen the mutual benefits of affiliate members and continue to align the goals of each entity.

• To approve the 2016-2017 budget as amended (see below).

Summary of adjustments to the 2016-2017 budget approved by the Board of Trustees:

<table>
<thead>
<tr>
<th>Expense Description</th>
<th>Original Amount</th>
<th>Adjustments</th>
<th>Adjusted Amount</th>
</tr>
</thead>
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<tr>
<td>Balance:</td>
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</table>

Adjustments Detail:

- $80,000 Workforce Study (5/24 Motion 14)
- $8,000 Millennial Task Force Meeting (5/29 Motion 16)
Please note that although the proposed budget reflects a negative balance, historically, at the end of the fiscal year the AAPD has consistently shown a balanced budget or a net profit. This is because in the budgeting process we estimate expenses aggressively and income conservatively, and do not include unearned income (investments) in budget projections.

Complete action minutes are available on the Members-Only section of the AAPD website at http://www.aapd.org/members/resources/.

HIGHLIGHTS OF THE GENERAL ASSEMBLY

New Officers Elected

President-Elect: James D. Nickman
Vice President: Joseph B. Castellano
Secretary-Treasurer: Kevin J. Donly
Trustee At-Large: Paula L. Coates
American Board of Pediatric Dentistry Director: E. LaRee Johnson

Dues Increase Approved

Definitions, Oral Health Policies and Clinical Guidelines Approved/Reaffirmed

a) Definition of Special Health Care Needs  
b) Policy on Oral Health Care Programs for Infants  
c) Policy on Oral Health in Child Care Settings  
d) Policy Early Childhood Caries (ECC): Classifications, Consequences, and Preventive Strategies  
e) Policy on Early Childhood Caries (ECC): Unique Challenges and Treatment Options  
f) Policy on Intraoral / Perioral Piercing and Oral Jewelry / Accessories  
g) Policy on Third-party Reimbursement of Medical Fees Related to Sedation / General Anesthesia for Delivery of Oral Health Services  
h) Policy on Third-party Reimbursement for Oral Health Care Services Related to Congenital Orofacial Anomalies  
i) Policy on Third-party Reimbursement of Fees Related to Dental Sealants  
j) Policy on Transitioning from a Pediatric-centered to an Adult-centered Dental Home for Individuals with Special Health Care Needs  
k) Guideline on Management of Dental Patients with Special Health Care Needs  
l) Guideline on Oral Health Care for the Pregnant Adolescent  
m) Definition of Dental Neglect  
p) Monitoring and Management of Pediatric Patients Before, During, and After Sedation for Diagnostic and Therapeutic Procedures*  
q) Guideline on Restorative Dentistry - Revision limited to a section on the Hall Technique  

*Joint document with American Academy of Pediatrics

The following existing Definitions, Oral Health Policies and Clinical Guidelines were deleted:

a) Guideline on Perinatal Oral Health Care  
b) Guideline on Infant Oral Health Care

The following new Definitions, Oral Health Policies, Clinical Guidelines, or Endorsements were approved:

a) Policy on Sleep Apnea in Children  
b) Policy on Substance Abuse in Adolescents  
c) Guideline on Perinatal and Infant Oral Health Care

The following amendments to the Bylaws were approved:

• Create Leadership Development Committee  
• Make technical corrections

The complete 2016 General Assembly minutes are available on the Members-Only section of the AAPD website at http://www.aapd.org/members/resources/. Updated versions of the policies and guidelines listed above will be posted on the AAPD website in July and published in the Reference Manual this fall.
The AAPD PAC continues to grow in size and influence. We thank all of our 2015 supporters who were listed in the May 2016 issue of PDT as well as on the TV monitor at the AAPD membership booth on the exhibit floor during the recent AAPD Annual Session in San Antonio.

As you know, you can support the AAPD PAC via the voluntary PAC contribution “check-off” on your current 2016-17 dues statement. Your support is critical to our long-term success. Why not consider increasing your PAC contribution by perhaps 10 or 20 percent? Also, remember that if you want your dollars applied directly to candidate support, please make your PAC contribution via a personal credit card or check.

Last month you received a specific appeal from your PAC Steering Committee district representative along with the 2015 PAC Annual Report that highlighted how important your support of the AAPD PAC is to our advocacy efforts. We urge you to review this closely.

Below are some photos from the PAC reception in San Antonio.

For further information about the AAPD PAC, please contact PAC Secretary C. Scott Litch at (312) 337-2169 ext. 29 or slitch@aapd.org. Reneida E. Reyes, Chair

1 (L-R) Congressional Liaison Heber Simmons Jr. and PAC Steering Committee Chair Reneida Reyes. Dr. Simmons was recognized for his PAC donation at the Patriot Level ($1000 and above). • 2 (L-R) Past President and Committee on Dental Benefits Chair Paul A. Reggiardo and Dr. Reyes. Dr. Reggiardo was recognized for his PAC donation at the Patriot Level. • 3 (l-r) Dr. Kyle House and Dr. Reyes. Dr. House was recognized for his PAC donation at the Patriot Level. • 4 (l-r) CEO John Rutkauskas, Past President Rhea M. Haugseth, 2015-16 Secretary-Treasurer Joseph B. Castellano, and Cabinet Level donor Dr. Clifford R. Hartmann. • 5 (l-r) Cabinet Level donor Dr. Nancy L. Rajchel, Dr. Allon McWhorter and Barrie Choate. • 6 (l-r) Dr. Lisa Stanley, PAC Steering Committee Southeastern representative and Cabinet Level Donor K. Jean Beauchamp, PAC Steering Committee Assistant Treasurer Shari C. Kohn, and Dr. Kohn’s son “AJ.”
Public Policy Advocacy for Children’s Oral Health

The AAPD continues to vigorously advocate for critical issues impacting children’s oral health care. The 2016 Legislative and Regulatory Priorities, as developed by the Council on Government Affairs and approved by the board of trustees, are available on the AAPD website at http://www.aapd.org/aapd_2016_legislative_and_regulatory_priorities/.

Public Policy Advocacy Conference (PPAC) in Washington, D.C.

On April 4-6, 2016, over 240 AAPD members advocated for children’s oral health in Washington, D.C., by visiting with their members of Congress. AAPD attendees included members of the Council on Government Affairs, PAC Steering Committee, Executive Committee and Budget and Finance Committee. Attendees participated in an AAPD PAC event and heard updates on key AAPD public policy issues such as Title VII pediatric dentistry training funds, and the need for ACA amendments related to the pediatric oral health benefit. They advocated for these issues in their Capitol Hill visits. 30 pediatric dental residency programs were represented, with over 130 residents in attendance. A new feature added to PPAC this year was a special orientation and advocacy training session for residents. We also featured the world premiere of an AAPD-produced demonstration video on a good vs. bad Congressional visit. The AAPD PAC hosted a fund-raiser for U.S. Senator Patty Murray (D-Wash.).

The specific advocacy requests were:

Provide FY 2017 funding of $35.873 million for the HRSA Title VII Primary Care Dental Training Cluster and related oral health programs, with not less than $10 million for Pediatric Dentistry Training programs—including continuation of new dental faculty loan repayment program awards made in FY 2016 and postdoctoral and predoctoral awards made in FY 2015.

To promote children’s oral health and assure that children receive the oral health care they need, the Affordable Care Act (ACA) should be amended to:

a) Make pediatric oral health coverage mandatory for families with children, either through an appropriately structured stand-alone dental plan (SADP) or embedded medical plan.

b) Exempt preventive dental services from any cost sharing (deductibles or co-pays) in embedded medical plans and SADPs, and require separate dental deductibles in embedded plans.

c) Include any separate dental premium cost under the calculation of a tax subsidy for low income families.

The fact sheets used in Congressional visits are available on the AAPD website at: http://www.aapd.org/advocacy/legislative_and_regulatory_fact_sheets/.

Additional details about these issues are provided below. We thank all those members who took time from their busy schedules to attend this important conference.
Legislative and Regulatory Update

Unless otherwise noted, for further information on any of these issues, please contact Chief Operating Officer and General Counsel C. Scott Litch at (312) 337-2169 or slitch@aapd.org.

FEDERAL NEWS

$10 Million for Pediatric Dentistry Training Included in FY 2017 Senate Labor-HHS-Education Appropriations Bill

The Senate Labor, Health and Human Services, and Education Appropriations Subcommittee approved a FY2017 funding bill on June 7, followed by full Appropriations Committee passage on June 9, 2016 by a 29-1 vote. The approved bipartisan legislation will include a $2 billion increase for medical research by the National Institutes of Health and includes funding for issues affecting oral and overall health, education, job training, and opioid abuse prevention.

The AAPD is pleased with the $10 million that was provided for pediatric dentistry in the Senate bill. This is one step towards reaching our top FY 2017 federal appropriations priority of including $35.873 million for the HRSA Title VII Primary Care Dental Training Cluster and related oral health programs, with not less than $10 million for Pediatric Dentistry Training programs—including continuation of new dental faculty loan repayment program awards. The following report language was included:

“Training in Oral Healthcare: The Committee provides $35,873,000 for the Training in Oral Health Care programs, which includes not less than $10,000,000 each for general and pediatric dentistry. Funds may be used to expand training … and may also be used to plan and operate training programs, as well as to provide financial assistance to students and residents.

The agency is directed to provide continuation funding for predoctoral and postdoctoral training grants initially awarded in fiscal year 2015 and for Section 748 Dental Faculty Loan Program grants initially awarded in fiscal year 2016.

The Committee strongly encourages HRSA to restore the position of Chief Dental Officer with executive level authority and resources to oversee and lead HRSA dental programs and initiatives.”


Background: The authority to fund pediatric dentistry residency training under Title VII was first enacted under the health Professions Education Partnership of 1998. This expanded the existing General Dentistry training authority by providing “start-up funds” to increase Pediatric Dentistry positions at existing programs or initiate new programs. Under the 2010 Affordable Care Act, Title VII was expanded to create a primary care dental funding cluster under Section 748 of the Public Health Service Act. Authority was broadened to allow use of funds for faculty development, predoctoral training, and faculty loan repayment. The AAPD has long advocated for this latter initiative due to the significant difficulties in recruiting qualified individuals to fill faculty positions.

Analysis: This outcome is one step towards meeting the AAPD’s final FY 2017 federal appropriations goals. The AAPD is especially pleased that report language was included recognizing the importance of continuing the Dental Faculty Loan Repayment awards that are expected to be announced later this summer. The AAPD also strongly supports the restoration of a Chief Dental Officer position at HRSA. The AAPD especially thanks Congressional Liaison Heber Simmons, Jr. and Mike Gilliland and Kate McAuliffe at Hogan Lovells in Washington D.C. for their efforts on these appropriations issues. The AAPD also thanks all those members who participated in the 2016 Public Policy Advocacy Conference in Washington, D.C. where they advocated for this funding.

The AAPD also acknowledges our joint efforts with the ADA, ADEA, and AADR.
Regulations Implementing Section 1557 of ACA Impose Significant Burdens on Dental Offices

The very first “Litch’s Law Log” in PDT from almost a decade ago dealt with legal requirements for hearing impaired and limited English proficiency patients: http://www.aapd.org/assets/1/7/2940.pdf. In that article the following point was made:

“The Office of Civil Rights (OCR) for the U.S. Department of Health and Human Services has stated that if a health care provider treats Medicaid-eligible patients, foreign language assistance should be provided at no cost to the health care provider’s entire limited English proficient population! The guidance arguably exceeds federal regulatory authority.”

Now, under the Section 1557 nondiscrimination provision of the Affordable Care Act (ACA), the implementing regulations have a broad and burdensome reach: http://www.hhs.gov/civil-rights/for-individuals/section-1557/index.html.

This regulation requires that dentists who receive federal financial assistance, such as those participating in Medicaid or CHIP, will have to post notices in the top 15 languages spoken in the state that free language assistance services are available, and make sure interpreters (including bilingual staff) are “qualified.”

The AAPD is working with ADA in analyzing this new regulation. More information will be disseminated shortly. Before OCR issued the regulation, the ADA commented on the burden the rule would have on dental practices. The ADA has requested additional clarification about the rule from the Office for Civil Rights.

STATE NEWS

Settlement Reached in Florida Medicaid Litigation

A decade-old class-action lawsuit brought on behalf of 2 million children who depend on Florida’s Medicaid system for care was recently settled, with an agreement that agencies responsible for running the system continue to improve medical and dental care—including raising reimbursement rates.

The lawsuit was filed in 2005, arguing that Florida Medicaid reimbursements were so low they fell short of federal standards and discouraged doctors from seeing patients.

The litigation was brought by the Florida chapters of the American Academy of Pediatrics and the American Academy of Pediatric Dentistry, the Public Interest Law Center, and the law firm Boies Schiller & Flexner LLP. In 2014, after a 90-day trial where pediatric dentist and AAPD Dental Quality Alliance representative Dr. James J. Crall was an expert witness, a federal judge ordered the state to settle with the plaintiffs.

The settlement must be approved by the federal court where the suit was filed. The proposed settlement is lengthy, but an initial review by ADA legal staff indicates that it will affect dental care delivery in the state in the following ways:

• The state’s Agency for Health Care Administration (AHCA), which runs the Medicaid program, agrees to increase access to and utilization of pediatric dental services.
• AHCA will study network adequacy standards and make these standards part of Medicaid managed care contracts; AHCA will work with the Florida Academy of Pediatric Dentistry before finalizing standards.
• AHCA will impose incentives and contractual penalties for managed care organizations (MCOs) achieving or failing to achieve network adequacy standards; similar incentives or penalties will be applied for meeting metrics used to evaluate program improvements.
• AHCA will improve its outreach to enrollees on the availability and importance of dental care.
• The order sets out utilization benchmarks to be met or exceeded. It also provides for corrective action for failing to meet benchmarks; this corrective action could include targeted research into barriers to dental care, incentives or penalties for plans that fail to meet these standards, and outreach to enrollees on oral care importance.
• AHCA will afford dentists serving Medicaid enrolled children a reasonable opportunity to earn increased payment rates; the increase must be sufficient to incentivize dentists in such a way that all of the interim utilization benchmarks set forth in the agreement are achieved. Increased payment rates must be in an amount equal to at least the 50th percentile of commercial dental insurance payments for pediatric dental care services furnished in Florida.

The settlement also requires the state to pay $12 million in legal fees to the firms and parents of the families that brought the suit.

For more background on the case and the Dec. 20, 2014, District court ruling against the state, visit http://www.aapd.org/federal_judge_rules_that_florida_medicaid_program_violates_federal_law/.
Request for Board of Trustees Nominations

Southeastern District

The AAPD is accepting nominations for the trustee position in one district. Current Trustee Brian A. Beitel (Southeastern District) will rotate off the Academy’s board of trustees at the conclusion of the 2017 annual session. Nominations for a new trustee from the Southeastern District, for a three year term of service beginning in 2017 and concluding in 2020, are now being accepted. Nominations must be transmitted to AAPD headquarters from the Southeastern District for this position. The nominations packet must be postmarked no later than Sept. 1, 2016, and returned to the AAPD headquarters office to the attention of Margaret Bjerklie.

Nominations can be transmitted in one of two manners:

Individuals from the Southeastern district can submit a nomination by including:

- A letter signed by ten AAPD voting members from the district signifying support of the nomination.
- The completed AAPD nomination form* signed and dated by the Nominee.

An AAPD state chapter in the Southeastern District can submit a nomination by including:

- A letter, signed and dated, from the president of the recognized state unit certifying that the nomination is an official action of the state unit.
- The completed AAPD nomination form* signed and dated by the Nominee.

Under either scenario, all materials must be forwarded to the district organization (the Southeastern Society of Pediatric Dentistry) which will in turn forward these materials to the AAPD headquarters.

If two or more candidates are nominated, the AAPD will conduct a mail ballot of each AAPD voting member in the district in order to select the trustee.

*The AAPD Nominations Form may be downloaded from the AAPD website (http://www.aapd.org) members-only area under Member Resources.
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• To redeem your rebate, please fax a copy of your invoice showing the purchase of a ProVecta HD & ScanX Swift to Air Techniques at 516-433-3831 or email it to jpuswald@airtechniques.com no later than 10/31/16.
• Cannot be combined with any other offers.
welcome reception

Texas Revolution in the River City, San Antonio Style!

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SUNSTAR

GUNN BUTLER
keynote address

Erik Wahl
preconference course

Esthetic Pediatric Restorative Dentistry

5k fun run

All About that Race
career opportunities fair

Seeking Pediatric Dentists

posters

My Kid’s Dentist Poster Research Competition

Sponsored by NuSmile

Smiles ahead.

Sponsored by Pacific Dental Services, Inc.
exhibit hall

Explore the Floor
new dentist happy hour

Howl at the Moon
grand opening

Welcome to AAPD2016

first timers' reception

Mix and Mingle

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aapd recognition awards

And the Winner is...

distinguished service award

Dr. Dennis J. McTigue

Sponsored by The Miller Foundation

pediatric dentist of the year

Dr. Joel H. Berg

Sponsored by NuSmile

ann page griffin award

Rear Admiral

Dr. Elaine Wagner

Sponsored by Practicon

lewis a. kay excellence in education award

Dr. Lori Barbeau

Sponsored by Pediatric Dental Associates, Ltd.

manuel m. album award

Dr. Lisa Jocob

Sponsored by the Album Society

merle c. hunter leadership award

Dr. David A. Tesini

Sponsored by Kinder Krowns

jerome b. miller/for the kids award

Dr. Donald Chi (unable to attend)

Sponsored by Procter & Gamble Oral Health: Crest & Oral B
**nusmile graduate student research awards (gsra) presentations**

Sponsored by NuSmile

**Jenna Alvey, D.D.S.**
University of North Carolina at Chapel Hill
What Child Oral Health-Related Behaviors Can First-Time Mothers Actualize?

**Jami Ballantine, D.D.S.**
University of North Carolina at Chapel Hill
Exploring the Genomic Basis of Early Childhood Caries

**Jacqueline Burgette, D.M.D.**
University of North Carolina at Chapel Hill
Enrollment in Early Head Start and Quality of Life

**Chieh Ting Chang, D.M.D.**
UTHSC Houston Pediatric Dentistry Program
Ethnic Influence on Parental Preferences towards Behavioral Management Techniques Used in Pediatric Dentistry

**Gina Graziani, D.D.S.**
UCSF
Evaluation of Bacterial Enumeration of Cariscreen Versus Traditional Selective Culture

**Shawn S. Hanway, D.M.D.**
University of Florida, College of Dentistry
New Insights into the Oral Biofilm of Children with Caries

**Harlyn K. Susarla, D.M.D., M.P.H.**
University of Maryland School of Dentistry
National Dietary Recommendations for Children: Do National Healthcare Organizations Agree?

**ralph e. mcdonald award recipient**

**Casey L. Filbert, D.D.S.**
University of Tennessee Health Science Center
MTT Cytotoxicity of Three Dental Cements on Human Oral Cells

**my kid's dentist poster research competition**

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![MyKid's Dentist Poster](image)

**first place**

**Andrea Frere**
Jacobi Medical Center, Yonkers, N.Y.
Comparison of Two Isolation Techniques in Aerosol and Spatter Reduction

**second place**

**Gabriel Dawson**
Nationwide Children's Hospital/The Ohio State University, Columbus, Ohio
Relationship Between Factors Associated with Toxic Stress and Child Behavior in the Dental Office

**third place**

**Serena Mitchual**
University of Illinois at Chicago, Chicago, Ill.
Childhood Traumatic Stress and Behavior in the Dental Chair

**sunstar fellowship award winners**

Sponsored by Sunstar

**Allison Scully**
School of Dentistry, University of Michigan
The Effectiveness of Silver Diamine Fluoride as a Treatment for Caries in Comparison to Traditional Restorative Techniques: A 12 Month Randomized Controlled Trial

**Beau Meyer**
UNC School of Dentistry
Trends and Expenditures Associated with Dental Treatment Under General Anesthesia

**Christopher Goodell**
Boston Children's Hospital
The Effectiveness of 38% Silver Diamine Fluoride as a Caries-Arresting Agent in Carious Primary Teeth and its Effect on the Oral Microbiome

**Paul P. Taylor award**

**S Twetman, V Dhar**
Evidence of effectiveness of current therapies to prevent and treat early childhood caries. Pediatric Dentistry 2015;37(3):246-253

**chomper challenge winner**

![Chomper Challenge](image)
presidents' farewell dinner

Laissez Les Bons Temps Rouler

Reception sponsored by Treloar & Heisel
Dinner sponsored by MAM
2016 Annual Session Sponsors

The AAPD and Healthy Smiles, Healthy Children gratefully acknowledge the generosity of the following organizations for their annual support of AAPD 2016.

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- Sunstar Americas, Inc.

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- MAM
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- Indiana University Pediatric Dentistry Alumni Association
- KinderKrowns
- MacPractice
- Miller Family Foundation
- Practicon
- SML Space Maintainers Laboratories

Industry Relations Council Partner

The AAPD would like to thank NuSmile for their participation in the Industry Relations Council. The IRC provides exclusive opportunities throughout the year to meet and collaborate with both the AAPD and HSHC Leadership. Interested in joining? Please contact Vice President for Meetings and Continuing Education Tonya Almond at talmond@aapd.org.
The Gateway to Your Professional Development

Comprehensive Review: 22 CE
This course will provide you with an expansive, contemporary and in-depth summary of pediatric dentistry. Topics to be discussed include Growth and Development, Assessment and Prevention, Oral Pathology, Care for Special Needs Patients, Restorative Dentistry and Materials, Trauma, Behavior Management, Pulp Therapy and Hospital Dentistry.

Safe & Effective Sedation: 13 CE
This course includes lectures and case presentations, while enhancing clinically driven considerations, still retaining relevant topics associated with safe sedation of children such as the pre-sedation assessment, sedation and post-sedation period, patient monitoring and future trends. Additional materials are presented about the child’s personality, drug selection and a reference list.

Oral Pathology Symposium: 14 CE
This symposium is designed to update the practitioner on the diagnosis and management of common and important orofacial and cutaneous disorders and lesions. Dental anomalies, soft tissue and jaw lesions and specific skin disorders are presented. This multidisciplinary discussion will also include newly defined lesions and the latest diagnostic and therapeutic approaches.

2015 Annual Session: 39 CE
For the first time ever, AAPD is offering CE for those courses at Annual Session you could not attend. In the Education Passport, you will have the opportunity to purchase and earn up to 39 CE hours. Get the entire Annual Session package or just a few sessions, the choice is yours!

Dental Assistant’s Course: 7 CE
This course is specially designed for the pediatric dental assistant to increase their knowledge and understanding of sedative related and medical emergencies. A review of the pharmacology and clinical application of oral sedation and the use of nitrous oxide/oxygen is included. Participants will learn how to organize and prepare the office for an organized response to a medical emergency and the important role of the dental assistant in the dental team.

AAPD Education Passport
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Questions? Email CadmiumCD at info@cadmiumcd.com or call 410.638.9239
AAPD Presentations Submission Deadlines

**Sept. 16, 2016**
- Breakfast Rounds
- MiniClinics
- String of Pearls

**Jan. 17, 2017**
- NuSmile GSRA
- My Kid’s Dentist Research Poster Competition

If you are interested in making a presentation at AAPD2017 in Washington, D.C., please visit the AAPD website at [http://www.aapd.org](http://www.aapd.org) for a Breakfast Round, MiniClinic, or String of Pearls submission form. For additional questions contact Jessica Parra at jparra@aapd.org. For the Research Poster Competition contact Colleen Bingle at cbingle@aapd.org.

You must be an AAPD member in good standing and must be registered for the meeting in order to present at the Annual Session. The AAPD will strictly adhere to these deadlines. All submissions must be complete in order to be considered for a session at the Annual Session, GSRA, or a Poster.

**RESEARCH AWARDS**

**NuSmile Graduate Student Research Awards (GSRA)**

Up to eight finalists are selected to present their research at the AAPD Annual Session in May. Finalists receive travel to the Annual Session, complimentary registration for themselves and a guest, and a cash award and plaque at the Annual Session. A matching cash award is given to each finalist’s training program. The recipients are asked to present their research at the Annual Session. NuSmile generously supports these awards. All applications and research abstracts must be submitted by Jan. 17, 2017.

**My Kid’s Dentist Research Poster Competition**

All presenters must be registered for the Annual Session. If you are a pediatric dentist, you must be a member of the AAPD to present in this research competition. The research competition will take place on Friday, May 26, and Saturday, May 27, 2017, at AAPD2017 in Washington, D.C. Applications are due Jan. 17, 2017.
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Welcome New Members

The AAPD would like to welcome new members that have joined in March – June. We look forward to supporting your professional needs. For further information membership and membership benefits please contact Membership Department at (312) 337-2169.

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Dr. Maria Lagaida-MacDonald
Dr. Antoinette Laskasik
Dr. Bechera Fisher Surger

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Dr. Jung Min Cho
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Life Members

Congratulations to the following members who achieved Life Membership in AAPD this year. Life Membership is a member who has been a member of AAPD for 30 year and has reached the age of 65. Thank you for all your loyalty to AAPD!

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Dr. Jol M. Best
Dr. Patrick Canonue
Dr. Susan H. Carron
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Dr. Charles J. Pillar
Dr. Olaf B. Plotzke
Dr. Nick A. Prater
Dr. William R. Renner
Dr. Ivette Rodriguez

2017 Membership Directory Reminder

Your Membership Directory address is printed on your membership dues invoice that was recently mailed to you. Any changes or updates to your Membership Directory information are due to the headquarters office by Sept. 15, 2016. You can verify your address on your annual dues invoice or visit the Members’ Only section of the AAPD website (www.aapd.org) to update your profile. Please take a few moments to verify your address information to assure that AAPD has it correctly. Questions regarding your Membership Directory address information should be forwarded to Kathy Corbin at (312) 337-2169 or kcorbin@aapd.org.
Attention: Class of 2016

The AAPD congratulates all June postdoctoral graduates on their commencement into the profession. We would also like to remind you about the many reasons why membership in the AAPD is so important, especially at this point in your career.

- *Free* transition from student to active membership. This applies only if you complete an active membership application and return it to the AAPD headquarters office prior to Dec. 31, 2016.
- To be listed as an Active Member in the printed 2016 Membership Directory applications must be received by Sept. 1, 2016. Membership applications are available at [http://www.aapd.org](http://www.aapd.org).
- Recent graduate are afforded one year dues-waived and two years of reduced membership dues at 50 percent off the full active membership dues rate if they have maintained continuous membership. The dues reduction rate would translate to:

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<tr>
<td>First year out – 2016 - 17</td>
<td>$0</td>
<td>Prorated dues if application not receive by 12/31/16</td>
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<tr>
<td>Second year out – 2017 - 18</td>
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<td>Third year out – 2018 - 19</td>
<td>$345</td>
<td>Active Dues</td>
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Transition from student membership to active membership is not automatic. **Student members must submit an application and a copy of their pediatric dentistry certificate to the AAPD office.**

Alternatively, program directors may send a list of graduating residents to verify the completion their program to our office to membership@aapd.org and AAPD will automatically update their membership status to Active; otherwise the student must send in an application with certificate. For questions regarding student to active membership please contact AAPD Membership Department at (312) 337-2169.
# 2016 AAPD Certificate of Merit Award Winners

AAPD Certificate of Merit Award is given to a single senior dental student that shows the most promise in pediatric dentistry and is chosen by the dental faculty of each school.

<table>
<thead>
<tr>
<th>Arizona School of Dentistry &amp; Oral Health</th>
<th>Kyle Lea Henry</th>
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<tr>
<td>Augusta University</td>
<td>Natalie Evans</td>
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<td>Boston University</td>
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<td>Creighton University</td>
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<td>Medical University of South Carolina</td>
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<td>Meharry Medical College</td>
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<td>University of Minnesota</td>
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<td>University of Mississippi</td>
<td>Anna Jennings Nix</td>
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<td>University of Missouri - Kansas City</td>
<td>Audrey Y Sill</td>
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<td>University of Nevada Las Vegas</td>
<td>Bryce Bott</td>
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<td>University of Saskatchewan</td>
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<td>University of Southern California</td>
<td>Soo K. Lee</td>
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<td>University of Tennessee Health Science Center</td>
<td>Chad Slaven</td>
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<td>University of Texas Health Science Center</td>
<td>Jaclyn T. Vu</td>
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<td>University of the Pacific</td>
<td>Benjamin D. Robinson</td>
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<td>University of Washington</td>
<td>Bradley Cox</td>
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<td>Virginia Commonwealth University</td>
<td>Brandy Nichelle Edmonds</td>
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<td>West Virginia University</td>
<td>Katie Krieter Piet</td>
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AAPD Resident Recognition Awards

The AAPD Pediatric Dental Resident Committee developed the Resident Recognition Award to recognize pediatric dental residents doing innovative and interesting activities in their training programs. Selected residents are awarded with a monetary prize, featured on the AAPD website, featured in Pediatric Dentistry Today (PDT), and recognized at the awards ceremony during the annual AAPD meeting.

Nominations are reviewed by a panel of at least three reviewers from the Pediatric Dental Resident Committee, New Pediatric Dentist Committee and the Council on Membership and Membership Services.

Winners are chosen based on activities during residency that contribute to one or more of the following fields: patient care, education (i.e., teaching), research, and community service. Innovation, time commitment, and significance of service to others are the primary factors considered in the selection process.

Please join us in recognizing the two winners for the Spring/Summer cycle.

Alison Sigal

University of Toronto – Graduation 6/30/2016

Alison Sigal started a not-for-profit charitable foundation whose objective was to improve access to dental care for persons with disabilities call Oral Health Total Health (OHTH) (details at www.ohth.ca). OHTH brings together undergraduate dental students with persons with special needs at an event called Sharing Smiles Day to help them develop a bond that she hopes will last and then translate to improved access to dental care. The OHTH team provides advocacy and education both at the Faculties and in the community. She started this program at the University of Toronto and in the last three years has created chapters in all of the English speaking dental schools in Canada and several community colleges and is still growing. The program also hopes to raise funds to support the Mount Sinai Hospital Dental Program for Persons with Disabilities in Toronto.

Her research on determining the longevity of stainless steel crowns on permanent posterior teeth in persons with special needs is completed. This is the largest retrospective study of its kind that clearly demonstrates that SSCs have an 80 percent, 10-year survival with minimal negative impacts and should be the restoration of choice for the posterior permanent teeth with significant caries involvement and not just for those with special needs. She has already successfully defended her master’s thesis. This was submitted to the Graduate Student Research Competition for 2016 AAPD meeting.

She is recognized as an excellent teacher, mentor and role model to undergraduate dental students, hospital dental residents and fellow residents in pediatric dentistry and the other dental specialties. She goes the extra distance to ensure the learners not only get the message but understand the message.

Finally, she is an excellent clinician and has a gift with children and teens and she especially shines with patients with special needs of all ages in all settings—clinic, emergency and the operating room.

Beau Meyer

University of North Carolina – Graduation 6/30/17

Beau Meyer has already accomplished more in the area of research/scholarly activity than some of faculty at the University of North Carolina. Meyer is in his second year and is also working on an M.PH. degree. Below is a list of Meyer’s research accomplishments to date.

1) First author publication in the prestigious Journal of Dental Research (JDR) for the paper entitled “The confluence of sugar, dental caries and health policy.” JDR has an impact factor of 4.139, which is #1 in ranked journals in the Dentistry, Oral Surgery & Medicine category. Additionally, Meyer’s paper was listed among the top ten most read papers in JDR for the year 2015.

2) First author publication in the Clinical, Cosmetic, and Investigational Dentistry for his paper entitled “Determining the Rate of Follow-up after Emergency Department Visits for Dental Conditions.” This is scheduled to be published in 2016.

3) Meyer is also working on two additional research projects:
   a. Study 1: Examination of factors and costs associated with treatment under general anesthesia for young children. Meyer has dedicated himself to spend one day a week at the office of North Carolina Medicaid to understand and execute this study. Additionally, he is providing policy guidance to the dental Medicaid director
   b. Study 2: Children’s First Visit into Community-based and University-based Dental Clinics. Meyer has spent time in a community health department or obtain and analyze emergency visit data.
Got Loans?
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Register for a Webinar to Learn More: SoFi.com/AAPDWebinars

Congratulations to the Class of 2016! Graduation season is around the corner and as soon-to-be graduates complete their last weeks of school, we wanted to remind our members of AAPD’s partnership with SoFi, the market leader in student loan refinancing. Whether it is a parent who has taken out loans for a child or a recent graduate, SoFi refines student loans at low rates, creating meaningful savings for their borrowers.

To date, SoFi has originated over $9 billion of loans for over 150,000 borrowers. Benefits of the program include:

- **Bonus**: $400 welcome bonus* for members, their friends and family upon refinancing through SoFi.com/AAPD (must use the link!)
- **Flexibility**: Choose from 5y, 7y, 10y, 15y and 20y terms
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The application process is simple and begins with a pre-approval to determine the rates and terms available to you. To find out if you or a family member or friend qualifies, go to sofi.com/AAPD and apply. Pre-approval will not affect your credit score and rates are not binding.

Questions? Feel free to contact Michael Phillips and his dedicated customer service team at ask@sofi.com or (855) 456-7634. Be sure to mention you are part of the AAPD partnership program.

Disclaimer: SoFi loans are private loans and do not offer the same flexible repayment terms that are features of federal student loans. Federal loans offer forgiveness programs such as the Public Service Loan Forgiveness Program (PSLFP) and the Teacher Loan Forgiveness Program. If you work in either of these fields, you’ll want to see if one of these programs applies to you before refinancing your federal loans with SoFi.

¹ See sofi.com/disclaimer

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Rates effective as of March 1, 2016. Fixed rates from 3.50% APR to 7.74% (with AutoPay). Variable rates from 2.14% APR to 5.94% (with AutoPay). Interest rates on variable rate loans are capped at either 9.25% or 10.25% depending on term of loan. Lowest variable rate of 2.14% APR assumes current 1 month LIBOR rate of 0.44% plus 1.70% margin. Not all borrowers receive the lowest rate. If approved for a loan, the fixed or variable interest rate offered will depend on your creditworthiness, and the term of the loan and other factors, and will be within the ranges of rates listed above. For the SoFi variable rate loan, the 1-month LIBOR index will adjust monthly and the loan payment will be re-amortized and may change monthly. APRs for variable rate loans may increase after origination if the LIBOR index increases. The SoFi 0.25% AutoPay interest rate reduction requires you to agree to make monthly principal and interest payments by an automatic monthly deduction from a savings or checking account. The benefit will discontinue and be lost for periods in which you do not pay by automatic deduction from a savings or checking account. Eligible borrowers must be U.S. citizens or permanent residents and meet SoFi’s underwriting requirements. SoFi loans not offered to residents of Nevada. Other state restrictions may apply. See eligibility requirements at sofi.com/eligibility. SoFi loans are originated by SoFi Lending Corp (dba SoFi) California Finance Lender #6054612. NMLS #1121636.

State Dues

AAPD collects dues for the following chapters:

- Alaska Society of Pediatric Dentists
- Alabama Academy of Pediatric Dentists
- Arizona Academy of Pediatric Dentistry
- California Society of Pediatric Dentistry
- Connecticut Society of Pediatric Dentists
- Colorado Academy of Pediatric Dentists
- Florida Academy of Pediatric Dentists, Inc.
- Georgia Academy of Pediatric Dentistry, Inc.
- Hawaii Academy of Pediatric Dentistry, Inc.
- Illinois Society of Pediatric Dentists
- Indiana Society of Pediatric Dentistry
- Iowa Academy of Pediatric Dentistry
- Kentucky Academy of Pediatric Dentistry
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- Massachusetts Academy of Pediatric Dentistry
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- Montana Academy of Pediatric Dentists
- Nebraska Society of Pediatric Dentistry
- Nevada Academy of Pediatric Dentistry
- New Hampshire Academy of Pediatric Dentistry
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- New York Academy of Pediatric Dentistry
- North Carolina Academy of Pediatric Dentistry
- Pennsylvania Academy of Pediatric Dentistry
- Ohio Academy of Pediatric Dentistry
- Oregon Academy of Pediatric Dentistry
- Tennessee Academy of Pediatric Dentistry
- Texas Academy of Pediatric Dentistry
- Virginia Society of Pediatric Dentistry
- West Virginia Academy of Pediatric Dentistry
- Washington State Academy of Pediatric Dentistry
- Wisconsin Society of Pediatric Dentistry, Ltd.

Southeastern Society of Pediatric Dentistry
Southwestern Society of Pediatric Dentistry
Western Society of Pediatric Dentistry

State/District unit dues are included on your membership renewal notice.

If you are interested in having AAPD collect membership dues for your state or district unit please contact Membership and Marketing Director Suzanne Wester at swester@AAPD.org or (800) 544-2174.

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AAPD Predoctoral Chapter Spotlight

University of Michigan

By Michael Halcomb

The University of Michigan School of Dentistry (UMSOD) is known to be the home of the “Leaders and Best” and has continually led the way in providing comprehensive, specialized health care for families and communities statewide.

One of the services offered at the U-M C.S. Mott Children’s Hospital, located on campus and affiliated with the UMSOD, is focused on treating patients with craniofacial anomalies. The level of intensity for some of the dental patients seen at the hospital ranges from complex genetic anomalies and environmental exposures, to more common cleft lip/cleft palate and craniosynostosis deformities.

Being a member of the American Academy of Pediatric Dentistry (AAPD) allows me to shadow and work alongside these world-class faculty, thus providing an opportunistic hands-on experience.

The first time I shadowed at the Children’s Hospital with Dr. Katherine Kelly (orthodontist) was during their scheduled craniofacial clinic. On this day, members of the interprofessional craniofacial team work together on the treatment planning/procedures for the wide range of anomalies and syndromes diagnosed to their patients. The craniofacial team consisted of a surgeon, ENT, nurse, mental health professionals, social worker, speech language pathologist, audiologist, primary care physician, orthodontist, and a pediatric dentist. The genuine concern and care for the patients, exhibited by the faculty and providers, was truly inspiring.

Working alongside Dr. Kelly as she visited with each patient and discussed their needs, areas of concern, and progress in their treatment plan was informative, and cemented my foundational knowledge gained within a classroom setting. Many of the patients had congenital disorders, with oligodontia as one of their associated signs, and under Dr. Kelly’s direction I assisted in taking these patient’s oral health records. In addition, I watched as the patient’s treatment plans were reviewed between the patient and their provider, which allowed for optimal treatment reinforcement and progression.

After spending time with their scheduled patients, the craniofacial team met to review their medical findings and discuss future treatment plans. During the meeting, Dr. Kelly was kind enough to explain any areas of medicine that I was not familiar with; which greatly enhanced my learning.

The opportunity, provided by AAPD, to work within an interprofessional oral health care environment and learn how to assist those with special needs has been one of my most valued experiences as a dental student.
Resident’s Corner

Are you a #Tweetiatricdentist?

Maybe some of you have had a similar experience in your residency. You are doing your best to educate a parent regarding the status of their child’s oral health and all you are getting from the parent is the top of their head as they seem to be glued to their cell phone rather than hanging off of your every word. In a world that is increasingly more connected, it is often difficult to connect to our patients and their parents. As a wise man once said, “If you can’t beat ‘em, join ‘em.”

We have grown up with tech in our back pocket. We are often much closer in age to our patient’s parents than some of our colleagues and we are ideally positioned to evolve and move with the technological times. Twitter is a social media channel that many of our counterparts in medicine have already embraced as a way to impact communities, share information, teach, and connect to families as well as colleagues. In a world that has a hard time digesting long discussions at the doctor’s office, maybe it is time to enter into the world of fact bytes and photos in the ever shifting landscape of patient education.

I became excited about Twitter after a conversation I had with Dr. Jeff Karp (@jeffreyMKarp) the Residency Program Director of Pediatric Dentistry at the University of Minnesota, while at #AAPD2016 (you may be able to link it to the Twitter search page for #AAPD2016) in San Antonio. We were discussing how to engage policy makers when he mentioned that our colleagues in pediatric medicine have much more engaged on Twitter and there would be a place for pediatric dentistry to fill a valuable niche for Twitter users. We discussed the logistics and tweeting, whom we would like to engage through our tweets, and the obligations we have as professionals, educators, and members of the business community. What follows are take aways from that conversation and others I have had since that time regarding what Twitter might mean for the future of pediatric dentistry.

Some of Twitter is sheer logistics. Just because you write a tweet does not mean people will see it. How should media or hashtags be used in tweets? Can you under or over tweet? What are some common mistakes? I spoke with AAPD Web and Social Media Coordinator Lily Snyder (@AmerAcadPedDent), who had a few simple tips for those of us who are not already expert tweeters. Media and hashtags are important, these are what bring more people into your conversation. Engaging families, other providers, or specific communities on Twitter is only possible if they know you are communicating with them. Hashtags and media allow you to engage people and let them know you’re a resource for them. Over tweeting can be a problem! You do not want to add to the noise. Snyder recommends anywhere from two to five tweets per week to keep your followers and others engaged in your feed. In general the biggest mistake you can make is to not maintain your feed. Remain consistent with your posts, have some fun and be real but don’t let your feed turn into a runaway train. Many influencers recommend that people have only one Twitter account for both their professional interests and personal interests. People like to see the whole person. A good profile pic is also important rather than a logo or practice icon. I think that we should identify ourselves as pediatric dentists and reference our hashtag (#tweetiatricdentist) on our profile pages.

Twitter is also touted as a marketing tool and as I near the conclusion of my residency program I am inundated with marketing products that aim to increase the visibility of my future practice online. I will be the first to admit I was a skeptic and have been hesitant to use Twitter in my life as a pediatric dentist as I was afraid of having my posts seem like simple pandering for more patients. It turns out this is a common concern. Gary Vaynerchuk (@garyvee) is an entrepreneur and social media marketing expert. He has built a core business around the idea that you build value through content. By providing your best information for free, and building your personal brand you will attract people based on the quality of who you are. There is a fine line between what we are perceived to give: education and advice vs. how much we take: practice marketing. His advice, give more than you take. The application is simple, Twitter is our digital chair-side. Provide the same excellent advice on Twitter that you do with your patients in the clinic. But be sure to leave the patient’s information at the chairside. Practice pediatric dentistry offline; educate online (no HIPAA violations please). Use hashtags to engage parents, other health care professionals, politicians and community groups. Bring people into the conversation.

As residents we not only learn the skills to become a pediatric dentist, we are also learning the communication skills to educate and inform our patients, colleagues, and policymakers. Twitter and other social media provide an amazing opportunity to collaborate with other professionals, advocate for children and families, connect patients with rare conditions to the information they need and provide high quality, accessible health care advice. Importantly there is an open space in the twittersphere for pediatric dentistry, who better than residents to take up the cause.

How do you plan on engaging on Twitter? Let me know @AaronBumann on twitter with the hashtag #Tweetiatricdentist and let’s bring pediatric dentists to twitter!
Pup Therapy

“When you feel lousy, puppy therapy is indicated.”
—Sara Paretsky

Pup therapy, unlike most clinical breakthroughs, wasn’t born out of medical necessity but rather out of dire domestic need. Dr. Kaaren Vargas discovered pup therapy incidentally after being forced to take her home-defiling canine to work. While she was out caring for the children of North Liberty, Iowa, pooch Daisy was at home consoling herself by scratching and chewing all manner of household items. Being a psychiatrist at heart, Dr. Vargas realized her pup was reverting back to the oral stage of emotional development due to separation anxiety.

Dr. Vargas was also aware of the emerging research on animal assisted therapies; findings from a 2015 review that suggest animal assisted therapy may be of benefit to a wide range of individuals, including children with autism.1 As a member of the AAPD’s first ever evidence-based guideline workgroup on pulp therapy, she is also well aware of the need for evidence and research. Incorporating her pets into her practice has allowed her to marry complementary and traditional therapies.

Practically, it was cheaper to keep Daisy off the [psychiatrist’s] couch, both figuratively and literally, by bringing her to work every day; so Daisy, a lemon beagle, joined the staff in 2009 as the first therapy dog at Corridor Kids. Daisy, a lemon beagle, joined the staff in 2009 as the first therapy dog at Corridor Kids Pediatric Dentistry. The decision to bring Daisy to work involved checking state and federal ordinances pertaining to animals in health care settings, in addition to preparing patients and staff for her presence. On the front door was posted a notice stating, “A dog is on the premises.” All patients were notified and queried regarding allergies or preferences. Daisy and her colleague therapy dogs have been padding down the corridors for seven years now. Only a handful of patients have requested the dogs be kept away—a request Dr. Vargas’ staff cheerfully obliges.

Initially, Dr. Vargas viewed this arrangement as furniture-sparing not the new behavior modification tool that it has become. Dr. Vargas enjoyed having Daisy in the office and soon realized the benefit Daisy’s presence had on everyone—staff, parents, and patients. Daisy was calming everyone down, from toddlers to hygienists. Just as she had comforted Dr. Vargas after a stressful day providing pulp therapies, Daisy’s pup therapy was bringing a smile to everyone.

Daisy was so successful at her job of rewarding patients for good behavior, she was asked to mentor Maggie, a five-year-old lemon beagle rescue, before she retired at age 74 (16 in dog years). Daisy and her mentee Maggie would arrive at 6 a.m. each day with Dr. Vargas. Daisy showed Maggie the ropes; she let her know where to take a cat nap and where the staff kept the leashes so they could take a hygienist out for a walk. Unlike the doctor, Daisy refused to work eleven-hour days without a break.

When awake or out walking with staff, Daisy and Maggie could be found under Dr. Vargas’ desk or in the corner of the operatory waiting to greet patients after their visit. Daisy taught Maggie not to bark, lick or jump on any patient. Maggie learned quickly, and soon took Daisy’s esteemed place as sole therapy dog at Corridor Kids. Maggie solo career was short-lived, since Dr. Vargas adopted Nix, now a two-year-old Bichon.

Daisy, Maggie and Nix have all earned high marks on patient surveys. Some patients state the therapy pups are the best feature of the practice, an opinion Dr. Vargas and her staff share. (Although Dr. Vargas does think she has best human team, too.)

Today Nix and Maggie visit with patients before or after their visit with Dr. Vargas; patients arrive knowing they will be treated to a staff-supervised pup therapy. Best of all, no radiographs are needed to prove it works; patients’ smiles say it all.


Drs. N. Sue Seale and James A. Coll were married on April 23, 2016 in York, PA.

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New Technical Brief Now Available

Competition or Collaboration: Exploring the Relationship Between Corporate Dentistry and Dental Training Programs

A new technical brief from the Pediatric Oral Health Research and Policy Center examines how dental schools and dental service organizations can reap the benefits of working together in collaborative programs not only to provide needed treatment to financially disadvantaged children, but to introduce dental students to such corporate environment resources as data management, marketing and business strategies. Drs. Anupama Tate, Janice Townsend and Tegwyn Brickhouse served as co-authors on the brief.

Check out the new brief by visiting the POHRPC webpage at http://www.aapd.org/policy_center/technical_briefs/.

Caries, Calories, and Kids: Surveys with Pediatric Dentists and General Dentists Completed

Through a grant from the Robert Wood Johnson Foundation, the Pediatric Oral Health Research and Policy Center conducted a national survey to discover the attitudes, skills and practices of AAPD members related to reducing the consumption of sugar-sweetened beverages in patients ages 0 – 12 and preventing childhood obesity. A similar survey was administered to general dentists through the Academy of General Dentistry during May and June. The results will be presented at a meeting of oral health shareholders on Nov. 3 – 4, 2016, in Washington, D.C.
Harris Fellowship Recipient Announced

Erica Caffrey, D.D.S., was awarded the 2016-2017 Samuel D. Harris Research and Policy Fellowship sponsored by Preventech at the AAPD General Assembly on May 29, 2016. As this year’s Harris Fellow, Caffrey will work with the Pediatric Oral Health Research and Policy Center to complete a project in health policy and present the findings of her research at the 2017 Annual Session in Washington, D.C.

Caffrey graduated from the Columbia University College of Dental Medicine in 2013, where she received the AAPD Predoctoral Student Award for outstanding promise in the field of pediatric dentistry. In 2015, she completed her specialty training in the pediatric dentistry residency program at Children’s National Medical Center in Washington, D.C. It was during this rigorous hospital program that she became acutely aware of the many challenges facing vulnerable populations and providers in establishing and maintaining optimal oral health. Now in private practice, Caffrey hopes to be an active member of the pediatric dental community and advocate for those children most in need of care. She is deeply committed to improving access to and quality of care for all children and to contributing to the growing body of research on public policies related to children’s oral health care.

AAPD Visibility Built Through Meeting Representation

National Oral Health Conference on April 17 – 20, 2016, in Cincinnati, Ohio, sponsored by the Association of State and Territorial Dental Directors and American Association of Public Health Dentistry. Dr. Paul Casamassimo presented information on the Policy Center’s research project of medically specific factors that correlate to caries risk in young children.

Pediatric Academic Societies Meeting, April 30-May 3, 2016, Baltimore, Maryland. Mrs. Leola Royston presented a research poster on the Policy Center’s DentaQuest project. This meeting brings together thousands of pediatricians and other health care providers united by a common mission, which is to improve the health and well-being of children worldwide.

American Academy of Physician Assistants Conference, May 14-18, 2016, San Antonio, Texas. Mr. Patrick Killeen and Mrs. Leola Royston gave a 30-minute presentation on the DentaQuest project during the Research in Action section of the conference. They gained additional visibility for the research project by participating in an e-poster session for attendees.

Policy Center Continues Research on Medical Factors Associated with Caries Risk

The AAPD Policy Center was granted another year of funding from the DentaQuest Foundation for its research project, “Interprofessional Study of Oral Health in Primary Care: Common Risk Factor Study II.”

During the 2016 phase of the study, we are further validating medical factors identified in 2015 as correlating to caries risk – as well as exploring other potentially significant variables – through an analysis of electronic medical and dental records of additional US child populations. In addition, a caries-prediction tool will be pilot tested at Nationwide Children’s Hospital in Columbus, Ohio. A caries-risk assessment based on information routinely gathered from well-baby visits means that oral health promotion and necessary dental referrals may be delivered more efficiently by primary care providers.

The next steps toward improving provider adherence to oral health screening at well-child visits are to incorporate these variables into a new medically specific caries-risk assessment tool within the electronic health record. Such a tool carries the potential to further engage primary care medical providers in oral health promotion and encourage needed referrals to a dental home. Earlier oral health screenings, prompting more referrals of young children to a dental home, will help provide access to preventive dental services to those children most at risk for dental problems. Research investigators are excited about the implications this type of tool could have on improving the overall health of children.

Visit the POHRPC website at www.aapd.org to view the full Year Two Report.
Behind the Code

Sneak Peek at CDT 2017

A few new codes for CDT 2017 that are pertinent to pediatric dentists. A complete list of new and revised codes will follow in the September PDT. Note that the NEW Dental Case Management codes were approved based on a submission from the AAPD.

D9991 Dental Case Management – addressing appointment compliance barriers

Individualized efforts to assist a patient to maintain scheduled appointments by solving transportation challenges or other barriers.

D9992 Dental Case Management – care coordination

Assisting in a patient’s decisions regarding the coordination of oral health care services across multiple providers, provider types, specialty areas of treatment, health care settings, health care organizations and payment systems. This is the additional time and resources expended to provide experience or expertise beyond that possessed by the patient.

D9993 Dental Case Management – motivational interviewing

Patient-centered, personalized counseling using methods such as Motivational Interviewing (MI) to identify and modify behaviors interfering with positive oral health outcomes. This is a separate service from traditional nutritional or tobacco counseling.

D9994 Dental Case Management – patient education to improve oral health literacy

Individual, customized communication of information to assist the patient in making appropriate health decisions designed to improve oral health literacy, explained in a manner acknowledging economic circumstances and different cultural beliefs, values, attitudes, traditions and language preferences, and adopting information and services to these differences, which requires the expenditure of time.

D4346 Scaling in presence of generalized moderate or severe gingival inflammation – full mouth, after oral evaluation

The removal of plaque, calculus and stains from supra- and sub-gingival tooth surfaces when there is generalized moderate or severe gingival inflammation in the absence of periodontitis. It is indicated for patients who have swollen, inflamed gingiva, generalized suprabony pockets, and moderate to severe bleeding on probing. Should not be reported in conjunction with prophylaxis, scaling and root planing, or debridement procedures.

Here is a decision tree diagram developed by the American Dental Association.
Questions & Answers

1. Why was a new “scaling” code added to the CDT Code?
   a) Current CDT codes document procedures for patients with generally healthy periodontium, or patients with periodontal disease that has accompanying loss of attachment (e.g. periodontal pockets and bone loss).

   D1110 is primarily a preventive procedure, but can be therapeutic depending on the periodontium’s overall health. It is applicable for patients with generally healthy periodontium where any deposits are removed to control irritational factors, and for patients with localized gingivitis to prevent further progression of the disease.

   Codes D4341 and D4342 are therapeutic procedures, and are indicated for patients who require scaling and root planing due to bone loss and subsequent loss of attachment. Instrumentation of the exposed root surface to remove deposits is an integral part of this procedure.

   There is no CDT Code available to report therapeutic treatment of patients with generalized moderate to severe gingival inflammation, with or without pseudo-pockets but exhibiting no bone loss – this is the gap filled by D4346.

   b) Filling this gap will result in more accurate documentation and reporting by eliminating consideration of:
      • D4999 as this code requires a narrative containing information that limits auto-adjudication
      • “Undercoding” as a Prophylaxis procedure
      • “Overcoding” as a Scaling and Root Planing procedure

2. Would the D4346 procedure be appropriate for a “hard prophy” where more time than usual is required to remove plaque, calculus and excessive staining from the tooth structures in order to control local irritational factors?

   If the “hard prophy” is being defined strictly by the amount of time required to complete the procedure, then no D4346 is not appropriate. The D4346 procedure is applicable when there is generalized moderate or severe gingival inflammation in the absence of attachment loss. In other words, the procedure is based on the diagnosis rather than intensity of treatment required.

3. How do you differentiate this new scaling procedure (D4346) from the current debridement procedure (D4355)?

   D4355 is an enabler for comprehensive oral evaluation i.e. it is performed before the subsequent comprehensive evaluation simply to remove gross deposits from the tooth surface. D4346 is a therapeutic service performed after evaluation and diagnosis of gingivitis to remove all deposits and allow tissue healing.

4. What sort of oral evaluation is appropriate before delivery of D4346?

   As with all therapeutic procedures, D4346 is performed after a periodic (D0120), comprehensive (D0150), or comprehensive periodontal (D0180) oral evaluation.

5. May the oral evaluation and the D4346 procedure be performed on the same date of service?

   Yes. There is nothing in either CDT Code’s nomenclature or descriptor that precludes their delivery and reporting on the same date of service.

6. What is the clear and accepted definition of “…generalized moderate to severe gingival inflammation…” so that the D4346 procedure can be differentiated from prophylaxis procedures?

   a) The AAP defines generalized chronic periodontitis1 to be when 30 percent or more of the patient’s teeth at one or more sites are involved, and it is reasonable to extend this definition to a patient with gingivitis.


   b) The Gingival Index of Löe and Silness defines gingival inflammation as follows:
      0 = normal inflammation
      1 = mild inflammation- slight change in color and slight edema but no bleeding on probing
      2 = moderate inflammation- redness, edema, and glazing, bleeding on probing
      3 = severe inflammation- marked redness and edema, ulceration with tendency to spontaneous bleeding

7. What procedure is appropriate for patients with localized gingival inflammation (gingivitis)?

   D1110 is applicable for patients with localized gingivitis to prevent further progression of the disease.

8. Is there a waiting period between completion of a D4346 and delivery of a prophylaxis as part of the patient’s routine preventive regimen?

   There is no set waiting period. D4346 is a therapeutic procedure to bring the patients periodontium back to health. Based on the patients’ needs, the dentist is in the best position to determine when the patient can assume a regular preventive regimen that includes oral prophylaxis.

9. D4346 is a full mouth procedure; does this mean that it is completed in a single day?

   This procedure is expected to be completed on a single date of service, but patient comfort and acceptance may require delivery over more than one visit. Should more than one day be required the date of completion is the date of service.

10. What dental professional would deliver the D4346 procedure?

    As with all procedures documented with CDT codes, state laws regulating scope of practice determine which persons may deliver the service.
11. Is local anesthesia used when delivering D4346?

Patient needs and preferences, as well as the clinical state of the dentition, are factors that the dentist considers when determining the need for local anesthesia. State law determines who may deliver the anesthetic agent, which would be documented on the patient’s record using the applicable CDT Code.

12. What should be documented in the patient’s record to support delivery of D4346?

a) Periodontal charting that records (pseudo) pocket depths and bleeding on probing. (Note: Pocket depth may be recorded without loss of attachment.)

b) Photographs or other diagnostic images (e.g., radiographs) may be helpful to document the gingiva’s condition (e.g., visualize localized v. generalized inflammation) for retention in the patient’s chart.

13. Is D4346 a procedure followed by periodontal maintenance reported with D4910?

No. D4346 is performed in patients who do not exhibit any loss of attachment. D4910 is a procedure that includes site specific root planing as needed in patients who have been treated for attachment loss.

14. There is another new entry in CDT 2017 – “D6081 scaling and debridement in the presence of inflammation or mucositis of a single implant, including cleaning of the implant surfaces, without flap.” This procedure could be part of the treatment plan for a patient who also has moderate to severe gingival inflammation. Could D6081 and D4346 be delivered to the patient on the same date of service?

Yes. Both D6081 and D4346 may be delivered on the same date of service as there is nothing in either CDT Code’s nomenclature or descriptor that precludes concurrent delivery and reporting.

Please note, however, that the D6081 descriptor includes exclusion language stating – “This procedure is not performed in conjunction with D1110 or D4910.” – meaning that these are considered separate procedures and may be reported with the same date of service.

Please contact Dental Benefits Director Mary Essling with questions at messling@aapd.org.

For inquiries contact Dr. J. Kyle House (541) 387-8688 or send resume to jobs@akidzdentalzone.com

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For inquiries contact Dr. J. Kyle House (541) 387-8688 or send resume to jobs@akidzdentalzone.com
2016 Joint Academic Day

Over 165 educators involved in predoctoral and postdoctoral pediatric dental education came together for the Annual Joint Academic Day. Dr. Amr Moursi, Trustee-at-Large for Academic Affairs welcomed everyone and introduced the morning program featuring a discussion titled Effective and Efficient Clinical Teaching led by Dr. John Littlefield, Adjunct Assistant Professor, Comprehensive Dentistry at the University of Texas Health Science Center at San Antonio and Dr. Paula N. O’Neill, Professor Emerita from the University of Texas School of Dentistry at Houston. Drs. Tegwyn Brickhouse and Janice Townsend spoke about Collaboration, Not Competition: A relationship analysis of DSOs and dental schools in view of children’s access to care based on a technical brief produced by the AAPD Pediatric Oral Health Research and Policy Center. Rounding out the morning was an informative discussion on the Advanced Dental Admissions Test provided by Dr. Kathleen Hinshaw of the ADA and updates to the ADEA PASS system offered by Dr. Carolyn Booker.

Following lunch sponsored by Proctor and Gamble, the Society of Predoctoral Program Directors and the Society of Postdoctoral Program Directors met and held programs designed to meet their specific needs.

Please contact AAPD Educational Affairs Manager Scott Dalhouse at sdalhouse@aapd.org for additional information or assistance with accessing the presentations.

Dr. Amr Moursi welcomes participants in the 2016 Joint Academic Day.
AAPD Continuing Education Courses

Register Now!

Register now for our Fall CE courses. Whether you’re looking for sedation training, a course for your assistants or just need an update on the latest in pediatric dentistry, there’s something for everyone! These courses are guaranteed to sell out, so don’t wait to register, visit http://www.aapd.org/events and sign up today!

Oral Clinical Exam Review
SEPTEMBER 8, 2016
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At the conclusion of the course, participants will have gained a better understanding of how to prepare for the exam including:

- Topical areas of the exam.
- American Academy of Pediatric Dentistry guidelines.
- The examination process.
- Suggested readings for exam preparation.
- How cases are designed and graded.

SPEAKERS
Paul Casamassimo, D.D.S., M.S.
Henry Fields, D.D.S., M.S., M.S.D.

This course is approved for 7 continuing education credits.

Sponsored by NuSmile

Comprehensive Review of Pediatric Dentistry
SEPTEMBER 9-11, 2016
RITZ CARLTON, ST. LOUIS, MO.

This highly acclaimed course provides a comprehensive review of pediatric dentistry. It may be helpful to AAPD members in their preparation for the American Board of Pediatric Dentistry (ABPD) examinations, although participation in this course does not guarantee successful completion of board exams. The curriculum is also designed to serve as a comprehensive and in-depth review of pediatric dentistry to those attendees who may be either board certified already or not planning on taking the exam.

Topics to be discussed include growth and development, assessment and prevention, oral pathology, care for special needs patients, restorative dentistry and materials, trauma, behavior management and pulp therapy.

Expert clinicians presenting this course utilize a lecture format to review the subjects included in the board examinations. Participation in this course does not guarantee successful completion of board exams.

The curriculum is also designed to serve as a comprehensive and in-depth review of pediatric dentistry to those attendees who may either be board certified or not planning on taking the examination.

COURSE CHAIR AND SPEAKER
Kevin J. Donly, D.D.S., M.S.

SPEAKERS
Catherine M. Flaitz, D.D.S., M.S.
Andrew L. Sonis, D.M.D.
Amr M. Moursi, D.D.S., Ph.D.

This course is approved for 22 continuing education credits.

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Smiles ahead.
Small Beginnings, Big Outcomes

OCTOBER 28-29, 2016
DUBLIN, IRELAND

The AAPD is joining the Royal College of Surgeons Ireland in hosting their Annual Scientific Meeting. We are working closely with Dr. John Walsh, dean of the dental faculty, along with Drs. Jessica Y. Lee and Amr Moursi for the AAPD plus AAPD Headquarters staff.

Highly acclaimed international experts will provide a comprehensive overview in the treatment and management of dental conditions in children. The course will provide a contemporary, scientific and in-depth discussion about international approaches to clinical pediatric dentistry. Topics to be discussed include assessment, communication, prevention, restorative dentistry and pulp therapy, behavior guidance and sedation, trauma, and orthodontic management. The curriculum is designed to provide short one-hour overviews of the emerging therapies and approaches citing the current literature along with clinical cases. Attendees will learn the best scientific approaches to pediatric dental conditions. Global expert clinicians will provide a discussion about international variations to management planning and treatment planning approaches. The limited attendance will create an environment, which will allow for stimulating interactions with the speakers and fellow attendees.

The specific objectives of this course are to:

1) Understand the latest scientific evidence in caries risk assessment, prevention, restorative dentistry and pulp therapy in children.
2) Learn the emerging therapies and approaches in trauma and orthodontic management in children.
3) Discuss new approaches to communication, behavior guidance and sedation in children.

INVITED SPEAKERS

Ebrahim Al Awadhi, B.Dent.Sc., M.F.D., M.Sc., M.Orth., F.ED., Ph.D
Marielle Blake
Paul Casamassimo, D.D.S., M.S., F.D.S.R.C.S. Ed.
Dympna Daly, B.Dent. Sc, M.Sc. (Paed.)
Jeff Dean, D.D.S., M.S.D.
Billy Fenlon, B.Dent.Sc., M.Dent.Sc., M.R.C.D. (C)
Jessica Lee, D.D.S., M.P.H., Ph.D.
Amr Moursi, D.D.S., Ph.D.
Ann O’Connell, B.A., B.Dent.Sc., M.S. (Univ Roch)
Arun Sharma, M.Sc., D.D.S.
Professor Helen Whelton, B.D.S. (NUI), Ph.D. (NUI), M.D.P.H. (NUI), D.T.I.H.E. (NUI)
Tim Wright, D.D.S.

Sponsored by NuSmile

ENHANCED COURSE AND WORKSHOP:
The Role of the Dental Assistant in Safe Procedural Sedation

NOVEMBER 4-5, 2016
POINTE HILTON SQUAW PEAK, PHOENIX, ARIZ.

This course is specially designed for the pediatric dental team to increase their knowledge and understanding of office preparation and medical emergencies that may occur during a sedation visit. A review of the pharmacology and clinical application of oral sedation and the use of nitrous oxide/oxygen will be included. Participants will learn how to organize and prepare the office for an organized response to a medical emergency and the important role of the dental assistant in the dental team. There will be hands-on experiences geared toward the dental assistant where they rotate through multiple stations including emergency airway rescue techniques, monitoring, basic life support, and the appropriate use of restraining devices.

COURSE CHAIR AND SPEAKER

Sarat “Bobby” Thikkurissy, D.D.S., M.S.

SPEAKERS

Stephen Wilson, D.M.D., M.A., Ph.D.; Alan Milnes, D.D.S., Ph.D. and Cara Riley, D.M.D.

This course is approved for 11 continuing education credits.

NEW COURSE: Safe and Effective Sedation of the Pediatric Dental Patient

NOVEMBER 4-6, 2016
POINTE HILTON SQUAW PEAK, PHOENIX, ARIZ.

This all-new course features the recognized leaders in the field, both in dental anesthesia as well as pediatric dentistry. You’ll find didactic lectures, case studies, film clip sessions, panel discussions and hands-on breakouts with personalized attention. There will be dedicated forums to ask questions and talk about specific issues with course faculty, discuss techniques for effective communication with the patient and parent to address unusually challenging and complex situations. This course will offer opportunities to gain hands-on experience while learning airway techniques to rescue patients and will include breakout sessions with manikin practice with face masks, ambu bags and the insertion of nasal and oral airways; all in a personalized setting with real equipment and monitors.

COURSE CHAIR AND SPEAKER

Stephen Wilson, D.M.D., M.A., Ph.D.

COURSE VICE-CHAIR AND SPEAKER

Sarat “Bobby” Thikkurissy, D.D.S., M.S.

SPEAKERS

Alan Milnes, D.D.S., Ph.D. and Cara Riley, D.M.D.

This course is approved for 22 continuing education credits.

Sponsored by My Kid’s Dentist
For more information on how to submit your media coverage, please contact Public Relations Senior Manager Erika Hoeft at (312) 337-2169 or erika@aapd.org.

AAPD Member Op-Ed Included In The Hill: May 16, 2016

AAPD member Dr. Jessica Meeske (Neb.) authored an op-ed, “How Medicaid Audits Hurt Children In My Home State.”

In the op-ed, Dr. Meeske shared her experience with the Recovery Audit Contractor (RAC) program and noted that it prevents low-income families and children from receiving dental care through Medicaid in Nebraska. She referenced specific Nebraska RAC audit examples to reinforce her stance. Dr. Meeske balanced her piece by noting provider manuals in Nebraska give dentists discretion to determine frequency of treatment and noted low-income patients, particularly children, are at higher risk and may need care more often than every six months.

ParentMap.com: June 2, 2016

AAPD national spokesperson Dr. Amr Moursi (N.Y.) was interviewed for a story on the banking of baby teeth in regards to dental stem cells and regenerative therapies.

“This area of study is moving quickly, and significant clinical applications may be available in the future,” says American Academy of Pediatric Dentistry national spokesperson Dr. Amr M. Moursi.

“Parents should discuss the risks and benefits of dental stem cell banking with their pediatric dentist in order to make a well-informed decision.”

Mouth Monster Consumer Hub Articles

- Little Teeth Truths: Is thumb sucking hurting my child’s teeth? This query was addressed by AAPD President Dr. Jade Miller: http://mouthmonsters.mychildrenstooth.org/little-teeth-truths-is-thumbsucking-hurting-my-childrens-teeth/


- The Perfect Smile? AAPD Immediate Past President Dr. Robert Delarosa explains when cosmetic dentistry may or may not be right for children: http://mouthmonsters.mychildrenstooth.org/the-perfect-smile/

- Can You Handle A Dental Emergency? Pediatric dentist and AAPD national spokesperson Dr. Bruce Weiner weighs in on oral injuries during the toddling years and beyond: http://mouthmonsters.mychildrenstooth.org/can-you-handle-a-dental-emergency/

Facebook Webinar

Making the Most of Your Facebook Community to Grow Your Practice

With 75 percent of parents logging into Facebook daily, the well-established social platform is an ideal – and affordable – channel to build awareness of and promote your practice. On April 21, Weber hosted a 60-minute webinar to better understand why the social platform should be considered a cornerstone for your practice’s online presence, and how to best use the page to engage with families you care for on a daily basis.

To access the materials, please log on as a member to the main site and you’ll find the information under Practice Management under webinar materials.
AAPD Press Releases


AAPD Honors Winners at Annual Session in San Antonio: http://www.aapd.org/aapd_honors_winners_at_annual_session_in_san_antonio/

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Ad Council Update

To date in 2016, the campaign has received over $6.8M in preliminary donated media.
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Healthy Smiles, Healthy Children: The Foundation of the American Academy of Pediatric Dentistry strives to ensure every child has a Dental Home – a place where they can receive consistent, compassionate dental care.

Dr. Ned Savide
*HSHC President*

**Growth, Gratitude and Looking Ahead**

Frequent visitors to these pages will notice a considerable difference between the photo that used to be on this spot and the mug you see smiling back at you here. Dr. Beverly Largent concluded her three-year term as Healthy Smiles, Healthy Children President last month and I now have the honor of serving as HSHC President.

Transitions are a time of both reflection and looking ahead so here’s a little recap of the Foundation’s accomplishments during Beverly’s tenure:

- HSHC’s annual Access to Care Grant portfolio grew from $300,000 grants made in 2012-2013 to more than $1 million in grants and commitments made each year.
- HSHC’s Access to Care reach grew from 17 to 29 states, plus the District of Columbia.
- Most important, HSHC grantees provided dental homes to more than 200,000 children.

Since 2010, HSHC has issued more than $4.1 million in grants and commitments to 81 organizations.

And, as the Foundation increased its grant commitments to help more children across the country receive needed dental care, our assets grew – from $13.5 million as of July 30, 2013, to more than $16 million as of July 30, 2015 (our most recent complete audit on file).

If ever there was a case to be made for someone “making the wood pile higher” during her time in a leadership spot, it’s Beverly.

Now, Beverly would be the first person to tell you it’s not all her. She’d say it’s our volunteers, our grantees, our members, or our Board, but for me it would come back to what she’s been able to help HSHC accomplish.

There is one point in her rebuttal that I would agree and that’s the Foundation’s success really is attributable to you – the AAPD members who generously support Healthy Smiles, Healthy Children.

Pediatric dentists are the finest people in dentistry. In my 41-year career, I’ve been amazed by the warmth, generosity and humanity that AAPD members exude. It’s what I love about our field.

Looking ahead, I am grateful to everyone who played a part in getting Healthy Smiles, Healthy Children to be where we are today. I also am grateful to everyone who will play a part in taking Healthy Smiles, Healthy Children into the future.

This coming year for the Foundation is not only a transition year for governance, but we will continue our ongoing evaluation for how we can continue to serve the oral health needs of our nation’s children.

Yes, we will continue our efforts to support community-based initiatives that provide Dental Homes to underserved children. But, we also will explore other ways Healthy Smiles, Healthy Children can harness the expertise and generosity of AAPD members to help all children.

It’s with great gratitude and humility that I begin my term as Healthy Smiles, Healthy Children President. I am honored to have this opportunity and I look forward to building upon the legacy of those who have come before me.

**Thank you for all you do for the kids!**

*Dr. Savide, AAPD Past President (2005), is a retired pediatric dentist residing in suburban Chicago.*
Every Child Deserves a Dental Home

Thanks to fifty volunteers, our friends at Sunstar Americas, Inc., along with the University of Texas Health Science Center in San Antonio and the Ricardo Salinas Pediatric Dental Clinic, 203 San Antonio children now have dental homes … and 140 of those kids already have follow-up appointments scheduled.

Sponsored by Sunstar Americas, Inc., University of Texas Health Science Center received a total of $30,000 in HSHC Access to Care Grants to help provide year-round care for these children.
donor appreciation gala

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¹Data on file.
On behalf of the entire NuSmile family, we want to thank you not only for your loyalty to our company and our products, but for your insights on how we can better serve your needs and those of your patients and their parents. We invite you to keep the candid feedback coming so that we can do an even better job of supporting your success during our next 25 years.

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Dr. Kelly Kim  
Supported Pediatric Owner Dentist  
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CALIFORNIA—SAN DIEGO. Private practice opportunity in ethic driven, fee for service practice. Excellent opportunity to join a well respected, growing, privately owned practice in America’s finest city. We are a multi-doctor, multi-specialty, technically advanced practice in a new facility. We are currently looking for a pediatric dentist who is board certified or eligible to join us. Opportunity for longterm associateship and even partnership certainly there for quality candidate to be discussed upon review of application and in-person interview. We look forward to reviewing your application. To apply, all candidates must submit via email: —Resume—Requested daily compensation—References. Thank you for your interest Ethics American Board of Pediatric Dentistry eligibility/diplomate status.

COLORADO—DENVER. Pediatric Dental Group of Colorado has an opportunity for an associate to join our respected quality oriented pediatric dental practice / business with multiple locations in Denver Metro, Northern Colorado and Summit County. We expect our associates to; exhibit high ethical standards and possess excellent leadership qualities, to possess exceptional child ‘coaching skills’ as we gain the trust of the child / parent enabling most treatment to be rendered in our private office settings, to be committed to providing high quality preventive and restorative dental treatment, to understand that the private practice of pediatric dentistry is a ‘people business’ and requires excellent people skills, to understand and appreciate the challenges and rewards of “business ownership” in contrast to ‘having a job’. akidsdentist@yahoo.com.

FLORIDA—PALM COAST. Immediate opening for Associate. Busi practice with a large patient base, strong referring doctors and fully trained front desk and clinical staff seeks a motivated associate dentist. Our office is well managed and has much potential for growth. Please email resume/C.V. to denvac@aol.com Pediatric Certificate from an accredited program.

FLORIDA. Would you like to work in sunny south Florida? In private practice? We are expanding again. Looking for a part time pediatric dentist associate with potential to full time. Ultimately, an equity position can be arranged. Licensed to practice in FL, and has completed a Pediatric Dentistry residency in the U.S. drmilan1996@yahoo.com.

GEORGIA—Metros ATLANTA & NEIGHBORING AREAS. Pediatric dentist wanted. Be a part of our highly esteemed group practice. We offer an on-site anesthesia team, educated staff and a welcoming environment. Motivated, ethical person a must. Top salary and benefits. Call (678) 763 2600 or e-mail: wvsshanti@time.com.

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IDAHO—TWIN FALLS. Growing pediatric group practice seeks a full-time associate. Our practice offers a full range of pediatric services including oral conscious sedation and general anesthesia. Our team is genuine, kind, dedicated and focused on giving quality care to a “small town” Idaho community. We offer a great earning potential ($250,000+ w/ monthly base for a set period), health insurance for you and family, liability insurance, and association dues. Please email C.V. and questions to smiles@kids@fgmail.com.

ILLINOIS—NAPERVILLE. Fantastic Future Now! Careers for Pediatric Dentist in a multi specialty dental practice Our large Multi specialty Practice has an immediate opportunity for a Board Certified Pediatric Dentist. The Pediatric Dentist will provide dental care for infants, children, and adolescents. The Pediatric Dentist should be comfortable working with young patients and enjoy providing excellent patient care to children in a loving comforting way. The parents in our practice are as equally important and must have a fully understanding of the treatment being provided to their child. Why Choose A Multi Specialty Practice? For many reasons, including these: Our Specialty Team includes the finest specialists in the industry, including faculty...
from previous dental educational centers. Our commitment to developing the strengths and abilities of our Specialists and providing high quality of care and safety to our patients is our standard. Our Multi Specialty Practice located in beautiful downtown Naperville has a large and diverse pediatric patient population, including special needs children—you will enjoy great opportunity for professional growth and financial reward by treating such a large, diverse group, and you will enjoy the satisfaction of improving the health and the lives of the children for whom you provide care. We are located in Naperville, 40min from Chicago, axdismary@aol.com.

**INDIANA—INDIANAPOLIS.** Growing children’s practice in Indianapolis is seeking both a part-time and/or full-time Pediatric Dentist and Hygienist to join our professional team. Positive, caring attitudes, exceptional communication skills, and the desire to make a difference are a must. We offer competitive salary and a great benefits package, great environment and state of the art equipment. If you possess a passion for providing quality care and are looking for a rewarding practice opportunity please contact Dr. Taylor at (317) 968-9700 or email jtaylor@childrensdentistnh.com.

**MARYLAND—BOWIE/LANHAM.** Pediatric Dentist needed to join our dedicated team which has served our communities for over 10 years. Family owned offices. 401K and safe harbor benefits available. Full-time or part-time opportunities available. Offices located in the Bowie, MD and Lanham, MD areas. New graduates are welcomed to apply. Maryland licensure, Maryland Controlled Substance Licensure, DEA licensure, Malpractice Insurance whitakerdds@yahoo.com.

**MASSACHUSETTS—WORCESTER.** We are a well-established, private practice with lots of great families and good staff. We are looking for an full-time or part-time associate interested in a great career opportunity. Benefits available. Please email your resume to pedhek366@gmail.com or call 203-915-6328.

**MICHIGAN—FREDERICK.** We are well established private practice with two locations, in the Frederick and Hagerstown area. Our offices are the state of the art in pediatrics. Our goal is to provide the highest quality of pediatric dental service including nitrous oxide, conscious sedation and hospital privileges. The position is for 3-4 day work week. Requirements are Maryland license, certificate in pediatric dentistry and board certification/eligible. mcmachoh@jfdentity.com.

**NEW HAMPSHIRE—GILFORD.** Our busy and continually growing state-of-the-art pediatric practice seeks motivated and compassionate pediatric dental associate to grow with our high demand of patients. Our Gilford practice is located in the heart of the Lakes Region, our Plymouth practice is centrally located in the White Mountain Region and our Littleton practice in the North Country. These locations are ideal for someone looking for it all! Lake and Mountain living with convenient access to Boston and the Seacoast. Come join a highly trained compassionate and enthusiastic dental team that parents and patients love! All of our practices offer advanced technology, top notch equipment and office décor our patients can't stop talking about! This practice is without a doubt one-of-a-kind! We offer generous pay and a flexible schedule. For more information about this position e-mail drkennell@md.com.

**NEW JERSEY—AVON BY THE SEA.** Active and growing New Jersey Shore Pediatric Dental practice, beautiful location close to New York and Philadelphia. Wonderful area to live and/or bring up your family. Two office locations. State-of-the-art facility treating a mixed population. Excellent opportunity to practice ALL aspects of pediatric dentistry. Hospital privileges available for OR cases. Great staff and wonderful opportunity for the right person. Accredited ADA Pediatric Dentistry Program—Certificate in Pediatric Dentistry. ABPD Eligible info@shorechildrensdentalcare.com.

**NEW JERSEY.** Compassionate, warm pediatric dentist wanted for a well established, excellent orthodontic practice. Great opportunity for energetic and caring pedodontist. New graduates and dentists with experience welcome. Practice in a state of the art friendly environment. Patients and parents love our practice! It’s a fun place to work! Salary negotiable. D.D.S./D.M.D. from a dental education program accredited by the Commission on Dental Accreditation. Current, valid license to practice dentistry in the state of New Jersey. Current Malpractice Insurance. kbiltho@msn.com.

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**NEW JERSEY.** Pediatric dental office in New Jersey, with an easy commute to NYC, has an opening for a part time pediatric dentist to work 2-3 days a week (Saturdays are a must plus one or two weekdays). It...
is a busy fee for service practice with a well-managed front desk and fully trained clinical staff. We have been recognized as one of New Jersey’s top pediatric dentists by parents and peers. Please email C.V. to
dentistry4children@comcast.net.

NEW YORK—MONROE. We are looking for a highly motivated and energetic pediatric dentist to join our team. Our practice is about 50 miles north of NYC, near the Woodbury Commons. We have been in practice for 10 years and recently moved into a brand new state of the art facility. We offer paperless charts, digital x-rays, nitrous oxide and IV sedation when needed. Please email C.V. to info@jegental.com.

NEW YORK—POUGHKEEPSIE. Pediatric Dentists: Currently seeking well qualified Pediatric Dentists to add to our team of Pediatric dentists. We have been established for over 10 years and provide quality dentistry in our community. We have a great team and believe in teamwork and providing a comfortable environment for our patients and staff. Must be team oriented, responsible and dependable. Applicants must be caring, compassionate and have outstanding patient care principles. Exceptional clinical and communication skills are a must. Full-time and part-time positions available $800-$900 base, 42%, which ever is higher. Average $1000-$1200 per day Monday—Friday. Job Type: Contract Send C.V. or Resume: Email: dentalwork46@gmail.com.

NEW YORK—WEST SENeca. Passionate pediatric dentist with positive attitude towards kids is needed immediately. Pediatric/Ortho practice seeks Pedodontist for 2-3 days per week, Buffalo, New York suburb. Please call 716-822-2499 or email resume to paree1988@verizon.net.

NEW YORK. Busy multi-doctor pediatric dental office looking for an associate pediatric dentist for our Queens, New York locations. Our offices are located at Bayside, Flushing and New Rochelle, New York. Both part time or full time positions will be considered. Must be a team player with a compassionate and honest personality. Health insurance and 401K benefits available for full time employees. If interested, please email curriculum vitae/resume to suetdol@hotmail.com or fax to 718-281-2898. D.M.D./D.D.S. and specialty certificate.

NEW YORK. Energetic, talented pediatric dentist wanted for a rapidly growing, excellent Pediatric/ Family/General dental practice. Great opportunity for caring motivated pediatric dentist. New graduates and dentists with experience are welcome. Practice is a state of the art facility alongside a highly productive staff. This practice is, without a doubt, one of a kind. Patients and parents love it! Come join a highly trained, compassionate and enthusiastic team. It’s just more fun to practice here! Be a part of our outstanding team, providing care for Long Island’s kids. High compensation for the right candidate. Available weekdays and/or Saturdays. katherine.berick88@gmail.com.

NORTH CAROLINA—CHARLOTTE. Awesome position for a fun-loving Pediatric Dentist in our patient-centered, growing multi-location practice in the Charlotte, NC area. Our team is looking for a like-minded Pediatric Dentist to join us who is Board Certified/Board Eligible and able to practice in NC. We pride ourselves on the caring, relationship-building nature of our practice and would love to work with someone who also shares these values. Our practice has a very low turnover, both in staff and dentists. We also have incredible practice management systems in place to make your job more enjoyable. We would welcome someone with or without practice experience. We would like to accommodate an associate that wanted to work part-time or full-time. Associate may also have the option of partnership at a future date. Please send inquiries along with a C.V. to: staff@SteelCreekPediatricDentistry.com. Visit our websites: SteelCreekPediatricDentistry.com, PediatricDentistryofMathews.com, PediatricDentistryofCary.com to check out our practices! Board Eligible or Certified Pediatric Dentist.

NORTH CAROLINA—CHARLOTTE. A highly respected, multi-doctor Orthodontic Dental practice has an immediate opening for a Board Certified or Board eligible Pediatric Dentist to join our progressive, energetic and expanding practice. Please email information to 3eabh23@gmail.com.

NORTH CAROLINA—DURHAM. We strive for EXCELLENCE! Seeking a pediatric dentist who most importantly aims to provide quality care to our patients and excellent customer service. We are providing exceptional advanced pediatric dentistry, this is the ideal opportunity for someone wanting a long-term and stable career. Our office has new, state-of-the-art equipment and provides an incredible environment for kids. Within our office is a full service anesthesia suite. Here we have the option to provide in-office general anesthesia for our patients with the assistance of a board certified dentist anesthesiologist. This position offers competitive pay and benefits, please contact us further to discuss. Aside from a wonderful practice to work, Durham is a great place to call home! Located in the Triangle [Durham-Raleigh-Chapel Hill], we are surrounded by major universities, including Duke and UNC is also adjacent to the RTP, which is one of the most prominent, high-tech research communities in the United States consisting of over 150 major companies. Durham has been voted one of top 100 cities to live with a thriving health care industry and rich culinary and recreational attractions! Part-time or full-time opportunities available. If you are interested in joining our team, please submit your C.V. to amyjulian@duke.edu or fax 919-667-5900 to the attention of the Office Manager. Please send a cover letter and C.V. to 155 S. Church St, Suite 300, Durham, NC 27701 to: amyt@duke.edu.

NORTH CAROLINA—DURHAM. We have an immediate opening for a Board Certified or Board eligible Pediatric Dentist. Our team is a fun, vibrant, patient-centered, and soon to be brand new state of the art facility. We offer paperless dental charts, digital x-rays, nitrous oxide, in-office sedation and the option of in-office general anesthesia or general anesthesia in a hospital setting. We offer a competitive compensation package for the right Dentist to join in our ever growing practice. Please call us at (919)421-2000 or visit our website at: www.durhampediatrics.com.

NORTH CAROLINA—LEWISVILLE. We are looking for an associate pediatric dentist who is Board Certified or Board eligible and interested in the practice in Lewisville, NC. We are a multi-location practice, currently seeking a Board Certified dentist to join our progressive practice in Lewisville. Excellent opportunity for a motivated part-time pediatric dentist in a state-of-the-art pediatric dental practice. There is strong potential leading to a full-time associate position. We are a thriving, well respected, high quality pediatric dentistry practice located in a professional Medical Park in the Piedmont Triad of North Carolina. We have an exceptional, experienced, multi skilled team to support patient care in our 15 chair child friendly office. We are a fee for service practice and are looking for a skilled pediatric dentist dedicated to providing the highest care in a fun, caring environment. Please send cover letter and C.V. to 185 Kimel Park Drive, suite 202, Winston-Salem. North Carolina 27103. Attn: Office Manager.

NORTH CAROLINA. Seeking a compassionate, hardworking pediatric dentist to bring a positive attitude to our Young and Polite Children’s Dentistry team. We are a multisite group practice that thrives on communication to our parents and our patients. We have a awesome team work atmosphere. Must be available to work full time (32 hours/week) at our state of the art pediatric dental office. Our goal is to provide the highest quality of pediatric dental services including orthodontics, nitrous oxide, in-office sedation and the option of in-office general anesthesia or general anesthesia in a hospital setting. We offer a competitive compensation package for the right Dentist to join in our ever growing practice. Please call us at (704)387-7336 or visit our website at: www.youngandpolite.com.

OREGON. Southern Oregon pediatric dental office seeking FT pediatric or general dentist who enjoys working with kids. FT position considered for the right candidate. $200K-250K base with bonuses and benefits. Associateship, buyout and partnership are all options. Call 541-408-1057 for details or send C.V. to rexandemily@gmail.com.

Pennsylvania—BEAVER. Pittsburgh Area/ South Eastern Ohio. Full Time/Part Time position opening. Very Busy office. We have a very experienced staff to help with all of your needs. We offer many Benefits and a pleasant work opportunity. We also have Hospital privileges available. Please contact Robert Davis at rfdavis@nnsona.com for more information. Must have completed a accredited Residency and have appropriate licenses.

Pennsylvania—COLLEGEVILLE. Suburban Philadelphia, PA Modern pediatric dental practice is looking for a pediatric dentist...
who has superior behavior management, clinical and communication skills. We are a well respected fee for service practice that is focused on delivering high quality pediatric care in a comfortable kid friendly setting. We are offering a competitive salary package of 35% of production, paid malpractice insurance, health insurance for you and your family, memberships to the ADA, AAPD, and ABPD, plus a generous CE stipend. You will have a four day work week so that you may have time to spend enjoying other interests outside of dentistry. Submit cover letter and resume to eric.hans@comcast.net or Fax 610-409-1941 Certificate in Pediatric Dentistry.

PENNSYLVANIA—PHILADELPHIA. This is the opportunity you’ve been waiting for. Great owners, great associates, staff, great kids, great offices... the only thing missing is YOU! Amazing opportunity for motivated pediatric dentists to join our 7 location pediatric practice in the Philadelphia/suburban area. Work with our large group of superb doctors and staff to provide high-quality care for our thousands of wonderful kids! Also, provide infant and special needs care under general anesthesia in our own private Ambulatory Surgical Center – the first in the nation dedicated exclusively to dental procedures. No investment – excellent salary and benefits, too. EOE. We’re about to expand again, so please send your letter of introduction and C.V. to dbressler@hotmail.com. Website: Cavitiesbusters.com.

PENNSYLVANIA—PITTSBURGH AREA. Join our 13 office group practice. Flexible schedule. Our current Pediatric Dentists make in excess of $300,000/year. Contact Dr. Dandashi at 412-980-4027 or DrDandashi@KatzurDental.com. All contact kept confidential. Apply online at www.KatzurDental.com.

PENNSYLVANIA—PITTSBURGH. Exceptional opportunity for a motivated and caring pediatric dentist. Large, brand new state of the art orthodontic/ pediatric office in a growing suburb of Pittsburgh. This is an excellent opportunity to manage your own office and become a pillar in the community. The office has an excellent reputation and location – close to schools and pediatricians. Part time or full time. Schedule is flexible. Private practice experience or graduating residents in 2016-2017. Potential for ownership. Please email C.V. to PittsburghSmiles1217@gmail.com.

SOUTH CAROLINA—CHARLESTON. Pediatric Dentistry – The Medical University of South Carolina, James B. Edwards College of Dental Medicine, invites applications for a full-time tenure-track faculty position as the Pediatric Dentistry Graduate Program Director. Located in the historical peninsula of Charleston, SC, the Medical University of South Carolina is the State’s only comprehensive academic health science center. The primary area of responsibility of the faculty position is to lead the Pediatric Dentistry Graduate Program, including active participation in the teaching and patient care components of the program. Other expectations include teaching pediatric dentistry in the D.M.D. program and conducting research in related areas. The ideal candidate must have excellent leadership, mentorship, administrative, and organizational skills. In addition, the candidate must have a creative and positive attitude toward maintaining a team-oriented work environment. Outstanding opportunities exist for teaching and curriculum development and participation in an active intramural faculty practice. Candidates must possess a D.M.D. degree or equivalent, and a certificate or master’s degree from a CODA-accredited graduate pediatric dentistry program. Candidates must be eligible for licensure in South Carolina. Board certification in pediatric dentistry and previous teaching and research experience are required. Academic rank and salary will be based on candidate’s qualifications and commensurate with level of experience. Preference will be given to applicants with demonstrated expertise in didactic and clinical teaching, scholarship and program administration. Review of candidates will begin immediately and applications will be accepted until the position is filled. Dr. Cynthia L. Hipp, Interim-chair, Department of Pediatric Dentistry and Orthodontics, Medical University of South Carolina, 30 Bee Street, Room 120, MC 507, Charleston, South Carolina 29425, Phone: (843) 792-3916, Fax: (843) 792-3917.

SOUTH CAROLINA—COLUMBIA & SUMTER. Excellent Opportunity for pediatric dentist starting IMMEDIATELY!! Patients abound for a dentist who wants to work hard and enjoy Southern living in a private practice setting. We have been in practice for over 33 years in two locations, Columbia and Sumter, both seeking full-time Pediatric dentists who are passionate about their careers. Great relationships with all pediatricians in the area. Two major hospitals and one surgical center for hospital OR cases between the two offices, and oral conscious sedation performed at both locations. Full Time Position: Continuing Education stipend, Health Insurance, $10000/day or 35% collections, whichever is higher, 401K, and relocation expenses provided. The Midlands of South Carolina provide quick access to the mountains and all the beaches of South Carolina, while welcoming you home like no other place. Our teams are extremely loyal and dedicated to providing the absolute best in treatment and comfort for each patient. For more information send C.V. to goinsandpoag@ccdsmail.com. Visit our website at www.carolinachildrensdentistry.com.

TENNESSEE—SMYRNA. My Kid’s Dentist has an excellent opportunity for a pediatric dentist to work 3-4 days per week in a brand new office opening in Smyrna, TN just outside of Nashville. My Kid’s Dentist offers excellent income, comprehensive benefits and a great work/life balance all in an environment in which you dictate treatment plans. If you like the idea of focusing 100% of your time on children then this is the office for you. Pediatric General Dentist from an accredited University and an active State Dental Board license. D.D.S./D.M.D., Oral Sedation license required. Send resume to lisoname@pacificden.com.

TENNESSEE. We are currently seeking a full or part time pediatric/general dentist to join our Team of Professionals in a rewarding work environment! This is an outstanding career opportunity with a highly successful practice located in Savannah, TN. • Day-to-Day headaches of Managing a Practice • Great opportunity • Excellent Quality of life • Moderate Cost of Living • Excellent Schools • Within 15 miles of Lake • Located on the Banks of the beautiful Tennessee River Quality dental care must be your top priority. You would have a full schedule immediately and outstanding earning potential. We offer employment opportunities that provide professional growth, and financial growth. We strive to provide employees with continuous professional development, competitive wage and benefits, and a supportive work environment. We offer a lucrative compensation package, including malpractice, continuing education and 401k, etc.


TEXAS—HOUSTON. Great opportunity for a motivated pediatric dentist to provide care in a rapidly expanding pediatric dental practice. Wonderful staff, great benefits and the latest in technology. Excellent compensation and earnings potential based on monthly production. For information or consideration please email resume to jack.castle@lowlendetals.com and visit www.lowlendetals.com.

TEXAS—SAN ANTONIO & AUSTIN AREA. Want to be at the TOP OF THE PAY SCALE & BE CONSTANTLY BUSY? Here you go! Booming & mature pediatric dental office seeking a new energetic super star pediatric associate who aspires to move into ownership in future. Compensation is higher of monthly guarantee salary of $25k or % that includes all hygiene. Many job benefits and flexible schedule. Mentoring doctor ready to train as needed. Send C.V. to thane@covrojobs@gmail.com. Get ready for your mind to be blown how great this job is!

TEXAS—SAN ANTONIO/SURROUNDING AREAS AND LAREDO. Tots to Teens Pediatric Dentistry & Orthodontics is seeking a part-time/ full-time pediatric dentist. We are NOT a cooperate dental practice. We are locally owned and operated. We have the following locations available. San Antonio, TX, Kerrville, TX, and Laredo, TX. Our practices offer an attractive, child-friendly ambiance. We are chartless, have digital radiographs and up-to-date dental equipment. Our doctors provide in-house treatment with nitrous oxide, oral sedation and extended treatment under general anesthesia at an outpatient hospital setting for patients in need. Partnership opportunities are available for the right candidate. Compensation includes a daily guarantee or percentage of collections, whichever is higher. Full time benefits include medical insurance reimbursements, vacations, holidays and CE days. We pay for malpractice, license renewal, membership fees and CE allowance. Some of our locations offer travel reimbursements for part-time positions. Sign on bonus for full-time positions. If you are interested in joining a busy, up-and-coming dental practice, we are happy to meet with you. Email your resume to loido@teensdental.com.

TEXAS. Brand New Modern Pedo / Ortho Office in Dallas area. Partner and Share space with ortho (there 2 days a week) to build your pedo practice! Especially ideal if you don’t want the full costs or headaches of building a new office from scratch. Great location on main road with high visibility, in a booming growth area of Collin County (recently ranked # 1 in Texas for median HH income). Lots of new homes being built all around. Both immediate and long term benefits of sharing costs, overhead and patients. 2,400 of with 5 chairs in open bay, 2 private treatment rooms. All the hard initial groundwork is done— all you have to do is move in and start practicing! Owner financing available. Email: ucbum1995@hotmail.com.

TEXAS. Our established pediatric and orthodontic practice is currently looking for a third pediatric dentist to join our team. Our patient base consist of primarily of Texas Medicaid patients. However, we consider it a privilege to treat our underserved children. We will hire a new graduate or an experienced pediatric dentist who wants to practice without the administrative burdens of operating a practice. If interested you may email your resume to doderrvbo@sbcglobal.net. Please visit our web site at www.sscdc.org for additional information.
**Virginia—Fairfax.** Excellent opportunity for a pediatric dental associate in well established pediatric dental practice in suburbs of Washington D.C. We are a private practice looking for full time or part time associate. Experience and board certification preferred but not required. Comprehensive benefit package available. Please email resume and CV for consideration to kidsdentist25@gmail.com. Board eligible, experience.

**Virginia—Hampton Roads Area & Tidewater.** Pediatric Dentist. Quality, progressive multi-office practice in Chesapeake, Norfolk, Suffolk, and Virginia Beach specializing in family practice, pediatric and orthodontic care seeking pediatric dentists who are looking for a permanent position with ownership opportunities. This person must have the philosophy that the patient’s care and best interest comes first. We are looking for D.D.S./D.M.D. professionals who will deliver high quality, comprehensive dental care with genuine concern for the patient. Benefits for talented and motivated individuals include competitive salary, continuing education, medical/disability/liability insurance, 401k, profit sharing, deferred compensation and most importantly lots of team support from our dentists, hygienists, schedulers and other office staff. If interested in our practice, please contact: LWSS, Attn: Robin Greene, 1230 Progressive Drive, Suite 103, Chesapeake, VA 23320, (757) 410-2658 fax, robin@lwsdcom.com, (757) 962-6769 direct dial. D.D.S./D.M.D.

**Washington—Marysville.** Fun, friendly, totally awesome Pediatric Dental Group in quest of an outstanding associate to join a highly respected, established, quality oriented pediatric dental practice. We have multiple locations in Marysville, Monroe Lake Stevens, and Stanwood/Washington, all located within Snohomish County in the beautiful Pacific Northwest! If you feel you are compatible and are interested in exploring the possibility of joining our remarkable team please respond with your CV to Tracy@PygerSoundPD.com. Our associates must:
1) Demonstrate high ethical standards and possess excellent leadership qualities.
2) Possess exceptional child coaching and behavior management skills.
3) Dedicated to providing high quality preventive and restorative dental treatment.
4) Fully understand that the private practice of pediatric dentistry is a people business and requires EXCELLENT interpersonal/social skills.

**Wisconsin—Green Bay.** Successful, well respected and growing pediatric dental office serving our community for over 40 years seeking a compassionate and motivated pediatric dentist. We are a private group practice of board certified pediatric dentists offering comprehensive pediatric dentistry and orthodontics to patients in a fun, family centered atmosphere. We currently have a large patient base with 100+ new patients every month in addition to our busy recall system. We are completely digital, paperless and have a well-trained team. We are seeking a full time pediatric dentist with the opportunity for partnership. Our practice is located in beautiful northeastern Wisconsin which offers professional sporting events, year round outdoor recreation, excellent school systems, convenient art and cultural exchanges and a wonderful community for families. We are offering a generous starting salary with bonus potential based on production and an excellent benefits package. New residents and experienced practitioners encouraged to apply. Send letter of interest along with C.V. to juliananderson@kidsdentalexperts.com. Completion of Pediatric Dental Residency Program.

**Nebraska—Las Vegas.** Well established multi-specialty pediatric dental practice in Las Vegas, NV looking for an energetic associate with a heart for children who will treat you and your child as we would want to be treated. Practice is run by Christian principles and business ethics and associate must be able to embrace these. We are looking for someone to help take the practice to the next level. Position can lead to an equity position for the right person. 4-5 days/week. Las Vegas is a dynamic city of 2 million with an interesting reputation. There is always a lot to do, but most of the population lives away from the Las Vegas strip and leaves that to the tourists. Beyond the neon Las Vegas is similar to most cities, with suburbs, over 81 elementary and middle schools, parks, and over 300 days of sunshine a year. Nevada dental license (Western Regional Boards); Nevada Conscientious Sedation permit. Board eligible/Board certified, lantunanpev@yahoo.com.

**Faculty Positions Available**

**Illinois—Chicago.** Clinical Assistant/ Clinical Associate Professor (Non-Tenure Track) Department of Pediatric Dentistry College of Dentistry University of Illinois at Chicago The Department of Pediatric Dentistry in the College of Dentistry at University of Illinois at Chicago is seeking a qualified candidate for a full-time faculty non-tenure track position of Clinical Assistant or Clinical Associate Professor. The Department seeks an excellent educator, mentor, and clinician with an interest in research to teach in both the pre-doctoral and post-graduate programs. The Department has a history of strong interaction with Public Health; thus, the ideal candidate should be able to work well within that environment. Responsibilities will include resident, dental student, physician and medical student education and training, delivery of dental care for children under general anesthesia and sedation, professional service and scholarly activity, including mentoring of graduate student research projects. Participation in intramural or extramural practice is acceptable. Qualifications include a Doctorate of Dental Surgery (D.D.S./Doctor of Dental Medicine (D.M.D.)) or equivalent degree; completion of an accredited specialty program in Pediatric Dentistry; currently hold or be eligible for dental licenses in Illinois and maintain current dental, specialty, and controlled substances licenses, and current CPR/ BLS/PALS certificates; be board certified or board eligible. If board-eligible, the candidate will be expected to complete the board certification process within three years of the date of hire; experience utilizing conscious sedation and general anesthesia; and must be eligible for rank at the Clinical Assistant Professor level (minimum) or Clinical Associate Professor (depending on prior education and experience) commensurate with norms and criteria for faculty appointments within the Department of Pediatric Dentistry. Preferred qualifications include a strong background working with diverse patient populations, and experience or training in the care of medically compromised and/or special needs patients. Experience in evidenced-based dentistry, curriculum development, and practice management preferred. For fullest consideration, submit a letter of intent, current C.V., and the names of three references to University of Illinois at Chicago, Human Resources website at https://jobs.illinois.edu/job-board/job-duty/5%2B%28jobID%29=62584 through the close of business on Monday, July 26, 2016. Position to remain open until filled. The University of Illinois at Chicago is an Equal Opportunity, Affirmative Action employer. Minorities, women, veterans and individuals with disabilities are encouraged to apply. The University of Illinois may conduct background checks on all job candidates upon acceptance of a contingent offer. Background checks will be performed in compliance with the Fair Credit Reporting Act.

**Multiple Locations.** The NYU Lutheran Pediatric Dentistry Residency Program is recruiting for three positions: San Diego, CA: FT clinical and managerial faculty member for its Associate Program Director position. Its San Ysidro Health Center-affiliated site, the San Ysidro Children’s Dental Center, is located on the campus of Rady Children’s Hospital in San Diego. Responsibilities include full program oversight as well as managerial, clinical, and didactic resident instruction in concert with other faculty members. Requirements include a D.D.S./D.M.D. degree from an ADA-accredited U.S. or Canadian dental school, a certificate in pediatric dentistry from an ADA accredited program, ABPD Diplomate status desirable, a record of scholarship, and a dental license in the State of California. Salary will be commensurate with qualifications and experience. Phoenix, AZ: Full-time faculty position with a dental clinic affiliated with the NYU Lutheran-Pediatric Dental Residency Program in Phoenix, Arizona. Primary responsibilities include direct patient care, and clinical and didactic resident supervision and instruction. The ideal candidate has experience in supervising and training dental residents and is skilled in all aspects of pediatric dentistry. Requirements include a D.D.S. or D.M.D. degree from a U.S. or Canadian CODA accredited dental school, completion of a CODA accredited program in pediatric dentistry, and a dental license in the State of Arizona. Brandon, FL: Full-time faculty position within Brandon Community Health Center, a FQHC within Suncoast Community Health Centers, Inc. and affiliated with the NYU Lutheran-Pediatric Dental Residency in Brandon, Florida. Primary responsibilities include direct patient care, clinical and didactic resident supervision and instruction. Hospital responsibilities including supervision of residents in the operating room, inpatient and ED call rotation supervision on a rotating basis. The ideal candidate has experience in supervising and training dental residents and is skilled in all aspects of pediatric dentistry. Requirements include a D.D.S. or D.M.D. degree from a U.S. or Canadian CODA accredited dental school, completion of a CODA accredited program in pediatric dentistry, Board eligible or certified, a dental license in the State of Florida, Pediatric conscious sedation permit in the State of Florida desirable. Review of applications will continue until the positions are filled. To explore these opportunities & in confidence, please send correspondence of interest and curriculum vitae to: Dr. Daniel J. Kane at DKane@CharterCare.org and Dr. David Okaji at David.Okaji@LutheranDental.com

**International**

**Canada Nova Scotia—Halifax.** Paediatric Dentist, IWK Health Centre The IWK Health Centre is actively seeking a Paediatric Dentist to complement our 4 Paediatric Dentists on staff with the Department of Dentistry, IWK Health Centre and the Division of Paediatric Dentistry, Department of Dentistry and Allied Clinical Sciences, Faculty of Dentistry, Dalhousie University. The IWK Health Centre is a teaching hospital affiliated with Dalhousie University Faculty of Dentistry, Medicine.
and Allied Health Sciences. The Paediatric Dentist should have training and demonstrated competence in provision of multidisciplinary care both in the hospital clinic and operating room to tertiary care paediatric hospital patients including those who are medically compromised, or have intellectual and physical disabilities. In addition to the clinical activities described, the successful candidate will provide care to paediatric dental patients referred to the Paediatric Dental Unit in the Children’s Health Program, from communities within the Province of Nova Scotia. Active Staff Paediatric Dentists are involved in education through the Division of Paediatric Dentistry, Faculty of Dentistry, Dalhousie University, teaching dental and dental hygiene students and our one-year postgraduate Paediatric Dental General Practice Residency, on an assigned basis. A graduate training program in the specialty of Paediatric Dentistry is under active development. Paediatric dentists also participate in teaching of graduate periodontics and OMF and undergraduate and graduate medical students at the IWK and Dalhousie. Applicants must have a Fellowship with the Royal College of Dentists of Canada and must be able to obtain licensure in the province of Nova Scotia. Please send a cover letter and curriculum vitae along with two letters of reference to: Dr. Ross D. Anderson, Chief of Dentistry, IWK Health Centre, 5850/5980 University Avenue, PO Box 3070, Halifax NS B3J 3G9 Tel: (902) 470-8678, Fax: (902) 470-8835 ross.anderson@iwk.nshealth.ca. The IWK Health Centre and Dalhousie University are equal opportunity employers and educators.

PRACTICE FOR SALE

ILLINOIS—ST. LOUIS METRO AREA. Rare opportunity for an immediate buy-in partnership that collects over $4.7 million in 2014. This opportunity will provide a Pediatric dentist a successful and prosperous future. The senior Pediatric partner wants to retire and sell his third ownership. The seller’s 2014 allocated collections were $1.3 million plus with NO Medicaid, all fee for service and insurance base. State of the art practice has 3 locations, the seller’s location has 3 open bay chairs and 2 quiet rooms. All updated technology, newer equipment and the real estate is also for sale. The other 2 locations are brand new with all state of the art technology with a fun kid friendly environment. Financing is already in place. The practice is located in the suburbs of St. Louis. You can have the benefits of a larger metro area in a small town. The metro link runs residents to downtown St. Louis in less than 20 minutes which allows residents to enjoy all of the things that are offered in St. Louis. The suburb itself has a strong private and public school system and major colleges and universities nearby. The area is experiencing a large growth period for the practice and the residents. Please call me to discuss this great practice opportunity. Ruth Dalin Peds Exclusively Pediatric Dentist Recruiter | Practice Transition | Consultant Toll Free: 866-533-5899 Fax: 888-818-9113 E-Mail: Ruth@Peds-exclusively.com.

ILLINOIS, NW Suburban Chicago – Well established practice with excellent reputation, good referral base, multi-doctor pediatric medical practice in same building and day care/preschool next door. Staff privileges available at nearby Children’s Hospital/Surgicenter. Great hometown community, excellent schools with central downtown. Well maintained building. Close to ORD (and the rest of the world), tollways and expressways. Two main operators, plus hygiene chair w/x-ray, 4th (private) op plumbed, currently used as x-ray room. Central Nitrous, Digital-ScanX X-rays/Panorex. Dentrix software. Pvt Dr Office, Biz office, Dr’s Bathroom. Recent computer upgrades. Video in each operator. Owner working 3 ½ days a week seeing to transition or retire outright. Inquiries in confidence to fmrscdds@aol.com ABPD Candidate or Board Certified.

ILLINOIS WESTERN SUBURBS. Practice For Sale: Western Suburbs of Chicago. Established and still growing Oak Brook and St Charles. Owner looking to retire but will stay on for mutually agreeable transition. Oak Brook office is the flagship, 2800 sf, nine operatories; St Charles, 2500 sf, five operatories. Option of purchasing both office practices, or St Charles. Send letter of interest to jjpenterprises@gmail.com.

INDIANA. Established pediatric dental practice for sale. Close access to Indiana Dunes and Lake Michigan. Less than one hour from Chicago and South Bend. Easy access to nearby universities. Award-winning school district. Owner works 3.5 days per week. Average monthly work schedule: 15 days. Average monthly production: $45,000. Practice has excellent opportunity for growth and pursuit of other interests: Academic, community, or family. Owner seeks retirement. For more information, contact transition specialist, Bruce Lowy, 847.677.6000, confidentiality assured. Board-eligible, licensed pediatric dentist.

MICHIGAN. Pediatric Practice—NE of Detroit. Large facility with 12 ops. 17+ hygiene days per week. Plenty of active patients with a 600 new patients per year history. Perfect associate-to-owner or role reversal (seller becomes senior associate) opportunity. Contact agent: Reggie. VanderVen@HenrySchein.com or call 616-485-0482. MI specialty license.

TEXAS—NORTHEAST OF MCKINNEY. Great opportunity to own your own Medicaid practice northeast of McKinney, Texas! This completely paperless office boasts a total active patient count over the last eighteen months of 7,063 and an average new patient count over the last twelve months of 61. This 3,500 square feet practice has four operators equipped for the dentist, two hygienist operatories, plus one additional plumbed but not equipped operator. 2015 gross collections for this very busy Medicaid practice were $1,218,353.00. For more information, email Paula at paula@adsotexas.com or call 460-222-3200.

OFFICE SPACE AVAILABLE

TEXAS—LEWISVILLE. Office space for pediatric dentist for lease or sale. Gas, water and suction for 5 chairs in an open area and one private operator. Large waiting room, finance office, consult room, x-ray room, lab, 2 private offices, kitchen/ lounge and built in video game console. 2560 sq. ft. Minimal time to be open for business. In building with general dentist. 972-317-6211.
DEPARTMENT OF PEDIATRIC DENTISTRY
RESIDENCY PROGRAM DIRECTOR

The School of Dentistry at Oregon Health & Science University invites applicants for the position of Pediatric Residency Program Director. The campus is especially interested in candidates who can contribute to the diversity and excellence of the academic community through their research, teaching and service.

The Program Director will be responsible for the establishment and maintenance of a program of specific and general scholarly activity for the Pediatric Residency program. This position will participate in the clinical and didactic education of predoctoral students and pediatric dental residents, administrative committees and councils and other professionally related public service activities on behalf of the department. The School of Dentistry is committed to providing opportunities for faculty development.

Qualified candidates will have a dental degree (DDS/DMD) from a CODA accredited school, a certification in pediatric dentistry recognized by CODA, board certification or eligibility for certification from the American Board of Pediatric Dentistry and eligibility for dental and moderate sedation licensure in Oregon. Preferred candidates will have dual training, MPH, PhD degrees, membership in professional societies in dental research and pediatric dentistry, demonstrated achievement in research, and course director or co-directorship experience. Candidates must be able to teach at the pre and post graduate levels. Salary and academic rank will be commensurate with qualifications and experience.

Oregon Health & Science University
Oregon Health & Science University is a nationally prominent research university and Oregon’s only public academic health center. It educates health professionals and scientists and provides leading-edge patient care, community service and biomedical research. The School of Dentistry shares the mission of the Oregon Health & Science University to provide educational programs, basic and clinical research, and high quality care and community programs. We strive to foster an environment of mutual respect where the free exchange of ideas can flourish. The dental school prepares graduates in general dentistry and the dental specialties to deliver compassionate and ethical oro-facial health care.

The University is responsive to the needs of dual-career couples. OHSU is an equal opportunity, affirmative action institution. All qualified applicants will receive consideration for employment and will not be discriminated against on the basis of disability or protected veteran status. Applicants with disabilities can request reasonable accommodation by contacting the Affirmative Action and Equal Opportunity Department at 503-494-5148.

Portland and the Pacific Northwest
Portland is Oregon's largest city, with a metropolitan area population of nearly two million. The area offers entertainment in the arts and theater, museums of art and science, restaurants, night life and sports. Opportunities for outdoor recreation abound in Portland and the Pacific Northwest. Nearby rivers and lakes invite swimming, boating, and other water sports. Mountains and ocean beaches, all within a 90-minute drive, attract campers, hikers, cyclists, skiers and climbers.

Portland is well known for its abundant offering of outdoor activities due to the close proximity of the Columbia River Gorge, the Mt. Hood forest system and the Oregon beaches - all within a short drive. Outdoor recreation is fostered by Portland’s sunny summer and fall days, averaging 70-80 degrees with low humidity, and moderate winter days rarely dipping below 32 degrees.

For more information contact: Samantha Kennen, HR Manager, kennen@ohsu.edu
Completed application and enquiries should be directed to: Dr. William A. Wiltshire, Professor and Head of the Department of Preventive Dental Science, College of Dentistry, Department of Preventive Dental Science, Faculty of Health Sciences, Department of Preventive Dental Science, College of Dentistry, Faculty of Health Sciences. Responsibilities will include didactic, preclinical and clinical teaching in the undergraduate and graduate programs, administration, research and participation in community service programs in pediatric dentistry. Rank and salary will be commensurate with qualifications and experience. The appointment will commence on August 1, 2016 or as soon thereafter as possible. Position Numbers: 22140 & 22141

The appointee must have completed full-time university-based specialty training in Pediatric Dentistry from an accredited Canadian or US program (Masters level credentials from a 36 month specialty program are preferred). Previous teaching, research and University-based administration experience is preferred. Successful completion of the RCDC exam in Pediatric Dentistry is preferred, but applicants from accredited programs who have not completed the RCDC fellowship, will have up to 5 years to attain such. Candidates must be eligible for licensure with the Manitoba Dental Association as a Pediatric Dentistry specialist (Licensing Bylaw No. 17-10.) http://www.manitobadentist.ca Private Practice privilege is available 1 day, or two half-days per week.

The University of Manitoba is the largest and most comprehensive institution of higher learning in Manitoba. Considered an area of strength within the University of Manitoba, the College of Dentistry is dedicated to educating dental, dental hygiene and graduate students in a progressive learning environment, conducting research in oral health, and serving the oral health professions and community as a source of knowledge and expertise. Details about the College appear at www.umanitoba.ca/dentistry The Division of Pediatric Dentistry, Department of Preventive Dental Science, College of Dentistry offers a four-year dental degree, a two-year international dental degree completion program, two-year dental hygiene diploma and six graduate programs. It has a significant research profile, and a variety of community service activities that has made this institution among the most respected in Canada today.

The University of Manitoba is strongly committed to equity and diversity within its community and especially welcomes applications from women, members of racialized communities, Indigenous persons, persons with disabilities, persons of all sexual orientations and genders, and others who may contribute to the further diversification of ideas. All qualified candidates are encouraged to apply; however, Canadian citizens and permanent residents will be given priority.

Only complete applications will be considered. Applications must include the following: Curriculum Vitae, statement of career goals, three letters of reference sent directly from the referees, certified copies of university graduation certificates and accredited specialty training certificate/diploma/degree in Pediatric Dentistry, a certified copy of the applicant’s present licensing authority registration certificate and a Letter of Good Standing from the licensing jurisdiction. Applicants who have not graduated from a Canadian or US accredited undergraduate dental school/program are required to submit, at their own expense, independent verification of their university-based undergraduate credentials and transcripts, which may be obtained from: http://www.wes.org/ca/ or http://www.wes.org/ca/educators/evaluation.asp

A certified copy of the RCDC certificate is also required to complete the application package, or a statement confirming eligibility (by virtue of graduation from an accredited specialty program) and willingness to sit the RCDC exam within a 5 year period after hiring.

As a requirement for employment in the College of Dentistry, all staff in a clinical setting are required to submit an Adult Criminal Record Check as well as the Child Abuse Registry check at the time of hire.

Application materials, including letters of reference, will be handled in accordance with the protection of privacy provisions of “The Freedom of Information and Protection of Privacy” (Manitoba). Please note that curricula vitae may be provided to participating members of the search process.

Positions will remain open until filled.

Completed application and enquiries should be directed to: Dr. William A. Wiltshire, Professor and Head of the Department of Preventive Dental Science, Department of Preventive Dental Science, College of Dentistry, Faculty of Health Sciences, D341A-780 Bannatyne Avenue, Winnipeg, Manitoba, Canada, R3E 0W2, E-mail: wa_wiltshire@umanitoba.ca

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Contact Vice President for Meetings and Continuing Education Tonya Almond at talmond@aapd.org or Meetings and Education Coordinator Jessica Parra at jparra@aapd.org for more information or to customize an opportunity for your organization.
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