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Thanks and Farewell

In what is my final President’s Message, I have several points of reflection and observation to share. The first is how fast this year has passed. It seems like yesterday we were in Seattle, and now we’re geared up for San Antonio and my Farewell Extravaganza. I am so excited for incoming President Jade Miller’s year as I know he will enjoy it as much as I have. It truly has been one of the best years of my professional life, and as Heber Simmons Jr. says, “I believe we should leave the woodpile higher than we found it.”

For me, one of the highlights of the year was our collaboration with the International Academy of Paediatric Dentistry in Glasgow and the Royal College of Surgeons Ireland in Dublin. When Joel Berg created the Task Force on International Relations, his vision was to see more involvement with our colleagues across the world in terms of meetings, research dialogue and guidelines. We have certainly begun the process and hopefully you can join us in Dublin in October for our Joint Meeting with the Royal College of Surgeons Ireland. We are also proposing that we hold our 2024 Annual Session in Toronto. Our Executive Committee was hosted by the city in August, and were convinced that this venue would be ideal for our first international locale since 1999.

I have been on a whirlwind of media activity this year, beginning in New York the week after Thanksgiving, with a stop on the Kathy Ireland Modern Living Show in Los Angeles in January, then ending in February with a satellite tour of 26 radio and television outlets in Chicago, Baton Rouge and across the country. We successfully delivered our messages about the Dental Home and the Age One dental visit, as well as our role as pediatric dentists in helping our children achieve healthy smiles. Our public relations firm Weber Shandwick and our own Erika Hoeft were instrumental in helping us spread the word. The Mouth Monsters Campaign has been very informative and resonates well with our target audiences. I am proud to be a member of an organization that has a simple, worthy and lofty goal: optimal oral health for all children everywhere!

The second cohort of the Advanced Leadership Institute has begun the work of producing our new strategic plan. With a solid kickoff at our Winter Planning Meeting, the groups are meeting and preparing for our sessions at The Wharton School. Their final report will be delivered at the 2017 Winter Planning Meeting, and I am excited to see their product. We are fortunate to have these intelligent individuals who are so eager to serve our Academy, and I know we are in good hands moving forward.

With guidance from Heber Simmons Jr., Scott Litch, Paul Reggiardo and our lobbying firm, we had another successful experience on the “Hill” at our Public Policy Advocacy Conference in April. Once again, the number of residents signed up continues to grow and is a good sign for our future.

Capturing the interest and participation of our “millennials,” as you’ve all heard me say, is one of the cornerstones of the Academy’s future. Our Millennial Task Force has done an incredible job in developing activities that will be incorporated into the strategic plan...
and across several councils and committees as we see these young members assume leadership roles. I think this was a fortuitous time to engage our next generation, and I expect our new Leadership Development Committee will have many great individuals to identify for leadership.

We have continued to work with our chapter affiliates to strengthen all of us. As we saw early on, collecting district and state dues greatly assisted membership roles and coffers that allowed our affiliates to continue to serve their members at the district and state level. I have had the opportunity to attend several meetings across the country and I sense that we can continue to build our relationships in a positive way to meet our common goal: optimal oral health for all children.

I owe a huge thank you to so many people for making this year one of the best years of my life. First, to my immediate and practice families. Without their wholehearted support, my success is not possible. Being out of the office so much this year has posed challenges, but my team never wavered in support and encouragement. We adjusted schedules, communicated greatly with our families (who were also excited about our journey), and remained productive.

One of the best benefits of serving on this Board is the opportunity to work with gifted colleagues who share the common vision, and who work tirelessly for the Academy and the kids. I am so proud of each of these individuals, and have been both inspired and emboldened by them to pursue our dream of a cavity free generation.

Lastly, I wish I could adequately express how hard our Academy staff works behind the scenes to ensure that all goes well. There is an incredible amount of effort required to run our operation, and with John Rutkauskas and the talented group assembled to perform the many tasks that we don’t see done every day, we are able to experience the successes that we all enjoy. Thanks to each of you for making my job so rewarding and fun. I have thoroughly enjoyed our run.

Although I will be fast joining the ranks of the “past” category, I assure you I will be willing to continue to serve this great Academy in any endeavor asked of me. And, as with my experience with Ed Moody, I will be there for Jade as he assumes the role of your President.

Thanks again for giving me the opportunity to serve and to lead our Academy!!
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AAPD’s Commitment to Leadership

Senator Bill Bradley once stated, “Leadership is unlocking people’s potential to become better.” Simply stated but profound at the same time. What is occurring at the Academy is equally subtle but no less far reaching as we pursue unlocking the potential of all our members.

The historic evolution of the Academy has paralleled the increasing awareness that leadership development is paramount for an organization that is expected to grow, evolve, improve and ultimately reach its full potential. While the Academy is very fortunate to have an envious 93 percent recruitment and retention of pediatric dentists, with that is the responsibility to also recognize that building from such success requires an increasing resource commitment to our members’ leadership potential. It is this potential that we want to recognize, achieve and ultimately harness.

As many of you know, the Academy has now hosted and co-sponsored four leadership institutes at Kellogg School of Management, graduating 120 of our members and bringing some of the best minds in leadership to our academy. Our next cohort of 30 will be enrolling this upcoming fall. By demand, we have expanded our educational experiences to partner with The Wharton School and deliver a year-long immersion in leadership that is unparalleled anywhere in the country. Both of these focused experiences are our investments in current and future member leaders.

It has become clear that we need to do even more. Recently, the board approved the creation of a leadership committee charged with developing a masterplan that will recognize leadership development opportunities at numerous governance points in the organization. For example, creating an orientation for all our Chapter presidents with a focus on operations, team work/building, communications, and intraorganizational behavior is one potential opportunity that may be planned. Programming for our newest members, recognizing some of the unique challenges of millennials, is another area under serious consideration and review.

Leadership potential spans the personal and professional landscape as it keeps raising the bar with every activity and venture. The Academy is committed to providing the opportunities for all our members to unlock their potential to become better and more effective leaders.
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

AAPD 2016 Legislative and Regulatory Priorities

These priorities, as developed by the AAPD Council on Government Affairs and approved by the AAPD’s board of trustees, are provided below and are also available on the AAPD website at http://www.aapd.org/aapd_2016_legislative_and_regulatory_priorities/.

PRIORITY: AFFORDABLE CARE ACT (ACA) AND INSURANCE REFORM

GOAL: ACCESS TO CARE

Target: Federal Health Care Reform

1. Support corrections to Affordable Care Act (ACA) to:
   a) Make pediatric oral health coverage mandatory.
   b) Include dental premium cost under calculation of tax subsidy for low income families.
   c) Exempt preventive dental services from deductibles in embedded plans and SADPs.

2. Assist ADA in promotion of ERISA reform bill from Congressman Gosar (H.R. 1677), that would require all health plans offering dental benefits to provide uniform coordination of benefits and permit consumers to designate payment of dental benefits to providers who do not participate in the network.

3. Work with ADA and other dental and medical organizations to support a H.R. 3323, the Dental and Optometric Care Access Act, which would apply non-covered services provisions to ERISA plans.

Target: Federal Regulations

1. As the Affordable Care Act (ACA) provision defines pediatric oral health as an essential health benefit (EHB), ensure that implementing regulations require robust coverage consistent with the AAPD Policy on a Model Dental Benefits for Infants, Children, Adolescents, and Individuals with Special Health Care Needs. Coordinate joint response/comments on proposed regulations with ADA and keep key members of Congress informed.

Support mandatory purchase (vs. offer) of an appropriately structured embedded or stand-alone dental plan for children inside exchanges, and encourage states to adopt such a requirement as several have already done (Kentucky, Nevada, Washington state).

Sustain regulatory inclusion of general anesthesia coverage state mandates as EHB in 2017 and beyond (for states that approved such mandates prior to 12-31-11). Monitor types of pediatric oral health insurance offered in state health insurance exchanges as compared with AAPD model benefits.

Evaluate and respond to key ACA insurance plan issues such as network adequacy, provider fees, family out-of-pocket costs, and the impact of pediatric dental coverage embedded in medical plans. Communicate recommendations to Center for Consumer Information and Insurance Oversight.

2. Work closely with ADA, state dental associations, and state pediatric dentistry chapters to ensure that state health insurance exchanges appropriately adhere to federal guidelines and regulations concerning insurance plans offering pediatric oral health coverage. Fully engage state Public Policy Advocates in this effort.

Target: State Legislation and Regulations

1. Continue to provide technical assistance to states for General Anesthesia legislation, highlighting ongoing cost analysis and using TRICARE coverage and success in 33 states to spur momentum. Evaluate likelihood of states considering future insurance mandates in light of ACA EHB provision.

Utilizing research and policy center technical brief and working closely with CDBP, educate insurers and insurance regulators on necessity of this benefit and role of pediatric dentists in treating high risk children.

PRIORITY: MEDICAID DENTAL REFORM

GOAL: ACCESS TO CARE AND MEDICAID DENTAL REFORM

Target: Federal Health Care Reform

1. Explore possibility of targeted pediatric oral health bill to address Medicaid dental reform by increasing Medicaid matching payments for states that pursue specific Medicaid dental reforms including reimbursement at competitive market-based rates (per previous proposals such as S. 1522/H.R. 3120). Protect Medicaid EPSDT guarantee in Medicaid block grant and other cost-savings proposals.

2. Ensure that Medicaid EPSDT regulations continue to promote the dental home and a required examination by a dentist.
GOAL: MEDICAID DENTAL REFORM

Target: Federal Appropriations for FY17

1. Seek appropriations for sec. 748 Title VII dental primary care cluster of $35.873 million, with directed funding of not less than $10 million going to pediatric dentistry in recognition of the demand for training grants and the increased need for pediatric dentists to treat newly insured children under the ACA. Obtain continued support for dental faculty loan repayment, and strongly encourage applications in response to HRSA’s FY 2016 grant announcement.

2. Support efforts of Children’s Hospital Association to obtain full funding of $300 million for Children’s Hospitals GME, and oppose any HRSA efforts to restructure the program and eliminate dental positions from residency count in funding formula.

3. Seek HRSA support to implement AAPD proposal for restructured MCHB program for Leadership in Pediatric Dentistry Education.

GOAL: ACCESS TO CARE

Target: Federal Health Care Reform

1. Work with ADA and other dental and medical organizations to support a simplified process across appropriate governmental agencies to designate individuals with intellectual disabilities as a medically underserved population.

2. Secure HRSA review and update of dental health professions shortage area (HPSA) criteria, building from unimplemented 2005 UNC/Sheps Center report along with other recommendations. An improved dental HPSA will provide a more accurate federal assessment of oral health workforce needs.

Target: Federal Regulations

1. Monitor implementation of Head Start Performance Standards proposed in 2015, to ensure appropriate requirements for dental periodicity schedule and establishment of a dental home.

Target: State Legislation and Regulations

1. Promote states’ adoption of expanded duties for dental assistants as recommended in the AAPD’s Policy on Workforce Issues and Delivery of Oral Health Care Services in a Dental Home, and assist state chapters dealing with dental therapist and other mid-level proposals.

2. Provide technical assistance, via research and policy center, to state Public Policy Advocates working in collaboration with state dental associations on this issue.

PRIORITY: OTHER

GOAL: WORKFORCE IMPROVEMENTS

Target: Federal Appropriations for FY17

1. Encourage CMS to include pediatric oral health quality measures developed by the Dental Quality Alliance as part of the Medicaid dental program.

Target: State Legislation and Regulations

1. Provide continued technical assistance to state pediatric dentistry chapters for Medicaid dental reform for their efforts with both state legislatures and state dental associations.

2. Ensure that state Medicaid programs conducting provider audits work with research and policy center and CDBP to respond to Medicaid medical movement to managed care by:

   (a) promoting dental managed care hybrid payment models that leave the risk with the plan contractor (or at least share it between the plan and the provider); and

   (b) maintaining accountable dental fee-for-service plans.

3. Seek HRSA support to implement AAPD proposal for restructured MCHB program for Leadership in Pediatric Dentistry Education.

Target: State Legislation and Regulations

1. Encourage CMS to include pediatric oral health quality measures developed by the Dental Quality Alliance as part of the Medicaid dental program.

2. Ensure that state Medicaid programs conducting provider audits do so in an appropriate and fair manner, adhering to AAPD clinical guidelines and utilizing peer review by pediatric dentists. Secure appropriate guidance to states from CMS Center for Medicaid and State Operations.

3. Note that a tool kit is available on the AAPD research and policy center web page.
AAPD and ADA Urge Improved CMS Oversight of Medicaid Dental Programs

In early January 2016, the AAPD and ADA sent two comment letters to the Centers for Medicare and Medicaid Services (CMS) concerning the CMS regulation on Medicaid Programs: Methods for Assuring Access to Covered Medicaid Services issued on Nov. 2, 2015 (CMS-2328-FC). The organizations urged that dental services be included in state Access Monitoring Plans that must be submitted to CMS by July 1, 2016. A number of additional recommendations were made related to market-based reimbursements and measuring patient utilization via Dental Quality Alliance measures. Effective CMS oversight of Medicaid is even more important given the 2015 Supreme Court decision denying health care providers the right to sue Medicaid to seek judicial enforcement of the “equal access” provision in the Medicaid law. Copies of the letters are available at: http://www.aapd.org/aapd_and_ada_urge_improved_cms_oversight_of_medicaid_dental_programs/.

STATE NEWS

OIG Report: Most Children with Medicaid in Four State are Not Receiving Required Dental Services; AAPD Spokesperson Quoted in AP Story

In January 2016 the HHS Office of Inspector General (OIG) released its latest in a series of reports on Medicaid dental programs. This report focused on Medicaid dental claims in four states: California, Indiana, Louisiana, and Maryland. The study focused on three required dental services – biannual oral exams, dental cleanings, and fluoride treatments – for children continuously enrolled in Medicaid for two years. OIG found that three out of four children did not receive all required dental services, with one in four failing to see a dentist at all.

The AAPD has been engaged in ongoing discussions with D-HHS OIG concerning their work on Medicaid children’s dental issues, offering our expertise to ensure their analysis is as accurate as possible. OIG deputy regional inspector general Meredith Saife spoke to AAPD’s state Public Policy Advocates during their luncheon 2014 at the 2014 AAPD Annual Session in Boston. AAPD leaders, including current Academic Trustee-at-large Dr. Amr Moursi, had previously met with Ms. Saife and her staff at the OIG regional office in New York City.

The Associated Press covered this OIG report in an online story on Jan. 25, 2016. The article quoted AAPD spokesperson Dr. Amr Moursi of New York University College of Dentistry, who stressed the importance of regular dental care. He stated, “We need to get children who are enrolled and eligible for services to actually get them.” The article also featured photos of AAPD member Dr. Juan F. Yepes treating pediatric patients at Riley Hospital in Indianapolis. This story ran on Reuter’s, the Washington Post online, and newspapers across the country.

The four states discussed in the report had adopted the AAPD periodicity schedule requiring exams and cleanings every six months, but Indiana and Louisiana had coverage policies that didn’t allow Medicaid payment for particular services in the established schedule. The coverage policies “were impeding children from getting the services they need and were required to get,” according to Meridith Saife, the OIG deputy regional inspector general who worked on the report.

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Sending Protected Health Information via Unencrypted E-mail

This column in the March 2016 PDT addressed legalities of calling, texting, and e-mailing parents/guardians. It was noted that HIPAA does not require encryption of e-mails containing protected health information (PHI) in all circumstances. However, if you are communicating with a parent/guardian with an unencrypted e-mail, you can protect against legal liability by notifying the parent/guardian of the risks of third party disclosure. If they still prefer to receive PHI via an unencrypted e-mail, they have that right.

D-HHS recently released an updated set of HIPAA FAQs, and two of them go into greater detail on this point. These are reproduced below for your convenience. I have highlighted key text. The bottom line is that if you follow these procedures you can e-mail PHI to parents/guardians via unencrypted e-mail.

“Do individuals have the right under HIPAA to have copies of their PHI transferred or transmitted to them in the manner they request, even if the requested mode of transfer or transmission is unsecure?

Yes, as long as the PHI is “readily producible” in the manner requested, based on the capabilities of the covered entity and transmission or transfer in such a manner would not present an unacceptable level of security risk to the PHI on the covered entity’s systems, such as risks that may be presented by connecting an outside system, application, or device directly to a covered entity’s systems (as opposed to security risks to PHI once it has left the systems). For example, individuals generally have a right to receive copies of their PHI by mail or e-mail, if they request. It is expected that all covered entities have the capability to transmit PHI by mail or e-mail and transmitting PHI in such a manner does not present unacceptable security risks to the systems of covered entities, even though there may be security risks to the PHI once it has left the systems. Thus, a covered entity may not require that an individual travel to the covered entity’s physical location to pick up a copy of her PHI if the individual requests the copy be mailed or e-mailed. In the limited case where a covered entity is unable to e-mail the PHI as requested, such as in the case where diagnostic images are requested and e-mail cannot accommodate the file size of the images, the covered entity should offer the individual alternative means of receiving the PHI, such as on portable media that can be mailed to the individual.

Further, while covered entities are required by the Privacy and Security Rules to implement reasonable safeguards to protect PHI while in transit, individuals have a right to receive a copy of their PHI by unencrypted e-mail if the individual requests access in this manner. In such cases, the covered entity must provide a brief warning to the individual that there is some level of risk that the individual’s PHI could be read or otherwise accessed by a third party while in transit, and confirm that the individual still wants to receive her PHI by unencrypted e-mail. If the individual says yes, the covered entity must comply with the request. We note that providers using the 2015 edition of Certified EHR Technology will have the capability to send unencrypted e-mail transmissions directly from that technology.

Whether an individual has a right to receive a copy of her PHI through other unsecure modes of transmission or transfer (assuming the individual requests the mode and accepts the risk) depends on the extent to which the mode of transmission or transfer is within the capabilities of the covered entity and the mode would not present an unacceptable level of risk to the security of the PHI on the covered entity’s systems (as explained above), based on the covered entity’s Security Rule risk analysis. For example, a covered entity’s risk analysis may provide that connecting an outside (foreign) device, such as a USB drive, directly to the entity’s systems presents an unacceptable level of risk to the PHI on the systems. In this case, the covered entity is not required to agree to an individual’s request to transfer the PHI in this manner, but the entity must offer some other means of providing electronic access to the PHI.

Note that while an individual can receive copies of her PHI by unsecure methods if that is her preference, as described in more detail above, a covered entity is not permitted to require an individual to accept unsecure methods of transmission in order to receive copies of her health information.
Is a covered entity responsible if it complies with an individual’s access request to receive PHI in an unsecure manner (e.g., unencrypted e-mail) and the information is intercepted while in transit?

No. While covered entities are responsible for adopting reasonable safeguards in implementing the individual’s request (e.g., correctly entering the e-mail address), covered entities are not responsible for a disclosure of PHI while in transmission to the individual based on the individual’s access request to receive the PHI in an unsecure manner (assuming the individual was warned of and accepted the risks associated with the unsecure transmission). This includes breach notification obligations and liability for disclosures that occur in transit. Further, covered entities are not responsible for safeguarding the information once delivered to the individual. Covered entities are responsible for breach notification for unsecured transmissions and may be liable for impermissible disclosures of PHI that occur in all contexts except when fulfilling an individual’s right of access under 45 CFR 164.524 to receive his or her PHI or direct the PHI to a third party in an unsecure manner.”

For further information contact Chief Operating Officer and General Counsel C. Scott Litch at 312-337-2169 ext. 29 or slitch@napd.org.

This column presents a general informational overview of legal issues. It is intended as general guidance rather than legal advice. It is not a substitute for consulting with your own attorney concerning specific circumstances in your dental practice. Mr. Litch does not provide legal representation to individual AAPD members.

1 http://www.hhs.gov/hipaa/for-professionals/privacy/guidance/access/index.html

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New this year, the conference app, online Itinerary Planner, interactive floor plan and ePoster Gallery are all linked! Browse sessions, speakers, exhibitors, social events and more! That’s not all, create your own personalized schedule in the app before even getting to San Antonio.

To download the app, search in the iTunes or Google Play Stores for ‘AAPD Annual Session.’ Once the app is downloaded, access your account by using the email that you registered for Annual Session and the registration confirmation ID, which can be found in your confirmation email.

San Antonio Tours

We are proud to offer a variety of tours that will let you experience everything the city of San Antonio has to offer through unique interactive activities. Visit https://www.regonline.com/aapd2016tours to register now! All tours include transportation.

Getting There

San Antonio International Airport is conveniently located about eight miles north of downtown. Taxis are available and range from $25 - $29 depending on the time of day. VIA Metropolitan Transit is San Antonio’s public transportation agency offering service throughout the city. For more details, visit http://www.viainfo.net.

Registration Hours and Tote Bag Pick Up

Bring your confirmation email with you to AAPD 2016. Use the bar code at the scan and print stations to have your badge and any purchased tickets printed at a station. Pick up your tote bag and badge and you’re ready for sessions and networking events at AAPD 2016.

Thursday, May 26 7:30 AM – 5 PM
Friday, May 27 7 AM – 5 PM
Saturday, May 28 8 AM – 5 PM
Sunday, May 29 8 AM – NOON

CE Credits and Evaluations

AAPD is providing electronic session evaluations and an overall evaluation which will track your CE hours for you. Upon completion of the evaluations, you will be able to email a CE certificate to yourself with a complete record of your CE hours from AAPD 2016. Complete the evaluations when you return home to obtain a CE certificate for your records.

Posters On-Demand

AAPD is presenting all poster research in an online e-gallery and poster app. Stop by to see posters On-Demand in the Exhibit Hall at the Henry B. Gonzalez Convention Center during exhibitor hours and check out the presenting authors.

Photo Contest

#ChomperChallenge

Post a photo with a #MouthMonster on Instagram, Twitter, or Facebook for a chance to win one of three $100 American Express gift cards. Your photo must include an image of a Mouth Monster and #aapd2016 to be considered eligible. For full details, tips, and to see where you can get a Mouth Monster, head over to http://www.aapd.org/annual/aapd_2016/aapd_2016/.

How to play: All entries must be posted by 12 p.m., on May 13, 2016. Enter to win one (1) $100 American Express gift card by posting a photo with a Mouth Monster using the hashtag #aapd2016. On May 13, 2016, our team of discerning judges will choose the best shot and notify the winning participant of their award. Multiple entries are encouraged, bonus points are awarded for comments and likes from your friends but creativity ultimately wins the prize.
Preconference Course
Esthetic Pediatric Restorative Dentistry

Thursday, May 26
8:30 AM – 4:30 PM
Kevin J. Donly, D.D.S., M.S., William F. Waggoner, D.D.S., M.S.,

This course is designed to offer the most current esthetic pediatric restorative dentistry techniques with data available to support restorative regimens. Indications and contraindications will be presented.

Dr. Kevin J. Donly is currently a professor and chair in the Department of Pediatric Dentistry and professor in the Department of Pediatrics at the University of Texas Health Science Center at San Antonio. He received his D.D.S., Certificate in Pediatric Dentistry, and M.S. from the University of Iowa.

Dr. William Waggoner will discuss the esthetic restoration of primary anterior teeth, including resins, strip crowns, pre-veneered stainless steel crowns and zirconia crowns. He will include cases for examples of restorative indications and techniques for restoring teeth.

Dr. Ted Croll will discuss posterior primary teeth restorative techniques with a number of restorative materials, including resin-based composites, resin-modified glass ionomer cement and zirconia crowns.

Dr. Nasser Barghi, an internationally respected esthetic dentist, will present permanent teeth esthetic restorative materials and techniques, including resin-based composites, porcelain and zirconia anterior and posterior restorations with numerous case presentations to present indications, preparation design and placement techniques.

Sponsored by NuSmile

Keynote Address and Opening Ceremony

UNThink: The Art of Leadership Erik Wahl

Friday, May 27
7:30 – 9 AM

Start AAPD 2016 off with an inspiring start by celebrating and honoring the best in the pediatric dentistry community with its highest honors. Join us throughout the morning to hear from AAPD leadership share highlights of the year. Top the session off with an uplifting, intelligent and emotional presentation by Erik Wahl.

Maintaining a successful growing brand in today’s ever-changing market is difficult. Your team is working exceptionally hard, but could potentially be worn out, confused or maybe even heading down the wrong path. You hired them because they seemed perfect for the job, but over time their focus has lost its laser-like precision. There are days when, as their leader, you simply wish you could push the restart button. You know your group is talented but in desperate need of new motivation, a tool to realign your troops and revitalize them to perform their jobs as you both originally envisioned.

If this is your reality, Erik Wahl offers his high-energy onstage performance as your inspiration. This presentation is equivalent to yelling CLEAR as the paddles are positioned to shock the fading pulse of your workforce and enliven their hearts to pursue their jobs as you both originally intended.
Social & Networking Events

First Timers’ Reception

**Thursday, May 26**
**5:30 – 6:30 PM**

Join other first-time attendees to make new acquaintances from your district or mingle with old friends. The AAPD board of trustees welcomes you to the AAPD 2016!

Sponsored by NuSmile

5k Fun Run

**Friday, May 27**
**6:30 – 7:30 AM**

(Ticketed Event)

The San Antonio River symbolizes the heart and soul of our city. Hundreds of years ago, the river was a gathering place for Native Americans. The first civilian Spanish settlers built their homes here in the 1700s. In the late 1920s the San Antonio Conservations Society, government officials and business leaders realized what an important centerpiece of our history and it should be preserved.

Our walk and run will be along the Eagleland section of the Riverwalk which incorporates ecosystem restoration, a walking/running path, and hike and bike trails. The Mission Reach section extends eight miles from Lone Star Boulevard to Mission Espada. Key to this segment is restoration of the river and its aquatic life and wildlife, along with recreational trails, pedestrian bridges, pavilions and portals to four Spanish colonial missions, Concepcion, San Jose, San Juan and Espada.

A portion of the funds are donated to Healthy Smiles, Healthy Children.

Career Opportunities Fair

**Friday, May 27**
**3:30 – 5:30 PM**

The Career Opportunities Fair is a great opportunity for a new pediatric dentist seeking their first practice position or the more experienced dentist who is looking for a change to network with hiring organizations.

For more information on exhibiting or to download the Career Fair form, visit [http://www.aapd.org/annual](http://www.aapd.org/annual) or contact Meetings and Exhibits Associate Colleen Bingle at (312) 337-2169 or cbingle@aapd.org. The cost for AAPD Members is $150; recruitment companies may exhibit at the price of $500.

Sponsored by NuSmile

Satellite Symposia

**Wednesday, May 25**
**3 – 6 PM**

Zirconia Ceramics—New Horizons in Pediatric Dentistry
Hands-On Workshop

To register, please call (713) 861-0033 or (800) 346-5133, or register online at [www.nusmile.com/aapd2016](http://www.nusmile.com/aapd2016).

Sponsored by NuSmile

**Sunday, May 29**
**NOON – 1:30 PM**

Lessons Learned: How Simple Changes Can Improve Your Practice

Sponsored by Dental Synetics
New Pediatric Dentist Happy Hour: Howl at the Moon

Friday, May 27
5:30 – 7:30 PM
(Ticketed Event)

Located on the historic Riverwalk, Howl at the Moon is in the heart of nightlife in San Antonio! Part bar and part concert, the scene is sure to be alive. Howl at the Moon prides itself on their high-energy double pianos interactive music atmosphere. You will hear everything from current pop music to old school Rock ‘n’ Roll. Come prepared, as they accept song recommendations! Bring back those songs that were popular hits during your time in dental school.

Meet and connect with fellow new pediatric dentists while also having the option to dance and sing along to the lively music from the double pianos.

This is not your average bar, don’t miss out on a fun time on the Riverwalk at Howl at the Moon. Transportation will be provided to the AAPD Welcome Reception.

Sponsored by Treloar & Heisel and Medical Protective

AAPD Welcome Reception: Texas Revolution in the River City, San Antonio Style!

Friday, May 27
7 – 10 PM

Deep in the heart of AAPD 2016, it’s Fiesta time San Antonio style! We got all the fixin’s tonight. Come on down to a place where the experience of San Antonio flavors, sights and sounds flow; from Tex-Mex to Native American heritage to the German roots that run deep in local culture. Mariachis set a festive mood, while the best in local street food and gourmet versions of classic Mexican fare is paired with custom margaritas and tequila tastings.

For a true Texan BBQ experience, look for the Hoe-Down Hall where line dancing meets the best slow smokin’ in the state! Follow the Oompah band to the Bratwurst Grill-Off, where the steins overflow with the spirit of Oktoberfest all year round. A club with a DJ spinning dance tunes all night is not to be missed. And don’t forget the band from Austin on the main stage and a crawfish boil nearby.

AAPD kids and families will be entertained at the kids street festival environment including all the fun rides you would expect.

Come! Let’s celebrate the spirit of the Alamo City—deep in the heart—all just minutes down the road at historic Sunset Station!

Sponsored by Sunstar Americas, Inc.

AAPD Mentor Program

Back by popular demand, the Mentor Program is available for residents, new dentists, and seasoned professionals to sign up for San Antonio. You will once again be able to meet your partner at the Meet & Greet Lounge to walk the exhibit floor together and discuss how to get the most out of AAPD 2016. With nearly 500 participants already signed up, this is bound to be a successful program yet again.

International Reception

Saturday, May 28
5:30 – 7:30 PM

This reception began in 2010 at the Annual Session and has continued to be a popular event for international members and attendees. Join members of the AAPD board of trustees, learn more about the AAPD and network with fellow international attendees before enjoying your evening in San Antonio.

Presidents’ Farewell Dinner

Sunday, May 29
6:30 – 10:30 PM
Tobin Center for the Performing Arts

President’s Ball: Laissez Les Bons Temps Rouler

Alright, alright, alright! Mask up AAPD revelers, and come on down to the Delarosa Krew Ball! Let’s turn up the volume on this year’s lavish affair, all with the same sophistication and elegance of past but infused by the irresistible spirit of our President, Rob Delarosa. The Spirit of Bacchus at Mardi Gras takes over this grand May fête, with Carnival sights, tastes and sounds, while paying homage to the Greco-Roman roots of this grand feast day. Hosted at the magnificent riverside Tobin Center for Performing Arts, this venue in itself a dazzling architectural treasure transformed for a modern day world class performance center.

Every ball needs its mask, and don’t forget to bring your best gown and dancing shoes … because tonight’s festivities includes New Orleans’s own amazing Bucktown Allstars, a multi-year winner of Gambit Reader’s Poll, “Best Band that Doesn’t Fit Any of these Categories” with raspy vocals, rollicking piano, and a corrupt horn section fueling the unorthodox mix of second line funk and Motown soul, the main ingredients that have entertained thousands of hip-shaking fans across Louisiana and the country for 23 years strong and going.

Reception is sponsored by Treloar & Heisel
Dinner is sponsored by MAM

AAPD
Mentor Program

Back by popular demand, the Mentor Program is available for residents, new dentists, and seasoned professionals to sign up for San Antonio. You will once again be able to meet your partner at the Meet & Greet Lounge to walk the exhibit floor together and discuss how to get the most out of AAPD 2016. With nearly 500 participants already signed up, this is bound to be a successful program yet again.
## 2016 Annual Session Exhibitors

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**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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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**
The AAPD Education Passport was created to fit your busy lifestyle! With the Education Passport, we've made it easy for you to fulfill your continuing education needs. Access recorded courses and virtual lunch breaks at your own pace and earn continuing education from the office or even in the comfort of your own home.

Visit the Education Passport at:
www.conferencepassport.com/aapd
No matter your patient's age, our new clear formula Vella 5% sodium fluoride with xylitol offers improved esthetics, a smooth and easy application, and the extra protection they need. When your varnish application looks better, feels better in the mouth, and tastes great, it's sure to improve patient compliance. Plus, Vella has great fluoride release and uptake at two hours¹, and it provides relief from hypersensitivity. To order Vella, call your favorite dealer, or visit Preventech.com for a FREE SAMPLE!
Dr. Mark Lisagor’s bags are packed and he is headed back to Kathmandu, Nepal. This will be Dr. Lisagor’s 11th visit to this magic country, where he leads volunteer dental teams providing care to children.

Lisagor has worked on more than 50 dental missions. Since the 1990’s, he has completed 20 mission trips to Guatemala with his wife Terri. In 2005, he joined his first Global Dental Relief (GDR) trip to India, then returned for a second trip to Nepal and never looked back. Since 2008, Lisagor has led 24 volunteer dental teams with Global Dental Relief.

The Nepal team is one of the 18 Global Dental Relief teams working on behalf of kids in 2016. Global Dental Relief was started in 2001 to bring volunteers together to provide dental care to children in need around the globe. Today, Global Dental Relief teams work in five countries—Nepal, India, Cambodia, Guatemala and Kenya. In 2015, volunteers including 78 dentists, 28 hygienists, nine dental assistants and 119 non-dental volunteers, brought care to 15,000 children.

On each Global Dental Relief trip, one of Lisagor’s favorite moments happen when he first meets his new team members—folks who have made the decision to donate their time and talent to help children. Everyone is excited and a bit anxious, as they discuss clinic protocols and take the first steps that will eventually meld them into a lean and effective team delivering care.

In Nepal this spring, Lisagor and his co-leader Sue McEvoy join their new group of five dentists, two hygienists and seven non-dental volunteers. It is a diverse group from four countries and five states in the U.S., with three returning volunteers and the rest first-timers.

Lisagor does this work, “because it is a remarkable feeling to help a group of strangers join together with the purpose of improving the lives of many children. It forever changes your look at the world, your practice and your family. Once you do this work, there is no turning back!”

They begin their time together orienting volunteers to the labyrinthine walkways of Boudha, which lies on the outskirts of Kathmandu where they will spend the next eight days. Boudha is also home to the world heritage Boudhanath Stupa, a centuries old Buddhist shrine and the focal point for local community gatherings.

The group joins in the circumambulation of this stupa that takes place at the beginning and end of each day, as neighbors meet and chat and the devout circle the stupa, prayer beads in hand. It is the beginning of their immersion into this fascinating and very different culture.

Each GDR team has two leaders and in Nepal, Lisagor’s co-leader is Sue McEvoy, a writer and outdoor adventurer from Redstone, Colo. These two have led Global Dental Relief trips in Nepal and India, honing their skills with Lisagor running the dental side of the clinic, and McEvoy ensuring each school group arrives as scheduled and managing group logistics. Together they share their extensive knowledge and love of Nepal with volunteers.

In addition to his work in Nepal, Lisagor also leads Global Dental Relief trips to the remote region of India called Ladakh. To hear his experiences firsthand, see side bar on his trip to “the rooftop of the world.”
Back in Nepal the 2016 team begins their first clinic day, arriving at the clinic by 8:30. Volunteers are greeted by a line of children, each clutching their dental chart and excitedly chattering about the day ahead. Children call out the traditional greeting of *namaste* with shy smiles and the traditional folded hands.

Lisagor and McEvoy work skillfully to help each volunteer adapt to their assigned duties. One dentist begins *intake*, giving each child an exam and treatment plan for the day. The intake chair is a busy place, with children receiving exams, injections or verdicts of perfect teeth, all while interacting with dozens of bright eager faces.

Once they are numbed, dentists treat each child, extracting infected teeth and restoring cavities. The goal is to do all necessary dental care, and children are brought back on subsequent days as needed. At the same time, dental hygienists clean teeth and continue oral health instruction.

This approach is Global Dental Relief’s model of care:

- Treat each school, child by child.
- Provide all necessary care over one to three visits during the clinic week, including restorations, extractions, cleanings and a fluoride treatment.
- Give each child a new toothbrush, teach them to brush, teach their teachers to brush and offer oral hygiene education.
- Return to these same populations every two years to provide long term, sustained care and education.

In Lisagor and McEvoy’s clinic, non-dental volunteers quickly learn essential duties. Some assist chairside for a dentist or hygienist. Others pitch in to sterilize and restock the extensive inventory of dental instruments. Or they manage patient records to ensure each child’s care is completed during the clinic week. Volunteers teach oral health education and tooth brushing, apply fluoride, or oversee the general flow of patients in the very full and bustling clinic.

This is the first dental visit for most of these children. In Nepal there are few dentists to serve the population of 27 million, and a visit to the dentist is financially out of reach for most children. The recent upsurge in sugar is readily apparent, as more decay is present than in past generations. In Nepal, typically about 50 percent of the children need immediate care, and some need to return for multiple visits throughout the week to be restored to full dental health.

Volunteers are moved by the trust of each child in the clinic. With wide eyes, they each take their turn in the dental chair, often gripping the hand of the chairside assistant. Some children are so excited, they cross the entire room to the dental chair with mouths already wide open.

And everyone enjoys watching an excited child grin and leap out of the chair when work is complete. They can been seen racing out of the clinic, eager to point to their new dental work and compare the day’s events with friends.

Clinic days typically end around 4:30, after treating up to 120 children a day. Each day is demanding as volunteers work under field conditions with portable units and field lighting. Yet days are rich with special interactions and small gestures of joining between children and volunteers, bridging generations and cultures.

One of the reasons Lisagor and McEvoy love this work is that it allows them “to share the joy and fulfillment of this work with new volunteers,” says McEvoy. “We always say only good people volunteer, and we see this with each of our teams. It is a special chance to make new friends or, best of all, reunite with volunteers returning over and over again.”
As the week comes to a close, this team will treat over 900 children with 433 restorations, 172 extractions, many sealants and fluoride treatments, and lots of toothbrush instruction. The group winds down their last clinic day with a farewell dinner and a briefing about their upcoming five-day trek along the Everest trail. Each Global Dental Relief trip includes an optional sightseeing adventure after the clinic. In Nepal this is a five-day trek or a shorter jungle excursion. In other countries, this includes three safari days in Kenya or weekends in beautiful Antigua, Guatemala.

The final dinner is bittersweet as volunteers exchange email and Facebook contacts with the local students and partners who worked as part of the team during the past seven days. Stories are told, a few songs sung, photos are taken and shared memories extend into the night.

As Lisagor says, “possibly the most impactful result of our work is that we touch people in these remote places simply by going there to help. The message to all of these children is—I must matter or these people wouldn’t take the time to come from so far just to help me have better health.”

This is the work that Lisagor and McEvoy love, and what brings them to this service over and over again. They are devoted to the mission of helping children, steeped in their commitment to return to see these same populations year after year, making a lasting difference in the health of the communities they serve.

They ask you to consider joining them in this commitment—to make a difference and see the world as you never have before. You can join them on a trip in Nepal or India in 2016 or consider the three other GDR locations: Cambodia, Kenya or Guatemala. For more information, email volunteer@globaldentalrelief.org, call (303) 858-8857 or view schedules and itineraries online at globaldentalrelief.org.

ABOUT MARK LISAGOR

Dr. Mark Lisagor received both his Bachelor of Science degree in Public Health and his degree in Dentistry, at UCLA. Following service in the United States Public Health Service (Indian Health Branch), he completed his residency training in Pediatric Dentistry at UCLA-Harbor General Hospital.

Lisagor is a Diplomate of the American Board of Pediatric Dentistry, and was the founding partner of a large pediatric dental group practice serving Ventura County since 1977. He is past president of the American Society of Dentistry for Children in Southern California, the California Society of Pediatric Dentistry, and the California Society of Pediatric Dentistry Foundation, and has served as a legislative advocate for children’s oral health to the U.S. Congress for many years.

Back home in California, he is completing his second four-year term as a Trustee on the Ventura County Board of Education.

ABOUT GLOBAL DENTAL RELIEF

Global Dental Relief was founded in 2001 to bring teams of volunteers overseas to provide dental care to children in need. Since 2001, teams have served over 100,000 children with first time and follow up care. Global Dental relief is a 501 c 3 tax exempt charitable organization. For more information, email volunteer@globaldentalrelief.org, or call (303) 858-8857. View trip schedules and itineraries at www.globaldentalrelief.org.
Working on the Rooftop of the World

By Mark Lisagor, D.D.S.

“Practice kindness whenever it is possible. It is always possible.”

H.H. Dalai Lama

This is the lesson that I learn and relearn whenever I am here in Leh, Ladakh, and just one of the reasons I keep coming back to this magical place.

At the time of this writing, I’m leading my 13th volunteer dental clinic here in Leh, in the Himalayan Indian region of Ladakh. One can’t help but be impressed by the peaceful nature of this ancient town on the Silk Road at more than 12,000 feet, where people simply get along, and even help each other when times are tough. I walk along the main bazaar and see a Sunni mosque and a Shia mosque within a few feet of each other, with a Tibetan Buddhist monastery in the middle and a Moravian Christian church just up the road.

I wake up to the Muslim call to prayer mixed with the sound of apples dropping from heavily laden trees as they hit the tin roof next to my window. I look out and see snow-covered peaks on the edge of the Himalayas and watch Kashmiri water boys pushing oil drums full of drinking water down to the town, carefully avoiding the cows that also call the roads home here.

I look forward to seeing friends that no longer treat me as a tourist, but as a colleague, working together with them to improve the quality of life for so many children here. Children who are certainly better for the care we deliver, but maybe more importantly, children who learn that they truly matter—why else would people travel so far to provide care for them, year after year?

Every year I am able to peel back another layer of the onion that is a different culture than my own. These discoveries are yet another reason I keep coming back to the same place rather than venturing out to so many other distant lands that certainly beckon.

“Ladakh is the last Shangri-La in the world.”

Pico Iyer, the famous travel writer, certainly had it right.
Welcome New Members

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

Active Member
Dr. Kevin Ludwig
Dr. Rachel Rittenberg
Dr. Nihal Sharma

Affiliate Member
Dr. Steven M. Bennett Jr.
Dr. Arlene Esche
Dr. Jessica Kepler
Dr. Michael Zhang

International Member
Dr. Zahra Mohammad Alshahrani
Dr. Stacey Chin
Dr. Obiubaka Olamide Olatosi

Pre Doctoral Member
Ms. Manish Rao
Ms. Nerea Doyz Rath
Ms. Vishnu Sanketh Ronda Reddy
Ms. Jared Roberts
Ms. Daillah I Romero
Ms. Noor Razzaq
Ms. Flora Sarmiento
Ms. Harsheen Sidhu
Ms. Jihan Solanki
Meagan Steward
Ms. Kazi Talshepour
Ms. Lyndon Khoi Tran
Ms. Sandra Trinh
Dr. Dan Truong
Dr. Ruben Villareal

International Student Member
Ms. Adriana Aarda Collado
Ms. Yezenia Aguila
Mr. Fernando Antonio Aguilar
Mr. Elba Melissa Torres Albarran
Ms. Anabel Elizabeth Alcarriz
Ms. Karla Alejandra Arroyo
Ms. Sandra Romero Ariztigui
Ms. Leticia Ayala
Ms. Angel Daniel Becerra
Ms. Alba Liza Brambila
Ms. Fernanda Moneserratt Briones
Ms. Cristina Cardona
Ms. Gladys De la Torre
Ms. Juan Gerardo De Lagarza
Ms. Mariela Dominguez
Ms. Turizzi Figueroa Estpita
Ms. Minam Fernandez
Ms. Karen Jatziri Salgado Fuentes
Ms. Jaqueline Fuentes
Mrs. Martha Elizabeth Galindo
Ms. Marcela Garza
Ms. Myriam Garza
Ms. Maria Gomez
Dr. Samita Gumber
Ms. Estefania Gutierrez Garcia
Ms. Desiis Ramirez Herrera
Ms. Lyda Karina Lopez
Ms. Lourdes Beatriz Lopez
Ms. Mirna Alejandra Maldonado
Ms. Cristina Marisol Martinez
Ms. Irmã Catalina Medina
Ms. Alina Rios Mendoza
Ms. Eva Larissa Gutierrez Navarro
Ms. Dulce Palmira Naafelao Hitepa
Ms. Maria De Lourdes Ortiz
Ms. Zulema Puea
Ms. Maria Fernanda Parada Sainz
Ms. Elizabeth Parra
Ms. Jorge Socrates Pascencio
Ms. Xuxia Serra Redondo
Ms. Ana Sarahi Reneta
Ms. Silvia Flores Rodriguez
Ms. Gabriel Eduardo Rosas
Ms. Maria Fernanda Rubio
Ms. Alejandra Rutalacava
Ms. Gilberto Sanchez
Ms. Maricela Siliceo
Ms. Jhoelyn Ardhuell Tapia
Ms. Sukriye Tkoglu
Ms. Adela Andrea Villarreal
Ms. Laura Margarita Vizcaino
Mr. Bruno Agustin Juarez Zepeda

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Ms. Adela Andrea Villarreal
Ms. Laura Margarita Vizcaino
Mr. Bruno Agustin Juarez Zepeda
Member Benefit Spotlight

AAPD Members Refinance Over $5.0 Million of Student Loans with SoFi

Taking good care of finances is extremely important to most dentists. According to the American Dental Education Association, the average dental student graduated with $247,227¹ of debt. In order to achieve financial goals, most dentists need to efficiently pay off their debt and make the most of the income they are bringing in.

That’s why the AAPD has partnered with SoFi to provide dentists with a student loan refinancing benefit to help them tackle these issues. Through this partnership with SoFi, AAPD members and their friends and families receive a $400 welcome bonus² upon refinancing through SoFi.com/AAPD. To date, AAPD members have already refinanced over $5 million of student loans with SoFi.

Just like refinancing a mortgage, student loans can also be refinanced at a lower interest rate. Interest rates for graduate and professional school have been higher than prevailing rates for a number of years, which means it can be possible for dental school grads to get a lower rate through refinancing.

Refinancing can have big benefits like lower monthly payments or a reduced payment term, and can save you a significant amount of interest over the remaining life of the loan. You can also consolidate more than one student loan through refinancing, which saves you the time and hassle of multiple monthly payments.

Need the hard numbers? Let’s say you have $250,000 in student loans at a 6.8 percent weighted average interest rate and 10-year term (6.8 percent was the going rate for federal unsubsidized loans from 2006 to 2013). Your monthly loan payment would be about $2,875 per month, and you’d pay about $95,000 in interest over the life of the loan. If you can reduce that rate by even 1 percentage point to 5.8 percent, your monthly payment goes down by about $125/month, and you save around $15,000 in total interest.

Cut your rates further, and you save even more. Dental borrowers who refinance with SoFi save closer to $39,000² on average over the lifetime of their loans.

WHO REFINANCES?

To qualify for a lower rate through refinancing, lenders will often look at just your financial data, such as credit score. SoFi, on the other hand, uses a non-traditional underwriting approach. SoFi considers a number of holistic factors such as your track record of paying bills, employment history and income relative to your outstanding debt. Typically, the stronger your financial picture, the lower the rate you can qualify for.

Once you qualify to refinance, you can choose from a number of options such as payment term and variable vs. fixed interest rate. Each of these options can affect your monthly payment and total interest amount. It’s also important to note that federal student loan benefits like income-based repayment and loan forgiveness don’t transfer to private lenders, so before refinancing federal loans you should check to see if any of these programs apply to you.

A growing number of AAPD members are choosing student loan refinancing solutions with SoFi. The AAPD is committed to providing education that will help you make the best decision for your situation. You can find out more by visiting www.aapd.org. In addition, SoFi will be holding webinars specifically for AAPD members. Please register at SoFi.com/AAPDWebinars to attend one of the below webinars:

June 1 – 5 PM EST
June 7 – 1 PM EST
June 9 – 11 AM EST

ABOUT SOFI

SoFi is a modern finance company that’s fueling the shift to a bankless world. Our radical approach delivers unprecedented services for lending and wealth management. We evaluate applicants based on a holistic view of their financial well-being rather than a three-digit score. Whether our members are looking to refinance their student loans, buy their dream home, or simply seek advice as they ascend in their careers, SoFi provides the best products and tools to match their ambitions and propel them to new levels of financial greatness. To date, SoFi has originated over $7 billion of loans for over 120,000 borrowers.

*$400 payment will be issued electronically once you become a SoFi borrower, you have submitted a completed application with documents through SoFi.com/AAPD, and your loan has been disbursed. Offer good for new SoFi customers only.

²See https://www.sofi.com/disclaimer1/
AAPD Predoctoral Chapter Spotlight

Howard University College of Dentistry

By Jonathan Laurent, Linh Phan, LaToya Powell, Jose Liens, Victor Amartefio and Jennifer Sylvian

What an exciting year it has been for Howard University College of Dentistry’s AAPD student chapter. This school year our chapter started with great enthusiasm and continues with unyielding dedication. We have a growing student body and a full executive board consisting of President Jennifer Sylvian, Vice President Victor Amartefio, Secretary Stephanie Oboite, Treasurer Linh Phan, Fundraising Chair LaToya Powell, ASDA Representative Elaria Ghobrial, and representatives from each dental class—Tamerah Marable, Christina Becco, and Morgan Marrow. They are fully committed to the advancement of children’s oral health and increasing their knowledge in the realm of pediatric dentistry.

In October of 2015, the Howard University’s Hispanic Dental Association (HSDA) and AAPD predoctoral chapters came together to educate the young minds of Bancroft Elementary School on oral health care through the Lessons In A Lunch Box program. With the ultimate goal of the Children’s Oral Health Institute in mind, the predoctoral dental and dental hygiene students brought along their compassionate hearts and enthusiastic personalities to serve their community. Approximately 250 lunch boxes were delivered to Bancroft Elementary School to be distributed to first, second, and third graders. Oral hygiene instructions and nutritional counseling were given using visual aids and the contents within each lunch box. All lunch boxes included a toothbrush, toothpaste, floss and rinse cup; all disguised as a carrot!

On Wednesday Nov. 4, 2015, the Howard University College of Dentistry’s student body hung up their scrubs and signed up for a bit of fun in support of the AAPD predoctoral chapter’s game night fundraiser, “It’s Your Move”. The fundraising event is one of many events to come from the AAPD predoctoral chapter during the fall semester. The event was designed to facilitate comradery and bring about awareness of the philanthropic organization, Operation Smile. By partnering with Operation Smile, Howard University College of Dentistry faculty and students were given the opportunity to help at least one child obtain a successful cleft lip/cleft palate surgery.

The “It’s Your Move” game night consisted of video game tournaments, party games, such as, Taboo and Logo, as well as classic games like Connect Four and Jenga. The student body happily indulged in a night of pizza, beverages, and allowing their inner child to roam free. At the end of the night, a few lucky winners walked away with great prizes, such as, gift cards from popular places like Starbucks and Chipotle.

Also in November, the students of the Howard Chapter of the AAPD took part in a health science activity of hosting students as a part of STEM day. The day was planned to introduce the students to the different health science career paths open to them in the future of education and health. The STEM day at the dental school started with a quick tour of where the clinical and academic dental experience were built. The tour included a stop at the classrooms, the clinic floor, as well as the simulation lab. The STEM students were encouraged to ask questions while observing second year dental students practicing crown preparations in the simulation lab. The dental students explained to the visiting students the different aspects of dentistry they enjoyed and how dental school compared to their expectations. The tour ended in the pediatric clinic where the students were shown how to make impressions and practice restorations on large teeth models with wax. Many of the visiting students discovered the finesse and methodical procedure required to restore a tooth.

We have so much more planned as a chapter in the final stretch of the school year in 2016. As a chapter we hope to have more fundraising events, community service events, lunch and learns, and mentor/mentee link ups with local pediatric dentists. All of which we cannot do without the guidance of our motivational and inspirational faculty advisor, Dr. LaToya Barham. We appreciate the love and support of all our Howard University College of Dentistry family. We will always continue to represent the helping hand of Howard University with pride.

For more information on our chapter, please feel free to email us at huaapd@gmail.com.
Obituary

Ray Lansdowne

Dr. Ray Lansdowne, Wichita, Kansas, passed away at age 73 on Feb. 26, 2016. Lansdowne was the first AAPD (ASDC) Affiliate Trustee from 2002 – 2006. He was preceded in death by his father, James Edward Lansdowne II, and brother, James E. Lansdowne III. Survivors include his loving wife of 51 years, Sharon Lansdowne; mother, Lorriene Lansdowne; son, Paul (Cora) Lansdowne; daughter, Laura (Matt) Munsch; four grandchildren; and numerous other family members. In lieu of flowers, family has asked that memorials go to SmileTrain.org, an international children’s charity.

Member News

YWCA Brava Award

Connecticut Society of Pediatric Dentistry member and Greenwich Dental Society Vice President Stacy Zarakiotis was awarded a 2016 YWCA Brava Award. The ceremony took place at the Hyatt Regency Greenwich on Feb. 5, 2016.

The Brava Awards were established in 1977 to recognize outstanding women achievers who have excelled in their professional careers and are mentors in their community.

This was the first time a dentist was being honored. Brava!

Immediate Opening

Pediatric Dentist

A Kidz Dental Zone located in Hood River, Oregon

Has an immediate opening for a compassionate and motivated pediatric dentist interested in opportunities to provide care focusing on prevention and community involvement.

- Competitive Salary
- Quarterly Bonus Potential
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- Signing Bonus
- Opportunity for Future Partnership

For inquiries contact Dr. J. Kyle House (541) 387-8688 or send resume to jobs@akidzdentalzone.com
A President’s Year in Review

Catching up with AAPD President Dr. Robert Delarosa

Q As AAPD President, your agenda has focused on the creation of a task force to investigate the growing debt burden of recent graduates and potential avenues of relief, as well as continuing to act upon the recommendations of the previously created task forces, specifically identifying future volunteer leaders and enhancing chapter relations. Can you please share how each of these goals have been accomplished?

A The task force we created was not specifically for just debt burden, but rather all things millennial. However, debt is the “elephant in the room”. Our association with SoFi has allowed our young members to take advantage of loan services that will give them some leverage on this significant issue as they begin their careers. My focus was to have our young bright stars be able to impact children’s lives on their terms, in the practice environments or academic settings from where they could best thrive. With three young partners and a son in medical school residency, I have seen the costs of higher education first hand. Although it’s quite staggering, I do believe with the right fiscal advice and support, the debt can be managed efficiently and provide a sense of peace to our young members that we can help them through it.

Leadership development is also a part of the Millennial Task Force and through our newly established Leadership Development Committee, we will identify young leaders and develop a specific protocol where we can provide the necessary support, mentorship and encouragement for these individuals to succeed in their service to AAPD and beyond.

International Relations is another personal priority of mine and will continue to be so. If we want to achieve optimal oral health for kids everywhere, we need positive and meaningful engagement with our global partners. To that end, Joel Berg, with his vast international experience and network, created this opportunity that we have embarked upon, and already I see the potential to affect kids everywhere. The reception we hold at our Annual Session for International Members has been growing in number each year, and we have committed to having our presence at their meetings as well. I attended international meetings in Glasgow and Dublin this year, and the reception from our colleagues could not have been more welcoming and gracious. I look forward to attending our joint meeting with the Royal College of Surgeons of Ireland in October, and Jade Miller will be attending the European Academy of Pediatric Dentistry Meeting this summer. Also, we have our first international graduate of our Kellogg Leadership Institute, Dr. Eduardo Alcaino. I think Alcaino will serve as a great ambassador for this opportunity and help us recruit other interested members from the international community. Finally, we have international presence on councils and committees, and their expertise and knowledge have been invaluable in helping us produce the strongest policies and guidelines possible.

Q Can you please explain why the Millennial Task Force was important to you and ultimately for the Academy?

A As mentioned, I became acutely aware of this issue of debt as my associates came on board. It struck me that this burden falls on all of us—the senior partners, as well as the new practitioners—because structuring buyouts, buying new equipment, and practice growth all become hinged upon what the young doctors can afford. I realized we had to provide a means for the practice to maintain its progress and growth, while at the same time, not cripple my young partners with greater debt. In other words, we’re all in this together. Through my own millennial twins, and my interactions with my partners, I also realized how different we are—what my life journey is didn’t necessarily (and rightly so) resonate with these young individuals. I began to research millennial trends so that I would better understand and relate to them, and in the process figured out AAPD needed to do the exact same thing if we wanted to remain relevant to our future members. I am more than pleased to state how supportive Academy leadership has been for my project, both in time and resources. I am more than confident that we will emerge as a leader in our industry in membership value and retention of millennials moving forward. As with my own children, I am so fired up about the possibilities for their future, and with a little help from our “mature” members, we can only make it brighter for them.
Q: Are there achievements/milestones of AAPD under your leadership of which you’re most proud?

A: This is not about me in the least; it’s about what is best for the kids under our care. With that said, I am so proud to be part of an organization that fulfills such a noble mission. As importantly, this is an organization with a volunteer workforce and company employees who work side by side with great dedication and commitment to that mission. I guess then it’s the selflessness and willingness to be involved with something bigger than any individual that gives me a sense of pride. I love this Academy and all that we are trying to do.

Q: You have been key in promoting our Monster-Free Mouths campaign this year. From your perspective, how was it meeting with the New York Times and Family Circle among other consumer publications in November of 2015? What message in your opinion were they most receptive to?

A: That was truly an amazing experience! I took two things from the interviews: the first is how far we’ve come in exposure with Weber Shandwick working with our organization, and the second was how little the public still knows about pediatric dentistry. Our messages about the Dental Home and the Age One visit are received exceptionally well, but there is an initial lack of awareness and perception that surprises me. The enthusiasm and responses were all very positive, but we still have work to do. I have full confidence that the team will continue to get us into the right media outlets to deliver our message of optimal oral health for all children.

Q: How would you recommend addressing the faculty shortage issue?

A: Tough question! I know there are more qualified individuals than myself working on this issue, but I see two aspects of it that I think should be connected. The first is, once again, our millennials, and the way they receive instruction. As one example, many higher teaching institutes have changed their delivery models to include online courses, etc. I think we need to look at these other means as a way to teach that can bring a bit more efficiency to the system. The other component is to realize there are many individuals who have thirty plus years of practice experience and are cutting back or retiring who could be utilized to shore up the shortage in a more organized and structured way. Wow, and that right there is how a task force gets created!

Q: You participated in a national Satellite Media Tour as part of our outreach for National Children’s Dental Health Month, where you spoke to 26 television and radio stations across the country. Can you please share insight into this experience?

A: As with my time in New York and Los Angeles, this also was a first and great experience for me. I especially enjoyed this one because it was one setting, with the various outlets coming to us. It was a bit easier becoming familiar with the surroundings and delivery of information. Also, this production crew was especially helpful and supportive. From what we were told, I believe our message was well received because it created activity beyond that day, and several of the interviews went over the time allotted. I would say all of these interviews were very friendly and having gone through the AAPD’s media spokesperson training several times, I felt I was well prepared.

Q: In your opinion, how can dental professionals do a better job of reaching parents and educating them on the importance of a Dental Home and Age One dental visit?

A: We need to continue to be in the trenches, whether it be in our communities, hospitals that deliver babies or schools, educating our families, colleagues and other stakeholders. Some of the time it is one family you reach, but you’ll never be able to quantify the positive effect that one family can make if they choose to be the “voice.” I learned from Ann Page Griffin a long time ago, you just need to be out there delivering the message. In Baton Rouge, I sadly admit it has taken a long time for our pediatrician friends to understand and buy into the Age One dental visit. Almost every week we hear the same old thing—that’s too early! It’s really only been through dogged persistence and commitment that we see the breakthroughs. I have shared the data and the information countless times, but it sometimes takes countless plus one to make that difference.

Of course I believe what we are doing on the national level with media exposure is also important, and we need to use those campaigns to help us locally and regionally. I remember the Ad Council’s Two Minutes Twice a Day billboards were a hit in our practice. It got that simple message out and helped reinforce what we were already teaching in the office. In fact, as you may recall, we engaged in the Ad Council campaign with other leading dental organizations to promote children’s oral health. It’s important to note that what we’re doing with the Ad Council and our Partnership for Healthy Mouths, Healthy Lives, is on a parallel track with what we’re doing with Weber Shandwick and our Mouth Monster campaign—educating and providing resources to the lay public on children’s dental health! I’m hoping that you’re all fully utilizing all of these resources at both mychildrenseteeth.org, as well as 2min2x.org.

Q: I know your goal is to aspire for a cavity-free generation. Do you feel this is realistic in our lifetime? Why or why not?

A: You know what, why do it when you can overdo it! Any worthwhile goal stretches us and requires great effort. If we believe that decay is preventable, then why can’t we attain this amazing milestone? I think of what the Bill and Melinda Gates’ Foundation has done for malaria prevention, and I feel the same passion for our cause. I know there are practices in this country that have achieved very high levels of cavity-free kids, and as with anything, they started with one at the beginning. Who knows how long the journey will take, but what I do know is that it’s a noble goal worthy of our best efforts.

Q: Anything else you would like to add?

A: As I have reflected on this blur of a year, what keeps coming back to me is an overwhelming feeling of gratitude for this amazing opportunity. I can say this has been the ultimate year in my professional life, made possible by the leaders who preceded me. I humbly took my gavel from one of pediatric dentistry’s true heroes, Jerry Miller, and ran my race with the support and encouragement of family, friends, colleagues and staff. With so many individuals to thank, I want to extend my sincere appreciation to each of you for helping me serve our Academy. It has been more than a dream come true.
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You’re in for a treat this year as you explore our imagination with a very special virtual office tour.
Pediatric Oral Health Research and Policy Center

Caries, Calories, and Kids: New Survey of Pediatric Dentists through the Policy Center

As a part of its Robert Wood Johnson Foundation grant, the Policy Center conducted a new survey with AAPD members to discover their attitudes, experiences and interests in talking to parents and conducting other interventions related to healthy weight for children and the consumption of sugar-sweetened beverages. Based on an exhaustive literature search, empirically-supported behavioral theory, and input from grant partners, the survey analyzes how often and why pediatric dentists offer healthy weight and nutritional counseling to parents, as well as the barriers and incentives to a pediatric dental office as a setting for obesity and sugared-beverage-related interventions. The survey will be administered to general dentists this summer, and the results will be presented at a meeting of oral health shareholders in November in Washington, D.C.

Pediatric Dental Research Results on the Effects of the ACA

The Harris Fellow research project by Dr. Scott Schwartz evaluates the effect of the Affordable Care Act on practicing pediatric dentists by examining their attitudes toward, perceptions of, and experience with the legislation. According to the results of this national survey of AAPD members, patients are deferring treatment due to high out-of-pocket costs. Pediatric dental providers report that patients do not have enough information to understand their benefits. In addition, the providers report not having enough information to understand how these benefits affect their practices. According to the results of the research project, insurance plans should be simplified and legal details must be clarified for the Essential Health Benefit provision of the ACA to provide real value to both patients and practitioners.

Research-Based Action Plan for Public Policy Advocates

The research project of Harris Fellow Dr. Benjamin Curtis analyzes the efforts of the AAPD Public Policy Advocates (PPAs) regarding their levels of training in advocacy skills, knowledge of health reform issues, and empowering change at national, state and local levels. With evolving legislation and the state of oral health care, the PPA position was created in 2012 to strengthen and coordinate advocacy efforts by AAPD state chapters. Based upon research with current PPAs, an action plan and recommendations will be developed to help create a stronger network of PPAs equipped and empowered to advocate for children within their home state, as well as neighboring states and the nation.
AAPD Represented at National Oral Health Conference

The Policy Center represented the AAPD at the National Oral Health Conference (NOHC) 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, this premier meeting for dental public health was attended by approximately 800 dentists, dental hygienists, dental students, health researchers, legislators and others interested in the oral health of the public. Dr. Paul Casamassimo presented information on the Policy Center’s research project of medically specific factors that correlate to caries risk in young children and a prototype caries-prediction tool within electronic health record systems for primary care providers. The project was well received and many attendees expressed interest in the common risk factor approach to improving oral health promotion in primary care.

Policy Center Awarded Third Year of Funding For Oral Health Research

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.”

In 2015, the Policy Center conducted a study at Nationwide Children’s Hospital (NCH) in Columbus, Ohio, to identify medically specific factors that correlate to caries risk in young children. Whether or not toddlers developed cavities or were high risk was compared to approximately 40 independent variables pertaining to nutrition, safety, development, demographic information and other screening-related variables already embedded within the 12- and 15-month well-child examination templates. The results supported the growing consensus of health research that different diseases share common risk factors.

The 2016 phase of the study will further validate the medical factors identified as correlating to caries risk – and explore 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 NCH. A caries-risk assessment based on information routinely gathered from well-baby visits means oral health promotion and necessary dental referrals may be delivered more efficiently by primary care providers.

RETROSPECTIVE STUDY AT NATIONALWIDE CHILDREN’S HOSPITAL AND MARSHFIELD CLINIC

To further validate the significant variables identified in Year Two, as well as to increase and diversify the study population, patient data will be analyzed from Marshfield Clinic in Marshfield, WI. Additional data analysis of new patient populations and previously non-extractable variables will be conducted at NCH.

CONCURRENT STUDY OF A MEDICALLY ORIENTED CARIES-PREDICTION TOOL

A prototype caries-prediction model with scoring criteria will be embedded within well-child templates for 24 months of age or less. The model will include a Dental Caries Risk Alert similar to other Best Practice Alerts already available on the NCH EpicCare Ambulatory Electronic Health Record. The alert will offer medical teams several preventive intervention options in addition to a referral to the NCH’s dental clinic. All patients referred from primary care to the dental clinic will receive a screening appointment for dental validation of the medically oriented caries-prediction tool.

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. Research investigators are eager to embark upon this final year of the project and excited about the implications this type of tool could have on improving the overall health of children.

What does this photo say to you?

Let us know your views. Watch your inbox for our AAPD Survey on Sugared Beverages and Obesity.

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Ask the Policy Center

Parent-Friendly Answers on the Safety of Sedation

The Policy Center hears from members on research-related issues, frequently prompted by questions from parents. Our goal is to provide you with parent-friendly responses based on the latest scientific data to topics garnering public attention. In this issue, our focus turns to concerns about the safety of sedation and general anesthesia.

Question: “I saw on the news that a child died in a dental chair. How could a child die from dental treatment under sedation (or general anesthesia)?”

TALKING POINTS

• This is truly a tragic event, and our deepest sympathies are with the patient’s family.
• Since it is still under investigation, I don’t know the specifics of the case. However, I can tell you about all the safeguards in our practice to protect children when treated with sedation (general anesthesia).
• Although we have an excellent safety record in treating children, even one child in this situation is one too many. That’s why pediatric dentistry has been at the forefront of ensuring patient safety during sedation and anesthesia.
• The American Academy of Pediatric Dentistry, along with the American Academy of Pediatrics, have developed guidelines for education, training and use of sedation and anesthesia.
• These guidelines, endorsed by the American Dental Association, reflect the highest safety measures for children undergoing sedation and anesthesia.
• The American Academy of Pediatric Dentistry supports state regulations that limit the practice of deep sedation and general anesthesia to qualified, appropriately trained individuals. Parents are encouraged to ask their dentist about their training in sedation, particularly in sedating children.
• Dental sedation and anesthesia are very safe, as shown by solid science and clinical experience.
• Some children are too young to understand or cooperate for routine dental treatment. Effective sedative and anesthetic techniques have helped thousands of children to safely undergo dental treatments they might otherwise be unable to receive.
• It is of utmost importance that every doctor discuss the risks and benefits of all treatments, including sedation (anesthesia) with parents when there is a need for medical or dental treatment involving sedation (anesthesia) services.
• Parents deserve to be fully informed and have trust in their child’s dentist. If parents are not satisfied with the answers to their questions and concerns, they should consult with another pediatric dentist.
• There are many dentists fully trained and qualified in the use of sedation and anesthesia, and the AAPD can help parents find one in their area (aapd.org and mychildrensteeth.org)

Quick Tips

• Don’t minimize the seriousness of the situation.
• Don’t speculate on details of an individual case.
• Stress the safety record of pediatric dentistry.
• Tell all the steps you – and your profession – take to ensure patient safety.
• Voice your commitment to the well-being of children.
• Empower parents with positive actions to protect their child’s health.
Evidence-Based Dentistry

African bush elephants’ gestation period is approximately 22 months, South Sea pearls take from two to three years to reach diameters of up to 15mm, and evidence-based guidelines take at least two years to produce. All examples, in this insta-age where patience is tried by 30-second download times, that the truly superior and grand cannot be rushed or virtually replicated. Unlike African bush elephants that generally give birth to a single calf, this year the AAPD will produce two evidence-based guidelines.

Nothing has such power to broaden the mind as the ability to investigate systematically and truly all that comes under thy observation in life.

Marcus Aurelius

The AAPD has been working on two evidence-based systematic reviews: vital pulp therapy and non-vital pulp therapy. The pulp therapy workgroup’s1 final report will be presented to the board of trustees at Annual Session, and the full systematic review will be published in the September/October issue of Pediatric Dentistry. Progress is being made on the production of the non-vital pulp therapy review; protocol will be published in 2016. The sealant guideline, a joint project of the ADA and AAPD, is slated for publication in the fall of 2016.

AAPD’s evidence-based guidelines are being produced in accordance with standards created by Institute of Medicine and mandated by the National Guideline Clearinghouse (NGC), an initiative of the Agency for Healthcare Research and Quality, and therefore will be eligible to be included in the NGC. Inclusion in the NGC guarantees our guidelines will be seen by private and public payors, policy makers and the public.

Evidence-based guidelines are equal parts science and experience. These evidence-based guidelines are evidence that the AAPD, and pediatric dentistry as whole, are dedicated to excellence in care.

1 Drs. Coll 1, Seale 2, Vargas 3, and Marghalani 4.

1: Division of Pediatric Dentistry, University of Maryland School of Dentistry, Baltimore, Md., USA 2: Department of Pediatric Dentistry, Texas A&M University, Baylor College of Dentistry, Dallas, Texas, USA 3: Corridor Kids Pediatric Dentistry, North Liberty, Iowa, USA

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- Dr. Weston W. Heringer III, DMD
Salem, OR
Behind the Code

Revisions to Sedation Codes

One of the most significant changes in CDT 2016 concerns the reporting of intravenous sedation and general anesthesia. In dentistry, sedation has historically been reported for the first 30-minute increment of sedation, then for each additional 15-minute increment. This previous method of reporting is now revised to be similar to medical reporting, where sedation is reported in 15-minute increments. To establish this new reporting method, four existing CDT codes were deleted, and two new codes were added to replace those deleted codes.

DELETED CODES

D9220 Deep sedation/general anesthesia – first 30 minutes
D9221 Deep sedation/general anesthesia – each additional 15 minutes
D9241 Intravenous moderate (conscious) sedation/analgesia – first 30 minutes
D9242 Intravenous moderate (conscious) sedation/analgesia – each additional 15 minutes

NEW CODES

D9223 Deep sedation/general anesthesia – each 15 minute increment
D9243 Intravenous moderate (conscious) sedation/analgesia – each 15 minute increment

Two major payers have recently published their guidelines that establish how to properly report these new codes and how their fee schedules for these codes will be structured. Both payers have instructed that the codes will be reported “per line.” This means that 30 minutes of deep sedation should be reported by listing D9223 on the claim form on two separate lines.

If you find that your 2016 claims for sedation are denied, change the method of reporting. If you followed the claim form instructions and entered the code once and indicated a quantity, try reporting the code on a separate line for each 15-minute increment.

One of the payers has further stated that charges for more than 60 minutes of sedation will typically be disallowed. Sedation time required over 60 minutes may be considered on a “by report” basis. This limitation has been set based on the fact that not all dental procedures require sedation, and those that do can often be completed in 60 minutes or less. Other payers have similar exclusions and limitations on anesthesia services. Review the processing policy manual for each payer to determine its specific limitations.

The fee schedules for two payers were determined by adding the previous allowance for the initial 30 minutes plus two 15-minute increments of additional time. The total was then divided by four to obtain the fee for each 15-minute increment. Therefore, this is the suggested method to use to adjust dental practice fee schedules.

CDT codes are updated annually. It is important to review all CDT code changes each year and to make sure you are prepared to report procedures using the current code set. Failure to do so can result in claim rejections.

AAPD Coding and Insurance Reporting Manual – 2016

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“It’s a must-have for every pediatric dental office. We routinely use it for coding and definition searches for our routine treatment.”

Dr. Erin Stuewer
Affordable Care Act 101

The Affordable Care Act (ACA) was passed with a goal of making healthcare more accessible and affordable for all Americans. The ACA requires that all Americans have health coverage and identifies the quality of coverage that must be obtained. One requirement is that all plans must provide coverage for essential health benefits (EHB). There are currently ten items considered to be EHB, including pediatric services. This is an important provision for dental practices because this pediatric coverage includes dental care.

TYPES OF COVERAGE

There are three ways to obtain pediatric dental benefits.

Stand-alone Dental Plan

A standalone plan is similar to a traditional dental plan. There are two types of ACA stand-alone plans: the high option and the low option.

The difference is the percentage of treatments that the plan will pay. (Note: This type of plan typically has out-of-pocket maximums.)

Bundled Stand-alone Medical and Dental Plan

Bundled plans are separate medical and dental plans that are coupled together. With a bundled plan, a given dental policy may only be bundled with the corresponding medical plan. Even though the plans are bundled, monthly premiums are paid separately. To date, bundled plans appear to be more of a theory than a practical offering.

Embedded Dental Plan

When dental coverage is embedded in the medical plan, the insured is only covered by one plan that provides both medical and dental benefits. Under this type of plan, there is sometimes only one deductible that applies to all benefits. Dental benefits in embedded plans may be subject to the global deductible.

Since embedded plans are typically less expensive than other plans, many individuals choose this type of coverage. However, families that do not meet the single deductible may not actually receive any dental benefits.

COVERED PROCEDURES

Dental coverage varies among plans. Furthermore, coverage can differ between different types of plans (i.e., medical policies with embedded dental benefits versus stand-alone dental plans). The following routine procedures are typically covered as preventive treatments:

- Sealants for first and second permanent molars (typically covered only for patients 6 to 15 years of age; benefits vary).
- Space maintainers (typically must have missing first or second primary molars).
- Consultations.
- Palliative emergency treatment (for pain relief).
- Pulp vitality tests.

Reimbursement for covered procedures varies among plans. Some medical plans with embedded dental benefits require that preventative services be subject to the medical deductible. Once the medical deductible is met, some plans may require the patient to pay a copayment, such as 25 percent. There are also plans that have copayments for preventive visits.

LIMITATIONS AND MAXIMUMS

Plans have historically featured annual or lifetime limits on benefits. Under the ACA, plans are not allowed to place limits on EHB, including preventive care and pediatric benefits. However, plans may place limits on procedures that are not designated as EHB.

Another new feature for pediatric dental benefits is the out-of-pocket maximum. When a plan features an out-of-pocket maximum, once the maximum is met, all treatments are covered at 100 percent of the plan's allowable fee. Stand-alone dental plans purchased on the federal exchange must have an out-of-pocket maximum of $350 for one child and $700 for two or more children. (Note: This feature only applies to treatments provided by in-network doctors.)

PEDIATRIC DENTAL BENEFITS

Under the ACA, all children under the age of 19 must be covered by dental insurance. The coverage comes primarily from public programs, including the Children's Health Insurance Plan (CHIP) and Medicaid. Some coverage also comes from stand-alone plans or may be embedded in a medical plan.

This pediatric coverage requirement dramatically increased the number of children with dental coverage, and thus the demographics of pediatric patients within the dental market. However, dental coverage is not required for adults. Research shows that many adult patients have not obtained dental coverage, and some have even dropped existing dental coverage. This is especially true for families who purchase a medical plan that features embedded pediatric dental benefits.
ORTHODONTIC BENEFITS

Orthodontic benefits are also included in the pediatric EHB. Pediatric orthodontic benefits are typically covered when the treatment is considered medically necessary and the proper documentation is submitted.

Each payer defines its requirements for medical necessity and documentation. For orthodontic treatment, severe orthognathic problems, such as cleft palate or severe occlusion issues, typically meet medical necessity requirements. However, esthetic misalignment where the teeth have a stable occlusion does not qualify. Practically speaking, routine esthetic orthodontic cases are not covered.

While orthodontic documentation requirements vary by plan, many plans require the following:

• Documentation that establishes medical necessity.
• A written report from a qualified orthodontic specialist.
• Orthodontic records with a complete diagnosis (e.g., intraoral and extraoral photographs, panoramic radiographic images, study models, etc.).
• Orthodontic treatment plan or contract, including the anticipated initial placement of the appliance (s) and the length of treatment.

It is highly recommended that orthodontic benefits always be verified before treatment is provided, as coverage often varies from plan to plan and some plans have waiting periods. Furthermore, many plans require prior authorization for orthodontic benefits.

ICD-10-CM CODES

Note: The current diagnostic (ICD) code set is ICD-10-CM.

Medical claims are filed using both CPT and ICD codes. CPT codes are similar to CDT codes in that they report the procedure that was performed. ICD codes, or diagnoses codes, provide detail as to the necessity of the procedure. The additional information provided by ICD codes is appealing to claims processors and government entities for benchmarking and other purposes.

The 2012 ADA Dental Claim Form provides four boxes to report ICD codes. Some state Medicaid and ACA plans are currently requiring ICD codes to be reported on dental claims, and some have announced that they will require ICD codes in the future. Others have announced that all claims must be filed using the current 2012 ADA Dental Claim Form, indicating that they may be moving toward the ICD code requirement. Some predict that all plans will require ICD codes to be reported in the future.

COORDINATION OF BENEFITS

Coordination of benefits (COB) occurs when a patient is covered by more than one dental plan. One payer is identified as the primary payer. A claim is sent to the primary payer first, which will determine benefits based on its plan document. After the primary payer provides reimbursement, the claim is then filed to the secondary payer for consideration. Under this arrangement, the practice may receive up to its full practice fee for the procedure performed in some circumstances. However, under non-duplication of benefits, the secondary payer might not provide any benefits based on the primary payer’s level of reimbursement.

COB is a very difficult part of insurance administration and creates confusion for many practices. It is important to understand COB and to have all of the information needed to determine the proper coordination of benefits for each patient.

The ACA impacts COB in two ways, both of which concern the ordering of submitted claims. Medical plans are almost always primary to dental plans. Therefore, when a patient has a medical plan with embedded dental benefits and a stand-alone dental plan, the medical plan with embedded dental benefits will be primary to the stand-alone plan. However, if more plans are involved, determining the primary payer can be even more complicated.

The ACA provides that children up to age 26 may be covered under their parents’ health insurance. While dental coverage is only required up to age 19, some payers voluntarily offer coverage up to age 26 to provide consistency between the dental and medical coverage. Therefore, patients who are working adults may be covered under their employer plan and their spouse’s employer plan, while still being covered under one or more of their parents’ plans. This is an equation that previous COB models did not have to consider. These additional coverages further complicate COB.

Due to the complexity of the ACA, many employers, individuals, dentists, patients, etc. have experienced confusion and frustration. With the implementation of the required pediatric dental benefit, this confusion has been felt across the dental industry as well. Be aware that this article provides an overview of the ACA’s impact on dental practices and is not intended to provide a comprehensive and complete analysis of the ACA.

For more information, contact Dental Benefits Director Mary Messling at (312) 337-2169 or messling@aapd.org.
2016 NuSmile Graduate Student Research Awards

Sponsored by NuSmile, the Graduate Student Research Award was established in 1989 for current students and residents and recent graduates from advanced education programs in pediatric dentistry. The AAPD Committee on Scientific Affairs selects eight finalists to present their research during the Annual Session. Finalists receive complimentary Annual Session registration for themselves and a guest, travel expense reimbursement, a cash award and plaque presented during the General Assembly. A matching cash award is given to each finalist’s training program.

Congratulations to the following recipients:

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

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

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

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

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

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

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

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

Following their oral presentations at the Annual Session, the Graduate Student Research Award recipient judged to have accomplished the most outstanding research project is awarded the Ralph E. McDonald Award. The recipient receives an additional cash award. Established in 1991, the award honors Ralph E. McDonald, AAPD past-president and editor emeritus. The Indiana University of Pediatric Dentistry Alumni Association graciously supports this award.

2016 Joint Academic Day

Plan on meeting your colleagues for the 2016 Joint Academic Day being held at the Marriott Riverwalk Hotel in San Antonio on Wednesday, May 25, 2016. The combined morning session for pre- and post-doctoral program directors will feature a presentation titled, “Effective and Efficient Clinical Teaching,” by Dr. Paula O’Neill, professor emerita from the department of diagnostic and biomedical sciences at the University of Texas, Houston School of Dentistry and Dr. John Littlefield, adjunct assistant professor of comprehensive dentistry at the University of Texas Health Science Center at San Antonio. Dr. Kathleen Hinshaw from the ADA will speak on the Advanced Dental Admission Test (ADAT) and Dr. Carolyn Booker from ADEA will provide an update about enhancements to the ADEA PASS program. Drs. Janice Townsend and Anu Tate will present, “Collaboration, Not Competition: A relationship analysis of DSOs and dental schools in view of children’s access to care.”

Following lunch, the Society of Predoctoral Program Directors and the Society of Postdoctoral Program Directors will hold discussions on issues relevant to predoctoral and postdoctoral topics of interest.

The AAPD graciously acknowledges Proctor & Gamble Oral Health: Crest and Oral-B for their continued sponsorship of the Joint Academic Day.

AAPD Announces New Resource for Members’ Gateway to Teaching

The shortage of dental faculty has grown more pressing as new dental schools came on line and pediatric dentistry training programs expanded in numbers and size.

With support from the federal Health Resources and Services Administration, the Columbia University College of Dental Medicine responded to the faculty shortage crisis by developing a unique approach to recruiting faculty from private practice. Their website, TeachDentistry.Org assists practitioners who are curious about teaching to explore options at every stage of dentists’ careers.

The website provides step-by-step advice on how to become involved in academia in a variety of roles, both full-time and part-time. It features videos of current faculty explaining what they do and why they chose to teach.
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Oral Clinical Exam Review
SEPTEMBER 8, 2016
RITZ CARLTON, ST. LOUIS, MO.

If you’re serious about becoming a diplomate, this course could make the difference.

Presented by leading educators and clinicians, this course focuses on preparing the candidate to succeed in the oral portion of the board examination.

Participants will have the opportunity to be part of numerous mock examinations and will learn skills to deliver an impressive performance. Learn about the various domains contained in the American Board of Pediatric Dentistry examination, successful test taking techniques and how to be prepared for this type of high-stakes clinical examination. Additionally, participants will learn how to organize, remember and present pediatric dentistry information and literature.

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.

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.F.D., Ph.D.
Marielle Blake
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 Whelon, B.D.S. (NUI), Ph.D. (NUI), M.D.P.H. (NUI), D.T.I.H.E. (NUI)
Tim Wright, D.D.S.

This course is approved for 11 continuing education credits.

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 22 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.
Media Mix

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 PRESIDENT APPEARS ON ABC IN BATON ROUGE

Continuing the strong National Children’s Dental Health Month momentum, AAPD President Dr. Robert Delarosa appeared on WBRZ TV (ABC) in Baton Rouge, La., prominently weaving in AAPD (a couple times!), Age One dental visit, top tips for parents, mychildrensteeth.org and more.

AAPD INCLUDED IN CNN.COM STORY

Dr. Paul Casamassimo, director of AAPD’s Pediatric Oral Health Research & Policy Center, was interviewed by Nadia Kounang for an article based on analysis in Pediatrics regarding teething.

According to the story:

“If a child has a really high fever, or is in significant discomfort, or won’t eat or drink anything for days, that’s a red flag for concern,” said Dr. Paul Casamassimo, director of the American Academy of Pediatric Dentistry’s Pediatric Oral Health and Research and Policy Center. The analysis didn’t completely dismiss a parent’s intuition. It found the most common symptoms of teething were swollen gums, drooling and crankiness. Symptoms shouldn’t last for more than three to five days, Casamassimo said, but he did acknowledge that it can feel much longer. “By and large, symptoms are not a chronic thing. They come and go, and the job of the parent is to comfort the child, and keep their finger on the pulse of their child. Is the child eating? Staying hydrated?” Casamassimo said.

AAPD IN PARENT AND CHILD MAGAZINE

AAPD President Dr. Robert Delarosa was interviewed by Katie Choi for an article on preventing tooth decay. “While parents are usually well informed about seeing a pediatrician, dental guidelines tend to fly under the radar,” says Robert Delarosa, D.D.S., a pediatric dentist in Baton Rouge, La., and president of the American Academy of Pediatric Dentistry (AAPD).

AAPD AND SUNSTAR PROVIDE ORAL HEALTH CARE TIPS ON MODERN LIVING WITH KATHY IRELAND®

During the Feb. 25, segment, Kathy Ireland interviewed Marketing Manager Jess Magno and President of the American Academy of Pediatric Dentistry Dr. Robert L. Delarosa.

In addition, AAPD spokesperson Dr. Mira Albert of Hinsdale, Ill., also participated in this segment by shooting video footage in her office.
National Children’s Dental Health Month Media Update

PARENTS AND CAREGIVERS ASKED TO FIGHT TOOTH DECAY DURING NATIONAL CHILDREN’S DENTAL HEALTH MONTH

This February, the American Academy of Pediatric Dentistry (AAPD) celebrated National Children’s Dental Health Month by hosting the Tournament of Tooth Care, showcasing how parents and caregivers can help their kids fend off the Mouth Monsters—a.k.a. tooth decay. Parents and caregivers could tune in to the Mouth Madness to learn how to help little teeth take on the Mouth Monsters one big game at a time.

NATIONAL SATELLITE MEDIA TOUR
Feb. 9, 2016

AAPD’s public relations firm Weber Shandwick conducted a very successful satellite media tour with AAPD President Dr. Robert Delarosa where he did interviews with 26 radio and television outlets across the country, including several in key target markets (Dallas, San Diego, Philadelphia, San Antonio, Columbus and Miami).

We obtained 1,354 total placements reaching more than 33 million people!

#LITTLETEETHCHAT TWITTER CHAT
Feb. 24, 2016

As part of our national campaign to raise awareness of the importance of children’s dental health, AAPD hosted the chat with expert help from AAPD national spokesperson Dr. Mira Albert of Hinsdale, Ill., and co-host AAPD Parent Ambassador Susan Carraretto of 5 Minutes for Mom. During the chat, Dr. Albert and Susan engaged participants on Twitter through questions, anecdotal stories, and tips from AAPD. The chat focused on the importance of early dental visits, establishing a Dental Home and tips for keeping children’s mouths healthy and “Monster-Free.” Dr. Albert and Susan also answered questions from parents and caregivers on oral health, ultimately raising awareness of AAPD as a resource for parents and caregivers as the big authority on little teeth.

NATIONAL CHILDREN’S DENTAL HEALTH MONTH: INTRODUCING MOUTH MADNESS

Healthy little teeth ended up in first place at the conclusion of the National Children’s Dental Health Month Tournament of Tooth Care. Each little champion brought a unique skill, and they all worked together to take on the Mouth Monsters with ease. According to their coach, the Pediatric Dentist, the fun isn’t over yet—brushing and flossing practice starts again tomorrow, and the team’s next 6-month checkup is already scheduled for late 2016.

Ad Council Campaign Update

#BEDTIMEBATTLE TWITTER CHAT
Feb. 23, 2016

The Kids’ Healthy Mouths campaign held a Twitter chat to celebrate National Children’s Dental Health Month with co-hosts Momfluen-tial, HaveSippy and Teeth Fairies. AAPD President-Elect Dr. Jade Miller served as the pediatric oral health expert on the chat.

The chat focused on how parents can win the #BedtimeBattle with the 3 Bs: Brush, Book, Bed. Tips were shared for structuring children’s nighttime routines in a healthy way (including brushing for two minutes) that helps them get to sleep.
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Five Things you Should Know about Malpractice Insurance

By Kenneth C. Thomalla, CPA*, CLU, CFP®
Chief Operating Officer, Treloar and Heisel, Inc.

A professional liability policy provides coverage for the payment to a plaintiff in a malpractice claim, and, perhaps even more importantly, the insurance company’s expertise in your malpractice defense. Consequently, it’s important to choose a company with the best policy language and a strong reputation in the courtroom.

Here are five critical things to know about your malpractice insurance carrier.

1. The Consent Clause

The first thing you will want to know is, does your insurance company have a right to settle a claim without your consent? Clearly, you don’t want people deciding your fate without your approval. There are a few different types of consent clauses available in the marketplace. Let’s review them from weakest to strongest.

You’re in the weakest position when you have absolutely no choice in the matter. Your next (stronger) option is a feature called a hammer clause. That is when the insurance company has negotiated a pre-trial settlement offer, say for $100K, and you have the right to continue to fight it. If the judgment comes against you over and above the $100k the difference needs to come out of your pocket. You’re in a somewhat stronger position when you have the option to go to arbitration. In an arbitration scenario, the insurance company assembles a few people from your profession to determine whether or not they should settle the claim. You are, however, strongest when you have what is called ‘pure consent.’ This means the insurance company cannot settle a claim without your written agreement. They could have a settlement in place waiting for your approval and you can say no, regardless of the potential adverse outcome of the trial.

2. The Type of Policy

There are two types of policies, called claims made and occurrence. Claims made coverage protects you at the time the lawsuit is filed against you, regardless of when the alleged activity occurred. So you could have performed a treatment in 1970 and theoretically in 2015 you could have a claim against you for the treatment you performed years ago. The claims made covers you in 2015 for the claim that dates back to 1970.

The second type of policy is an occurrence policy. That policy will protect you for any procedure in a given year. With an occurrence policy, you essentially have a new limit every year that you practice. A lot of people feel the occurrence policy gives you a much broader overall limit.

Most insurance companies offer claims made policies. A very small number offer both. You need to decide which one is best for your practice, and for your risk tolerance. A good insurance agent should be able to walk you through that decision-making process.

3. Know Your Limits

We all know that malpractice lawsuits can go after your professional assets. However, if you have a $1M professional liability policy and there is a judgment against you for $5M, the plaintiff can go after your personal assets. How much depends on the state in which you live. As a result, it’s really important that you be adequately insured. It’s also good to know that (thankfully) as you increase your coverage, the price per million goes down.

4. Financial Strength

It’s a simple as that: you want to work with a company that has financial strength and the longevity to be able to last throughout your entire career (and beyond.) Especially with an occurrence policy this is particularly important, because you’re relying on that company to be there regardless of when that lawsuit will be filed against you. So… do your homework.

5. Preventative Services

What kind of risk management services does your carrier provide pre-claim? Do they offer any educational seminars to alert you to risks of lawsuits? Some companies will offer you a discounted policy for several years if you take the time to attend a seminar on how to prevent claims, and what to do if you do get a phone call or correspondence from a disgruntled patient.

It’s easy to gloss over the details when buying malpractice insurance, and yet the details are so important. Once you start shopping around, you may notice that it’s a very price competitive market. All the more reason for you to understand the technicalities, dive deep and make sure to partner with a knowledgeable and experienced insurance agent.
A Story of Grace

Stories of the human spirit never cease to amaze. As Chair of the Oral Clinical Exam, one of my fondest duties is taking calls from Candidates. Consequently, I hear a lot of stories. When I received the call about Dr. Grace Lim, I knew her story was something special.

Grace was born in 1981 in Seoul, Korea, followed soon by a sister, Joanne, and then a brother, George. Grace’s father worked for Hyundai in Southern California for four years. Realizing greater opportunities for their children in America, David and Joyce Lim moved their young family to Los Angeles when Grace was four.

Grace quickly assimilated into American culture, while still retaining her Korean heritage. Even at a young age, Grace was responsible, patient and nurturing. Since both parents worked tirelessly, Grace gradually assumed the role of house leader. She cared not only for her two younger siblings, but also her parents. She performed in that role so masterfully, that her younger siblings would oftentimes turn to Grace when they needed guidance and support. As adults, they would continue to seek her advice on a wide range of issues, from career paths to appropriate dating etiquette.

Grace’s parents stressed the value of a strong work ethic and perseverance. Even after a long day at work, they would spend time reviewing their children’s homework. But it wasn’t all about the work. After a long night of studying, they would lovingly reward their children with a late-night trip to Denny’s, where the Lim children and the Denny’s night-shift chatted on a “first-name” basis. The lesson in hard work hit the mark. Grace became a Pediatric Dentist, Joanne a Pharmacist, and George an Emergency Room Physician.

Always a bright and talented student, Grace completed the accelerated dental program at the University of the Pacific. After completing a Dental General Practice Residency, she pursued pediatric dental training at Montefiore Medical Center in New York. Amidst the rigors of dental school, Grace found her one, true love, Raymond Chan, also a dental student. They married after Grace’s first year of pediatric dental training. Ray stayed with his practice in California, while Grace completed her program. After graduating, she rejoined Ray and practiced pediatric dentistry in Central California. She quickly won over the hearts of her patients, their parents and her co-workers.

In 2014, Grace successfully challenged the Qualifying Exam. She received the Pugh Award, given to the top 3%. In September 2015, she took the Oral Clinical Exam. Two weeks later, she tragically and unexpectedly passed away from an aggressive form of leukemia. Grace never knew that she had passed the oral exam.

Grace had a profound influence on everyone around her. She always put herself last, building relationships on trust, generosity and self-less love. Following her death, Pacific Dental Services created the Grace Lim Award to memorialize her life, both as a person and a pediatric dentist. This award is presented annually to the doctor who best exemplifies “compassion, devotion, sacrifice, commitment, patient safety and clinical excellence to others”.

Cancer is a formidable foe. How does a person battling for her life, summon the strength to prepare for the Oral Clinical Exam? That’s not covered in our Operations Manual. Dr. Lim took the value of board certification to a level that most of us can never comprehend. She simply went about her business with the same quiet resolve and compassion that defined her life…truly a story of Grace.

Jeffrey C. Mabry, DDS, MS
Director, ABPD
San Antonio, TX
Board Certified in 1991

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Yes.
Reflections on Giving and Gratitude

My good friend Dr. Heber Simmons Jr. has a saying that a leader’s role is to make sure the wood pile is higher when you leave. As I complete my three years as Healthy Smiles, Healthy Children president, the Foundation’s wood pile is indeed higher, thanks to so many people.

My time as president benefitted greatly from the wisdom of my predecessor, Dr. David Curtis, who put the Foundation on its “kids-first” path. We turned our attention during his tenure to supporting only activities that demonstrate a direct benefit to children. Our Access to Care Grants were born.

What started with a handful of $20,000 grants in year one has grown to more than $1 million in Access to Care Grants and commitments in each of the last three years. Our grantees have helped provide Dental Homes to more than 300,000 kids. It’s the Foundation’s accomplishment that I’m most proud of.

I’m also proud of Leadership Institute and Advanced Leadership Institute, our shared investment with the Academy to develop the leadership skills of pediatric dentists to the betterment of pediatric dentistry and the children in our care. Since our first Leadership Institute session in December 2004, the Academy and Foundation have committed more than $1.7 million in the five Leadership Institute Cohorts and two Advanced Leadership Institute Cohorts.

Of course, none of this would be possible without the generosity of our donors—notably our AAPD member colleagues and corporate supporters. Our donors have responded to our kids-first efforts and HSHC continues to grow financially as we commit more each year in the care of underserved children.

Donor generosity is on full display this year. With two months to go in our fiscal year, we are closing in on our first $2 million contribution year thanks to an anonymous donor couple who are matching every contribution this year dollar for dollar as part of the $1 Million Dental Homes Challenge (see related story).

But, with all of these accomplishments, my time as HSHC president has taught me that a leader’s “success” has everything to do with getting your turn at the right time.

HSHC is on an upward trajectory thanks to dedicated Board members, Committee members and a battalion of volunteers who make everything go behind the scenes. You’ll not find a more committed group of people who put kids first in everything they do.

You’ll also not find a more committed group than our passionate staff. From our CEO Dr. John Rutkauskas on down, there’s no small measure of magic in staff’s ability to make things happen.

So, as I prepare to step aside, I am grateful to everyone for everything Healthy Smiles, Healthy Children has accomplished. I also am grateful for Dr. Neophytos “Ned” Savide, who will be taking over as HSHC president on July 1.

I am confident the Foundation will do great things in Ned’s capable hands. I’m also confident he will be as amazed as I am that he, too, will get his turn at the right time.

Thank you, everyone, for your support of Healthy Smiles, Healthy Children. See you in San Antonio.

Dr. Beverly A. Largent
HSHC President
2016 HSHC Grant Recipients

Since taking on the Dental Home challenge in 2010, Healthy Smiles, Healthy Children has issued more than $3 million in grants and commitments helping 70 organizations in 26 states provide Dental Homes to more than 290,000 children. HSHC plans to release another $1 million in new commitments next year.

In 2016, HSHC will award $400,000 in Access to Care grants to 20 organizations. Two previous grantees also will receive multi-year grants, receiving $75,000 a year through 2021.

Healthy Smiles, Healthy Children’s previous Access to Care grantees, Cook Children’s Health Care System/Save a Smile in Fort Worth, Texas along with St. Vincent de Paul Virginia G. Piper Medical & Dental Clinic (SVDP) in Phoenix, Arizona, each were awarded multi-year Access to Care grants of $375,000 ($75,000 per year for five years). Each five-year grant carries $75,000 annual commitments from FY 2017 through FY 2020.

2016 HSHC ACCESS TO CARE GRANTEES

1. Caridad Center, Inc.: Pediatric Dental Clinic – Boynton Beach, Fla.
2. The Center for Pediatric Dentistry: Dental Home Day at the CPD – Seattle, Wash.
3. Children’s Dental Services: First Year Dental Visits, Serving Homeless and Pregnant teens and Children in Twin Cities Suburbs – Minneapolis, Minn.
4. Children’s Diagnostic & Treatment Center: Dental Clinic for Special Needs Children – Fort Lauderdale, Fla.
6. Children’s Smile Center – Ozark, Mo.
13. Partnership for the Children of San Luis Obispo County: Tolosa Children’s Dental Center – Paso Robles, Calif.
14. Pike County Health Department: Pike County Dental Clinic – Pittsfield, Ill.
15. Santa Barbara Neighborhood Clinics: Goleta Neighborhood Dental Clinic (GNDC) – Santa Barbara, Calif.
Feel like a million bucks?

Healthy Smiles, Healthy Children is closing in on its best contributions year ever, thanks to a $1 million challenge contribution from an anonymous donor couple. Every gift and new pledge made to HSHC before June 30, 2016, will be matched dollar-for-dollar up to $1 million as part of the $1 Million Dental Homes Challenge.

Stop by the HSHC booth during AAPD 2016 to make your gift.

YOU CAN

- Select a specific child to donate to his/her care
- Make gift in honor or a friend, mentor or colleague
- Join a Donor Circle with a pledge of $2,000 a year or more

Everyone making a donation of $100 or more will receive a special gift. And every contribution will get us closer to our $1 million dollar goal. See us at the HSHC booth to learn more.

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When I was little, I was an anxious patient. Every time I saw my dentist, he would greet me with a big smile and try to make me laugh. I don’t remember all the details of the office or the visits, but what I do remember is that he was a happy person and my experience at the dentist was positive. That’s why my goal as a pediatric dentist is to give my patients a positive experience. The administrative support I receive from PDS allows me to do that. I feel secure with my role as a clinician because I have the support of a team that expands beyond my office walls. Plus, it’s very rewarding when my patients that relocate tell me they looked for a My Kid’s Dentist® in their new neighborhood. 

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The Two BIGGEST Problems Facing Pediatric Dentists

By Rhas Haugaste, D.M.D.

My name is Dr. Rhas Haugaste, and like you, I am a practicing pediatric dentist in Marietta, Georgia. Over the years, I found myself feeling very frustrated with the lack of efficient, cost-effective training available for pediatric dental assistants. In fact, there were two major problems that I continually had to deal with when hiring a dental assistant for my pediatric practice.

1. They had no clinical training. Even if they had dental assistant training, they still fell short of the unique needs of a pediatric practice.

2. They had no communication skills. They often did not know how to talk or act professionally or how to communicate effectively with children and their parents. Newly hired dental assistants tend to be young people who are just starting their careers. For a variety of reasons, many of them had very little people skills and life skills and had no way to manage their resources or prioritize efficiently.

There was plenty of training for general dental assistants, but nothing for the pediatric field. I knew what it took to create a successful PDA. Additionally, I was tired of training and re-training with every new PDA.

Dealing With Problem #1

Knowing that my colleagues were also frustrated with these same challenges, I created the Pediatric Dental Assistant School (PDAS) in Atlanta, where newly hired PDA's in Atlanta-based pediatric dental offices or those seeking a career as a pediatric dental assistant could get the training they need (for an entry-level position) in 9 weeks of training at my office in Atlanta.

Dealing With Problem #2

Although the PDA graduates were trained clinically, I realized there were other issues I needed to address, namely, teaching them the soft skills that came with working closely with children, parents, and the office staff. So I created training modules on parent/patient communications that teach PDA's the art of effective communication in a professional setting, and specifically how to communicate and connect with children and their parents. This training can make a remarkable impact on patient/staff relationships.

I realized that the need for specialized training was widespread, and pediatric dentists across the nation had to deal with these two problems regularly. "How can I help them?" I wondered. That is when I launched the Pediatric Dental Assistants Association. It not only provides the ins, outs, and commons needed to train newly hired PDA's to quickly because a valuable and fully functioning member of the staff, it is also a place where high-performing PDA's have been able to grow in their skills and in their careers.

The development of the Pediatric Dental Assistant School, along with the Pediatric Dental Assistant Association, has been a wonderful addition to my practice. My staff truly love these programs!

Pediatric dental offices who would like to receive more training and mentorship for their pediatric dental assistants should enroll their assistants in the PDAS.

For further information, please contact the Pediatric Dental Assistants Association at 770-823-3534 or email pdasdirector@gmail.com.

How Would You Like To Have The Best, The Happiest, And The Most Competent Pediatric Dental Assistants Who Actually Make You Money?

The Pediatric Dental Assistants Association is proud to accept memberships from qualifying pediatric dental offices. Take a look at everything that is included in your exclusive membership:

- The Annual PDAA Conference® - an excellent place to keep your PDA's connected and excited to be part of a bigger community of high-performing PDAs.
- Pediatric dental assistant video training modules in key practice areas.
- Email support from Dr. Haugaste personally.
- 24/7 access to videos and training modules to allow learning during downtime at the office, at the house, or even from a tablet.
- Opportunity to request new training modules to be developed.
- A bi-monthly newsletter filled with fun, helpful news and information.
- Additional fee

A PDAA membership is a truly hands-off program for you as the owner/doctor. Your dental assistants will gain valuable knowledge and training that will increase their abilities and help grow and develop your practice. Teaching new skills and sharpening the skills of your existing assistants is the key to keeping your practice happy, productive, and profitable.

Maximize your PDA's value to your practice! Call (770) 823-3534 or visit PediatricDentalAssistantsAssociation.org to join today!

Visit us at Booth 109 at the American Academy of Pediatric Dentistry Annual Conference on May 26-29 in San Antonio!
Opportunities

SEEKING PEDIATRIC DENTISTS

ARIZONA—TUCSON. Associate to partnership opportunity (after 1 year) for a Pediatric Dentist to join an established, growing, multi-location private practice. Join a strong team who delivers passionate, quality care in a fun office environment. Experience and board certification preferred, but not required. Comprehensive benefits package offered. For more information please contact Megan@tucsonsmilesaz.com.

ARIZONA—TUCSON. Associate to partnership opportunity for a Pediatric Dentist to join an established, growing, multi-location private practice. Join a strong team who delivers passionate, quality care in a fun office environment. Experience and board certification preferred, but not required. Comprehensive benefits package offered. For more information please contact Megan@tucsonsmilesaz.com.

CALIFORNIA—GARDEN GROVE. Healthy Smiles for Kids of Orange County is looking for a full time Dental Director to join our team! If you are someone that meets challenges with enthusiasm and enjoys building relationships while giving back to the community, Healthy Smiles has an opportunity for you!! At Healthy Smiles for Kids of Orange County our motto is “A Healthy Child Makes A Happy Child”. This position offers an exciting opportunity to an experienced, motivated and ambitious pediatric dentist who seeks a meaningful leadership role in an expanding not-for-profit dental health clinic. In addition to working in our clinic and providing leadership to staff, the Dental Director will have the distinction of working with the residents from the Advanced Pediatric Dentistry Residency Program at the Herman Ostrow School of Dentistry of USC and providing treatment for hospitalized patients at CHOC Children’s. CORE DUTIES: • Provide exemplary direct dental care to pediatric patients. • Participate in establishing standards of care for pediatric dental care. • Review and revise policies and procedures in the dental clinic to meet AAPD Guidelines. • Provide education to patients, clinic staff, pediatric medical residents and dentists as appropriate. • Provide leadership, staffing, coordination and evaluation of dental clinic activities with the assistance of the clinic supervisors. • Ensure the ethical and high quality provision of oral health care. • Monitor dental budget and implement systems to manage costs. • Assist Healthy Smiles leadership to prepare for site visits and surveys by licensing/accrediting agencies. • Understand patient needs and assure delivery of outstanding, efficient, productive, and quality clinical care. • Establish and/or maintain effective working relationships with key service provider groups. • Collaborate with USC School of Dentistry and Residency Director in the management, evaluation and supervision of Pediatric Dental Residents. • Develop and supervise case management program to integrate all phases of total patient care. • Participate in performing oral conscious sedation and supervise sedations with residents. • Develop and implement strategies to identify and to optimize operational efficiency and effectiveness. • Work with Clinic Supervisor to ensure continual review and maintenance of practice management software to facilitate scheduling, monitoring of productivity, billing and claims processing and the transition to digital patient files. • Contribute to and participate in practice-based advocacy. • Assure compliance with all federal, state, county regulations, statutes and ordinances. • Develop and maintain structured program for professional growth and development of all clinical staff. • Assure that clinical volunteers and health professions students participate in an optional orientation program prior to performing their services. • Interaction with academic and community partners to collaborate on service and/or research programs consistent with the agency’s strategic planning activities and direction. • Review and investigate all unexpected clinical outcomes. • Oversee completion of clinic expansion – the addition of 3 chairs – to include the implementation of an interceptive orthodontic program EDUCATION/EXPERIENCE REQUIREMENTS: • Graduate of an accredited Dental School (D.D.S. or D.M.D.). • California licensed practitioner in good standing. • Registered Dental-CaD Provider. • Pediatric Dentist, Board Certified. • 4+ years previous experience managing dental office with a minimum of 7 chairs. • A valid California Oral Conscious Sedation certificate ( B&K Code, Section 1647.1). • Strong leadership abilities and a track record in effective personnel management. • 7-10 years of pediatric dental experience. • Knowledge of the latest dental trends and technology. • Experience working in a community or public health clinic is preferred. • Orthodontic background helpful. For more information please contact RBerger@healthysmilesoc.org.

CALIFORNIA—ROCKLIN. Excellent opportunity to join our team in a growing and well respected pediatric dental practice. Fee for service business model with over 30 years of goodwill in the Sacramento/Rocklin area. My partner is retiring and I’m looking for an associate that is dedicated to the field, is board eligible or a current diplomate, and is ready to join a great dental family that is committed to providing quality pediatric dental care. Competitive compensation package and ownership potential. Call or email @ 916-660-2904 and jcrutchticheldn@gmail.com.

CALIFORNIA. Board Eligible or Board Certified Pediatric Dentist Needed full time for a new hi-tech pedo office in the center of Sacramento, extensive marketing in place and strong support groups, surge center will be arranged for GA cases. Should be comfortable with big GA cases. Experience, sedation certified. For more information please contact smearlesyan@yahoo.com.

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’. For more information please contact akhdendentist@yahoo.com

COLORADO—GLENWOOD SPRINGS. Pediatric Dentist wanted as a full time associate Glenwood Springs, Colorado (Western Slope, Colorado). All Kids Dental Pediatrics & Orthodontics is a two location, multi-specialty practice partnership with 3 doctors, which includes two full time pediatric dentists and one full time orthodontist. We have a large 12 chair main office with a small, but busy 4 chair satellite office 25 miles away. Located in the mountains of Colorado, Glenwood Springs is often called an outdoor paradise that is just down-valley from Aspen and 60 miles from Vail. You can live in one of the most beautiful and unique areas of the country and be part of a successful established practice with well over 20 dedicated staff and a very strong referral network. Both offices are state of the art, fully digital & chartless. All doctors are board certified and we practice all areas of pediatric dentistry and orthodontics for kids, teens and adults. Associate is needed to replace full time doctor out for medical reasons. This kind of opportunity does not come along often. For more information about the practice find us on the web at www.akdsmiles.com and call Jared Burt, Controller & Business Manager at 970-928-3500 or send your info to a special email at gskwilliams@gmail.com. Benefits & Perks: • Immediately start working with a full, very productive 4 day schedule. • Family oriented office with a strong & established patient base. • Full benefits (health, dental, vision, LTD, life insurance, 401k) offered through PEO & the partnership. • Guaranteed salary + bonus based on producive. • Possible future partnership opportunity. • Malpractice & Disability Coverage Assistance. • Other perks including dues & CE Assistance Applicant must have DDS/DMD from a fully accredited dental program with certificate in Pediatric Dentistry, Colorado license or ability to obtain license. Must be trained and comfortable with all areas of operative children’s dentistry including oral sedation and hospital dentistry. Applicant must be compassionate and will treat each and every child as if they were your own. Bi-lingual Spanish speaker would be a bonus but not required.
CONNECTICUT—MILFORD. Big Smiles: Pediatric Dentistry of Milford. We are offering an exciting full time position in our new practice. This a wonderful waterfront community and offers commuter train service to New York City. Candidates should have excellent communication skills, clinical proficiency, and an ability to be a team player. Compensation is very competitive and relocation allowance is available. Continuing education stipend, health insurance and malpractice insurance will be available in benefits. This practice is adjacent to a very large pediatric medical practice and has state of the art equipment and technology. Connecticut license or candidate for license. Graduate of accredited pediatric dental residency. Work experience is a plus but not required. For more information please contact. jdworkin.scdg@gmail.com

CONNECTICUT. Associate to Partner-track position in highly-regarded, pediatric-only, fee-for-service, specialty practice. Join us in maintaining and building upon our legacy of professional excellence and strong record of sustained growth and profitability. One to two years post-residency preferred. Superior interpersonal, special-needs and behavior management, OR, and operative skills required. Interested applicants please forward resume, together with references and a brief statement of professional goals. For more information please contact mullerdouglas@rocketmail.com

FLORIDA—BOCA RATON. Please Inquire about Generous Sign-On Bonus for this Position! UP TO $20K! Formally known as Sage Dental! Looking for an opportunity with a successful and growing company? Sage Dental is comprised of 36 “full service” General and Multi-Specialty practices located throughout South Florida! Sage Dental currently has opportunities for qualified General Dentists & Specialists given our continued expansion and excess demand for our services, we are presently seeking a Pediatric Dentist to join our family in our growing South Florida offices. Sage Dental offers you: Excellent earning potential – Sage Dental operates more efficiently and we share the results with our doctors through a higher compensation model. Ability to Focus on Patient Care – By delegating all the management and administrative stresses to us, our doctors can focus on providing the best patient care possible. State-of-the-Art Facilities – Our dentists enjoy working in state-of-the-art facilities with the latest dental technology and equipment. Quality of Life – Since you don’t have to worry about insurance claims, payroll, staffing, accounting and marketing, you have the time to enjoy everything Florida life has to offer, including our many golf courses and beautiful beaches. If you are ready to take the next step in your career as a Specialist and want a position with excellent earning potential, Sage Dental has what you are looking for. Apply today! https://www.appone.com/MainInfoReq.asp?R_ID=1013515. Contact: Bradford Cabibi – Doctor Recruitment. Email: bcabibi@gentledentalgroup.com; careers@gentledentalgroup.com. website: http://www.mysagedental.com/; https://www.appone.com/MainInfoReq.asp?R_ID=989372; http://www.mysagedental.com/careers-opportunities/Phone: (561) 999-9650 Ext. 6146 Cell: (561) 866-8187. Fax: (561) 526-2576 Florida Dental License.

IDAHO—TWIN FALLS/BURLEY. 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 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 smiles4kidsfl@gmail.com. Need to be board eligible for American Board of Pediatric Dentistry oral exam w/ plans to take oral boards.

ILLINOIS—CHICAGO. Webster Dental Care is seeking a full time pediatric dentist to join our group of general and specialty dentists in the Chicago area. You would be working in 3 of our modern, well run offices. We have been named a Top Workplace by the Chicago Tribune five years in a row. Pay is based on a percentage of collection with a guarantee minimum of $800 per day on an annualized basis. Our needs are for late February, 2016. Please contact Dr. Steve Rempas by email: webdental@aol.com

ILLINOIS—GLEN ELLYN. Energetic, fun, busy pediatric dental practice in the western suburbs of Chicago needs new owner-pediatric dentist. Office: 2nd floor of dental-legal bldg.; general dentist 1st fl, ofcs 3rd fl. 2300 sq ft. 6 open bay & 2 private ops. 3600 active patients. 40+ new pts/mo. Recent conversion to Eaglesoft/ EHR. No Medicaid, DMO, HMO. Yes, PPO. Over a million gross for last 5 years. Staff: ofc mgr/OR coordinator, 2 receptionists, 5 dental assistants through a higher compensation model. Ability to Focus on Patient Care – By delegating all the management and administrative stresses to us, our doctors can focus on providing the best patient care possible. State-of-the-Art Facilities – Our dentists enjoy working in state-of-the-art facilities with the latest dental technology and equipment. Quality of Life – Since you don’t have to worry about insurance claims, payroll, staffing, accounting and marketing, you have the time to enjoy everything Florida life has to offer, including our many golf courses and beautiful beaches. If you are ready to take the next step in your career as a Specialist and want a position with excellent earning potential, Sage Dental has what you are looking for. Apply today! https://www.appone.com/MainInfoReq.asp?R_ID=1013515. Contact: Bradford Cabibi – Doctor Recruitment. Email: bcabibi@gentledentalgroup.com; careers@gentledentalgroup.com. website: http://www.mysagedental.com/; https://www.appone.com/MainInfoReq.asp?R_ID=989372; http://www.mysagedental.com/careers-opportunities/Phone: (561) 999-9650 Ext. 6146 Cell: (561) 866-8187. Fax: (561) 526-2576 Florida Dental License.

**ANNOUNCING PEDIATRIC DENTISTS...**

**PRACTICE OPPORTUNITIES — FACULTY OPENINGS**

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Since inception in 1994, our ADA/CODA accredited two-year Pediatric Dental Residency Training Program has been committed to providing oral health services to the most vulnerable children in the United States and around the globe. Our pioneering model of dentistry without walls has established training sites through partnerships with Community Health Centers (CHCs), School-Based and Community Outreach Programs.

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**FACULTY POSITION REQUIRES:**

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ASSOCIATE DIRECTOR, PEDIATRIC DENTISTRY

David.Okuji@LutheranDental.com

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**NEAL A. DEMBY, DMD, MPH**

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Phone: 718-630-7177

**MARGARET K. MASON, DMD**

VICE PRESIDENT, SENIOR ADMINISTRATOR

Margaret.Mason@nyumc.org

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and College of DuPage dental hygiene programs. Owner transitioning to a career in academia in another state & must sell by June 2016. Owner willing to stay & facilitate transition until June. Must have graduated from a US accredited pediatric dental residency & dental school. Board eligible. For more information please contact kirkland@yahoo.com.

ILLINOIS—NAPERVILLE. Fantastic Future, NOW! Careers for Pediatric Dentists in a multi-specialty dental practice in a Chicagoland western suburb. Our large Multi-specialty Practice has an opportunity for several Pediatric Dentists who 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 equally as important and must have a full understanding of the treatment being provided to their child. Why Choose A Multi-Specialty Practice?
- 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 has a large and diverse pediatric patient population.
- Study Club & Residency.
- 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.
- Full and Part-time opportunities available. Send Your C.V./Resume to ncalm@gmail.com or phone Call Please Dental License to practice in the State of Illinois. Controlled.

ILLINOIS—NW SUBURBS CHICAGO. Looking for a new or experienced pediatric dentist to join our successful multipractice/specialty office. Excellent compensation (300k+) in this high tech, modern office that sees no HMO or state insurance. Inquire/send resume and photo for more details. Must be a pediatric dentist who is licensed to practice in the state of Illinois and has successfully completed or will be completing a 2 or 3 year residency program. For more information please contact nwwlittleteethrus@gmail.com.

ILLINOIS. We are looking for an empathetic residency program. For more information please contact kirkland@yahoo.com.

KENTUCKY. Are you looking for a great work/life balance? Interested in having enough time off to travel the world and enjoy your life? Pediatric dentistry offer a great opportunity to work with patients and children. We are seeking a talented, kind, enthusiastic pediatric dentist for an associate position with future buy-in for the right candidate. Practice includes children and also adults with special healthcare needs, sedation protocols, hospital-based dentistry and innovative practice promotion. Work in an office with modern equipment, excellent materials and an extremely capable and well-trained support staff. Balance your work life by living in a community with a low cost of living, fun outdoor activities and only an hour’s drive from a major airport. Work with a pediatric dentist who is skilled in mentorship and will help you grow and develop into the pediatric dentist you want to be. Excellent compensation package for a Board-certified or Board-eligible pediatric dentist. Interested candidates please email your C.V. and cover letter to kenzie.d.jessup@gmail.com At the core of our dental practice is a friendly team of pediatric dental professionals that are dedicated to our patient’s utmost comfort and oral health. We view each patient as a unique individual, and tailor each treatment to their specific needs.

MARYLAND—HAGERSTOWN. Are you looking for a motivated, caring, and friendly Pediatric Dentist to join our practice? We are well established Pediatric Office located with office sedation in Frederick and Hagerstown. We offer in-office oral sedation (class 1 permit) and General Anesthesia in FHM hospital. We offer competitive salary for the right part-time dentist to join our ever growing practice. Please e-mail your resume to mccamacho@fpdentistry.com.

MASSACHUSETTS—PITTSFIELD. We offer an excellent opportunity for a pediatric dentist to join a successful, growing, well-respected pediatric dental practice. We have a family-oriented community located in the Berkshires of Western Massachusetts where arts and culture abound as well as a multitude of outdoor activities. We seek a full-time associate with rapid partnership potential. Must be skilled, ethical, gentle and caring as well as board eligible/board certified. We embrace these. We are looking for someone to help you grow and develop into the pediatric dentist you want to be. 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.

NEVADAS. Great Expressions Dental Centers has a part-time opening for a Pediatric Dentist to join our Sterling Heights, MI practice. For more than 33 years, Great Expressions Dental Centers has been exceeding patients’ expectations offering general dentistry, endodontic, periodontic, oral and maxillofacial surgery, orthodontic, and pediatric dentistry services in a comfortable, friendly environment. We are looking for a motivated and qualified pediatric specialist to join and lead our 60 plus practice spread across the Greater Metro Detroit, MI area/Compensation:
- Six Figure Annual Base vs. Percent of Production!

NEVADAS. Well established multi-doctor pediatric dental practice in Las Vegas, NV looking for an energetic associate with a heart for kids. Our practice philosophy is “We strive to treat each child as if they were our own, and want to be the best care they receive.” 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 Conscious Sedation permit. Board eligible/Board certified. For more information please contact lantunapdca@yahoo.com.

NEW HAMPSHIRE—CONCORD. Position Description: Pediatric Dentist-Part-time, Southern NH. Two days a week in the office and two days a month in the OR. Large busy pediatric/general dental practice established 36 years ago seeks motivated pediatric dentist. All phases of pediatric dentistry performed including hospital rehabilitations. Requirements: Residency Training, Resume/C.V., Specialty/Area:Pediatric Dentistry.

NEW JERSEY. Amazing things happen when you love your work! We would like to offer you a unique opportunity to do the work you love without having to worry about the non-clinical aspects of running a practice. Our offices ensure great patient flow and professional management that eliminates the administrative headache for our Dentists. We take pride in knowing that our experienced team of professionals offer the highest standard of care by enriching the lives of our patients and the community. In addition to offering top compensation, we make the following benefits available to all our full time dentists: *Health Insurance *Dental Services *401K *Life Insurance *Short Term Disability, Long Term Disability and Vision. *Malpractice Insurance. *Relocation Assistance. *Continuing Education and Training. *National, State and Local Professional Dues We invite you to join our team of professionals in New Jersey. Please e-mail your C.V. to christa.barnett@blackfordidental.com, call 717-5-13231 or visit www.blackfordidental.com. Blackford Dental Management provides equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, religion, sex, national origin, age, disability or genetics. In addition to federal law requirements, Blackford Dental Management complies with applicable state and local laws governing nondiscrimination in employment in every location in which the company has facilities. This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, recall, transfer, leaves of absence, compensation and training.

NEW YORK—COMMACK, LONG ISLAND. Growing Pediatric Dental office seeking for a Part-time associate to provide only the best care for our patients. We are looking for a highly motivated, energetic and caring individual that will join our team of doctors. Please email your resume to r.jpeach@ yahoo.com.

NEW YORK—HOPEWELL JUNCTION. Part-time and Full-time Pediatric Dentist wanted for growing, state of the art, progressive Pediatric Dental office in the Hudson Valley of New York. We presently occupy two locations in Westchester and Dutchess Counties of New York. We are seeking qualified Pediatric Dentist with exceptional communication and clinical skills. Paperless office, soft tissue lasers, orthodontics and invasive general anesthesia offered to patients. Please email resume to: resume@valleypediatricdentistry.com. Completed Pediatric Dentistry residency program. Board eligible Pediatric Dentist. NYS License.

NEW YORK—MALONE. Pediatric Dentist Needed for Specialty Private practice. Sign-on bonus. Practice is located in Upstate New York. Recently remodeled, busy digital practice. Flexible hours (P/T or F/T). Excellent compensation. In office IV Sedation available. Email your resume to: SheilaConwayRDH@gmail.com

NEW YORK—MONTICELLO. Great Expressions Dental Centers has a full time opening for a Pediatric Dentist to join our Upstate, NY practices located in Goshen, Monroe, and Middletown, NY. For more than 35 years, Great Expressions Dental Centers has been exceeding patients’ expectations offering general dentistry, endodontic, periodontic, oral and maxillofacial surgery, orthodontic, and pediatric dentistry services in a comfortable, friendly environment. Compensation: Base vs. Percent of Production/Attractive Sign-on or Relocation possible as well. Benefits / Perks: Leaders in the practice: Clinical Freedom and Treatment Autonomy. Patient Focus: Established and Growing Patient Foundation.

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 a busy and rapidly growing practice providing 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 practice 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. It is also adjacent to I-85, which is one of the most prominent, high-tech research communities in the United State consisting of over 190 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 amyadavidian@yahoo.com and visit our website at “www.southpointpedo.com”. Applicants must have completed an accredited pediatric dental residency and eligible for board certification. A NC dental license is also required.

NORTH CAROLINA—CHARLOTTE AREA. Outstanding opportunity in Charlotte area for pediatric dentist or dual certified pediatric and orthodontic specialist willing and capable of providing pediatric services and participating in orthodontic care for our patients. An inherent sense of play and the ability to lead and inspire without judgement are critical. Someone who loves to learn and explore possibilities would be a great fit at Bluefish. About Bluefish: We are an education-based interdisciplinary practice with locations in Central Oregon, expanding our multi-disciplinary practice and recruiting for an individual interested in making a long-term commitment to our team and community. The ideal candidate is a pediatric dentist or dual-certified pediatric and orthodontic specialist willing and capable of providing pediatric services and participating in orthodontic care for our patients. We are currently under construction of a dental only ambulatory surgery center, to open in the summer of 2017. Placement needed for provider to live in the PINEHURST, NC area and work in regional offices twenty miles from Pinehurst/Southern Pines, NC. Live in the most beautiful area. Visit us on the web at http://www.southpointpedo.com.

NORTH CAROLINA—WINSTON-SALEM. Excellent opportunity for a motivated pediatric dentist to join our state-of-the-art dental practice. 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 Kimmel Park Drive suite 202, Winston-Salem, North Carolina 27103. Attn: Office Manager.

OHIO—BAY VILLAGE. Exceptional opportunity for a pediatric dentist to join our scenic Bay Village pediatric dental practice. Owner is seeking a caring, community-centered individual who loves children. We have an experienced, multi-skilled team with a strong referral base. Pediatric Dentistry Certificate, Board Certified or Board Eligible. For more information please contact baypedspsr@gmail.com.

OREGON—BEND. Bluefish Dental & Orthodontics, a children’s specialty dental clinic located in Central Oregon, is expanding our multi-disciplinary practice and recruiting for an individual interested in making a long-term commitment to our team and community. The ideal candidate is a pediatric dentist or dual-certified pediatric and orthodontic specialist willing and capable of providing pediatric services and participating in orthodontic care for our patients. An inherent sense of play and the ability to lead and inspire without judgement are critical. Someone who loves to learn and explore possibilities would be a great fit at Bluefish. About Bluefish: We are an education-based interdisciplinary practice with locations in Bend and Redmond, OR. We utilize innovative strategies to combat caries, such as the use of silver diamine fluoride and glass ionomer ITRs in addition to conventional treatment. We believe in empowering our staff to make a difference in the quality of understanding and care our patients receive. We have a diverse patient population both culturally and economically underserved. Our practice blends fee-for-service, Medicaid and pro-bono care proudly. We are intimately involved in preventive measures throughout the community and are known for our commitment to improving oral health care in kids throughout Central Oregon. Inquiries: Catherine Qiao, D.M.D. (Bluefish Dental & Orthodontics) (541) 317-1887 or info@bluefishidental.com.
Pennsylvania—Collegville. 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. I am seeking a compassionate, energetic, highly-motivated pediatric dentist to join our fun and dedicated team. We are a family-owned practice that strives to provide the highest quality of pediatric dentistry in a friendly, modern, and nurturing environment. I believe in providing care to all children as if they were my own. The ideal candidate has effective communication skills, strong leadership skills, integrity and the ability to multi-task. The practice is high-paced and presents an amazing opportunity for the right individual to cover two locations. The ideal candidate for this position offers both clinical autonomy and a good work-life balance while earning a compensation higher than most specialists in the field. All interested candidates should feel free to reach out to me personally. I would welcome the opportunity to show them our office and discuss how they too can be a part of my pediatric dental family.

Rhode Island—Cranston. Well established pediatric dental office serving the Rhode Island community for over 35 years is seeking a motivated and caring pediatric dentist. We have a strong presence in our small state, which compliments our positive reputation. Part-time position leading to full-time/partnership track. We have two modern offices equipped with the latest digital technology including all digital radiographs. Our offices are located near beaches, a major Ivy League institution, and the culture and diversity of Providence, RI. To find out more information about our office, please contact Craig Elice at cecile@comcast.net. (401) 463-5540 Board eligible Pediatric Dentist with good people skills.

South Carolina—Columbia. Excellent opportunity to join a well respected practice that is consistently booked out several months. Need an associate to replace retiring dentist so will be very busy immediately. Income potential is great. This office has all the latest technology—paperless, digital x-rays, etc. OR cases are done at nearby hospital and surgery center. Great relationships with all the specialists in the area. This is not a corporation so there will not be anybody looking over your shoulder. Full time position—Guaranteed base salary of $1000 per day or 35% on collections whichever is greater.—Paid Malpractice.—Health Insurance.—401K Retirement.—CE/Professional Membership Stipend ($1200).—Paid vacation.—Relocation fee ($2500). Columbia is a very welcoming city that has great weather that allows for outdoor activities year round. There is a large beautiful lake close by which is great for boating, fishing and water sports. Columbia has a low cost of living, affordable housing and great schools and colleges nearby. The beautiful beaches of South Carolina and the Blue Ridge Mountains are just a short drive away. 1 year experience in private practice. For more information please contact ellie3md@gmail.com.

South Carolina—Columbia & Florence. Endless income potential!! Growing private, pediatric dental offices have immediate openings for full time Pediatric Specialists. We currently have two practices; one in Columbia and another in Florence. Positions available for the both locations. Dedicated, competent staff. Enjoy the capital city, the beach or the mountains in our beautiful state. VERY Competitive Salary & 401(K) offered. Please send C.V. to ranee.moore@yahoo.com. To learn more about our practice, please visit our website at www.northeastchildrensdentistry.com.

South Carolina—Columbia. Excellent opportunity to join a well respected practice that is consistently booked out several months. Need an associate to replace retiring dentist so will be very busy immediately. Income potential is great. This office has all the latest technology—paperless, digital x-rays, etc. OR cases are done at nearby hospital and surgery center. Great relationships with all the specialists in the area. This is not a corporation so there will not be anybody looking over your shoulder. Full time position—Guaranteed base salary of $1000 per day or 35% on collections whichever is greater.—Paid Malpractice.—Health Insurance.—401K Retirement.—CE/Professional Membership Stipend ($1200).—Paid vacation.—Relocation fee ($2500). Columbia is a very welcoming city that has great weather that allows for outdoor activities year round. There is a large beautiful lake close by which is great for boating, fishing and water sports. Columbia has a low cost of living, affordable housing and great schools and colleges nearby. The beautiful beaches of South Carolina and the Blue Ridge Mountains are just a short drive away. 1 year experience in private practice. For more information please contact ellie3md@gmail.com.

South Carolina—Greenwood. Excellent opportunity to be the main dentist in this brand new office. This office has all the latest technology—paperless, digital x-rays, etc. OR cases can be done at nearby hospital. This is not a corporation so there will not be anybody looking over your shoulder. There is very little competition in the area so this is an excellent opportunity for a prosperous future. Full time position. —Guaranteed base salary of $1000 per day or 35% on collections whichever is greater.—Paid Malpractice.—Health Insurance Stipend—CE/Professional Membership Stipend ($1200).—Paid vacation.—Relocation fee ($2500). Greenwood is a growing city that has great weather that allows for outdoor activities year round. The city has a large beautiful lake which is great for boating, fishing and water sports. Greenwood is a very welcoming community that has a low cost of living, affordable housing and great schools and colleges nearby. The beautiful beaches of South Carolina and the Blue Ridge Mountains are just a short drive away. 1 year experience in private practice. For more information please contact midlandsdentalgroup1@gmail.com.

South Carolina—Seneca. Seeking full-time pediatric dentist for a busy state-of-the-art practice with two locations in Seneca and Clemson, South Carolina. Conveniendy located near Clemson University at the foothills of the Blue Ridge Mountains. Offering opportunities with sedation dentistry, including in-office IV sedation with a pediatric anesthesiologist and hospital privileges. Competitive benefits package and compensation provided. For more information please contact caillehornton@gmail.com.

Tennessee—Lenoir City. Smoky Mountain Pediatric Dentistry in Lenoir City, TN is seeking a pedodontist to support the practice in continued growth. The practice opened in 2014 and has continued to expand the patient base to meet the needs of the surrounding community. The Practice provides in office procedures as well as a heavy surgery schedule at two local hospitals. The practice is seeking a professional to become an associate with the possibility of future ownership opportunities. Compensation is negotiable and the position does provide for health and retirement benefits. The Practice will also provide annual continuing education reimbursement for both registration and travel, as well as funds for other professional expenses. Lenoir City is a suburb of Knoxville, TN and is located in the foothills of the Smoky Mountains. The city provides a high quality of residential living as well as access to amenities in the Knoxville area. East Tennessee is a thriving area of the southeastern United States and is expected to continue expanding into the foresee future. The opportunity to thrive professionally in this community while maintaining an excellent standard of living is very high. Please email all inquiries to our practice manager at chase@smydn.com.

Texas—Austin. Parkside Pediatric Dentistry is a family-owned dental practice and part of a group of eight other dental offices in the Austin metropolitan area with a strong upward path to expansion and growth. Parkside is looking for a Pediatric Dentist to join our team 2-4 days a week. This practice is solely dedicated to pedodontics. It is located in a well-established, upscale suburb in south Austin (Escarpment Village in Circle C), home to professionals. The ideal candidate for this position is responsible for examining, diagnosing and treating oral conditions of infants, children and adolescent patients. Must be a graduate of an accredited Pediatric Dentistry program. Experience preferred. Must be a graduate of an accredited Pediatric Dentistry program. Experience preferred. Please email all inquiries to our practice manager at chase@smydn.com.

Texas—AUSTIN. Parkside Pediatric Dentistry is a family-owned dental practice and part of a group of eight other dental offices in the Austin metropolitan area with a strong upward path to expansion and growth. Parkside is looking for a Pediatric Dentist to join our team 2-4 days a week. This practice is solely dedicated to pedodontics. It is located in a well-established, upscale suburb in south Austin (Escarpment Village in Circle C), home to professionals. The ideal candidate for this position is responsible for examining, diagnosing and treating oral conditions of infants, children and adolescent patients. Must be a graduate of an accredited Pediatric Dentistry program. Experience preferred. Please email all inquiries to our practice manager at chase@smydn.com.
TEXAS—CENTRAL (AUSTIN AREA). We seek an enthusiastic and caring Pediatric Dentist to join our Pedo/Ortho practice. Our philosophy is to treat our patients as if they were family. The office has digital x-rays and great staff who puts the needs of the patients first. We provide treatment with nitrous oxide, oral sedation, IV sedation and hospital dentistry. We currently have 3 offices in the Austin area and have 2 full-time Board Certified Pediatric Dentists and one Board Certified Orthodontist. Our offices are growing and we are looking to share this growth with right colleague. Full-time and part-time position available. We offer competitive guaranteed salary plus percentage of production. Please submit inquiries to zoso205@hotmail.com.

TEXAS—DALLAS. Great Expressions Dental Centers has a full time opening for a Pediatric Dentist to join our team in Dallas, TX! For more than 35 years, Great Expressions Dental Centers has been exceeding patients’ expectations offering general dentistry, endodontic, periodontic, oral and maxillofacial surgery, orthodontic, and pediatric dentistry services in a comfortable, friendly environment. We are looking for a motivated and qualified pediatric specialist to join and lead our 60 plus practices spread across the Greater Metro Detroit, MI area! Compensation: -Six Figure Annual Salary vs. Percent of Production -Attractive Sign-on or Relocation assistance as well. Benefits / Perks: -Leaders in the practice: Clinical Freedom and Treatment Autonomy -Patient Focus: Established and Growing Patient Foundation -Multi-Specialty office -Doctor Career Path – Partnership / Investment Opportunities -Full Benefits Offered – Healthcare & Dental Benefits, 401K, Short Term / Long Term Disability, Time Off -Malpractice Coverage Assistance -Continued Education Reimbursement, Paid ADA & State Society Dues -Mentorship – Study Clubs, Chairside Mentoring, GEDC University Courses -Please view our Doctor Career Path video: http://www.screencast.com/VE8xWM5C5YN. Please apply via this ad for consideration! Stacey Bruwer, M.A. | Clinical Recruiter | Great Expressions Dental Centers. 29777 Telegraph Road, Suite 3000 | Southfield, MI 48034. phone: 248-237-6853 | Ext. 72468 | fax 248-686-0118 | www.greatexpresses.com. Must have a D.D.S./D.M.D. from an accredited University and active State Dental Board license Pediatric Dental License and certifications.

TEXAS—HARKER HEIGHTS. Our beautiful facility opened in 2012, and we have recently expanded to meet the needs of our growing practice! We are a successful, high volume, privately owned pediatric dental practice located in the Killeen Metroplex area and are seeking a full time (4-5 days weekly) associate pediatric dentist to join our team. As our practice is a true Central Texas location, Austin is merely a short drive, as is the beautiful Texas Hill Country. We offer a flexible schedule, and a competitive percentage of collections. Our practice has an outstanding team of dental assistants, two phenomenal dental hygienists and a knowledgeable, friendly front desk team. We are seeking a D.D.S./D.M.D. pre- or post-graduate who will complete their residency in pediatric dentistry to join our team. We are looking for someone who will deliver high quality comprehensive dental care with genuine concern for our patients. Interested applicants should send resumes to cholland@abtikids.com, D.D.S./D.M.D., current license in the state of Texas, (or applied for) Pediatric Dental Residency completed.

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

TEXAS—SOUTH HOUSTON. NEW GRADS WELCOME!!! This highly successful, Pediatric Dental practice has a great opportunity for an associate to join our practice. High paced office with excellent income potential. New office (opened in 2013) • Digital X-Rays • Paperless Charts. • No papoose board. • Nitrous plumbed in all operatories. • Practice NO ANESTHESIA dentistry. • Oral Sedation ready. • In House GA. • Office Hours are T-F 11-7, and Saturdays 10-2 – also open during Mondays.where kids are out of school (e.g. MLK, President’s Day, Monday of Easter,Break, etc...) obviously not including Labor Day, Memorial Day, Christmas, New.Years, 4th of July. For more information Call or email Eric Astani Phone: (310) 466-1464. Email: ericchedentist@gmail.com Requirements: D.M.D. or D.D.S. licensed to practice in Texas, CAGS Pediatric Dentistry.

TEXAS—SAN ANTONIO. Our established pediatric and orthodontic practice is currently looking for a third pediatric dentist to join our team. Our patient base consist primarily of Texas Medicaid patients. However, we consider it a privilege to treat under served 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 dcderre@sscdc.org. Please visit our web site at www.sscdc.org for additional information.

UTAH—LEHI. High-tech pediatric dental practice seeks full-time associate, with potential for partnership for the right person. All digital practice offers full range of services including all sedation options. We use the newest in Laser dentistry-no experience needed. Seeking a motivated and personable pediatric dentist who loves children! Spanish speaking a plus, but not required. Please email your resume to richter.dibs@gmail.com or call (801) 472-1707.

UTAH. Busy multi-office pediatric practice is seeking full-time pediatric dentist. Our offices are all located in the Salt Lake County. The position is available as soon as May 1st but needs to filled by the start of July. We are looking for a specialist that is willing to provide quality work in a fun, modern pediatric dental practice. The position may have opportunity for partnership for the right individual. Interested parties please contact us at dentistryforchildren@excite.com or call (801) 674-7702 Pediatric dental specialists only.

UTAH. I have a full-time pediatric dentist position available beginning end of June first of July. Could begin a bit sooner as part time. I have two offices one in Utah County and one in Salt Lake County. Candidate will work at both clinics and will be involved in our growth strategies. If you have been wanting to return to Utah this is an excellent opportunity to do so. Guaranteed income, daily minimum or 35% of collections which ever is greater working 4 days a week. 5 days a week is available if so desired. Would Consider a part time. We would like to help take care of in two growing practices. Digital radiology. Paperless charting. Ceiling mounted TV’s. In office intubated GA, Surgical Center and Hospital Access. Dedicated well trained team ready to help you do your best pediatric dental work. Ownership opportunities for the right candidate. Call me (801) 716-868-5823 or email me at deviper2009@gmail.com. www.pediatricsmilesoforem.com and www. pediatricsmilesofsandy.com. If you love the outdoors Utah is the place...Lots of sunshine, fishing, hiking, boating, skiing, mountain biking, camping, rock climbing, sand dunes (my personal favorite!) It has it all except a good beach, there are some though...California is a short flight away!!! You are close to several national parks including Zion, Arches, Canyon Lands...Las Vegas is just a few hours south...Great family environment with strong family values, big families lots of kids. It really has it all.Utah has one of the strongest economies in the nation and is growing rapidly. Thanks. Adam Shephard Owner-Board Cert Pediatric Dentist. Utah License. Pediatric Specialty Certificate. Desire for Board Certification.

WASHINGTON—SEATTLE. Seattle Metropolitan Area large Pediatric group is looking for a Board Certified/Board Eligible Pediatric Dentist to join our Tacoma location. We are looking for an experienced provider with a partnership track position who is able to work independently and be responsible for all clinical aspects of the practice. Competitive salary plus benefits. Our group has an unlimited access to the Surgical Center where we perform 120+ GA cases per month. We are looking for a good bed side mannered candidate who is proficient in all treatment modalities including conscious sedation, GA, and non pharmacological behavior management. Please email us to inquire more about the position and schedule an interview. WA state license is required. Board Certified/ Board Eligible Pediatric Dentist. WA state license. 2+ years of experience.

WASHINGTON—VANCOUVER. We have an opening for a full time position (part-time can be considered as well) at our office. Must Love Kids Pediatric Dentistry in Vancouver, WA, USA. Our beautiful facility opened in 2013, and we have recently expanded to meet the needs of our growing practice! We are a successful, high volume, privately owned pediatric dental practice located close to the Portland, Oregon, airport. Our pediatric dentistry graduates welcome to apply! We are a two pediatric dentist team with a passion for excellent dentistry as well as providing an excellent dental experience for our patients. Our office has 8 separate operators,
with dedicated board certified anesthesiologists. Our office is modern, state-of-the-art facility, we use most current equipment, technologies and techniques. We are looking for a humble, energetic, team player, with great chair side manners and who would provide high quality comprehensive dental care with genuine concern and compassion for his/her patients and parents. Should be able to handle stressful situations. The office has very comfortable and modern amenities for children and parents. Take a virtual tour at www.mustlovekids.com. Graduate of an accredited Pediatric Dentistry program. WA State Dental License. Current or eligible for hospital privileges.

WISCONSIN—GREEN BAY. Successful, well-rooted practice. Sedation Permit. DEA credentials or willing to obtain. Pediatric Dentist with Washington license. With two surgical suites – seeing children 3-4 days have our own surgical center in our main location which provides a fun and rewarding component both regular insurance and Medicaid patients. We Hills Pediatric Dentistry and Orthodontics), serving busy pediatric locations (Columbia Basin & Orchard Hills Pediatric Dentistry and Orthodontics), serving in beautiful northeastern Wisconsin which offers digital, paperless and have a well-trained team. We patient base with 100+ new patients every month in a compassionate and motivated pediatric dentist. Our rapidly growing team player, with great chair side manners and who.

WASHINGTON—KENNEWICK/RICHLAND. Excellent opportunity to join our wonderful practice in sunny South-Eastern Washington. The Tri-Cities (Kennewick, Richland, Pasco) boast over 300 days of sunshine with easy access to boating, fishing, hunting, camping, golf and other outdoor recreational activities. Our community is an excellent place for raising a family with great schools, expansive parks, safe neighborhoods and wonderful people! We have two busy pediatric locations (Columbia Basin & Orchard Hills Pediatric Dentistry and Orthodontics), serving both regular insurance and Medicaid patients. We have orthodontists working side-by-side with us – which provides fun and rewarding component to our practice. We are also extremely fortunate to have our own surgical center in our main location with two surgical suites – seeing children 3-4 days per week under GA. Our exceptional compensation package includes health insurance, 401K, and other investment opportunities. Please email: walkertrusty@yahoo.com and check Virtual Tour at: www.grinsforkids.com. Pediatric Dentist with Washington license. We would prefer someone with some sedation/GA experience – and willing to get their Washington Sedation Permit. DEA credentials or willing to obtain them, We would prefer a pediatric dentist who enjoys working with others and wants to grow with our well-rooted practice.

WISCONSIN—GREEN BAY. Successful, well respected and growing pediatric dental office serving our community for over 40 years. Graduate of 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 events, 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 julieanderson@kidselectalifeexpert.com. Completion of Pediatric Dentistry Residency Program.

WYOMING—CASPER. Enjoy the outdoors with scenic views! This is the place for you. Casper offers numerous outdoor activities with excellent fishing. Great opportunity for personable, energetic, full-time associate pediatric dentist. Our rapidly growing practice has a new fully digital satellite office with 2 operators plumbed with N20 and 5 hygiene chairs. General anesthesia performed at local surgery center and in office oral conscious sedation. Office space shared with orthodontist. Compensation based on experience with bonus based on production. Benefit package includes: generous retirement package (401k, profit sharing, cash balance plan) health insurance, reimbursement for continuing education. Student loan repayment available. Ownership opportunity available for right candidate. Send resume to: mikespedmdinfo@gmail.com or call/text (208) 851-1679. Visit our website: themileacademy.com.

NATIONWIDE. Great Opportunity for a pediatric dentist in a well-respected practice with a great team. Our philosophy is simple: fabulous customer service with excellent care. Looking for a great talent with long term potential. Flexibility in compensation and schedule. Seeking a compassionate personality with the ability to grow as a leader. The successful candidate will be supported and encouraged -- the long term goal is to forge an excellent relationship fostering growth personally, professionally and financially. D.D.S., Board Eligible or Board Certified Pediatric Dentist. For more information please contact topediatricdentist70@gmail.com.

CANADA

CANADA—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 Dental Clinical Sciences, Faculty of Dentistry, Dalhousie University. The IWK Health Centre is a teaching hospital affiliated with Dalhousie University Faculties 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 general dental care and be 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) 470-8255, ross.anderson@iwk.nshealth.ca. The IWK Health Centre and Dalhousie University are equal opportunity employers and educators. D.D.S./D.M.D.. FRCDC in Pediatric Dentistry to be able to obtain licensure in the province of Nova Scotia. Historical Peninsula of Charleston, SC, the Medical University of South Carolina (MUSC) Dental School prepares graduates in general 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 events, 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 julieanderson@kidselectalifeexpert.com. Completion of Pediatric Dentistry Residency Program.

ONTARIO—TORONTO. We are seeking a Pediatric Dental associate for a well-established G.T.A. practice. We provide a full scope of services, including oral sedation, general anesthesia, and emergent care for a large patient demographic. We provide a warm, and family oriented work environment, taking a team approach to eliminating anxiety for our patients and their families. Associates will enjoy excellent compensation, and opportunity for income growth. If you are committed to the comfort and quality care of each child that we care, please email topediatricdentist@gmail.com.

Faculty Positions Available

OREGON—PORTLAND. The School of Dentistry at Oregon Health and Science University (OHSU), located in Portland, Oregon, invites applications for a full-time faculty position in the Department of Pediatric Dentistry. 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. Requirements of the position include a dental degree (D.D.S./D.M.D.), completion of an ADA accredited program in advanced specialty education in Pediatric Dentistry, and eligibility or certification by the American Board of Pediatric Dentistry. Eligibility for dental and sedation licensure in Oregon is required. An MPH, PhD, or dual specialty is preferred. The ideal candidate should be a leader, mentor and clinician scientist with experience in teaching, scholarly activities and hospital dentistry. The campus is especially interested in candidates who can contribute to the diversity and excellence of the academic community through their research, teaching and/or service. OHSU is an equal opportunity, affirmative action institution. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, age, national origin, marital status, sexual orientation, or protected veteran status. All correspondence and expressions of interest in this position will be held in strict confidence. OHSU offers a generous relocation and compensation package, comprehensive benefits and a commitment to ongoing learning and professional growth. For more information please contact Samantha Kennen, Human Resources Manager, at kennejs@ohsu.edu. Apply online by following this link.

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 historic 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.D.S. or 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 the 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. The Medical University of South Carolina is an Equal Opportunity/Affirmative Action employer. Please submit a letter of interest including statement of career goals and curriculum vitae to: Dr. Cynthia L. Hipp, Interim-chair, Department of Pediatric Dentistry and Orthodontics, Medical University of South Carolina, 30 Bee Street, Room 120, MSC 507, Charleston, South Carolina 29425, Phone: (843) 792-3916, Fax: (843) 792-3917.

OFFICE SPACE

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 operatory. 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.

PRACTICE FOR SALE

ILLINOIS—WESTERN SUBURBS OF CHICAGO. PRACTICE for Sale: Western Suburbs of Chicago, St. Charles. Owner looking to retire but will stay on for mutually agreed Transition period. Growing practice, 2500 sq ft, five operatories; option to purchase space if desired. Send letter of interest to: jgejenterprises@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. Practice for sale or Associate-to-Owner: Northeast 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.VanderVeen@HenrySchein.com or call 616-485-9482 and reference: OTP MI-148.

NORTH CAROLINA—GREENSBORO. 30+ year full service pediatric dental practice for sale. Practice is full range, with restorative, preventive, orthodontics, and hospital treatment. Hospital is Level 2 Trauma Center with 2 day op facilities, and full services. Large referral area. Production average for last 3 years-$1,810,000—98% collection rate and 48% overhead. 950+ new patient exams per year. Well trained staff, 4-1/2 day work week currently. Very efficient 2500 square foot Pride-THE Design building with 6 operatory bay and 1 private treatment room. Recently redecorated. Building is in campus setting with another building site that could be developed or sold. ScanX digital x-rays. Greensboro is home to 2 branches of the UNC University system with numerous other colleges. School system is excellent. Easy transportation throughout city. Close to mountains and beaches. Excellent opportunity for experienced Pediatric Dentist wishing to relocate or 2 Pediatric Dentists wishing to partner or dual trained Pediatric Dentist. Contact Dr Bryan Cobb at (336) 288-9445 or email bccobbdeacs@aol.com for more details.
Vice Chair, Division of Pediatric Dentistry

The Ohio State University College of Dentistry

The Vice Chair for the Division of Pediatric Dentistry is an academic leader and the principal investigator of a multi-site, clinical and/or basic research program which will be supported by a substantial budget. This position is also expected to develop strong relationships with community and dental organizations.

Requirements:
- Strong academic credentials, including a Ph.D. or equivalent, in an area of dental research
- Experience in clinical and/or basic research in Pediatric Dentistry
- Demonstrated ability to develop and maintain strong relationships with community and dental organizations
- Ability to develop and maintain strong relationships with community and dental organizations
- Proven track record of successful grant writing and securing funding for research programs
- Excellent oral and written communication skills
- Demonstrated ability to lead and manage a large, multi-disciplinary research team
- Experience in educational administration, including teaching, mentoring, and advising students
- Ability to work effectively with diverse groups and organizations

Application Process:
- Submit a letter of interest, curriculum vitae, and three letters of recommendation to: Catherine Flantz, DDS, MS, Chair, Division of Pediatric Dentistry, at flantz.1@osu.edu
- For more information about the college, the division, and this position, visit www.dent.osu.edu
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