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# Events & Information

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PO Box 3710
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beavertondentist@yahoo.com

**Articles**

Are you interested in contributing to Membership Matters? For more information, please contact editor, Dr. Barry Taylor: beavertondentist@yahoo.com

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## Component CE Calendar

Compiled by Mehdi Salari, DMD

Send your component’s CE courses to bendsalari@yahoo.com.

### TUES, APR 24

**Clackamas County**

**CE HRS:** 1.5

**Pearls of Implant Restorations**

Dentsply Speaker

**LOCATION:** Oregon City (Prov. Willamette Falls Comm. Ctr.)

**INFO:** www.clackamasdental.com

### FRI, MAY 4

**Eastern Oregon**

**CE HRS:** 7

**Insurance Coding and Increasing Practice Profitability**

Dr. Blair

**LOCATION:** Pendleton (Wildhorse Gaming Casino)

**INFO:** Dr. Eli Mayes, 541.963.8585 or elimayes@hotmail.com

### TUES, MAY 8

**Marion & Polk**

**CE HRS:** 2

**Veterinary Dental Consulting**

Pat Frost Fitch, DVM, DipAVDC

**LOCATION:** Salem (Broadway Commons)

**INFO:** www.mpdentalcme.com mpdentalcme@qwestoffice.net

### WED, MAY 16

**Multnomah**

**CE HRS:** 1

**Table Clinic Presentations**

LOCATION: Portland (Multnomah Athletic Club)

**INFO:** www.multnomahdental.org lora@multnomahdental.org

### TUE, MAY 22

**Clackamas County**

**CE HRS:** 1.5

**Snoring and Sleep Apnea Solutions**

Alex Lin

**LOCATION:** Oregon City (Prov. Willamette Falls Comm. Ctr.)

**INFO:** www.clackamasdental.com

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## 2012–2013 DBIC Risk Management Courses

<table>
<thead>
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<th>DATE</th>
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<th>COMPONENT/LOCATION</th>
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<tr>
<td>April 12</td>
<td>9 AM</td>
<td>Oregon Dental Conference®</td>
<td><a href="http://www.oregondental.org">www.oregondental.org</a></td>
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<tr>
<td>Oct. 26</td>
<td>8 AM</td>
<td>Southern Willamette (Corvallis)</td>
<td>541.754.1238</td>
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<tr>
<td>Nov. 13</td>
<td>5 PM</td>
<td>Washington County (Beaverton)</td>
<td>503.848.5605 or</td>
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<td><a href="mailto:wcdscarolyn@frontier.com">wcdscarolyn@frontier.com</a></td>
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<tr>
<td>Dec. 7</td>
<td>9 AM</td>
<td>Marion &amp; Polk (Salem)</td>
<td>503.581.9353 or</td>
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<td></td>
<td></td>
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<td><a href="mailto:lora@multnomahdental.org">lora@multnomahdental.org</a></td>
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### 2013

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<td>Oregon Dental Conference®</td>
<td><a href="http://www.oregondental.org">www.oregondental.org</a></td>
</tr>
<tr>
<td>May 14</td>
<td>6 PM</td>
<td>Southwestern OR (Coos Bay)</td>
<td>541.267.5867</td>
</tr>
<tr>
<td>Dec. 6</td>
<td>9 AM</td>
<td>Multnomah County (Portland)</td>
<td>503.513.5010</td>
</tr>
<tr>
<td>Dec. 13</td>
<td>9 AM</td>
<td>Central Oregon (Bend)</td>
<td><a href="http://www.centraloregondentalsociety.org">www.centraloregondentalsociety.org</a></td>
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</table>
Dear Senator,

My colleague, Dr. Mark Rodman, directed me to your opinion piece, “In Dental Crisis, The Truth Hurts,” in The Oregonian on March 12, 2012. You indicate that you heard from 1,200 dental patients regarding how a lack of access to dental care has impacted their lives. As Dr. Rodman suggested, I think you need to also hear from providers. As an Independent, I am sure you are fair and want to hear all sides of this story.

I have practiced dentistry in many different settings during my career and have worked with restorative hygienists, in clinics that treat low income patients on the federal Medicaid plans administered by Oregon Health Authority through the Oregon Health Plan, and volunteered my time and services to provide free care to underprivileged patients.

The statistics you cite tell only part of the story and your statement, “Raising the Medicaid reimbursement rates could help, but dentists need to change their attitude toward the low-income community” prompted me to write to you as well. You are correct on one thing indeed—raising the Medicaid rate would help.

There is much evidence that as the rate of reimbursement approaches 70% of UCR fees, the participation of dentists to treat patients greatly increases. Raise the rate to 70% and you wouldn’t need Federally Qualified Health Centers to provide dental care.

In a small community, money could go directly to providers who already have the infrastructure and staff to provide care, and low-income patients would receive the same care as others. It would also make rural dental offices all the more enticing for providers to work in.

I visited your website (www.sanders.senate.gov) to see if you support legislation to raise Medicaid rates, but I couldn’t find any evidence to that effect. I noticed that you do support measures to “significantly expand the National Health Service Corps which provides scholarships and loan repayment to those health professionals who agree to work in medical and dental under-served areas”. That is great, and I hope you also support more funds for higher education, so dental school tuition is not so high as to be affordable by only a select minority.

I wonder why you state dentists need to change their attitudes toward low-income patients? On February 29, 2012 the Subcommittee of the Senate Health, Education, Labor and Pensions Committee heard testimony at a hearing (Dental Crisis in America: The Need to Expand Access). Interestingly, the American Dental Association was not allowed to testify at this hearing and, in fact, reported, “Subcommittee Chairman Bernie Sanders repeatedly prompted witnesses to criticize the ADA, which some of them did.”

Apparently the hearing was not about access to care for low-income patients but about mid-level providers and how some believe they will improve access to care. I would like to sit down with you to review the services they could provide that you reference on your website from the PEW report.

In November of 2011, over 300 dentists from Oregon provided free care over two days at our second Mission of Mercy. Additionally, over the course of a year, dentists throughout the state volunteer countless hours providing free care on dental vans. The Oregon Dental Association’s charitable arm, the Dental Foundation of Oregon, gave over $40,000 in 2011 alone to organizations that provide care and education to low-income children in Oregon. Dentists who reported their individual charitable care to the ODA reported donating over $400,000 in care (many others provide care but do not report it). At recent Multnomah County ‘Give Kids A Smile!’ events, over 500 children were treated, for a total of over $150,000 in care.

Dentists do not have to change their attitude towards low-income patients—we are already sympathetic, passionate and eager to help. I will be in Washington D.C., with my daughter’s eighth grade class this May and would love to have lunch with you to discuss the positive role of dentists in providing preventive dental care and dental education to all patients.

Sincerely,

Barry J. Taylor, DMD
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TEAM ODA, the following two questions help to frame my mind-set as I write this huddle:

- What do you pack when you pursue a dream, and what do you leave behind?
- Do you let yesterday use up too much of today?

Before I deal with these questions, though, I want to share a story about email and what can go wrong:

An Illinois man left the snow-filled streets of Chicago for a vacation in Florida. His wife was on a business trip and was planning to meet him there the next day. When the husband reached his hotel, he sent his wife a quick email. Unfortunately, when typing her address, he missed one letter, and his note was sent instead to an elderly preacher’s widow—her husband had passed away just the day before. When the grieving woman checked her email, she took one look at the monitor, let out a piercing scream, and fell to the floor in a dead faint.

At the sound, her family rushed into the room and saw this note on the screen:

*Dearest wife, Just got checked in. Everything prepared for your arrival tomorrow.*

*P.S. Sure is hot down here.*

“Excellence is not an act...it’s a habit.” – Aristotle

Most of the time, we deal with the obstacles by persevering. Sometimes we get discouraged and turn to inspirational writing, like thoughts from Vince Lombardi: “Quitters never win and winners never quit.” That’s poor advice. Winners quit all the time. They just quit the right stuff at the right time. Most people quit—they just don’t quit successfully. In fact, many professions and many marketplaces profit from quitters—society assumes you’re going to quit.

Extraordinary benefits accrue to the tiny minority of people who are able to push just a little longer than most. Extraordinary benefits also accrue to a tiny part of the majority with the guts to quit early and refocus their efforts on a new area that plays better to their strengths. In both cases, it is about being their best by getting through the hard stuff and coming out on the other side.

“Those on top of the mountain didn’t fall there.” – Gil Atkinson

To get through the tough times we must have the ability to put all our chips on the table and be “All In” as they say in poker.

“Quit the wrong stuff. Stick with the right stuff. Have the guts to do one or the other.” – Seth Godin

“Champions keep playing until they get it right.” – Billie Jean King

My windsurfing friends tell me that windsurfing is very easy—except for dealing with the wind. The wind makes it tricky, of course. It’s not difficult to find great equipment, and the technique is fairly straightforward. What’s difficult is the wind. It is unpredictable; it will change exactly when you don’t want it to. The same thing is true when we provide patient care—it would be a lot less stressful if it wasn’t for the challenging patients. In fact everything about practicing dentistry has a wind problem.

Here’s the good news: The fact that it’s difficult and unpredictable works to your advantage, because if it were any other way, there would be no profit in it. People go windsurfing because the challenge of the wind makes it interesting. The driving force for people seeking your services is that you can help solve their oral health problems and needs.

“Obstacles don’t make people stop—people stop themselves.” – Carol Quinn

The next time you’re tempted to vilify a particularly obnoxious patient, realize that this failed interaction is the best thing that’s happened to you all day long. Without it, you’d be easily replaceable. The key is to embrace the challenge and then find a way afterwards to blow off what my family calls “The Stink.” Go for run, work in the yard or find something to read that “calms your water.”

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“Aim high in work and life. Become the best you that you were meant to be. Defy discouragement, stay true to your dreams. Look the world straight in the eye. Make a difference in the lives of others. Laugh often and love much. Above all, celebrate every step of the way—not just great achievements, but also the great attempts.

“Winning doesn’t always mean being first. Winning means you’re doing better than you’re ever done before.” – Bonnie Blair

“If you throw your heart over the fence, the rest will follow.” – Unknown

Be good to yourself. – Coach
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Invite a non-member colleague to join you at ODA’s “Non-Member Night” at MacTarnahan’s Taproom. Enjoy complimentary drinks and appetizers while helping us share the many benefits of ODA membership.

Network with colleagues as you tour the brewery and sample beer, all while non-members discover what they are missing!

**Thursday, May 31, 2012, 6 PM – 9 PM**

MacTarnahan’s Taproom
2730 NW 31st, Portland, OR 97210

Not sure which of your colleagues aren’t members? Check out the non-member list posted on ODA’s website under the “Member Resource” tab. You are not limited on the number of non-members you can invite. All are welcome, and we know the best invite comes from a colleague!

Show your support for this fun, new event!
RSVP to: Anna Juan at ajuan@oregondental.org or 503.218.2010 x 102

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**Please welcome our newest ODA members!**

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- COLEMAN A. DOW, DMD
  Springfield • Lane County
- JENNIFER M. DRIVER, DMD
  Roseburg • Umpqua
- PHILIP W. GETSINGER, DMD
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- TARA G. KHALIL, DDS
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ADA Seeking nominations: 2012 Certificate for International Volunteer Service

The Committee on International Programs and Development (CIPD)—a standing committee of the ADA’s Board of Trustees—is accepting nominations for the 2012 Certificate for International Volunteer Service. They invite nominations of outstanding members who have volunteered their services in developing countries.

You may complete the online nomination form at www.ada.org/1473.aspx. As described in Part III of the nomination form, two (2) testimonial letters are also required.

The deadline is April 1, 2012 for all materials to be received by the Division of Global Affairs.
Is your dental assistant certified in Oregon to take x-rays?

Radiation Protection Services (RPS) inspections are finding some common problems in dental offices. The Oregon Board of Dentistry has received notification of a second office in the last two months where a dental assistant is not certified in Oregon to take x-rays. Apparently, this dental assistant is certified in California. 

Certification in any other state does not automatically mean approval in Oregon.

Anyone with x-ray certification elsewhere must go through the proper channels to obtain an Oregon x-ray certificate:
http://1.usa.gov/XrayCert

Reciprocity can be obtained provided the training meets Oregon standards. The rule requires that all training, certificates and other information as necessary be submitted for approval prior to an Oregon certificate being issued and prior to any x-rays taken here in Oregon. The Board of Dentistry can be contacted for information on how to obtain an Oregon certificate.

RPS will require that the Oregon certificate be available upon inspection. (This is the number one violation during inspections.) If no Oregon certificate is available, the office will receive a citation and could be subjected to penalties. The Board of Dentistry will also be notified, and the dentist could be subject to disciplinary action.

Dentists should always ask for a copy of the dental assistant’s Oregon x-ray certificate. For those who have had the same dental assistant for many years, make sure you have a copy. The last office cited was one with a dental assistant who worked in the office for over 20 years without an Oregon certificate. This was discovered during a recent RPS inspection.

What other violations hit the top during x-ray inspections?

- **333-106-0045(2)** The radiation exposure to the patient shall be the minimum exposure required to produce images of good diagnostic quality.

One item tested during the machine testing portion of the x-ray inspection is measuring a facility's techniques for a given exam. Inspectors ensure the exposure to the patient is within guidelines that are set in rule. This is the second most common non-compliance item for 2011 and is also one of the top three non-compliances for 2010.

- **333-101-0005(1)** x-ray unit(s) not properly registered.

For one reason or another x-ray equipment doesn’t always get registered with RPS until an inspection happens. This can occur when a facility obtains new equipment or acquired equipment from another facility. If you have recently purchased a practice, you will need to re-register the equipment. According to rule, all x-ray equipment must be registered with the State:
http://1.usa.gov/RegisterXray.

Dentist Health & Wellness Hotline

ODA volunteers are on call 24 hours a day to provide confidential, caring assistance for help in dealing with substance abuse and addiction, disability, litigation stress, and mental health challenges.
Honorary Dental Organizations retain core missions while broadening diversity of fellowship

By Melody Finnemore

As the trio of honorary dental organizations near their respective 100th anniversaries, much has remained the same over the last century. They each award fellowship by invitation only to dental professionals who serve as leaders in professionalism, ethics and humanitarianism. And they each have retained the core mission that motivated their creation in the first place.

What has changed over the years is the breadth of diversity that each organization has experienced. As their geographic expanse has broadened, the distinguished dental professionals who make up their respective fellowships has increasingly become a more inclusive mix of people from different countries, cultures and perspectives on the profession.
American College of Dentists

The American College of Dentists, founded in 1920, initially was created to address what the organization called “serious problems facing the profession.” Stephen Ralls, DDS, the ACD’s executive director, recently wrote that these problems included limited opportunities for advanced education and training, a dearth of dental research, and commercial control of dental journalism.

Its leaders at that time crafted ACD’s mission with a priority on evaluating industry standards, encouraging graduate study, and recognizing those who had done meritorious work. Today, the ACD states that its mission is to advance excellence, ethics, professionalism and leadership in dentistry.

According to the ACD, the college continues to further its mission by supporting ethics summits, online courses in dental ethics, the Professional Ethics Initiative—an entry-level ethics course, online leadership courses, leadership symposia, a multimedia dental history resource, resource materials for dental schools and a variety of award programs.

The ACD has 7,400 fellows, about 4,000 of whom hold active status. That means that just 3.5 percent of the dentists in the U.S. and Canada are fellows of the college, according to Dr. Ralls.

Rickland G. Asai, DMD, past president of the Oregon Dental Association, recently was elected as an ACD regent and says he has seen diversity within the college grow as the profession’s diversity has broadened.

“I think there is a very strong drive within the profession to be sure that all who are interested and qualified are encouraged to consider dentistry as a career,” he said. “Historically, as in many other professions and careers, there is some question as to why there is not more diversity. I think that has changed and continues to change for the better.”

Dr. Asai acknowledged that it takes time to bring about change in the profession’s demographics, and said recent classes enrolled at the OHSU School of Dentistry reflect that it is indeed happening.

“As the diversity of the profession continues to broaden, so will the diversity of those who make up the honorary organizations,” he said.

International College of Dentists

Established in 1928, the International College of Dentists was created to recognize individual dentists for “outstanding professional achievement, meritorious service and dedication to the continued progress of dentistry for the benefit of humankind.”

The ICD has 12,500 fellows around the world and 7,000 in the U.S. It is governed by a council consisting of 40 members representing sections and regions in 112 countries around the world. Council members meet annually to set policy directives for the college and direct its growth and influence globally, according to the organization.

ICD President Garry Lunn, DDS, said the college was founded by American dentist Louis Ottoffy and Japanese dentist Tsurukichi Okumura, who each wanted to establish a communications network of professional and scientific information with dentists in other countries. Its purpose of advancing the art and science of dentistry and honoring meritorious service remain the same today, he said.

The organization continues to expand its borders, most recently granting sectional status to Myanmar and mainland China. Earlier this year, ICD held a convocation for more than 40 fellows in Africa. Dr. Lunn noted that diversity goes hand-in-hand with the organization’s global view.

“Diversity has never been an issue with the ICD when you consider our worldwide exposure and fellows from around the world representing many cultures and dental practices,” he said. “Worthy dentists do not ‘join’ the ICD, but are ‘invited’ based on their contributions to their community and the profession of dentistry regardless of where they live, their religion, their sex or the color of their skin.”

Pierre Fauchard Academy

The Pierre Fauchard Academy, named for the French dentist recognized as the “Father of Modern Dentistry,” last year celebrated its 75th anniversary. Its objective is to celebrate “professionalism, integrity and ethics worldwide by our own conduct as worthy role models, by the advancement of dentistry to the highest level, by supporting and honoring colleagues for their distinguished work, research, contributions, and public service, and by providing excellence in programs, education, and leadership in oral health care.”

According to the PFA, one of the primary objectives at the time of its 1936 founding was to garner greater control by the dental profession over its own literature. The academy still holds that as a key priority that includes the publication of the Dental
Over the last 75 years, PFA has expanded beyond publications and branched into philanthropy, education, mentorship, and maintaining a website presence. Judith Kozal, the PFA’s executive director, said the academy also provides educational scholarships to students at dental schools throughout the world. In addition, the academy awards grants for dental service projects to improve oral health care in many countries. Since 1995, its foundation has provided more than $1.8 million in scholarships to third-year dental students around the world, and more than $2.4 million in grants to charitable programs.

“Cultural diversity and openness to differences has enabled the Pierre Fauchard Academy to reach across international boundaries and bring together through professional contacts a ‘family’ of dental professionals across the globe, united under a common mission,” she said. “Fellows are brought into the academy by invitation only and our ranks reflect the broadening cultural diversity of dentistry in general,” Kozal added. “In PFA there is now a greater diversity of women and fellows from different cultural backgrounds.”

Kozal noted that the PFA’s leadership now includes three women on its Board of Trustees. In addition, it was the first honorary dental organization to have an African-American president, and its board is comprised of fellows from Australia, Japan, Mexico, Chile, France, Belgium and the US.

Melody Finnemore is a freelance writer for ODA and a partner in Precision Communications (www.precomwords.com). She can be reached at precisionpdx@comcast.net.

Oregon Sections Sponsor Activities, Events That Promote Goals at Home

By Melody Finnemore

Each of the three honorary dental organizations has a regional structure that furthers its mission locally. Several of the leaders of the Oregon sections have been inducted in two or even all three organizations, and they have served at the regional and national levels as well. A few of the leaders recently shared how each Oregon section fosters national and international goals.

International College of Dentists—Oregon section

The ICD’s mission of service through leadership is exemplified by the commitment of its Oregon fellows. Among them is Jack Clinton, DMD, dean emeritus of the OHSU School of Dentistry. Dr. Clinton was inducted into the ICD in 1991, and is immediate past-president of its USA section.

“It’s very impressive for a lot of reasons. You become the person who administers the convocation, which is a very dignified ceremony,” he said. “It’s really sophisticated and is intended to honor those who have been nominated for fellowship for all they’ve done on behalf of professionalism, ethics and humanitarianism.”

Traditionally, the ICD concentrated its humanitarian work in developing nations, sponsoring clinics and offering dental education for providers in places like Cambodia, Vietnam, Korea and Africa. Recognizing that there is plenty of need in the U.S., the ICD recently partnered with the Wounded Warrior Project and the Fisher House Foundation in a unique collaboration.

Wounded Warriors serves military veterans severely wounded during active duty, and Fisher House provides temporary housing for their families while they receive rehabilitation treatment. The ICD has offered to provide urgent and emergency dental care at no cost to those families during their stay. The first project—with Hawaii’s Wounded Warriors Project—launched in February.

“I fully expect that within the next couple of years, at least half of these rehabilitation sites will have a contract with Fisher House, and we’ll provide needed dental care for the families,” Dr. Clinton said. “The Wounded Warrior Project and Fisher House have been really supportive, and as ICD president I got to help orchestrate it and make it happen.”

The ICD also honors a graduating senior at every dental school each year, and sponsors an exchange program so dental students from other countries can study in the U.S. ICD recently initiated an effort to align dental students with faculty and ICD fellows within their community to create “neutral” mentoring relationships, Dr. Clinton said.
“The idea is to help the dental student understand professionalism early in their career so that matures into leadership,” he said. Dr. Clinton said he appreciates the individual missions of all three honorary dental colleges as well as their common goal of encouraging members of the profession “to step up and be more than just a dentist.”

“There is a lot of vitality and vibrancy in all three of the organizations to improve dentistry, celebrate the accomplishments of the industry, and enhance the image of the profession,” he said.

Jeffery Stewart, DDS, an associate professor in the Department of Pathology & Radiology at the OHSU School of Dentistry and ODA Speaker of the House, was inducted into the IDC in 2002 as was Denise Stewart, DDS. Both were nominated by Dr. Clinton.

Dr. Jeff Stewart currently serves as IDC’s deputy regent, representing Oregon, Washington, Idaho, Alaska and Montana. He said the chance to help guide the organization has been rewarding personally and professionally.

“I’ve enjoyed the opportunity to interact with colleagues who are awarded fellowships, and to have a chance to learn about all of the wonderful things they do in dentistry and in their leadership roles,” Dr. Jeff Stewart said.

American College of Dentists—Oregon section
With a focus on promoting ethics in dentistry, the ACD’s Oregon section works closely with the OHSU School of Dentistry to encourage ethics education and mentorship. Connie Masuoka, DMD, immediate past chair, sat in on an ethics course at the dental school to determine how to foster future education and mentorship opportunities for students.

“We’re really trying to revitalize the group and influence some new programs, so we want to highlight ways people can participate and make things interesting again for our members,” Dr. Masuoka said.

The group plans to sponsor an ethics lecture, “Ethics in the Business of Dentistry,” during the Oregon Dental Conference. The lecture will feature Gary T. Chiodo, DMD, Interim Dean of the OHSU School of Dentistry. His co-presenter, Phyllis Beemsterboer, EdD, is a professor and associate dean for academic affairs at the OHSU School of Dentistry and associate director for the Center for Ethics in Health Care.

Dr. Beemsterboer also serves as president of the American Society for Dental Ethics, a special section of the ACD. She said the ASDE has about 90 members, most of whom are dental educators but several of whom are practitioners with a keen interest in the topic. The ASDE is dedicated to the ongoing study of ethical issues and education to promote professional responsibility in conduct.

To that end, the organization sponsors continuing education workshops and other events. Its members gather for an annual membership and board meeting with the American Dental Education Association and the ACD.

“This is just a wonderful group of people who are very much dedicated to enhancing and framing our next generation of dental health care professionals,” Dr. Beemsterboer said.

James Fratzke, DMD, also a past ODA president, was inducted as an ACD fellow in the late 1980s and has been involved in its local leadership ever since. He said the organization grows even more relevant as ethical questions become not only more broad, but more gray than black and white.

“There are so many situations that confront the practicing dentist, from how to handle a patient who is disgruntled with a former dentist to advertising,” Dr. Fratzke said. “There are all sorts of things these people are faced with in making decisions, including how to approach patient relationships and treatment options.”

Dr. Fratzke said the group sponsors an annual student leadership award for a senior graduating from the OHSU School of Dentistry. In addition, the ACD section hosts a White Coat Ceremony for the School’s sophomore class, holds a dinner banquet each January, and contributes items to the national organization’s annual silent auction and fundraiser.

Pierre Fauchard Academy—Oregon section
Similar to the ICD and the ACD, the Pierre Fauchard Academy strives to promote professionalism, integrity and ethics. An Oregon section was established in 2007. Weston Heringer Jr., DMD, another ODA past president, was inducted into the ACD that year and has served as its chair since then.

“Our mission is to recognize people who have been active in organized dentistry and have been involved in going above and beyond in charitable work in the state and on a larger level,” Dr. Heringer said. The PFA’s past honorees include Bill Zepp, executive director of the ODA, for his work in establishing the MOM project in Oregon. The 2011 MOM event resulted in 2,023 patients receiving an estimated $1.2 million worth of dental services.

Dr. Heringer said the section grants $1,000 scholarships to third-year dental students. In addition, the PFA’s foundation provides grants and other funding for Oregon fellows to provide dental services overseas. ODA past president and current ODA secretary-treasurer, Sean Benson, DDS, who also serves as the section’s secretary/treasurer, received financial support for a trip to Honduras to provide care, while Dr. Heringer received support for a humanitarian trip to Romania. ●
When Pacific Continental bankers Amanda Mombert, Scott Beard and Chris Kane talk to their dental-banking clients, they know the difference between a pano and an intraoral camera. Whether helping to grow a practice with a line of credit or just financing a digital x-ray, their dental knowledge makes a world of difference. At Pacific Continental, our bankers not only speak dental, they’re experts in delivering the financial services you need, when you need them... on your terms.
Give Kids A Smile! 2012

Thank you to everyone involved who made Oregon’s kids SMILE!

Lane County Dental Society
Assistance League of Eugene
Children’s Dental Center
Right: Paul Newman, DMD
and Linda Eichner

Dr. Norman Magnuson’s office
Below: Norm Magnuson, DDS
Below right: Ryan Magnuson
Total Number Screened: 674
Total Number of Children Seen: 128
Total Dental Care Provided: $81,820

Sponsors for the La Grande event include Henry Schein Dental, Colgate-Palmolive, DEXIS Digital X-ray, and The ODS Companies. EODS dentists, Dr. Eli Mayes of La Grande and Dr. Sam Barry of Pendleton, worked with national corporate sponsors through the ADA's Give Kids A Smile® program. Every child was given a dental homecare bag including a toothbrush, toothpaste and floss donated by the sponsors.

Dr. Mayes arranged for 14 dentists to be involved in this GKAS event, 12 volunteered their services on February 3, while one worked from his office in Richland, Oregon. The ODS Companies’ President of Dental Services, Dr. Bill Ten Pas, covered expenses to host GKAS® at The ODS College of Dental Sciences 24-chair clinic, and to feed the GKAS® Volunteer Team.
Give Kids A Smile 2012, cont.

Multnomah Dental Society and OHSU School of Dentistry

Give Kids a Smile on Feb. 3 and Children’s Health Fair on Feb. 4

- $82,024 worth of care
- over 450 children seen
OHSU Dental Students Provide Care during National Children’s Dental Health Month

OHSU School of Dentistry students received plenty of hands-on patient care experience while serving the community during February, which is National Children’s Dental Health month.

Give Kids a Smile® day, now in its 10th year at the dental school in conjunction with Multnomah Dental Society, was held February 3. About 150 young people ages 6–19, many of them uninsured, received free oral health care from dental students and pediatric dentistry residents, under the supervision of faculty and alumni.

“In dentistry, you need to give back,” said fourth-year dental student Mandi Hudec. “This is a great event where we get to do something for the community.”

Also in conjunction with National Children’s Dental Health month, dental students volunteered at Lynchview Elementary School in SE Portland to provide care on two dental vans, courtesy of Multnomah Dental Society. About 200 children were seen at Lynchview on February 4.

“The Children’s Health Fair was a great experience for the children, as well as those who volunteered,” said fourth-year dental student Jane Xing.

Also on February 4, 34 dental students volunteered at the Clark College Hygiene Clinic, coordinated by Peter Lubisich IV, DMD ’01, assistant professor of pediatric dentistry. Dr. Lubisich is the dental director of the free clinic in southwest Washington. A dental van was also used for hygiene students to place sealants. The event was sponsored by Ronald McDonald House and the Washington Oral Health Foundation. “In all, we saw 264 patients and provided about $9,000 worth of treatment,” said Dr. Lubisich.

On February 17, OHSU School of Dentistry Outreach Coordinator Mary Ann Haish, RDH, hosted the 14th annual Sealant Day for Buckman Elementary second-graders in the school’s Dr. and Mrs. Carl Rietman Pediatric Dentistry Clinic. About two dozen Buckman students visited the school for free sealants.

“We’re changing lives,” said third-year dental student Clark Brinton.
2011–12 Membership Survey Results

What is the **one thing that ODA could do to improve** the value of ODA membership to you?

- Produce public service announcements promoting dentistry and oral health (19.2%)
- Add a virtual component to the Oregon Dental Conference (2.7%)
- Lower membership dues (17.9%)
- Communicate with members more innovatively (ex. ODA member app for smartphones) (4.0%)
- Increase legislative advocacy (11.2%)
- Increase opportunities for retired dentists (4.5%)
- Nothing; I’m satisfied with ODA (12.5%)
- Don’t know/not sure (12.9%)
- Other, not included above (please specify) (15.2%)

**Condensed ‘other’ responses**

- Be more inclusive of rural dentists.
- Make leadership decisions more transparent.
- Work more closely with component dental societies.
- Promote education of auxiliary staff.
- Promote water fluoridation.
- Emphasize the importance of improving general and dental health for all seeking treatment.
- Emphasize leadership training.

Encourage volunteer leadership from the general membership and make it easier to volunteer.
Include a teaching/learning emphasis in the Peer Review process.
Advocate for members on the real daily issues at the Board and in the State Legislature.
Protect member privacy.
Represent and be relative to all member dentists, including specialists.
Create a photo directory.

In which of the following groups **have you participated?**

- ODA Board of Trustees: 21.4%
- ODA President: 4.5%
- ODA officer, other than President: 6.3%
- ODA Executive Committee: 14.3%
- ODA Council/Committee: 25.9%
- ODA Grassroots Action Network: 13.4%
- ODA House of Delegates: 43.8%
- ODA Dental Conference Speaker Host: 29.5%
- Oregon Dental Mission of Mercy volunteer: 0.4%
- Oregon Mission of Mercy volunteer: 0.0%
- ADA Board of Trustees: 0.0%
- ADA President: 3.6%
- ADA Officer, other than President: 17.9%
- ADA Council/Committee: 31.3%
- Component Board of Trustees: 34.8%
- Component President: 30.8%
- Component Officer, other than President: 29.9%
- Component Council/Committee: None of the above

In preparation for the ODA Board’s February 4th mega-issue discussion on governance, they asked us to find out what you find important in your ODA membership. We thought we’d share with you the results of the survey. Thank you to the 224 members who told us their thoughts, for a 12.5% response rate (the link was sent electronically to the 1,796 members with email addresses).
How important to you are the following features of your Oregon Dental Association membership?

- Personal professional development
- Opportunity to promote high standards for oral health and oral healthcare
- Networking with colleagues & developing professional relationships
- Developing leadership skills
- Advancing dentistry issues in the legislative, regulatory and public affairs arenas
- Volunteer opportunities within the dental profession
- ODA member programs (peer review, mentor, etc.)
- ODA’s social media presence (Facebook, Twitter, LinkedIn, NewDocs)
- ODA governance (House of Delegates, Board of Trustees, etc.)
- Oregon Dental Conference
- Oregon Mission of Mercy
- The benefits of being a member of the American Dental Association
- The tangible benefits of being a member of the ODA (endorsed products, etc.)
- The benefits of being a member of your local component society

Average rating: 1.75, 2, 2.25, 2.5, 2.75, 3, 3.25

How satisfied are you with your ODA membership in the following areas?

- Personal professional development
- Opportunity to promote high standards for oral health and oral healthcare
- Networking with colleagues & developing professional relationships
- Developing leadership skills
- Advancing dentistry issues in the legislative, regulatory and public affairs arenas
- Volunteer opportunities within the dental profession
- ODA member programs (peer review, mentor, etc.)
- ODA’s social media presence (Facebook, Twitter, LinkedIn, NewDocs)
- ODA governance (House of Delegates, Board of Trustees, etc.)
- Oregon Dental Conference
- Oregon Mission of Mercy
- The benefits of being a member of the American Dental Association
- The tangible benefits of being a member of the ODA (endorsed products, etc.)
- The benefits of being a member of your local component society

Average rating: 2, 2.25, 2.5, 2.75, 3, 3.25
2011–12 Membership Survey Results, cont.

Which of the following best describes your dental practice?

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<tr>
<th>Practice Type</th>
<th>Responses</th>
</tr>
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<tbody>
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<td>3</td>
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<tr>
<td>Other</td>
<td>17</td>
</tr>
<tr>
<td>Retired</td>
<td>27</td>
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<tr>
<td>Public health</td>
<td>3</td>
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<tr>
<td>Academia</td>
<td>7</td>
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<tr>
<td>Employee / salary dentist</td>
<td>8</td>
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<tr>
<td>Clinic</td>
<td>1</td>
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<tr>
<td>Partner</td>
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<tr>
<td>Associate</td>
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<td>Group practice</td>
<td>29</td>
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<tr>
<td>Solo practice</td>
<td>131</td>
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<tr>
<td>Not applicable (3 responses)</td>
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<tr>
<td>Other (17 responses)</td>
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<td>Academia (7 responses)</td>
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<td>Partner (12 responses)</td>
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<td>Group practice (29 responses)</td>
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<tr>
<td>Solo practice (131 responses)</td>
<td></td>
</tr>
</tbody>
</table>

How long have you practiced dentistry?

- Less than a year: 0%
- 1–5 years: 3.6%
- 6–10 years: 8.9%
- 11–15 years: 7.1%
- 16–20 years: 9.8%
- More than 20 years: 70%
What is your local component society?

- Yamhill County (2 responses)
- Washington County (30 responses)
- Umpqua (3 responses)
- Southwestern Oregon (5 responses)
- Southern Willamette (9 responses)
- Southern Oregon (10 responses)
- Rogue Valley (5 responses)
- Multnomah (49 responses)
- Mid-Columbia (3 responses)
- Marion & Polk (23 responses)
- Lane County (19 responses)
- Klamath County (4 responses)
- Eastern Oregon (8 responses)
- Columbia (5 responses)
- Clatsop County (4 responses)
- Clackamas County (30 responses)
- Central Oregon (15 responses)

How long have you been a member of the ODA?

- Less than a year (1.3%)
- 1–5 years (8.9%)
- 6–10 years (12.9%)
- 11–15 years (8.9%)
- 16–20 years (8.5%)
- More than 20 years (59.4%)
WITH 299 MEMBERS, the Washington County Dental Society is one of the state’s largest components. Along with continuing education courses and guest speakers, WCDS members participate in many events throughout the county to provide dental care. These include working with local school districts to provide dental care to those in need and participating in Give Kids a Smile! each year in a clinic setting at Pacific University.

Many of the component’s member dentists donate time and services to participate in community screenings, with follow-up treatment sponsored by various organizations in Washington County. Many WCDS members have volunteered at the Oregon MOM event and support the efforts of the Tooth Taxi as well.

In addition, the Washington County Dental Society’s partnership with Pacific University’s dental hygiene program includes working with the students and providing a Hygiene Scholarship for students.

Carolyn Pearce, WCDS executive director, said the group’s primary goal for the last few years has been to try to meet the needs of all of its members, increasing member participation and encouraging newer members to become involved in organized dentistry so they can see the benefits of participation.

“Many of the WCDS component’s board members have spent several years on the Executive Board, finding it an excellent way to become acquainted with other dentists in the area, as well as sharing their concerns, thoughts and needs with other dental professionals throughout Oregon,” Pearce said.

Melody Finnemore is a freelance writer for ODA and a partner in Precision Communications (www.precomwords.com). She can be reached at precisionpdx@comcast.net.
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Meeting Highlights
February 4, 2012

• Thomas S. Tucker, DMD and Joni D. Young, DMD were elected, respectively, to two-year (2012–2013) and three-year (2012–2014) terms as ADA Alternate Delegates At Large.
• Jean M. Pacewic, DMD, was appointed to the Annual Meeting Council.
• The Dental Foundation of Oregon Articles of Incorporation were approved as presented.
• Bruce A. Burton, DMD, chair of the Leadership Development Committee, led the Board in a mega-issue discussion about the structure of the ODA Board of Directors. The Leadership Development Council was present to observe. They will synthesize the Board’s thoughts and report back at the May 19 Board meeting.
• Trustees talked about various Give Kids A Smile! activities in their components. They were asked to send statistics and photos to Christina Swartz at cswartz@oregondental.org.
• Trustees were provided with lists of 2011 ODA members in their component who have not yet paid their 2012 dues.
• ODA received funding from the ADA Membership Program for Growth (MPG) to (1) host a non-member social event focused on the tri-county, and to (2) send invitations and provide complimentary drink tickets to new dentists at the ODC New Dentist Reception.
• The 2011 Oregon Mission of Mercy was a huge success. The 2011 OrMOM video was shown to Trustees. It can be seen at: http://bit.ly/2011OrMOMvideo.
• Planning for the 2012 OrMOM in Southern Oregon is underway. It will be held September 13–16, 2012 in Medford.
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Board Committees Propose Rules Relating to Botox, Anesthesia and Orthodontic Assistants

The Board Dental Hygiene, Licensing, Standards, and Competency and Rules committees all met prior to the Board meeting December 16. Recommendations for rule changes were submitted to the Board for consideration and movement to a rules hearing in the spring. The Board decisions included:

1. Division 12 Standards of Practice – OAR 818-012-0005 included revising item (1) which lists procedures dentists cannot perform. The additional restriction for Botox was listed and cited as cannot “administer Botulism toxin type A or dermal fillers unless:
   a. the licensee is an oral surgeon or has completed an oral surgery residency accredited by the ADA or CODA, and
   b. has completed a clinical fellowship of at least one continuous year in duration, in esthetic (cosmetic) surgery recognized by American Association of Oral and Maxillofacial Surgeons, or holds privileges in at a JCAHO accredited hospital to perform these procedures, or
   c. Holds privileges either:
      i. In a JCAHO accredited hospital to perform these procedures in a hospital setting, or
      ii. In an Oregon licensed ambulatory surgical center and accredited by JCAHO or AAAHC accredited. These restrictions prohibit general dentists from providing Botox in dentally related treatments as well as for cosmetic reasons.

2. OAR818-026-0055 Dental Hygiene and Dental Assistant Procedures Performed under Nitrous Oxide or Minimal Sedation. OAR 818-026-0030 Requirement for Anesthesia Permit, Standards and Qualifications for Anesthesia Monitor. There was some wordsmithing of rule language in both sections to change from listing dentist and dental hygienist to “licensee”. A bigger clarification was in 818-026-0030, citing documentation is required for initial training within two years of applying for a permit. Additional documentation is needed if the permit application is more than two years but less than five years since initial training. The proposed rules now set some specifics of what is needed. The rule proposals will be provided on the Board’s website prior to the rule hearing in the spring.

3. OAR 818-042-0100 Expanded Functions – Orthodontic Assistants. The orthodontic community met with the Board’s committees and the Board to review the prohibited and allowed duties for Orthodontic Assistants. The proposed rules revised the Orthodontic Assistant duties allowed while under indirect supervision and those under general supervisions in addition to updating duties prohibited. Current rules and changes that were made many years ago do not reflect the current industry standard for orthodontic assistants. The proposals were accepted by the Board and will move forward to rule hearing in the spring.

Discussion of SB738

The Board reviewed what actions they are required to take under SB738.

• All LAPs will receive a new license as an Expanded Practice Dental Hygienist (EPDH) after January 1, 2012 and will also receive a copy of SB738 and the Collaborative Agreement coversheet the Board has developed which outlines what they need to do to receive the EPDH with Collaborative Agreement designation on their license. The EPDH must submit the coversheet with a copy of their collaborative agreement with a collaborating dentist to the Board for approval.

• SB738 also states that dental hygienists have a pathway to obtain an EPDH by taking continuing education courses. While the Board will not approve the specific courses, the Board must approve the course providers including institutions. All this information will be available on the Board’s website at www.oregon.gov/dentistry. Currently there are 245 LAPs that received new licenses as EPDHs. There are also several pending licenses.

• There was additional discussion about the changes to where EPDHs may practice. The locations and populations that were previously included in the law are still there but the law adds patients whose income is less than the federal poverty level and adds other populations that the
Board determines are underserved or lack access to dental hygiene services. ODHA indicated at the Board meeting that they will seek legislative changes.

**Correspondence**

Dental Assistants and Dental Hygienists Placing Posterior Composites

Dr. April Love submitted a letter requesting the Board reconsider their position and allow dental assistants and dental hygienists to place posterior composites. The Board reviewed her written request and decided to send this request to the Board’s Licensing, Standards and Competency Committee for review and recommendation.
On the Road with the Tooth Taxi in Estacada

Our First Snow Day of the Year! We were at Eagle Creek Elementary in the Estacada School District in early January. After the snow, we worried about the Tooth Taxi floating away while parked next to a swollen creek at the Estacada High School! Dr. Teri Barichello helped us to kick off the new year assisting us in implementing some changes to our clinical processes resulting in greater efficiency and treating more kids, which is what it’s all about! We are grateful for volunteers Dr. Peter Lax, Marica Nado, RDH, and dental assistant Mette Singer.

The team also went through “First Tooth” Training with Karen Hall, RDH. This informative class gave us great tools and resources for working with the teen parents and their children. The program through the Oregon Public Health Division Oral Health Unit aims for “preventing early childhood caries through medical and dental provider education and collaboration.”

Realities from the road

We treated a 1st grader who had an abscessed tooth extracted. His grandmother called to talk to us; she said she’d taken him to the doctor twice for a swollen face and both times received antibiotics. One doctor wanted to refer him to a plastic surgeon for his abscessed cheek. (This medical provider would benefit from the “First Tooth” training!) Grandma was wondering if the bad tooth was the whole problem as her grandson seems to be fine now and if she doesn’t have to haul him all the way to Portland she’d prefer not to.

Tooth Taxi Summary
Sept. 4, 2008 – January 24, 2012

- 10,722 students screened
- 9,534 students received oral hygiene education in the classroom
- 4,502 students treated in the van
- $2,784,268 value of free dental services provided

Overheard…from the kid gallery:
Kindergartner: “My dog bit my toothbrush.”
“My Grandma didn’t brush her teeth when she was little; they all fell out, and now she has dentures that don’t fit.”
1st grader returning for his 2nd appointment: “Let’s not make it anything about teeth.”
“Ha, ha, ha, the cat’s butt’s on fire.” (watching a Tom & Jerry cartoon)
“My tooth hurts because the other day a spider bit my cheek.”
3rd grader in the dental chair: “Just so you know, I’m not really fond of this.”
“I’m growing a cavity.”
BnK Construction Helps Raise $5,140 for DFO
Company sponsors a Texas Hold ’em Poker Tournament

BILL LUDWIG, PRESIDENT OF BNK CONSTRUCTION, along with his wife Sherry and extended family hosted a Texas Hold ’em Poker Tournament at their home in Boring on January 28. Thirty-four players joined in the fun and helped raise $5,140 for DFO programs like the Tooth Taxi.

Heather (Ludwig) Hippenstiel provided super support for the tournament, designing fliers, posters and promotional materials, while her husband, Darren, managed the details of the tournament.

Special thanks to the numerous sponsors who contributed over $3,000 in prizes that were distributed among participants and the final table.

Sponsors were: Schein Dental, Burkhart Dental, O’Brien Dental, Patterson Dental, DFF Dental Lab, Pacific Continental Bank, Bank of America, Key Bank, Spectra Contract Flooring, Gunderson Construction Cabinetry, Steel Stud Choppers, R&B Innovations Cabinetry, Ashland Concrete Cutting, Baxter & Flaming, Five Star Electric, Cascade Plumbing, Oregon Heating, Massage Envy, Dominos Pizza, Group Mackenzie, and Ironstone Bank!

All in all, it was a great night of fun, food and friendship helping to raise funds to support DFO’s mission of improving oral health for Oregon’s children. Our sincere thanks to the Ludwig Family, BnK Construction, and all of the sponsors and players who made the evening possible.

“It was a fantastic evening,” said Charlie LaTourette, DFO’s executive director. “We are very grateful to the Ludwig family and BnK Construction, and all of the sponsors who contributed prizes.”

Dr. Jason Bajuscak and Tim Warren

Dr. Steve Beadnell surveys the competition.

Heather (Ludwig) Hippenstiel and Bill Ludwig

Top Winners List
1st Place  Dr. Jason Bajuscak
2nd Place  Tim Warren
3rd Place  Joel Foust
4th Place  Dr. Brad Sievert
5th Place  Darren Hippenstiel
6th Place  Dan Hutton
7th Place  Xavier Ramero
8th Place  Dr. Steve Beadnell

Dr. Jason Bajuscak and Tim Warren
THOUGH IT’S ONLY BEEN TWO MONTHS since Gary Chiodo, DMD ’78, became interim dean at OHSU School of Dentistry, he already has big plans on the table. Dr. Chiodo took the helm January 1 when Dean Emeritus Jack Clinton, DMD ’64, retired to lead the School’s new building efforts. Dr. Chiodo (pronounced key-oh-dough) is working on a number of initiatives to increase communication, broaden clinical experience, build partnerships for diversity and outreach, expand the Faculty Dental Practice, and increase research opportunities.

“I’m very hands-on and will have initiatives related to all of our mission areas,” said Dr. Chiodo, who is generally at his desk by 5:30 a.m. “We have an enormously strong leadership team, and I’m looking forward to working with them. I’m also glad Dr. Clinton is staying on.”

One of Dr. Chiodo’s first initiatives is to broaden pre-doctoral clinic hours and expand its patient population base while increasing the patient treatment experience for fourth-year dental students who are ready to see up to two patients in the morning and up to two patients in the afternoon. “We are enhancing a patient-centered model for the pre-doctoral clinic,” said Dr. Chiodo. “The idea is that we want to start moving dental students to something closer to a realistic schedule.”

Strong patient care also involves building a robust Faculty Dental Practice, said Dr. Chiodo, and to that end, he is immediately recruiting a Faculty Dental Practice director. “Ultimately, our dental school should be a patient care resource to the community in which we are based, which includes the 11,000 OHSU employees on Marquam Hill and South Waterfront.”

To increase communication, Dr. Chiodo has been meeting with dental students and faculty monthly and staff quarterly. He recently implemented an online message board for faculty, staff, and students to post questions that can be answered and then viewed continually as FAQs.

Research is another key mission area and Dr. Chiodo said he hopes to help expand the clinical research opportunities at the dental school and continue to “build upon our excellent student research program.” In addition, he is enthusiastic about the “multiple opportunities for dental school investigators to collaborate with investigators in the School of Medicine and School of Nursing.” Dr. Chiodo’s research history includes several such successful collaborations.

To stimulate outreach on a global level, Dr. Chiodo is funding spring break patient care experiences overseas for nine dental students.

Dr. Chiodo is also in the process of forming a multi-group dental consortium that will include key leadership representation from various organizations to discuss issues affecting dental practice issues in Oregon. “I hope such collaboration will result in the most efficient and effective model for resolving issues that are of interest to several groups,” he said.

Dr. Chiodo is an Oregon native, having grown up on a large fruit and vegetable farm in Gresham. Scientifically-inclined from a young age, Dr. Chiodo said he knew in high school that he wanted to provide patient care. He completed the pre-medicine program at Portland State University, receiving a bachelor of science in biology in 1974.

“But I decided to go into dentistry rather than medicine,” said Dr. Chiodo. “I didn’t want to take care of patients who would get sick and die despite the doctor’s best efforts.” Dr. Chiodo graduated from dental school in 1978, and became assistant professor in what was then the department of public health
dentistry and is now the department of community dentistry.

“The irony is that after graduation I started my practice at the Russell Street Clinic for 21 years taking care of the AIDS [Acquired Immune Deficiency Syndrome] patient population,” said Dr. Chiodo. “The patients were medically complex, very sick, especially in the 1980s. Most of the patients had a life expectancy of between three months and one year.”

“To my surprise, I was better than expected at caring for the dying.”

In addition to caring for patients, Dr. Chiodo taught at the dental school and conducted research with HIV-positive patients, funded by National Institutes of Health grants, and with diabetic patients, funded by a Medical Research Foundation grant. He became an associate professor in 1985.

“We were always short of funds at Russell Street,” he said. “And we were always scrambling to provide the best care for patients who had limited funds, but the greatest oral health needs.”

In 1992, Dr. Chiodo received a certificate in health care ethics from the University of Washington School of Medicine and was promoted to OHSU professor of public health dentistry. He is a founding member of the university’s Center for Ethics in Healthcare and was one of its associate directors.

About that time, he also joined OHSU’s Institutional Review Board (IRB), the entity that oversees all human subjects research at the university, and in 1998 became its chair.

In 1999, OHSU began a national search for a Chief Integrity Officer and Dr. Chiodo was on the search committee. When the “first applicants didn’t work out,” Dr. Chiodo was asked to take the position, which he occupied for the past 11 years. He built the OHSU Integrity Program from the ground-up and it was deemed to be “world-class” by the Northwest Commission on Accreditation for Colleges and Universities. “I loved the job of Chief Integrity Officer and I would have been happy doing that until retirement, but then this position came along,” he said.

“I’m excited to be back at the dental school. I expect this to be my third and final job at OHSU.”

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