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matters

November 2013



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MEMBERSHIP *matters*



Official publication of the Oregon Dental Association in support of its core purpose to advance the dental profession and promote the highest standard of oral health and oral health care.



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TABLE OF CONTENTS

Volume 19, number 6
November 2013

ON THE COVER

ODA's new president Judd R. Larson, DDS



page **18**



Access to Care

Adult care takes
front and center
stage for ODA
committee intent on
improving services

page **12**

**PLUS: Senior Smile Program
addresses access to care
issue for vulnerable elderly
population**

page **12**



ALSO INSIDE...

3 From the Editor
Barry J. Taylor, DMD, CDE

4 News Briefs

9 Benefit of the Month:
Center for Professional
Success

11 Risk Management:
Spore Testing

22 ADA Success Smart Start

27 Oregon Dental Conference:
Dr. John Svirsky to present
four oral pathology courses

28 Dental Foundation of Oregon

30 Inside OHSU

31 Dental Classifieds

EVENTS & INFORMATION

CONTACT US

Letters to the Editor

Letters to the editor are welcomed.
All letters and other submissions
to this publication become the
property of the Oregon Dental
Association. Send submissions to:

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Articles

Are you interested in contributing
to Membership Matters?

For more information, please
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DOPAC <http://bit.ly/DOPACreport>

Social networks

Look for the Oregon Dental Association group on:



Twitter

Follow ODA President, Judd R. Larson, DDS: @ODAPrez

Blog www.TheToothOfTheMatter.org

NOV 24-27

Oregon Mission of Mercy IV
(Oregon Convention Center—Portland)

JAN 10 10:00 AM

Board of Trustees meeting (ODA)

MAR 7 9:00 AM

Leadership Seminar (ODA)

MAR 8 8:00 AM

Board of Trustees meeting (ODA)

APR 3-5

Oregon Dental Conference
(Oregon Convention Center—Portland)

APR 6 8:00 AM

Board of Trustees meeting
(DoubleTree Hotel By Hilton—Portland)

MAY 31 7:30 AM

Board of Trustees meeting (Salishan)

JUL 10-12

Oregon Mission of Mercy V (Salem)

JUL 25 10:00 AM

Board of Trustees meeting (Medford)

SEP 5-6

ODA House of Delegates (Riverhouse—Bend)

SEP 26 9:00 AM

Board of Trustees meeting (Portland)

NOV 1 8:00 AM

Board of Trustees meeting (ODA)

ODA CALENDAR EVENTS & MEETINGS

For more information
on these and other
upcoming events, visit
www.oregondental.org, and
click 'Calendar' at the top
of the page or call
ODA at 503.218.2010.



SALEM SAVE THE DATE

Mission of Mercy V
Salem, Oregon
July 10-12, 2014

Registration opening soon!



COMPONENT CE CALENDAR

compiled by Mehdi Salari, DMD
Send your component's CE courses
to bendsalari@yahoo.com.

TUES, DEC 10 Marion & Polk **CE HRS: 2**

Oral Surgery for the Rest of Us

Mark Thomas, DDS, exodontist

LOCATION: West Salem (Roth's)

INFO: www.mpdentalce.com, mpdentalce@qwestoffice.net

WED, DEC 11 Multnomah & Clackamas Co. **CE HRS: 2**
Healthcare Reform: What it Means to You and Your Practice, Kraig E. Anderson, FSA, MAAA,

Senior VP Underwriting & Acurial for MODA Health

LOCATION: Milwaukie (Moda Plaza)

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

THUR, JAN 9 Southern Oregon **CE HRS: 1.5**

Dentistry & Your Eyes

Paul Imperia, MD

LOCATION: Medford (Sunrise Café)

INFO: www.sodsonline.org

TUES, JAN 14 Marion & Polk **CE HRS: 2**

Business Identity Theft

Warren Franklin

LOCATION: West Salem (Roth's)

INFO: www.mpdentalce.com, mpdentalce@qwestoffice.net

TUES, JAN 14 Washington County **CE HRS: 1.5**

Sedation for Children:

An Anesthesiologist's View, Dr. Jeffrey L. Koh

LOCATION: Beaverton (Stockpot Broiler)

INFO: www.wacountydental.org, wcdskathy@comcast.net

TUES, JAN 14 Southwestern Oregon **CE HRS: 1.5**

Wealth Management for Dentists

Jake Paltzer

LOCATION: Coos Bay (Red Lion Hotel)

INFO: Dr.RogerSims@rogersims.com

WED, JAN 15 Multnomah **CE HRS: 1**

Identifying & Managing Disturbances of Eruption

Rebecca Kuperstein, DDS

LOCATION: Troutdale (McMenamins Edgefield)

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

FRI, JAN 24 Lane County **CE HRS: 4**

OSHA and Infection Control

Leslie Canham, CDA, RDA

LOCATION: Eugene (Valley River Inn)

INFO: www.lanedentalsociety.org

FRI, JAN 24 Southern Oregon **CE HRS: 5**

Building a Winning Team

Brent Ericksen & Associates

LOCATION: TBD

INFO: Amanda Davenport at sodentalsociety@yahoo.com

THUR, FEB 6 Southern Oregon **CE HRS: 1.5**

Managing the Challenging TMJ: What to look for, what to do

Bill Esser, MS, PT, CCTT & Justin Carson, DPT, CSCS, OCS

LOCATION: Medford (Sunrise Café)

INFO: www.sodsonline.org

FRI, FEB 7 Southern Oregon **CE HRS: 4**

Do it Yourself Finance!

Doug Carlsen

LOCATION: TBD

INFO: Amanda Davenport at sodentalsociety@yahoo.com

TUES, FEB 11 Lane County **CE HRS: 1.5**

Financial Principles for Dentists

Jake Paltzer

LOCATION: Eugene (Downtown Athletic Club)

INFO: www.lanedentalsociety.org

TUES, FEB 11 Marion & Polk **CE HRS: 2**

A Day in Endodontics

Tuong Nguyen Nguyen, BDS, MSD and Ryan Reese, DMD, MSD

LOCATION: West Salem (Roth's)

INFO: www.mpdentalce.com, mpdentalce@qwestoffice.net

It's Just the Status Quo in Oregon



Barry J. Taylor,
DMD, CDE

ACCCESS TO CARE appears to be a no win game for the private practitioner. Even for the larger DCOs that provide much of the care to this population, it has become more of a challenge over the past ten years. In this case, “access to care” pertains to the population of adult patients who cannot afford dental care. While we have made improvement in access to care for underprivileged children in Oregon, we are slipping backwards in dental care provided to adults. In 2012 alone, the Oregon Health Authority reduced the capitation rate for DCOs by approximately 11%. In addition to the cut in rates, there has also been a reduction in the type of services provided to qualified patients.

What are the reimbursement rate for the private office dentist who wants to be a provider? For an adult prophylaxis, the dentist is reimbursed just over \$37. An extraction? Just over \$76 to recover your overhead costs. Some dentists have found a way be providers through participation in managed capitation plans, but it is easy to understand why few do individually. In an urban area when your office has 70% overhead, it is difficult to justify participating in the plan if it is based on procedural reimbursement by the OHA. Even for the very organizations that have found a way to make a slim profit providing the dental care needed to this underserved population, the state of Oregon seems to be making the road just more difficult to navigate.

The problem will only become more pronounced as the coordinated care organizations (CCOs) in Oregon become the modality for providing dental care. Over 200,000 more individuals will now be qualified for dental coverage. Any increase in funding will be offset by the addition of enrollees in the plan. For the private practitioner participating in the Oregon Health Plan, the future is still uncharted. I have yet to meet a provider who can explain what “performance measures” and “outcome

measures” will be. It could possibly become even more difficult for an individual office to provide care. For the DCOs, it is not any easier, as they will be competing with medical and mental health providers in the CCOs.

At the Oregon Board of Dentistry level, to many, it is easy to perceive that the Oregon Dental Association is only active in blocking any regulations that others advocate would be helping the access to care issue. As an ODA member succinctly put it, “We have opposed secondary providers, expanded function hygienists and assistants, techniques that purportedly arrest the progress of decay, and, if we believe the reports, are not signing up to see OHP patients in sufficient numbers to have an impact on the access issue (which is why all of the previous issues were brought forward in the first place).”

One would have to be blind to the reality of dentistry in Oregon to think that there will not be a continued push for other levels of providers below that of the dentist. There is no reason to believe that the state of Oregon will ever increase per capita spending for dental care. All this during a time when students are graduating with staggering debt, dentists’ incomes are plateauing—and even declining—according to the ADA, and corporate dental offices are increasing. No amount of charitable dentistry such as Mission of Mercy events, dental vans, and clinics such as Creston in Multnomah County, are going to offset the pressures to change the way that dentistry is practiced in Oregon. It certainly is not for lack of good intention by dentists. ●

Barry J. Taylor, DMD, CDE,
is editor of *Membership
Matters*. He can be
reached via email at
barrytaylor1016@gmail.com.

WINNER



OF THE

Member-Get-A-Member Campaign

ODA Member, **JASON BAJUSCAK, DMD**, of Portland is ODA's Member Get-A-Member campaign winner.



For his efforts, Dr. Bajuscak has been awarded a luxurious 4-night getaway to Santa Fe, New Mexico.

Thank you for your membership recruitment assistance, Dr. Bajuscak!

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John Tiemessen, JD
Larry Henderson, CPA
Julie Seager, RDH, BSDH
And more

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Starting January 1, 2014, DMAP will no longer accept the ADA 2006 dental claim form

Starting January 1, 2014, the only dental claims DMAP will accept on paper will be those submitted on commercially available versions of the ADA 2012 claim form. This can be found on the ADA website at: www.ada.org/7119.aspx

Starting January 1, DMAP will be able to process claims that contain information in these new fields on the 2012 form:

- Tooth Quadrant (field 25)
- Quantity (field 29-b)
- Place of Treatment (field 38)
- Diagnosis Code Pointer (field 29a)

Whenever possible, please submit claims electronically using electronic data interchange or the Provider Web Portal at <https://www.or-medicaid.gov>. Billing electronically for all your claims is not only faster and results in lower denial rates, but can save you time and money. Paper claims are seldom required.

To learn more about billing electronically with DMAP, please visit the Electronic Business Practices page at: www.oregon.gov/oha/healthplan/pages/ebp.aspx

For paper-submitted DMAP claims, be sure you are using the 2012 ADA claim form, as seen here.

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The Annual Meeting Council is holding a Speaker Host Dinner & Training on Thursday, January 16, 2013, at 6:30 pm, at the ODA building in Wilsonville.

Attendees will learn the responsibilities and benefits of hosting, receive a sneak peak at the 2014 Oregon Dental Conference speaker schedule, and have the opportunity to select which speaker(s) they would like to host.

Register by December 20 with Lauren Malone:
lmalone@oregondental.org or 503-218-2010 x101

Can't attend in person?
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Position Available: Oregon Dentist for Tooth Taxi Mobile Dental Van

We have a unique opportunity for a caring and energetic dentist who enjoys working with children to join our highly successful mobile dental clinic program. The mobile clinic travels throughout the state of Oregon each week providing comprehensive dental care in order to improve oral health for Oregon school children (K-12). Based out of Portland, the "Tooth Taxi", a fully equipped, state-of-the art mobile dental van travels the rural areas of the state spending up to a week at a time at schools fulfilling the mission of the Dental Foundation of Oregon (DFO): "Improving Oral Health for Oregon's Children".

For more about the Tooth Taxi, visit the Dental Foundation of Oregon website: www.SmileOnOregon.org

The successful candidate will possess strong leadership and communication skills, has the ability to prioritize and treatment plan patient's needs and educate children on the importance of oral health.

Position requires an individual to build strong and sustainable relationships with sponsors and site partners and effectively communicate to multiple audiences the value of dentistry.

This position provides opportunities for experienced dentists or for new grads (GP and Pediatric) to experience many facets of dentistry as well as working with dental volunteers from the communities that the Tooth Taxi visits. This full-time traveling position is year-round and offers competitive salary and benefits.

Interested candidates, please email mary.daly@modahealth.com or call 503.329.8877.

WELCOME NEW ODA MEMBERS!

NICHOLAS R. BACKOWSKI, DMD

Gresham
Multnomah Dental Society

ANDREW M. BROADSWORD, DMD

Gresham
Multnomah Dental Society

DAVID M. BURRUS, DDS

Redmond
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Klamath County Dental Society

Volunteers NEEDED

The ODA councils and committees listed below currently have volunteer opportunities. **All ODA members are encouraged to participate in the leadership of this organization.**

Interested applicants should submit a letter of interest and a one-page resume to:

Mail: ODA Leadership Development Committee
Jim Smith, DMD, Chair,
Nominating Sub-Committee
PO Box 3710
Wilsonville, OR 97070

Email: leadership@oregondental.org

ODA Councils and Committees:

- Annual Meeting Council
- Membership Council
- New Dentist Committee
- Public and Professional Education Council
- Publications Advisory Committee

For more information, please call 503.218.2010.

Lane County Dental Society presents

Leslie Canham, CDA, RDA

OSHA and Infection Control

"You can Think your Practice is Safe or You can Know it"

Friday, January 24, 2014 8:00 a.m. – 12:30 p.m. – breakfast included

Valley River Inn, 1000 Valley River Way, Eugene - 4 CE credits

Non-ADA Dentists \$200 - Dental Staff \$60 - Students/Nonprofit Staff \$30

Free Tuition for Lane County Dental Society Members/Associate Members

Recommended for all oral health care providers,

including general dentists, specialists, hygienists and staff members.

Conflict of Interest Disclosure: None

Understand what training OSHA expects dentists to provide to employees. This course will cover: required bloodborne pathogen training, changes to the Hazard Communication Standard, Infection Control, and how to make sure your practice is SAFE and OSHA compliant. Learn how to update existing infection control protocols to meet the current CDC Guidelines. Examples of infection control "DON'Ts", "hands on" demonstrations, and step by step checklists provide you with tools to tune-up and confirm that your practice is safe for patients and dental team. Today, every dental practice must strive for infection control excellence.

LEARNING OBJECTIVES:

- Explain how to manage an exposure incident
- Understand how to update and maintain the office OSHA manual
- Understand the new Hazard Communication Standard label and SDS requirements
- Develop and implement an office infection control program using current CDC Guidelines

Register at: lanedentalsociety.org/programs



ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. Lane County Dental Society designates this activity for 6.5 continuing education credits. Concerns or complaints about a CE provider may be directed to the provider or to ADA CERP at www.ada.org/cerp.



Lane County Dental Society is designated as an Approved PACE Program Provider by the Academy of General Dentistry. The formal continuing education programs of this program provider are accepted by AGD for Fellowship, Mastership and membership maintenance credit. Approval does not imply acceptance by a state or provincial board of dentistry or AGD endorsement. The current term of AGD approval extends from 1/15/2010 to 1/14/2014.

For more information: (541) 686-1175 or info@lanedentalsociety.org

Center for Professional Success debuts

By Kelly Soderlund, ADA News staff

The ADA Center for Professional Success is live on the web and available to help ADA members navigate the challenges of being a dentist.

The Center, located at <http://Success.ADA.org>, is a one-stop shop for dentists who are seeking resources that will help them succeed as dental practitioners and small business

owners. This new ADA member benefit will help dentists find solutions to professional and personal challenges. The website includes everything from tips for choosing a career path to balancing personal and professional lives to planning for retirement.

"Dentists spend their days making clinical decisions to provide the best treatment for their patients," said ADA President Robert A. Faiella. "While caring for patients is dentists' primary goal, they are also juggling business and personal tasks every day, while also trying to find the right work/life balance.

The ADA Center for Professional Success allows members to focus on being a dentist, while we help provide resources to streamline the rest."

Dr. Faiella: The Center "allows members to focus on being a dentist, while we help provide resources to streamline the rest."

Among some of the Center's features are:

- Financial calculators to factor loan payments and overhead expenditures;
- In-person and online practice management education;
- Ergonomic tips;

- Patient communication strategies;
- Dental benefit resources;
- Information on buying and selling a practice;
- Marketing materials to recruit and retain patients;
- Staffing tips.

"The theme of the Center for Professional Success is to practice, learn and live," said Dr. Joseph Unger, chair of the Center for Professional Success Advisory Committee.

"We should always keep in mind that it's important to balance those three things if we want to be successful as dentists and just as ourselves."

ADA members can read a variety of articles on topics that may pertain to their practice or their home life. Current features focus on rules for the Health Insurance Portability and Accountability Act; 80 ways to make your practice green; and information on an executive practice management program at the University of Florida, among others. New content is being added regularly, and ADA members can expect to find something new each time they visit.

Members can also take a virtual tour of the website and use the Ask the ADA feature to ask practice management and wellness questions to ADA staff.

"This is something I wish was around when I started practicing dentistry," said Dr. Jonathan Knapp, chair of the Council on Dental Practice. "As dentists, we've got the clinical side covered. But you often find yourself with questions about the day-to-day operations of running a business. I'm confident that the Center for Professional Success will address members' needs when it comes to succeeding in their chosen practice settings."

The Center for Professional Success is sustained with the help of several corporate sponsors. Founding sponsors include ADA Business Resources and ADA Members Insurance Plans, and Gold Sponsors are AXA Equitable-ADA Members Retirement Programs and Procter & Gamble. ●



Soderlund K. Center for professional success debuts. Posted September 16, 2013 online at www.ada.org/news/9042.aspx.

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Did you know?

Spore testing must be performed **WEEKLY!**

Since 2004, the Oregon Board of Dentistry has required that dental office sterilizers be monitored weekly.

In addition, the Board now requires retention of the records of these weekly tests for the current year, plus the two previous years.

This rule has been in place since 2004, but the Board of Dentistry has only recently begun asking for spore testing records when they receive a complaint. Although the ODA is currently working with the Board to reach a resolution in this matter, currently fees are very steep for not following weekly spore testing requirements. Please check with your office staff to **ensure that you are testing weekly and keeping records of these tests** to prevent a violation and fine from the Board.

Weekly monitoring, which is also the CDC recommended standard, is based on quality assurance and standard operating procedures, as it was determined

that monthly testing places a higher risk if a sterilizer is out of proper operation. Sterilization procedures should be monitored through a combination of mechanical, chemical, and biological techniques designed to evaluate the sterilizing conditions and the procedure's effectiveness. If the spore count fails to meet monitoring requirements, dental offices should follow up with the CDC recommended procedures. ●

OAR 818-012-0040 Infection Control Guidelines state that (4) Heat sterilizing devices shall be tested for proper function on a weekly basis by means of biological monitoring system that indicates micro-organisms kill.

DBIC RISK MANAGEMENT COURSES

DEC 6 9:00 AM 7 CE Hours

LOCATION: Oregon Convention Center, Portland

INFO: Multnomah Dental Society, Lora Mattson, 503.513.5010

DEC 13 9:00 AM LOCATION: Bend

INFO: www.centraloregondentalsociety.org

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Access to Care

By Melody Finnemore



For a list of low-cost clinics in Oregon, please visit www.oregondental.org and click on 'Low Cost Dental Clinics.'

Adult care takes front and center stage for ODA committee intent on improving services

THE ODA'S ACCESS TO CARE COMMITTEE, a subcommittee of the Public and Professional Education Council, leads the Association's efforts to educate the public and dentists about preventing dental disease among uninsured, low-income, and underserved populations throughout the state. The committee has focused on improving access to care among Oregon's children, with promising results.

As the recession worsened and a growing number of adult Oregonians went without dental care, the committee turned its attention to improving access for that population. Committee members recently shared with *Membership Matters* their thoughts on access to care for Oregon Health Plan enrollees, cancer patients, and adult residents in assisted living centers, foster care homes, and other institutions.

Health care reform highlights integration of benefits

Jan Peterson, DMD, PhD, retired Corvallis practitioner, and past ODA president, chair of the ODA's Access to Care Committee, said much of the committee's work involves protecting oral health coverage under the Oregon Health Plan.

"Adult dental health benefits are pretty consistently on the chopping block when the Legislature meets," she said.

The problem is particularly pronounced in rural Oregon, where a limited number of dental professionals struggle to meet the needs of a growing number of uninsured and, often, unemployed adults.

Mark Jensen, DMD, Bend general dentist, and past ODA president, said the problem is exacerbated by Oregon Health Plan reimbursement, which has remained stagnant over the last decade. As the Affordable Care Act takes effect, anywhere from 200,000-240,000 more Oregonians will become eligible for dental benefits, and the implementation of coordinated care organizations (CCOs) in 2014 will add even more people to the list of those needing care.

"There will be a couple of big onslaughts of patients with coverage but not enough dentists to handle it, so I'm not sure what will happen," Dr. Jensen said. "Dentists are very generous, and we do a lot. For us to be tasked with how to solve the access problem is just not realistic, because it's a complex issue that involves reimbursement, personal responsibility, and preventive measures, among other things."

Dentists throughout rural and central Oregon provide free and reduced-fee services through a variety of community outreach efforts, including Medical Teams International and Project Connect. Oral surgeons have partnered with St. Charles Medical Center to handle treatment in dental offices rather than the emergency room. And Central Oregon Community College's dental assisting school doubles as a low-income clinic.

"It's always a tough situation. Philanthropically, I think the dentists of Central Oregon have done a good job, but it never seems to be enough," Dr. Jensen said.

The silver lining in the access to care issue is that the dental community is making gains on preventive care with kids, he noted. "The kids we're making headway on, which will hopefully pay dividends later."

Eli Schwarz, DDS, MPH, PhD, professor and chair of the Department of Community Dentistry at the Oregon Health & Science University School of



Jan Peterson, DMD



Mark Jensen, DMD



Eli Schwarz, DDS, MPH, PhD

continues ➔



Gary Allen, DMD

Dentistry, said the Oregon Health Coalition has grant funding to develop oral health and capacity under the Oregon Health Plan, which gives the state a leg up on the access to care issue.

“What I hear from other states is that dental care is being excluded from public health, so we are a little bit better off than some other states in a rudimentary way,” said Dr. Schwarz, an Access to Care Committee member.

Gary Allen, DMD, a Portland oral pathologist, another Access to Care Committee member, said he is optimistic about the implementation of CCOs as part of federal health care reform.

“I’m impressed at the level of interest the CCOs have in integrating dental health and in embracing dental health as a key component of overall health,” Dr. Allen said. “We have performance measures in place, and now we will develop outcomes measures.”

Cancer patients benefit from better coordination of care

Committee member **Wallace McKenzie, DMD**, has worked with head and neck cancer patients for nearly three years, reviewing dental products and writing dental protocols for patients, nurses, and dentists.

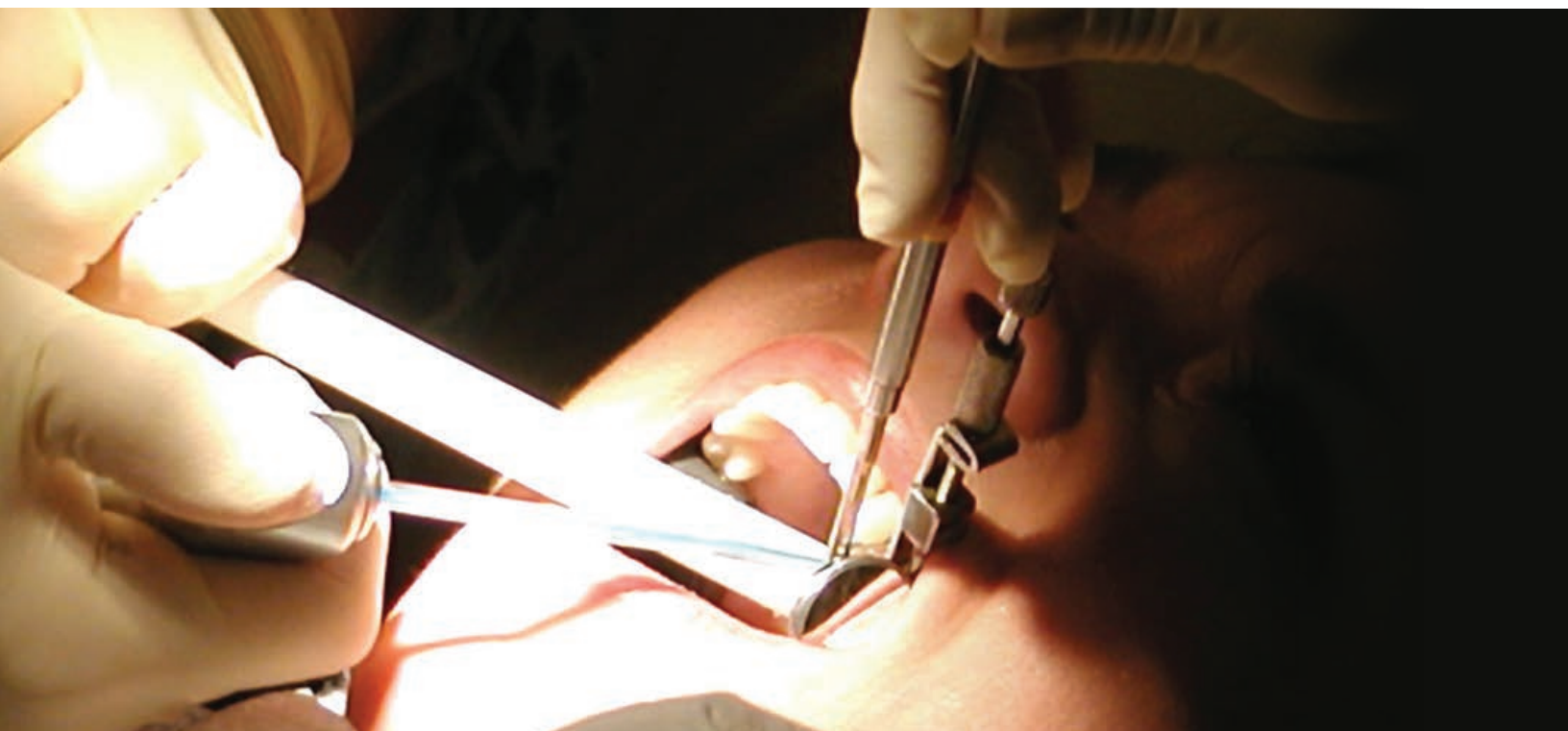


Wallace McKenzie, DMD

Dr. McKenzie noted that, once diagnosed, cancer patients traditionally have left the dental arena for the oncology arena. Their oral reactions to chemo and possible oral radiation were too often just seen as a consequence of treatment and were given only slight attention. With the advent of HPV-caused head and neck cancers, patients were not only living longer after treatment but many of them had been cured, making dental issues more obvious as the patients dealt with xerostomia (dry mouth), acute caries, oral infections, and mouth sores.

Patients with head and neck cancer experience some of the most severe xerostomia, but it also can be devastating in the treatment of most recurrent cancers. To a lesser degree, reactions from blood pressure and other medications cause similar problems. Dentists who help the chronically ill, nursing care patients, and the elderly often see the exaggerated dental disease caused by dry mouth and poor hygiene, Dr. McKenzie said.

“Five years ago my wife was diagnosed with triple negative breast cancer. Her chemo treatment included several very mucotoxic drugs which caused a severe mucositis. The nurse oncologists knew little treatment other than miracle mouthwash. When we complained, we



ended up being drafted to teach the nurses about other products that might work," he said.

"From there we were asked to give a talk to head and neck cancer patients. These patients really exposed the lack of coordinated treatment between the dental and medical professions," Dr. McKenzie added. "In working with the oncologists, the cancer patients, and the nurses, a better understanding was developed which led to an earlier incorporation of dental work and dental prevention and a better rationale for addressing the needs of these patients."

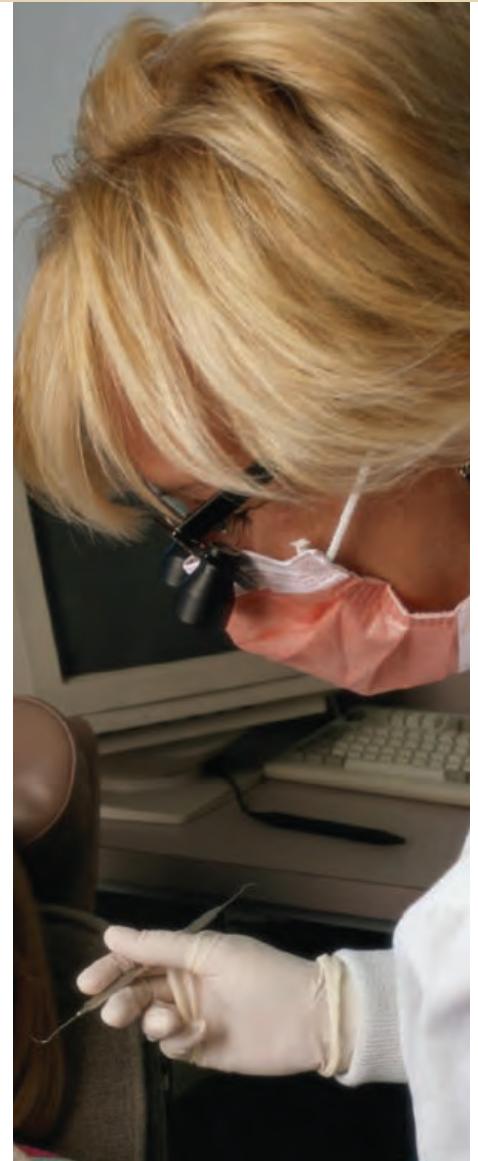
The Access to Care Committee took the protocols Dr. McKenzie developed and posted them on the ODA website (www.oregondental.org > public resources > managing your oral health), so that all interested parties can access them.

"Now we are getting the oncologists referring patients to dentists for care and treatment before chemo and radiation begin. They also now get the patient back to the dentist quickly so the preventive protocols can be monitored and potential problems detected earlier. The better patient results improve treatment and minimize future problems," he said.

Change in administrative rules means better dental care for institutionalized adults

Dr. Peterson said the Access to Care Committee was pleased to see oral health care added to the list of "activities of daily life," which mandates the daily care provided to adults living in assisted living centers, foster care homes, and other institutions. The committee is engaged in an outreach program to train the caretakers who work at these institutions how to provide adequate oral health care to their charges.

Dr. Allen has been advocating for improved oral health care for institutionalized adults for many years and through several organizations. He applauds similar efforts throughout the state, including initiatives in Linn-Benton County and others that are encouraging community groups and dentists to partner in providing volunteer services for this vulnerable population. ●



Members of the Access to Care Committee are:

Chair Jan Peterson, DMD, retired Corvallis practitioner;

Gary Allen, DMD, Portland oral and maxillofacial pathology specialist;

Michael Biermann, DMD, Portland pediatric dentist;

Wallace McKenzie, DMD,

head of the Global Health Ministries dental committee;

**Eli Schwarz, DDS, professor and chair of the Department of
Community Dentistry at the OHSU School of Dentistry; and**

Michelle Stafford, DDS, Portland pediatric dentist.

The committee welcomes new members!



The CDC estimates that one in four elderly Americans who are 65 or older have none of their original teeth. Nearly one-third of seniors have untreated tooth decay.

Senior Smile Program addresses access to care issue for vulnerable elderly population

By Melody Finnemore

OF THE VULNERABLE POPULATIONS that are impacted by a lack of access to dental care, elderly people face a particularly challenging set of circumstances. These challenges, according to the U.S. Department of Health & Human Services Administration on Aging, range from dry mouth often caused by medications, root decay and gum disease, a reduced ability to taste things, and oral cancer.

Other problems such as tooth loss can force the jawbone to be uneven, and dentures can cause inflammation of the gums. Badly fitted bridges or dentures can make it more difficult to chew, leading to poor nutrition for many seniors. Tooth decay and loose or missing teeth are among other problems many elderly people face.

The national Centers for Disease Control and Prevention estimates that one in four elderly Americans who are 65 or older have none of their original teeth. Nearly one-third of seniors have untreated tooth decay, and many with severe gum disease face increased risk of chronic diseases like diabetes, heart disease, stroke, and respiratory disease, the CDC states.



The Administration on Aging, which has published several resources related to the issue of access to care for elderly Americans (www.aoa.gov/AoARoot/AoA_Programs/HPW/Oral_Health/), notes that seniors face a gamut of barriers to accessing affordable dental care. These include paying for the rising cost of oral health care while living on fixed incomes; limited dental insurance for retirees, which is not included in Medicare; transportation and other mobility limitations; and a lack of translation services for older adults who are immigrants.

"Accessing dental care can be especially difficult for nursing home residents. Paying for dental care using Incurred Medical Expenses (IME) helps long-term care residents get dental treatment and allows dental practices to get reimbursed for services. IME is routinely used for eyeglasses and hearing aids, but many people are not aware that it is also available for dental treatment," the Administration on Aging states on its website, noting members of the American Dental Association's National Elder Care Advisory Committee have created a webinar to educate dentists on using IME billing.

Oregon stepped up to the challenge of improving access to care for the elderly by initiating the Senior Smile program. Sponsored by the Multnomah Dental Society since 1979, the community service program provides low-income, uninsured senior citizens living in Multnomah County with affordable dental care.

Through the Senior Smile Dental Services program, participating Multnomah Dental Society members agree to offer treatment to qualified patients at a 50 percent reduction in normal rates, with the exception of lab fees, which are charged in full. Once an individual has qualified for the program and been made a

member, the patient is assigned to a participating dentist. Efforts are made to match the patient with a dentist located near their residence.

The patient receives an eligibility card, along with the name, address, and phone number of the dentist they are assigned to. It is the patient's responsibility to contact the dental office to make an appointment, and the eligibility card must be presented at each office visit. All follow-up visits for treatment and annual check-ups are scheduled through the dental office, according to the dental society.

Since the Multnomah Dental Society began hosting the program, members have provided nearly \$1 million in routine and specialty treatment to more than 4,000 residents. The Washington County Dental Society is among the ODA components that also provide services through the Senior Smile Program,

with a one-time \$25 application fee for seniors 65 and older who make \$1,100 a month or less.

Laura Matin, DDS, who has a general practice in Portland, has seen multiple Senior Smile patients since she began volunteering her services through the program more than a decade ago. She sees an average of two Senior Smile patients each year.

"I got involved in the program because there is a great need for seniors on limited incomes to receive dental care. Seniors face a variety of issues, including broken teeth, the need for dentures, as well as routine dental cleanings, and Medicare covers none of this care. I enjoy giving back to the community," Dr. Matin said. ●

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

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President's Address



Judd R. Larson, DDS

Good afternoon delegates, Mr. Speaker, trustees, fellow officers, and guests. I'm very proud to welcome you to the 120th session of the Oregon Dental Association House of Delegates. It is amazing to me that the Oregon Dental Association has been a vital leader in our profession for well over a century. What I take away from that longevity is that we can't do it all individually, but as an organized cohesive group we have tremendous influence and can create great success throughout our profession. The winds of change are sweeping throughout our profession, and we must adapt and be chameleon-like in our efforts to stay relevant for the next 120 years.

Dr. Larson's speech is reprinted as it was presented to the ODA House of Delegates, in Sunriver, on September 7, 2013.

BEFORE I GO TOO FAR, I would like to officially introduce myself. I grew up, the son of a veterinarian and a housewife, in a small Nebraska town. Being the son of a veterinarian, I had all kinds of fun chores. You haven't lived until you have mucked out and sprayed down a chute after a long day of working cattle. My dad still wonders why I didn't become a vet—go figure? The town I grew up in had 750 people at that time (I think it is up to 880 people now). In a town that size, you learn two things quickly: you can't get away with too much because almost everyone knows everybody, and if you ever do get in trouble or have a problem, your neighbors and community rally around you to help out. So you may ask why a small town guy from Nebraska wants to be president of the Oregon Dental Association? I think it really goes back to some of those Midwestern roots, and that sense of community that was instilled in me at a young age. I look at our association as a community of my colleagues; we must all face the challenges in front

of us together to stay at the forefront of our profession.

In my spare time—when I am not working in someone's mouth—I enjoy traveling, playing several different sports, going to sporting events, and competing in triathlons. I have been to five continents, and my goal is to get to all seven before I leave this earth. I still have Africa and Antarctica to go. Of course I am a Husker fan. I think that old adage holds true for me: you can take the boy out of Nebraska, but you can't take the Husker out of the boy.

Looking back

My comments today are going to be focused around the word *change*. As Buddha once said, "Everything changes, nothing remains without change." I truly believe we are at a crossroads in dentistry right now. Change is, and will always be, a constant; our ability to adapt to it is going to determine the success of our organization and profession going forward.

The life saying "what got you here won't get you there" has been a pretty good truism for a long time, and, under the current realities, it has become a bottom line fact for where dentists stand with what they face in the next 25 years of practice. We've just existed in a 70-year period where growth in the profession was *always* happening. Along the way, we bought into a lot of variations of the word *always*. It was *always* like this. This is *always* how we do things. Here's what you *always* do. As a profession we drank the *always* kool-aid of what we thought was predictable when it



Nebraska Football Stadium

came to what economically was expected to happen for the “average” dentist in practice without a lot of effort. Those *always* trends produced a great 70-year period of development, and contributed to a profession-wide general consensus that these were trends that would always be with us and continue to get us there “forever.” But as we heard from Dr. Nasseh this morning, that is not the current reality. In other words what got us here is not going to get us there!

The future

One of those big changes is the Affordable Care Act (ACA). A primary goal of the ACA is to increase health insurance coverage by expanding Medicaid and establishing health benefit exchanges, which are intended to facilitate the purchase of private sector coverage by small businesses and individuals who lack coverage. The ACA provides for expanding Medicaid to “newly eligible” adults with incomes up to 133 percent of the federal poverty level: \$15,282 for an individual, and \$31,322 for a family of four. Health benefit exchanges—or health insurance marketplaces as they are described by regulators—will be available in each state, the District of Columbia, and the territories, to help individuals and small businesses (up to 100 employees) buy private sector coverage. As of July, 16 states and the District of Columbia planned to operate their own state-based exchanges; seven will partner with the federal government; and 27 will rely on the federal government to run federally facilitated exchanges.

As you may know, Oregon is one of the states that will operate its own state-based exchange for individuals and small businesses on the consumer-focused website, CoverOregon.org. This exchange must begin enrolling beneficiaries by October 1 and be fully operational by January 1, 2014. We have 16 CCOs (Coordinated Care Organizations) that will be coordinating the care for the 200,000 new people who will receive benefits through this system. The million

dollar question is: how long before certain big private groups like OEEB and PEBB are entered into this insurance exchange, which is on the Governor’s current agenda? If that occurs, it will be the true challenge to private practice dentistry in Oregon.

We are also facing changes at the Board of Dentistry—from silver nitrate possible uses, to additional monitoring requirements for sedation permit holders, to hygienists and dental assistants placing posterior composites. The rules and regulations regarding our profession continue to evolve. As you heard from Mr. Braatz yesterday, infection control and monitoring continues to be an issue as well. We must continue to work as a profession to meet these requirements and abide by the rules that govern us.

The final change I wanted to talk about is our continual membership decline over the last several years. The ODA currently has a 64.4% market share in Oregon. If this trend continues, our 120 year old association could become irrelevant. Can you imagine that scenario? I recently read an article from the American College of Dentists, by Dr. David Chambers, entitled “Free Riding Dentists.” In this article he discussed non-members and the concept of free riding and how it is a moral misdemeanor. The basic idea is using more than one’s share of the common good without replenishing the stock. He compared it to benefiting from services such as volunteer fire



Escape From Alcatraz Triathlon



Dr. Larson's Presidential Address

continues ➞

ODA HOUSE OF DELEGATES



ADA Meeting – San Francisco 2012

fighters and neighborhood clean-up programs without supporting these activities, which he called “free-riding.” His final statement was that letting the ADA, or—in our case—the ODA, lobby for one’s interests without being a member is the same thing! I found that analogy to really hit home. In these sweeping times of change, I would argue that your association membership is—like the old MasterCard commercial—PRICELESS! The value and benefits derived from those dues dollars paid are immeasurable.

My goals

I would now like to talk about my outlook for this next year. I really want to focus on relationship building and rekindling with our dental partner groups. I am very excited about our dental summit meeting, after the close of the House today.

We will have representatives from four of the main dental entities

in the state—ODS from dental insurance, members from the Board of Dentistry, the dean and staff from the School of Dentistry, and also officers and members from the ODA.

We will be talking about the future of dentistry, and the challenges we face in each of our areas of dentistry. I know we won’t agree on everything, but at least we will be having those important conversations, and know what each party is up against. Then we can start to work on collaborative proactive solutions to the challenges ahead.

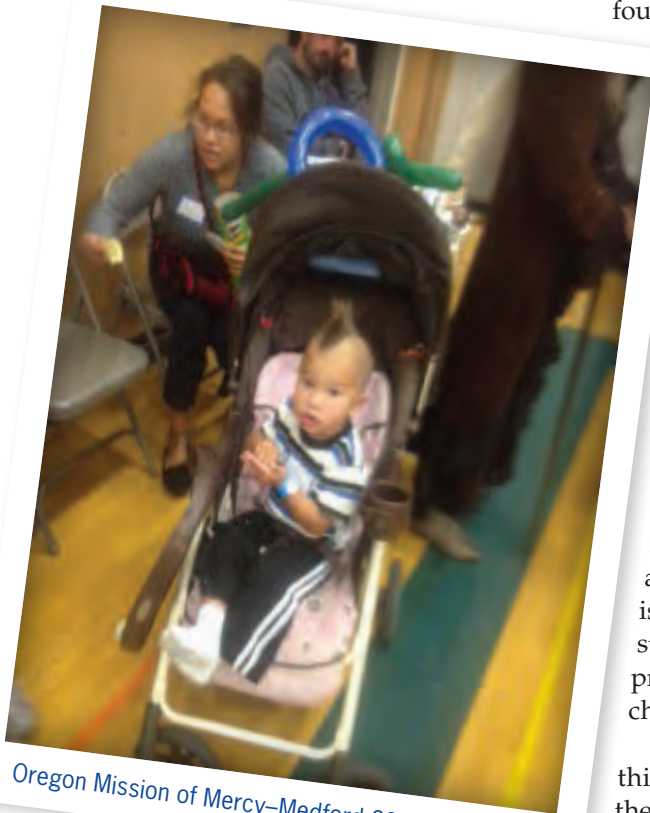
I plan to do this same thing with the leadership of the Oregon Dental Hygienists’ Association as well. This was

the first year in several years that they were at the ODC as a partner group. I know we don’t always see eye to eye on legislative and Board of Dentistry issues, but it is important to have that constant communication. I hope that we can work together and communicate on issues in which we have some common interest together.

I will also be the first ODA president to have two OrMOMs occur during my year. These clinics are important and shine a real positive spotlight on dentistry as a whole. They show the true giving nature of dentists, and how much we each enjoy giving back to the communities we live in and other communities throughout the state of Oregon. The ODA also understands that charitable work is not the solution to this issue involving a preventable disease. We understand that for every one dollar spent on prevention, it saves eight dollars in treatment costs. I feel that we are coming at this problem of dental disease from the wrong direction. We must spend the majority of our dollars and time on education and prevention. This is not a situation that we can drill our way out of!

I had privilege of being one of the co-chairs, along with **Dr. Jim Catt**, at our last MOM in Medford. In our small community, it made a tremendous impact. I wanted to share with you part of an interview I did with one of the patients who received treatment at the MOM event last year. [video shown]

I have several people to thank today because as you all know none of us can do this alone, and, as **Dr. Jill Price** mentioned yesterday, we definitely don’t do it for the pay. For me it is really about the relationships with my other colleagues in Oregon, in the 11th District, and across the nation. That is really what makes this type of leadership role enjoyable. They become a second family, and those



Oregon Mission of Mercy–Medford 2012

relationships continue beyond your years in service together. I wanted to share with you a few pictures that I have taken throughout this last couple years involving our ADA endeavors.

My staff were not able to come today, but if it wasn't for them and their leadership and efficiency, I would not be able to volunteer in this capacity. They have to adjust to me not being in the office as much, and the hectic schedule that this role creates. I appreciate their sacrifices and their continued support.

I also wanted to thank our fabulous staff of the ODA: Cindy Fletcher (Associate Executive Director), Lauren Malone (Managing Director, Meetings and Membership), Christina Swartz (Managing Director, Public and Professional Education), Brian Fredricks (Coordinator, Finance and Building Operations), Beryl Fletcher (Director, Professional affairs), Margaret Torgeson (Director, Membership and Consumer Affairs), Anna Juan (Coordinator, Meetings and Membership), and Jennifer Webster (Coordinator, Member Records). In case you didn't know, we haven't had an executive director for a few months now, and the association has not skipped a beat. That is a true testament to the wonderful staff we have in place and their leadership capabilities. They have banded together and done a great job. I appreciate their ongoing support and making all of our lives easier.

John F. Kennedy once said, "Change is the law of life and those who look only to the past or present are certain to miss the future." I look forward to working with our new Board of Trustees to adapt to the challenges that occur this next year and exploring the opportunities they create. We are all in this together, and I am excited about the privilege of moving our association forward during this next year.

Thank you. ●

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ADA Success Smart Start

Questions and comments during the program made it clear that a number of first year dental students were interested in connecting with mentor dentists soon. In response to that interest, the ODA has initiated a closed LinkedIn Group, where interested students can pose questions and comments to ODA mentor dentists.



ODA members who are interested in participating in the group should contact Margaret Torgeson at the ODA: 800.452.5628, ext 108.

Another opportunity to converse with dental students in a collegial setting is the **ODA Winter Mentor Dinner**, which is tentatively scheduled for **January 30, 2014**. Please contact Margaret Torgeson if you want more information on the ODA Mentor Program.

EVERY YEAR IN THE FALL, the OHSU School of Dentistry schedules the ADA Success Smart Start for the incoming freshman. This year's program was presented on Friday, September 6, 2013, in a two hour afternoon session. Phyllis Beemsterboer, MS, EdD, associate dean for academic affairs, who scheduled the event, briefly welcomed the presenters, and explained how the program is an example of how organized dentistry has resources to support dental students, and to help them as they make the transition into active dental practice, and in their future in the dental profession.

Margaret Torgeson, ODA Director of Membership, explained how she works with

the ODA New Dentist Committee, a group of dentists in practice 10 years or less, to offer several events each year for dental students. The ADA success programs (of which Smart Start is first in a series of four programs, one for each year of dental school) exists to provide the next generation of dentists an introduction to valuable ADA and ODA resources. Explaining how their speaker, Dr. Alexis Tessler, was recently selected as a new presenter the ADA Office of Student Affairs, Margaret shared her biography: "Dr. Tessler's passion for dentistry started with a wonderful experience with her own pediatric dentist. Dr. Tessler earned her Doctorate of Dental Surgery from the University of the

"What do you suggest we keep the same?" Samples survey comments:

Speaker

- ✓ She was very knowledgeable and passionate
- ✓ Fantastic: succinct, well-rounded, informative.
- ✓ Speaker was great.
- ✓ Speaker was very informative, honest, and realistic.

Content:

- ✓ Great content. The content was very pertinent.
- ✓ I thought it was very informative.
- ✓ It was all useful information to be aware of.
- ✓ The connect of the presentations.
- ✓ The information presented was great.
- ✓ The information was pertinent and helpful.
- ✓ Information was applicable and interesting.

Loan repayment

- ✓ The different loan pay-back opportunities.
- ✓ I really enjoyed the real-life information that was presented, like the repayment programs.
- ✓ Excellent source of resources for loan repayment.
- ✓ Love the parts about loans repayment plans, etc. Loan repayment options are awesome.

Ethical scenarios

- ✓ I also liked the ethical scenarios. I think these are all things to know as a beginning student.
- ✓ Speaker and ethical scenarios.

Group discussions

- ✓ Very personalized group discussions. She was great at answering all questions. It was definitely nice to see someone who just got out of school be successful.



Pacific in 2007, and then earned a Master of Science in Orthodontics from the University of Michigan in 2010. Now practicing in Austin, Dr. Tessler is active in continuing her education through regular attendance at local and national professional association meetings. Dr. Tessler loves her profession, which gives her the opportunities to help improve the health and happiness of others."

Margaret also shared the ODA Core Purpose Statement with students, and explained how the "tripartite" of organized dentistry—the local dental society, state and national levels—offer events, programs (like the Oregon Dental Conference), resources, and collegial support, including the ODA Mentor Program. In addition, she explained how OHSU dental students are all member of the American Student Dental Association. Since the ODA student trustee, **Karley Bedford**, was out of town for the ODA House of Delegates, **Joe Kelly**, President of the SOD Class of 2014, took time to attend. Joe spoke about his involvement in ASDA, which includes working on fundraising, and using his interest in design for items for sale. He encouraged first year students to get involved in ASDA in any of several areas which might interest them.

continues 



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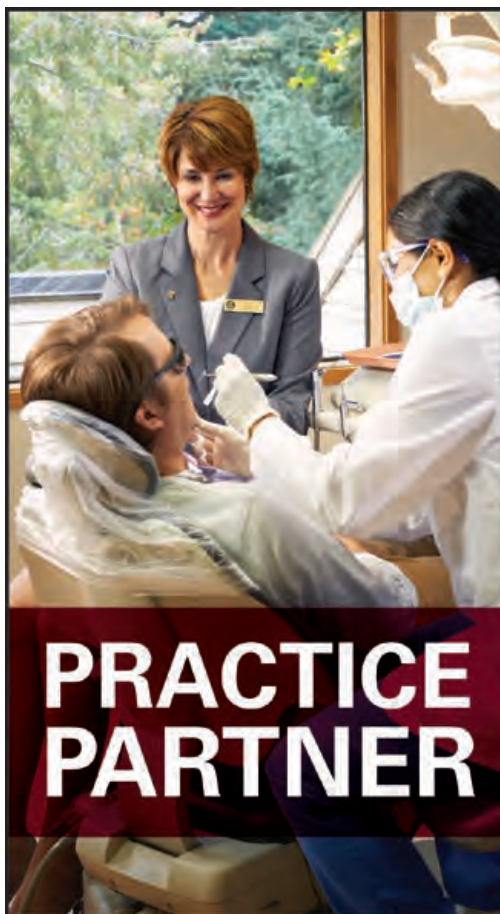
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Class of 2017 students responded very favorably to the Success Smart Start program content, which included information about: various career opportunities in dentistry; student loans, level of debt, and interest rates; budgeting and managing finance; stress management, and ethical and practice management topics.

Enthusiastic survey responses showed that, in selecting Dr. Tessler as a new speaker for Success programs, the ADA Office of Student Affairs achieved their goal of recruiting an ADA member with strong presentation skills, with passion for her chosen profession, and who is comfortable interacting with dental students and comfortable sharing her knowledge of practice management topics. In fact, a number of students stayed late on a pleasant summer Friday afternoon to continue the question and answer session with Dr. Tessler. ●



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S. OREGON COAST – Great start-up opportunity! Building and part time practice with 3 equipped ops.

PORTLAND AREA – Exceptional, high profit G/P collecting \$1M+! Excellent high traffic location with great off-street parking.

CENTRAL OREGON – Long time, high profit G/P collecting \$300K+. Excellent high traffic location.

S. OREGON COAST – Excellent family G/P collecting \$500K+. Very nice office with newer equipment, including Eagle Soft & Schick.

N. OR COAST – Excellent, well established, family G/P collecting \$1M+ with high profit.

WESTERN OREGON OMS – Excellent, high profit practice with tremendous growth potential. Great location close to a major hospital.

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JUNEAU, AK – G/P collecting around \$1 Million. Great location with plenty of parking and good access. Beautiful office boasts 5 ops, digital x-rays, pano, and plenty of space. Seller is willing to work back as needed!

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Dr. John Svirsky to present four oral pathology courses at the 2014 Oregon Dental Conference

The Oregon Dental Conference is excited to welcome back an informative and entertaining lecturer, John Svirsky, DDS, MED. You won't want to miss Dr. Svirsky's courses. *Mark your calendar and plan to attend!*



John Svirsky, DDS, MED is a board certified oral and maxillofacial pathologist at Virginia Commonwealth University (VCU) in Richmond, Virginia. He received his dental degree in 1973 from VCU and went on to complete a general practice residency at Long Island Jewish Medical Center/Queens Hospital Center, as well as an oral pathology residency at the Catholic Medical Center. He is currently a professor of oral and maxillofacial pathology and maintains a private practice in oral medicine and oral pathology. Dr. Svirsky has developed a broad background in research, published numerous articles in the dental literature, and earned a master's degree in adult education.

THURSDAY, APRIL 3

Oral Pathology with a Twist and a Number of Crusts 1:30–4:30 PM

This course will provide a review of oral dermatology in its entire splendor. From pimples to papules to pustules to tumors and much more will be visually encountered in this adventure of what grows on the skin. The course would not be complete without a few tattoos. Come enjoy this interactive, entertaining and informative course.

FRIDAY, APRIL 4

Come In and Catch it: The Review That Sticks 9 AM–12 PM

This is the perfect review course that covers the recognition, diagnosis and treatment of the 30 soft tissue lesions that every dentist and hygienist should know and treat appropriately. A number of the entities only require recognition. The classic lesions that have been forgotten since school will be brought back to life and your diagnostic confidence will be re-energized. Dr. Svirsky makes oral pathology fun!

Breakfast at Tiffany's: The Jewels and Gems of Oral Pathology 2–5 PM

This course will present interactive case presentations and will cover some of the normal and abnormal radiographic findings. A review of common radiolucent and radiopaque lesions will be covered. There is something for everybody. Get ready to learn, laugh and make a difference in the diagnosis and treatment of oral diseases.

SATURDAY, APRIL 5

Cases Only A Mother Could Love 8–11 AM CAUTION: This course is PG 13

This entertaining and informative course will dramatize in black and white and "living color" some of the unusual cases Dr. Svirsky has encountered in his over thirty years as an "oral medicine man." Things are not always as they seem. This program includes:

- Differential Diagnosis
- Cases that grow big and ugly
- Cases that grow
- Unusual cases even by my standards

This course is interactive with the audience and those of you that have not heard him are in for a memorable oral pathology experience.

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Sonja Stark – Giving Thanks



Sonja Stark (right) with her mentor, Mary Daly



Kristan Koch Stark, from Artisan Dental Laboratory, helped her daughter, Sonja, choose the Tooth Taxi for her 8th grade project.



Sonja with **Dr. Andrea Beltzner**, aboard the Tooth Taxi

THE HOLY FAMILY MIDDLE SCHOOL in SE Portland has an annual tradition for their graduating students. Every 8th grader is challenged to engage in an independent learning project (ILP). The purpose of the ILP is to nurture lifelong learning: empowering students, strengthening communication skills and deepening intelligence areas of strength.

When it was Sonja Stark's chance to pick her ILP, she focused on helping underserved children. And like so many in the dental field, her connection to dentistry began at home with her family. Sonja's mom, Kristan Koch Stark, manages marketing and events for Artisan Dental Laboratory and her grandfather, Karl Koch, is a co-founder of Artisan Dental Laboratory.

Through her work at Artisan, Sonja's mom was introduced to the Tooth Taxi at the Oregon Dental Conference. Knowing her daughter had aspirations to enter the dental field, Kristan immediately connected Sonja with the Tooth Taxi, and from there a partnership was born.

Sonja selected the Tooth Taxi for her ILP project and connected with Tooth Taxi program manager, Mary Daly. Acting as Sonja's mentor, Mary helped her develop goals and objectives, as well as a timeline for the project. And then, Sonja went to work.

Sonja spent time on the Tooth Taxi meeting students, observing treatment, escorting students to class after treatment, and putting together oral hygiene kits. During that work, a revelation hit Sonja. She realized many kids do not have the basic tools available at home to develop good oral hygiene habits. As a young woman of action, once Sonja saw the need, she began to develop a solution.

She organized an oral hygiene kit collection drive. The purpose of the drive was

to give each student on the Tooth Taxi a hygiene kit that could be shared with all family members at home. That meant, that in addition to the toothbrush and toothpaste the Tooth Taxi gives its patients, Sonja's work ensured each student also got toothbrushes and toothpaste for their entire family, thereby allowing the good oral health habits they learned on the Tooth Taxi to be shared at home.

Rallying her family, friends, parishioners, and school classmates, Sonja was able to collect an impressive number of items for the kits. Her efforts and collection will benefit many people, and—most importantly—will be an important tool to share the value of good oral hygiene.

At the conclusion of her ILP, Sonja presented her project at school. Her biggest takeaway, she said, was she learned not to take things for granted. To articulate that message, in her presentation, Sonja shared a photo of herself along with a 7th grade student who had never been to the dentist before. A stark contrast as Sonja said: "I've been going to the dentist since I was a baby."

Sonja's mentor, Mary Daly, attended Sonja's presentation at Holy Family. "Sonja did a fantastic job with her presentation, her involvement with the Tooth Taxi really helped her to understand our mission and share that with others who were inspired by her findings. No one in the room had ever heard of the Tooth Taxi, they were very interested in the program and commended Sonja for a fresh topic."

Sonja was grateful for the experience on the Tooth Taxi and the staff was grateful to have her help on the van. Sonja has now turned into a Tooth Taxi ambassador. She shares her experience with others and continues to help the families that the Tooth Taxi serves. ●

Thank you Sonja!

The Dental Foundation of Oregon is the charitable arm of the Oregon Dental Association. For more information, visit www.SmileOnOregon.org.

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Happy Holidays and Best Wishes for the New Year.

—The DFO Board of Directors



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OHSU School of Dentistry Initiates SPEA Chapter



By Sydney Clevenger

WHEN FOURTH-YEAR DENTAL STUDENT Shannon Woods was an undergraduate at the University of Oregon, she proposed an ethics panel within her sorority to promote academic integrity. So, when the Bend, Ore., native joined OHSU School of Dentistry, it was only natural for her to extend her interest in ethics to dental school.

"I've been passionate about ethics and professionalism for a long time," said Shannon. "There are ethics initiatives for faculty on campus, but I thought there should also be a dental student-led organization to help provide resources for students and create a culture of academic integrity."

Shannon turned to Executive Vice Dean **Gary Chiodo, DMD, FACD**, and Associate Dean for Academic Affairs **Phyllis Beemsterboer, MS, EdD**, for advice. They provided funding and support for a formal application to SPEA, the Student Professional and Ethics Association in Dentistry. Region 8 of the American College of Dentists also provided guidance. SPEA began in 2007 at the University of Southern California; there are now dozens of chapters at dental schools across the United States.

"We want to keep dentistry a self-regulated profession," said Shannon. "I think of it as a rising river that lifts all ships. Ethics and professionalism keep us all accountable and strengthen the field of dentistry as a whole."

This first year of the OHSU SPEA has been one of membership and awareness. To date, Shannon has recruited six members and intends to start a "Lunch and Learn" series.

In November, during OHSU's Professionalism Week, third- and fourth-year dental students heard from Alumni

Association President **Jim Smith, DMD**, during their Monday morning huddle, and a few days later, dental students attended the fifth annual Robert G. Gootee/Moda Health Endowed Lecture in Leadership and Professionalism.

Said Shannon, "In a perfect world, there would be regular collaboration where students meet to discuss pressing issues. I think the biggest ethical quandary for our generation of dentists is the large debt most students face when graduating from dental school. How does one balance productivity to pay off debt with the possible overtreatment of dental patients?"

Dental school debt is also on the national radar, said Dr. Beemsterboer, and often presents access to care issues because many young dentists cannot afford to practice initially in rural or underserved areas where the oral health need is greatest.

Though Shannon recognizes her time with SPEA is short, she is lining up a replacement chapter president for when she graduates in June.

"It's been great here," said Shannon, who is eyeing an orthodontic residency. "The faculty have been very supportive. I love Oregon and hope to stay here to practice." ●



Fourth-year dental student Shannon Woods (right) talks with Max Williams, president and chief executive officer of the Oregon Community Foundation, who spoke to dental students on leadership and professionalism in 2013.

Photo by Dan Carter

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