

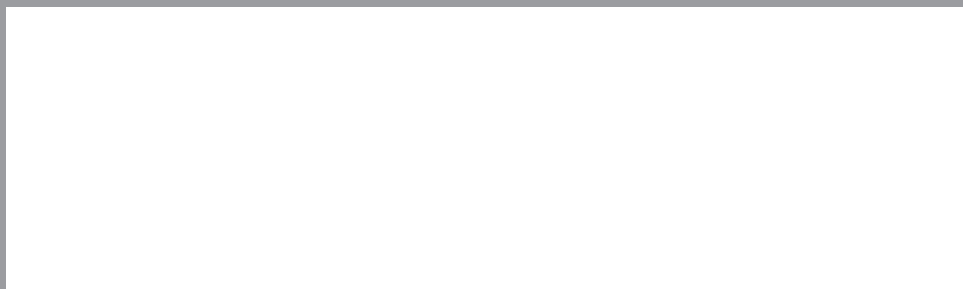
# ODA *JOURNAL*

VOLUME 98/ISSUE 4    DECEMBER 2006

## UPDATED CPR REQUIREMENTS

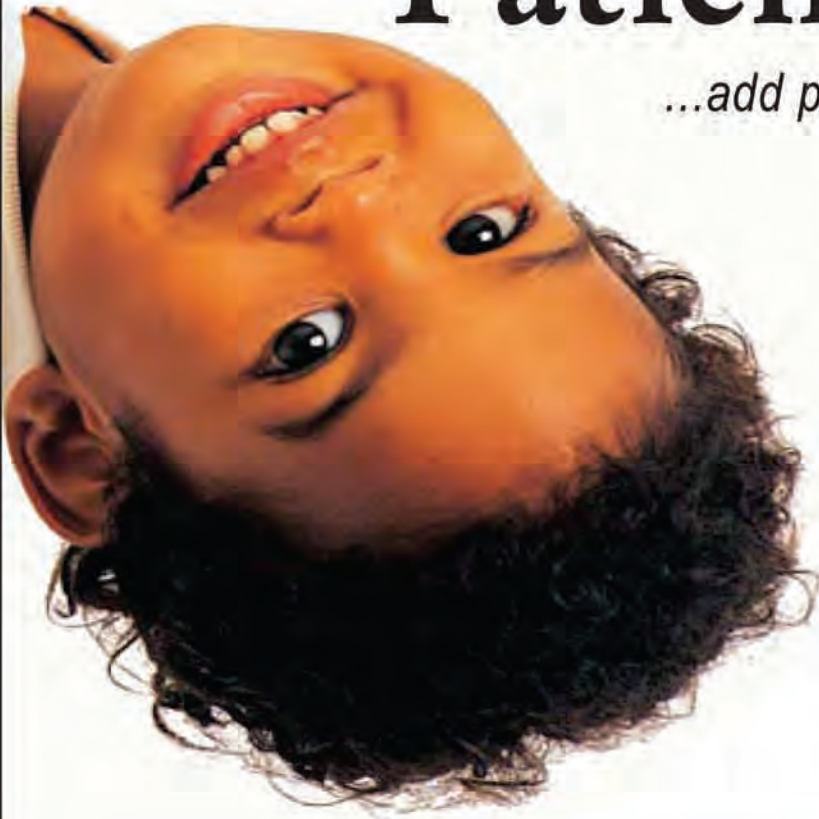


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Delta Dental of Oklahoma would like to invite you to participate in our **Patient Direct™** network. Because with *your* participation and *our* non-profit business model, we can join together to provide an affordable, insurance free program that offers virtually every Oklahoman vital access to quality dental care.

Questions about enrolling in our **Patient Direct™** network? Please contact Terri Green with our Professional Relations Department at 405-607-2142 (*within the OKC metro*) -or- 800-522-0188, ext 142 (*toll free*).

**Patient Direct™** from Delta Dental of Oklahoma. *It's a whole new way to look at dental!*

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# INSIDE

## SNAPSHOTS

The updated American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care (CPR guidelines) are outlined in the article found on page 24. The updated guidelines include dramatic changes to cardiopulmonary resuscitation and emphasis on chest compressions, providing specific recommendations for how healthcare providers should resuscitate victims of cardiovascular emergencies. The new CPR Guidelines also emphasize that Automated External Defibrillator (AED) programs should be implemented in public locations where there's a relatively high likelihood of witnessed cardiac arrest, including the dentist office. Do you have an AED in your practice? No? Read the article to find out why you should.



### GIVE KIDS A SMILE!

give kids a  
smile!  
National Children's  
Dental Access Day

Even if you participate in GKAS! every year and do not need supplies or t-shirts, the ODA still wants to know about it! The ODA will send a press release to the

hometown newspaper of every participating dentist and will list the names of all participating members in a future issue of the *ODA Journal*. Please take pictures of the activities that day and send them to us! We will include a photo from your event on a special GKAS! display at the 2007 Annual Meeting! Thank you for participating in Give Kids A Smile!

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## EXECUTIVE DIRECTOR'S MESSAGE

*Dana A. Davis*

Here I sit reflecting on the past four years of my life, most of which has been serving as your Executive Director. The move to Oklahoma was quite an adventure for me, having spent the majority of my professional life in Chicago. While I could write volumes about the cultural changes and what many of you have referred to as my "Okie-nization," I'm just "fixin'" to review the past ODA year.

2006 was definitely a year of change and improvement for the ODA. Under the leadership of Dr. Sid Nicholson and Dr. Pam Low, the ODA forged new ground and many new programs. The **Coalition of Rural Districts (CORD)** was created by the six rural component dental societies. Its purpose is to bring together the leadership of our rural components to collaborate on programs ranging from CE programs to membership participation. CORD wants to ensure that our rural members have a significant say in ODA policy and programs. They caucus prior to Board of Trustees and House of Delegate meetings.

The ODA House formed the new **Council on Technology and Electronic Communications (TEC)** as a result of our strategic planning process. TEC hit the ground running under the leadership of Dr. Raymond Cohlmlia (little Ray) by initiating two major projects to help our members move forward into the next decade. The ODA will be installing the equipment for **videoconferencing**. This will give our members who must drive 2 to 4 hours to attend council and board meetings the opportunity to attend the meetings from their homes or offices. The ODA now has the capacity to offer distance CE and to hold forums whereby our members in remote locations can interact with ODA leaders. We thank our component dental societies and the Oklahoma Dental Foundation for partnering with the ODA to make videoconferencing a reality. Another new initiative is the development of the **Digital Dental Office** program during our Annual Meeting. The Digital Dental Office was premiered during the 2006 Annual Meeting under the leadership of Dr. Ray Beddeo and will be greatly expanded for the 2007 Centennial Annual Meeting.

ODA and our partner Oklahoma Dental Foundation (ODF) have been extremely successful in addressing some of the access to dental care issues in collaboration with the Oklahoma Legislature. The ODF purchased two mobile dental units and launched the **Mobile Dental Care Program (MDCP)** under the leadership of Dr. Lisa Grimes. With the assistance of ODA members, the MDCP has screened 413 patients and treated 167 patients for a value of \$31,490 (based on Sooner Care rates) as of October 2006. Even as I write this article, the unit is spending a week in the panhandle. The ODA successfully lobbied for \$100,000 from the State for the MDCP. In addition, the ODA introduced a bill which was passed, funded, and signed into law to create the **Dental Loan Repayment Act**. This program will pay up to \$25,000 per year toward dental education loans for new dentists who practice in designated shortage areas and have 30% of their patients be Medicaid patients. The dentist is eligible to stay in the program for up to five

years. The program is funded for five slots per year, one of which can be given to a new dentist who becomes a full time faculty member at the OUCOD. When the program is fully functioning at a five-year period, the cost of the program will be \$700,000. The ODA will continue to lobby for the funding of both the MDCP and the Loan Repayment Program.

**DENPAC**, ODA's political action committee, has had great success in selecting the candidates to back financially. It has a 95% success rate and now ranks among the top ten non-corporate PACs in the state (see page 17). Our contract lobbyist, **Scott Adkins**, deserves a huge thank you for helping the ODA become a strong force at the Legislature. DENPAC has also purchased a software program entitled **CapWiz** that will enable our members to communicate directly with their state legislators in an easy and efficient manner. We will debut CapWiz during this upcoming legislative session.

ODA's Council on Dental Care, under the leadership of Dr. Lisa Grimes, **commissioned a study of the Oklahoma dentists workforce** conducted by the American Dental Association. The report has just been completed and will be reported to the members in 2007. The data projects into the future, allowing the ODA and the OUCOD to project new programs and member/student needs and numbers. The data will also be used in our lobbying efforts, the MDCP, and the Loan Repayment Program.

Our Council on Budget and Finance, under the leadership of Dr. Todd Bridges, has been studying various scenarios to forecast the financial needs of the ODA in the future. They have adopted formulas based on the principles of **dues stabilization**. With the program growth ODA has had, our members will only experience a \$10 dues increase for 2007. The Council has also started to fund a depreciation account for the ODA building. If every member pledged and paid \$999 (\$333 per year) the ODA building mortgage would be paid off, saving us over \$40,000 per year in interest payments. Please consider doing this and purchase a brick for the new building. Your donation is considered voluntary dues to become a member of the **ODA Centennial Section**.

The ODA for profit subsidiary, **ODASCO**, has had tremendous success over the years under the leadership of Dr. Jerome Miller. It has endorsed over 15 companies to provide special discounted services to ODA members and non dues revenue to the ODA. This year the ODASCO Board and the ODA officers worked with an accountant to determine how to maximize the revenue generated from ODA's endorsements. As a result, the ODA Board of Trustees voted to dissolve ODASCO, as there was no good non tax reason to continue its existence. Effective January 1, 2007, the ODA will assume the responsibilities of ODASCO through the newly created Board Committee on Endorsed Products and Services. ODA extends a very big **THANK YOU to Drs. Jerome Miller, James Torchia, Phil Abshere, Raymond Cohlmlia, Keith Keeter, Lee Beasley, Steve Glenn, and ODASCO's General Manager, Kay Mosley, for a job well done.**

**Dr. Gary Gardner**, Past ODA President, is donating his time and tremendous talent to sculpt a life size statue of the Father of Dentistry, **Pierre Fauchard**, to be placed at the ODA building to celebrate ODA's Centennial year. The statue will be dedicated during our 2007 Annual Meeting. The ODA is also producing 75 numbered, 16 inch bronze miniatures for purchase. All proceeds from the sale of the miniatures will go directly to the ODA building mortgage.

As you can see, the ODA has had a very busy year working on your behalf (I have only highlighted new programs). For me, it has been an exciting and stimulating journey. Thanks to all of you who donate your precious time and talent to the ODA. To quote a famous song, "**you are the wind beneath my wings.**" I wish you all a warm, happy, and loving holiday season with your friends and family.

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calendar of events



**DECEMBER**

**DEC 4-9** – ODF Mobile Dental Care Program - Panhandle

**DEC 7** – TCDS Holiday Casino Party - Renaissance Hotel

**DEC 8** – ODF Board Meeting - ODA Building

**DEC 18** – Retired Dentists' Lunch - ODA Building - 11:30 AM

**DEC 25** – ODA Offices Closed

**DEC 26** – ODA Offices Closed



**JANUARY**

**JAN 1** - ODA Offices Closed

**JAN 5** – Digital Dental Office Workgroup Meeting - ODA Building - 9:00 AM

**JAN 5** – Council on Technology and Electronic Communications  
ODA Building - 10:00 AM

**JAN 5** – Council on Dental Education and Public Information - ODA Building - 1:00 PM

**JAN 10** – Children's Oral Health Coalition - ODA Building - 10:00 AM

**JAN 12** – OCDS CE - Homebuilders - Dr. David Hornbrook

**JAN 15** – Retired Dentists' Lunch - ODA Building - 11:30 AM

**JAN 16** – ODA Senior Night - OU Faculty House - 6:00 PM

**JAN 17** – Politics & Pizza - OUCOD - 12:00 PM

**JAN 18-20** – Southwest Dental Conference - Dallas, Texas

**JAN 19** – ODF Mobile Dental Unit - Adair County Headstart

**JAN 19** – OCDS Installation of Officers - OKC Golf and Country Club

**JAN 25** – ODF Mobile Dental Unit - Ottawa County Health Department

**JAN 26** – ODF Mobile Dental Unit - Delaware County Health Department

**JAN 26** – TCDS CE - Dr. Michael Miller - Renaissance Hotel

**JAN 26** – Council on Nominations and Elections - ODA Building - 11:00 AM

**JAN 27** – ODF Mobile Dental Unit - Langston University/NE Coalition Health Forum

**JAN 27** – ODF Mobile Dental Unit - Craig County Health Department

**JAN 28-30** – ADA President-elect Conference - Chicago

**JAN 30** – TCDS Table Clinics/Dinner/Meeting - Renaissance Hotel

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MEMBER PUBLICATION  
AMERICAN ASSOCIATION  
OF DENTAL EDITORS

# HAPPY BIRTHDAY

## ODA and Oklahoma!

2007 is a big year for our fine Association and our fine state! The ODA is celebrating an impressive milestone in 2007 – 100 years of representing the interests of the members of the dental profession and the patients which we serve, 100 years of promoting the public health and health services in Oklahoma, and 100 years of quality service and work, all advancing the art and science of dentistry in Oklahoma.

Oklahoma celebrates its 100th anniversary of statehood on November 16, 2007, and all across the 46th state, communities and organizations are getting ready. Most are planning special commemorations or are enhancing traditional festivals and annual events.

The ODA Centennial Committee encourages you to help publicize the ODA by getting involved in the state's Centennial festivities planned in your hometown community! Visit the Oklahoma Centennial Commission's website at [www.oklahomacentennial.com](http://www.oklahomacentennial.com) to find out what's planned. Many hometowns have planned Centennial parades or other types of public events and the ODA Centennial Committee has purchased signs for your car/truck for your use during these events. To reserve these signs for use during your community's event, please contact Lynn Means via email at [lmeans@okda.org](mailto:lmeans@okda.org).



**ODA car or truck signs now available for use during your hometown's Centennial event.**

## Mark Your Calendar!

*ODA Centennial Gala / President's Dinner  
Saturday, April 28 - Cox Convention Center Ballroom*

*Join us for a historical night for the  
ODA as we celebrate 100 years!*

*The evening's attire is black-tie.  
Plan for an unforgettable evening!*

*6:00 - 6:30 p.m. ~ Reception*

*6:30 - 7:30 p.m. ~ Oklahoma Centennial Rodeo Opry Show*

*7:30 - 8:30 p.m. ~ Dinner*

*8:30 p.m. ~ Centennial Champagne Toast*

*8:30 - whenever*

*Dance the night away with the fabulous sounds of Souled Out!*

So come ready to be entertained and ready to toast to ODA's past, present and future!  
Tickets are \$65. Watch for your Annual Meeting Registration Form in February!



Our state was recently honored by the National Museum of Dentistry for being the state with the most new individual contributors in the past year. Accepting the honor on behalf of Oklahoma is National Museum of Dentistry Advisory Committee member, Dr. James Lowe, from the Advisory Committee Chair, Dr. Alan Singer, during the Annual Recognition Breakfast held in October.

# ODA MEMBER SERVICES

BEING A MEMBER OF THE ODA HAS ITS ADVANTAGES.

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# DENTIST DAY AT THE CAPITOL - FEBRUARY 7TH -

## MARK YOUR CALENDARS!

### 9:00 – 11:30 a.m.

Alliance members meet at the ODA building to receive legislative gift kits and disbursement instructions. Transportation to the Capitol will be available that day and is sponsored by DENPAC.

### 1:00-2:30 p.m.

Come-and-go educational session and lunch at the ODA building to learn about legislative issues on the docket that may affect dentistry in Oklahoma. Lunch sponsored by DENPAC.

### 2:30 – 5:00 p.m.

Dentists and Alliance members meet with legislators. Schedule an appointment with your legislator to meet during this time. Park at the ODA building and ride the shuttle bus to the Capitol.

### 5:30 – 7:30 p.m.

ODA Legislative Reception at the ODA Building - Hors d'oeuvres and drinks provided.

Your participation is imperative! Sixty legislators attended the 2006 Dentist Day at the Capitol reception and many districts were not represented by ODA members. The first question every Legislator asked was "Is there anyone here from my district?". **That answer needs to be YES!** A personal relationship with your State Representative and Senator is the most important step toward educating the legislature about our issues. **Don't sit back and assume others will be representing your district. YOU be the one!**

### DENTIST DAY AT THE CAPITOL – COMMITMENT FORM

Attend all the events that day, or attend only what your schedule allows.

- Yes! I will attend all of the day's events
- Yes! I will attend only the educational session/lunch and meet with my legislators
- Yes! I will represent my district during the Legislative Reception, (\$10/person)

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

### Contact your Legislator to make an appointment:

House of Representatives 405-521-2711 or 800-522-8502  
Senate 405-521-5692

**Find your legislators online at [www.okda.org](http://www.okda.org)!**

Return this form to the ODA by fax 405-848-8875

*Co-sponsored by the Oklahoma Academy of General Dentistry,  
Oklahoma County Dental Society, Oklahoma Association of Women Dentists,  
Pierre Fauchard Academy and the Tulsa County Dental Society.*



oklahoma dental  
association

annual meeting  
centennial celebration

april 26 - 29

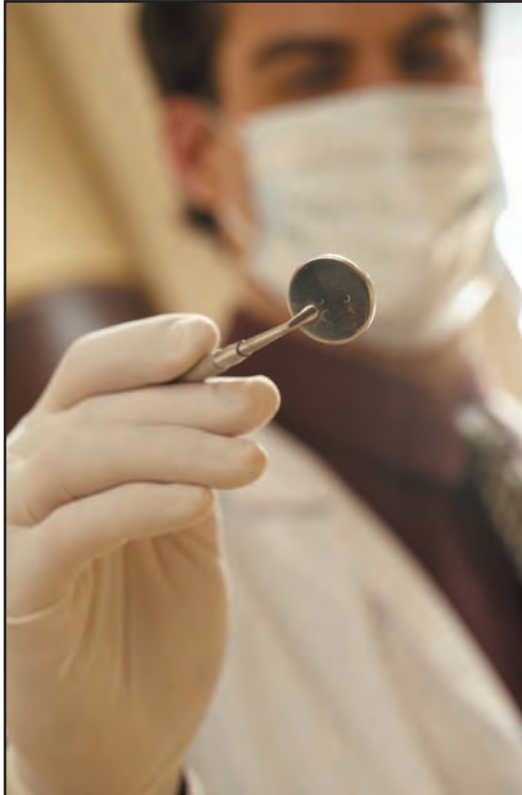
**DON'T MISS IT!**



## PATIENT'S PAGE



This message brought to you by your dentist - a proud member of the Oklahoma Dental Association



**If a child's primary tooth is knocked loose, the patient should see a dentist within a day or two. Even though children lose these primary teeth normally, trauma that causes a tooth to become loose could actually damage the permanent tooth below.**

### **Ways to AVOID a mouth injury:**

- Wear a mouth guard when participating in sports or recreational activities.
- Avoid chewing ice, popcorn kernels and hard candy, all of which can crack a tooth.
- Cut tape using scissors rather than your teeth.

## **Dental Emergencies – Tips for Being Prepared**

Of course, avoiding a dental emergency or injury is ideal, but being prepared is your best defense. Accidents are inevitable. Remaining calm and knowing what to do when an accident occurs can mean the difference between saving and losing a tooth.

### **Knocked Out Tooth**

Holding the tooth by the crown, gently rinse the root of the tooth with water only to remove dirt or debris. Do not scrub it or remove any attached tissue fragments. If possible, gently insert and hold the tooth in its socket. If that isn't possible, put the tooth in a cup of milk and get to the dentist as quickly as possible. Remember to take the tooth with you!

### **Broken Tooth**

Rinse your mouth with warm water to clean the area. Use cold compresses on the area to manage swelling. Locate and save any broken tooth fragments. Call your dentist immediately.

### **Loosened Tooth**

If a tooth can be moved slightly forwards or backwards, gently use light pressure with your finger to reposition the tooth to its normal alignment. Do not try to force the tooth back into its socket. Hold the tooth in place with a moist tissue or gauze. Contact your dentist immediately.

### **Cracked Tooth**

It may be difficult to determine if a tooth is cracked. A crack may appear as a hairline fracture, running vertically along the tooth and may not be visible to the eye. Depending on the size and location of the crack, treatment may vary from bonding to root canal treatment. A severely cracked tooth may need extraction. Your dentist will determine the best treatment for you. Tiny cracks are common and usually do not cause problems. Regular dental checkups are important. Checkups allow your dentist to diagnose and treat problems in the early stages of a crack. If you continue to have pain, avoid chewing on that side of your mouth and call your dentist.

### **Cut Lip, Tongue or Cheek Lining**

Clean the area gently with a cloth and apply cold compresses to control any swelling. Apply ice to bruised areas. If there is bleeding, apply firm but gentle pressure with a clean gauze or cloth. If bleeding does not stop after 15 minutes or it cannot be controlled by simple pressure, go to a hospital emergency department immediately.

### **Jaw May Be Broken**

To control the swelling, apply cold compresses to the injured area. Go to your dentist or a hospital emergency room immediately.

### **Object Caught Between Teeth**

Try to gently remove the object with dental floss; avoid cutting the gums. Never use a sharp instrument to remove any object that is stuck between your teeth. If you can't dislodge the object using dental floss, seek the assistance of your dentist.

### **Toothache**

Rinse your mouth with warm water to clean it out. Gently use dental floss to ensure that there is no food or other debris caught between the teeth. Never put aspirin or any other painkiller against the gums near the aching tooth because it may burn the gum tissue. If the pain persists, contact your dentist.

## **What do I do if I'm traveling?**

- Look in the telephone book under "dentist" to find the state or local dental society phone number to get a referral.
- Ask the hospital emergency room staff to recommend a dentist.
- Ask hotel personnel to refer you to a dentist.
- If you are out of the U.S., contact the U.S. Embassy or ask hotel personnel to recommend a dentist.

# SPECIAL ODA CENTENNIAL GOLF SHIRTS NOW AVAILABLE!

Show your Association pride and help celebrate with the ODA as your Association commemorates 100 years of fostering an awareness of the obligations and responsibilities of the dental profession in Oklahoma! Pre-order your ODA Centennial Golf Shirt and wear it to the 2007 Centennial Annual Meeting, April 26 – 29! Available in men's and women's sizes – order one for your whole dental team!

### Outer Banks Pima Tipped Jersey

- 60/2 ply 100% pima cotton pique
- Classic styling with luxurious quality
- Women's has a refined, feminine keyhole placket with dyed-to-match engraved button



Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

MEN'S	Quantity	Price	WOMEN'S	Quantity	Price
S	_____	\$30	S	_____	\$30
M	_____	\$30	M	_____	\$30
L	_____	\$30	L	_____	\$30
XL	_____	\$30	XL	_____	\$30
XXL	_____	\$35	XXL	_____	\$35
3X	_____	\$35	Shipping	_____	\$5
Shipping	_____	\$5			
SUB TOTAL: _____			SUB TOTAL: _____		

**TOTAL ORDER:** \_\_\_\_\_

Make check payable to: Oklahoma Dental Association -OR-

VISA       MasterCard       Discover

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

PRINT name as it appears on card: \_\_\_\_\_

Signature: \_\_\_\_\_

- I will collect my shirt at the ODA Partner's Booth during the 2007 ODA Annual Meeting. (Orders must be received prior to February 20, 2007)
- Please mail my shirt (please add additional \$5.00 shipping charge above)

Mail form with payment to: ODA Centennial, Oklahoma Dental Association, 317 NE 13th Street, Oklahoma City, OK 73104



# Give Kids a Smile!®

**Who:** Many dentists across Oklahoma will take time from their practices to help underserved children who aren't getting the oral health care they need. Will you join us?

**What:** Give Kids A Smile!® is an annual one-day volunteer initiative to provide free educational, preventive and restorative services to children from low-income families.

**When:** February 2, 2007

**Why:** To provide oral care to disadvantaged children and teach them how to take care of their teeth. It will also provide you an opportunity to

educate the parents about the importance of regular visits to the dentist.

**How:** You can volunteer to participate in a number of ways:

- 1) Offer free educational, preventive and restorative services to children from low-income families in your practice on February 2, 2007.
- 2) Open your practice to allow other local dentists to provide services in your practice with you on February 2, 2007. We will direct volunteers to contact you.
- 3) Volunteer your services in another practice on February 2, 2007. We will put you together with dentists who are looking for help that day.
- 4) Make a donation to Give Kids A Smile! so other volunteer dentists will have help with the supplies they'll need on February 2, 2007.

The ODA will have a limited number of toothbrushes and toothpaste, etc., available to help you and special Give Kids A Smile!® t-shirts for the volunteers to wear that day. Return the form below by **December 31, 2006** to have priority.

To volunteer please complete the short form below and return it to:

Give Kids A Smile!®/Oklahoma Dental Association  
 317 NE 13th Street  
 Oklahoma City, OK 73104  
 Or fax to: 405.848.8875

To learn more please visit [www.okda.org](http://www.okda.org) or call Lynn Means at the ODA at 848.8873 or 800.876.8890; or email [lmeans@okda.org](mailto:lmeans@okda.org)

## PLEASE TELL THE ODA WHAT YOU HAVE PLANNED!

Give Kids A Smile!® Volunteer Form

List full names of all participating dentists: \_\_\_\_\_

Name of your practice if different from above (for press release): \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail address \_\_\_\_\_

Please mark all that apply:

YES! I am planning to participate in GKAS! in my office. Here is what I have planned:

- Please send me some supplies. I realize the ODA's inventory is limited.
- No, I do not need any supplies from the ODA.

YES! I am planning to participate in GKAS! and would welcome a colleague from another office to participate in my office on February 2, 2007.

YES! I want to participate in GKAS! and would like to volunteer in a colleague's office.

YES! I would like to make a donation to the ODA to assist in purchasing GKAS! supplies. My check is enclosed. Make check payable to the ODA and [send with this form](#).

Even if you participate in GKAS! every year, and do not need supplies or t-shirts, the ODA still wants to know about it! The ODA will send a press release to the hometown newspaper of every participating dentist and will list the names of all participating members in a future issue of the *ODA Journal*. Please take pictures of the activities that day and send them to us! Thank you for volunteering for Give Kids A Smile!®



## D-DENT

By: Shirley Harris

THANK YOU FOR THE SMILES. Blue Cross Blue Shield recently recognized individuals and organizations working to make a difference in the health of Oklahoma communities. The Champions of Health award winners were honored Monday, Oct. 30, at an awards ceremony at the National Cowboy and Western Heritage Museum in Oklahoma City. The event featured University of Oklahoma women's head basketball coach, Sherri Coale, as emcee, and keynote speaker, Dr. Louis Sullivan, former U.S. Secretary of Health and Human Services. D-DENT was honored with the Champion of Senior Health award. D-DENT's mission is to provide free comprehensive dental care to all developmentally disabled and elderly Oklahomans who are in financial need. This year D-DENT celebrates its 20th anniversary. D-DENT would like to express their gratitude to all volunteers. Each one of you has had a positive impact on the state of oral health of many elderly and disabled Oklahomans. For information on how you can make a difference volunteering through D-DENT, call 1-800-522-9510 or 405-424-8092. D-DENT is a 501(c)3 organization. D-DENT is funded in part by the State of Oklahoma Deptment of Health, Delta Dental of Oklahoma, United Way, Kirkpatrick Foundation, Zink Foundation, Oklahoma County Health Department and other foundations, grants and private donations. THANK YOU FOR THE SMILES.



(Clockwise from upper left): Barbara Rivas-Lopez, Dorita Brown, Dr. Bernard Rhone, Dr. & Mrs. Doug Chancellor, Dr. & Mrs. Hugh Burch, all in attendace at the Champions of Health ceremony.

# ODA ANNUAL AWARDS

Do you have a colleague that should be recognized as Dentist of the Year? Do you know someone who has gone above and beyond the call of duty with his/her charitable and community work? The ODA will be recognizing members during the 2007 Annual Meeting Opening Session for outstanding achievement in the following areas:

**Dentist of the Year –**

the dentist selected as having made the greatest contribution to the advancement of dentistry in Oklahoma.

**Young Dentist of the Year –**

to recognize a new member who exhibits an active interest in organized dentistry and the image of the dental profession. Candidates for this nomination should be a member of organized dentistry for five years or less.

*contd. on next page*

## Oklahoma Dental Association AWARDS NOMINATION FORM

### NOMINEE INFORMATION (please print clearly or type)

Name: \_\_\_\_\_ Award Nomination for:  
 \_\_\_\_\_ Dentist of the Year  
 \_\_\_\_\_ Young Dentist of the Year  
 \_\_\_\_\_ Thomas Jefferson (Citizenship)  
 \_\_\_\_\_ Robert K. Wynne (Public Info)  
 \_\_\_\_\_ Dan E. Brannin (Professionalism)  
 \_\_\_\_\_ Richard T. Oliver (Legislative)

Current Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ ODA Member Since: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Email: \_\_\_\_\_

### NOMINATED BY

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

### NATIONAL, STATE &/or LOCAL POSITIONS HELD

Organization/offices held: (please use additional pages as necessary)	Year
_____	_____
_____	_____
_____	_____

List all dental-related work experience in chronological order with dates: (please use additional pages as necessary)

\_\_\_\_\_

\_\_\_\_\_

*Please attach letters of recommendation, references and other documentation as necessary.*

Submitted by: \_\_\_\_\_ Signature: \_\_\_\_\_

**DEADLINE FOR NOMINATIONS IS JANUARY 15, 2007**

Please use a separate form for each award nomination. Photo copies of this original form will be accepted. A letter of nomination must accompany each nomination describing the nominee's accomplishments and other contributions.

**Submit to:** Oklahoma Dental Association, Attention: Member Awards, 317 NE 13th Street, Oklahoma City, OK 73104

Nominate someone TODAY!

**Thomas Jefferson Citizenship Award –**

a member dentist who has made significant contributions to community service and philanthropic works in the area of dentistry.

**Robert K. Wynne Public Information Award –**

a member dentist who has worked to advance the knowledge of dentistry and dental health through public education and public relations efforts.

**Dan E. Brannin Professionalism Award –**

the dentist selected as having made significant contributions to the advancement of the principles and practice of ethics and professionalism in dentistry.

**Richard T. Oliver Legislative Award –**

for outstanding effort and leadership in the Oklahoma Legislative process on behalf of the Oklahoma Dental Association.

Nominations are now being accepted for 2007 ODA awards.

**Nominations will be accepted until January 15, 2007.** Use the Oklahoma Dental Association Awards Nomination Form below to nominate an ODA member for an award. One form per individual nomination please. Nominations are only valid if the entire form is completed. Additionally, a letter of nomination describing the nominee's accomplishments for the award must accompany the nomination form. Nominations are not valid without this letter of nomination.

Please fax completed nomination forms to the ODA at 405.848.8875; or mail to the Oklahoma Dental Association, 317 NE 13th Street, Oklahoma City, OK, 73104.

# OWN YOUR IDEAL PRACTICE

Successful, established practices want new dentists to join them and become owners over time.

**Associate/Partner Wanted:**

**Tulsa, OK** — Well-run family practice in professional building. Easy freeway access. Excellent reputation. Tremendous growth. 11 ops/4,800 sq. ft. All new equipment and computers. Seek associate interested in eventual partnership and full ownership.

**Tulsa, OK** — Well-established private pediatric practice in stand alone building. Fully computerized chairside stations, digital, open bay concept. 3000 sq. ft., 3800 charts, 7 ops plumbed, 2 unplumbed. Good transition plan for associate looking for equity position and eventual ownership.

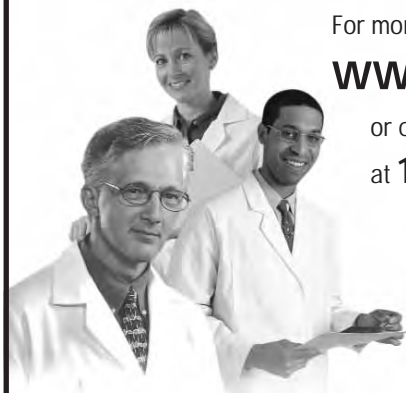
**Woodward, OK** — Well-established family, esthetic, sedation, implant practice. Professional free-standing building. 8 ops/2,700 sq. ft. Digital X-ray; IO cameras; Soft tissue laser. Progressive hygiene dept. Two partners interested in mentoring associate for eventual partnership.

For more information, visit

**www.TransDent.com**

or call Mercer Transitions

at **1.800.588.0098**.



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## A winning combination.

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# ODA Board of Trustees - November Meeting

The ODA Board of Trustees met Friday, November 10th, at the ODA Building. Below are the actions from that meeting:

## Video Conferencing Proposal

The Board passed a motion from the Council on Technology and Electronic Communication to raise a total of \$84,106.42 for the purchase of video internet conferencing equipment by requesting \$25,000 from the Oklahoma Dental Foundation will lease the equipment and pre-pay the lease in the amount of \$25,000. Each component dental society will pay \$5,000 and the remaining \$15,000 will be funded by the ODA.

Representatives from Tulsa County and Oklahoma County Dental Societies agreed to request from their respective Boards additional funds up to \$5,000 to split between the two components. [The request for additional funding from OK and Tulsa Counties has been granted]. If a Component Dental Society cannot pay the \$5,000 in one lump sum, the ODA will bill the component \$1,667 per year for three years. The ODA will pay their portion out of the general reserve and the money received from the Component will be deposited back into the reserve. The video conferencing equipment should be installed in the ODA building by January 31, 2007.

## Annual Meeting Registration Fees for Retired State Life, State Life, and Retired Members

The Annual Meeting basic registration fee for Retired State Life Members shall remain \$0 and the basic registration fee for State Life Members and Retired Members shall be \$25 for 2007. Lunch tickets are not included in the basic registration fee for these membership categories. Lunch tickets may be purchased for \$25 per day.

## 2007 Budget

The proposed 2007 budget, including a \$10 dues increase, was approved by the Board of Trustees for ratification by the House of Delegates in April 2007.

## Standing Committee on Endorsed Products and Services

The Board established a Standing Committee on Endorsed Products and Services. The charge, composition and duties of the committee are as follows:

**Charge:** The Standing Committee on Endorsed Products and Services shall be a standing committee of the Board of Trustees for the purpose of managing the endorsement of products and services benefiting ODA members and forwarding Committee recommendations for Board action.

**Composition:** The voting members shall consist of five to nine ODA members appointed annually by the Board of Trustees at its March/April meeting, and shall include at least one Trustee and the Chair of the Membership and Membership Services Council (*ex officio*). The chair shall be appointed by the President with the approval of the Trustees. The ODA Executive Director shall serve as an *ex officio* member without vote.

### Duties:

- Enhance ODA membership value by considering a broad range of products and services for ODA members.
- Solicit, evaluate, and launch new products and services that will be used by ODA members in the conduct of their practices.
- Generate an increase for the ODA non-dues revenue stream through royalty/licensing agreements.

- Evaluate and renegotiate existing contracts.
  - Manage existing product lines to maximize member benefits and revenues.
  - Maintain standard operating procedures that ensure the equitable treatment of vendors.
  - Solicit input from the Council on Membership and Membership Services regarding the usefulness and appropriateness of potential endorsed products or services for ODA members.
  - Provide regular written and oral reports to the Board of Trustees and request timely authorization of its transactions.
- The standing committee will be appointed at the March 2007 Board of Trustees meeting. The ODA President has appointed an interim committee to serve until the March 2007 BOT meeting.

## Council Quorum Requirement

The Council on Dental Care recommended that the House of Delegates amend the ODA Council Policy Manual so that a quorum shall be 35% (rounded up) of the number of Council members. The Board recommended a do pass.

## Dental Education – Our Legacy Our Future

The Council on Dental Education and Public Information recommended to the House of Delegates that the ODA become an official Facilitating Partner of the Dental Education Our Legacy Our Future national campaign. The Board recommended a do pass.

## Accrue TEC Funds

The Board adopted the TEC Council's request to allocate the portion of the TEC Council budget earmarked for IT upgrades to be on an accrual basis from year to year, allowing the Council to make IT upgrades as necessary.

## Relief Fund Policy

The Board recommended that it be the policy of the ODA to follow the American Dental Association Foundation criteria for granting relief to members.

## Registration Rebate Policy

The Local Arrangements Committee recommended to the House of Delegates that it be the policy of the ODA to provide a \$10 rebate to the ODA Alliance for every spouse registered for the Annual Meeting and to the Oklahoma Dental Assistants Association for every ODAA member registered for the Annual Meeting. The Board recommended a do pass.

## Financial Support of Alliance

The Board voted to sponsor \$5,000 from the general reserve fund to the Alliance of the American Dental Association to help underwrite events at the 2007 Leadership Conference in Tulsa, Oklahoma.



Please contact Dana Davis, ODA Executive Director, with any questions/comments regarding the actions of the ODA Board of Directors at (405) 848-8873 or (800) 876-8890; or email [ddavis@okda.org](mailto:ddavis@okda.org).

# CLINICAL ORAL PATHOLOGY FOR EVERYDAY DENTAL PRACTICE

Friday, March 9, 2007  
Metro Technology Centers (Springlake Campus)  
Carousel-Big Dipper Rooms  
1900 Springlake Drive  
Oklahoma City, Oklahoma

Friday, March 30, 2007  
James O. Goodwin Health Center  
Prothro Auditorium  
5051 South 129th East Avenue  
Tulsa, Oklahoma

**Glen D. Houston, D.D.S., M.S.D.**

**David M. Lewis, D.D.S., M.S.**

**Stephen K. Young, D.D.S., M.S.**

**This course provides a review and update of clinical oral pathology. The areas to be covered include red and white lesions, vesiculo-bullous and ulcerative diseases, lumps and bumps, radiolucent and radiopaque lesions. Natural history, clinical significance, and treatment of these conditions will be discussed. A handout will be provided to each participant, which emphasizes differential diagnosis for each disease group.**

**"Bumps, Lumps, and Xerostomia"**

Many common pathologic processes a dentist sees and must deal with appear as a lump or bump. Their recognition and differentiation from similar lesions will be discussed. Also, in this session, the commonly encountered problem of the dry mouth and associated oral lesions will be presented. The problems associated with diagnosis, treatment, and related lesions will be discussed.

**"Cold Sores, Canker Sores, and Other Sores"**

Herpes simplex virus infections (cold sores) and aphthous stomatitis (canker sores) are the two most common ulcerative disease processes that affect the oral cavity. However, they are still frequently confused, misdiagnosed, and improperly treated. Clinical differential diagnosis and etiology of these two diseases as well as erosive lichen planus, erythema multiforme, pemphigus, and pemphigoid will be discussed with special emphasis on the most recent methods of treatment.

SCHEDULE:           8:00 a.m. - Registration and Continental Breakfast  
                              8:30 a.m. - Morning Session  
                              12:00 p.m. - Lunch (on your own)  
                              1:00 p.m. - Afternoon Session  
                              4:30 p.m. - Summary and wrap-up

**"Red and White Lesions"**

Red and white lesions are probably the most common soft tissue abnormalities seen by the dentist. Many of these areas are malignant or potentially malignant while the majority represent benign conditions such as candidiasis or lichen planus. Which ones do you biopsy? The recognition and management of the whole range of red and white lesions will be discussed.

**"Radiolucent - Radiopaque Lesions"**

One of the most difficult tasks we have is differential diagnosis of radiolucent and radiopaque lesions. Certain lesions need to be biopsied and others simply observed. Guidelines for the diagnosis and management of radiolucent and radiopaque pathology will be presented.

The University of Oklahoma is an equal opportunity institution. This brochure was prepared at no cost to the taxpayers of the State of Oklahoma. Registration deadline, two weeks prior to meeting date.

**CHECK LOCATION**   » » »    March 30 - **Tulsa**   or    March 9 - **Oklahoma City**

**Please Print**

Name \_\_\_\_\_ Degree \_\_\_\_\_

Address \_\_\_\_\_

Phone: Office (\_\_\_\_) \_\_\_\_\_ Home (\_\_\_\_) \_\_\_\_\_

Office Staff: \_\_\_\_\_

A \$25.00 tuition payment is non-refundable unless the course is completely enrolled when the application is received or the course is cancelled. Refund of the remainder of the tuition will be allowed only if refund request is received two weeks prior to the course offering. We reserve the right to cancel the course if the need arises.

**REGISTRATION FEE**

Dentists (\$195.00 per person) # \_\_\_\_\_

Dental Hygienists & Office Staff  
(\$145.00 per person)

# \_\_\_\_\_ Total \$ \_\_\_\_\_

**MAIL REGISTRATION AND CHECK TO:**

Dept. of Oral and Maxillofacial Pathology  
OU College of Dentistry  
1201 N. Stonewall Ave., OKC, OK 73117-1214

**MAKE CHECK PAYABLE TO:**

**OU College of Dentistry Cont. Education**

**7 Hours CE Credit - Board of Governors & AGD**

For more information please contact Dr. Glen Houston  
at the OU College of Dentistry (405) 271-6326

## AGD Enhances CE Recording for Members



Over the past year, the Academy of General Dentistry (AGD) has been working hard to improve the AGD continuing education (CE) transcripts—everything from how AGD members can submit CE credit to how they can view credits. Beginning with the 2006 AGD membership cards, the AGD included a barcode along with a new six-digit membership number, which allows many CE providers to simply scan an AGD member's card and submit his or her CE documentation!

How do members take advantage of these new services? By just bringing their AGD membership card whenever they take CE. If the CE provider doesn't scan cards, members should encourage the provider to contact the AGD so CE recording is easier for everyone. All Program Approval for Continuing Education (PACE)-approved program providers are required to submit CE rosters to the AGD on behalf of its members. Providers can submit this information online or by fax or mail.

Along with the new cards, the AGD created a convenient tool that makes it easier than ever for PACE-approved CE providers to submit their course attendance rosters online. While CE providers are not required to use this new

tool, many providers are enjoying the speed and convenience of this new service. Since the new service debuted in May 2006, more than 900 rosters have been submitted online by providers, and the information is typically updated within 48 hours.

The AGD encourages all members to regularly check their AGD state and award transcripts to verify accuracy. Members can view and update their CE by going to the AGD Web site ([www.agd.org](http://www.agd.org)) and clicking on "Transcripts" on the right-hand side of the home page. These state transcripts have been customized for each state. When an AGD member goes to view his or her state transcript, it will show: 1) what the state's re-licensure requirements are; 2) how many hours of each required CE are needed; and 3) whether or not the member has met the requirements.

If members have not already logged on to view their transcript, they will need to supply their AGD membership number and the last date of their license renewal.

If members have questions regarding their transcript or CE that has been submitted, they should contact the AGD Membership Services Center toll-free at 888.243.3368, ext. 5300, or via e-mail at [membership@agd.org](mailto:membership@agd.org).

From the ADA...



## Interim Guidance on Reconstituted Infant Formula

Have any of your patients ever asked what type of water should be used when mixing powdered or liquid concentrate infant formula? Information about fluoride intake for infants and young children, which includes interim guidance on reconstituted infant formula, is posted on [ADA.org](http://ADA.org).

The appropriate amount of fluoride is essential to prevent tooth decay, but fluoride intake above the recommended level for a child's age creates a risk for enamel fluorosis in teeth during their development before eruption through the gums. According to fluoride intake guidelines set by the Institute of Medicine, the amount of fluoride recommended for babies under a year old is less than that for older children and adults. Infants less than one year old may be getting more than the optimal amount of fluoride (which may increase their risk of enamel fluorosis) if their primary source of nutrition is powdered or liquid concentrate infant formula mixed with water containing fluoride.

Recent developments led the ADA to develop the interim guidance. Last spring, the National Research Council released a report on naturally occurring fluoride in drinking water. While not the major focus of the report, research was cited that raised the possibility that infants could receive a greater than optimal amount of fluoride from reconstituted baby formula. Then, on October 14, the FDA said bottlers could claim that fluoridated water can reduce the risk of dental cavities or tooth decay, but that this claim could not be used on water marketed to infants.

More research is needed before definitive recommendations can be made, but, in the meantime, if parents and caregivers are concerned, the ADA's interim guidance provides steps to simply and effectively reduce fluoride intake during a baby's first year of life. Essentially, the ADA supports the pediatricians' recommendations on the benefits of breast feeding and notes that using ready-to-feed formula for bottle-fed babies will keep their fluoride intake under IOM limits. If using a product that needs to be reconstituted, parents and caregivers should consider using water that has no or low levels of fluoride. Visit [ADA.org](http://ADA.org) for additional information on fluoride.

## Is Your Practice Up To Par?

Too busy or distracted to work on your game? Frustrated with being too much over par?

Call **Melinda Lawrence** today for **YOUR** complimentary consultation - find out how her solid coaching skills can keep you in the fairway to improve your score!



- **One-On-One Coaching:** Hands on coaching for you and your staff. You can expect personal contact from Melinda, each and every time.
- **Customized Coaching Plans:** MLC's services are tailored to meet the needs of each practice and doctor. No cookie cutter consulting.
- **Leadership Development:** Melinda will teach you to lead your team with confidence, dynamic communication, clarity and consistency.

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Call today at 405-285-8192 office or 405-919-1230 cell



Don't miss out! Sign up for **Practice Made Perfect**, a **FREE** monthly E-newsletter full of great practice management tips, ideas and solutions. Visit our website today to sign up: [www.MelindaLawrence.com](http://www.MelindaLawrence.com)

## Retired Dentist Thanksgiving Celebration

The third Monday of every month brings an opportunity of socializing and fellowship among the ODA's retired dentists. They meet at the ODA Building for a good lunch and great company.

In honor of the ODA's Centennial year, retired dentists from across the state were invited to Thanksgiving Dinner on Monday, November 20. They enjoyed a home-cooked feast prepared by Dana Davis, ODA Executive Director. Chris Sutton, a journalist commissioned to help produce the Centennial issue *ODA Journal*, was on hand to interview retired members about their careers. Dr. Pamela Low, ODA President, and Mrs. Wanda Saddoris were also in attendance.

Dr. Sunshine Sullivan-Myers of Oklahoma City welcomed all out of town members and encouraged everyone to tour the new building.

For more information about the monthly retired dentist luncheons, please contact Nicole Smith at (405) 848-8873 or (800) 876-8890; or email at [nsmith@okda.org](mailto:nsmith@okda.org).



Dr. Low visits with Retired Dentists as they enjoy a Thanksgiving feast.



## ODA News You Can Use!

### Dental Record Keeping System Provides Simplicity and Ease for ODA Members

An ODA-endorsed company, The Dental Record is a dental record keeping system company that has revolutionized the way dental practices document their patients' treatment.

The Dental Record provides an easy-to-use system that is the result of years of research defining the key components in patients' charts. The goal of the system is to document the patient's treatment, but the founders of the system at the Wisconsin Dental Association took this concept one step further. The Dental Record's system provides a thorough record for post-treatment reviews and peer reviews, and it also helps protect the legal interests of the doctor. The key forms are continually updated as legal and medical standards change, which gives peace of mind to many dentists. The ODA believes the system will have a wide appeal among members. The Dental Record helps dental practices become more efficient and organized, and it is truly an asset of the practice. It was created by dentists, for dentists.

The records can be ordered as a completely assembled kit with pockets and forms already attached, which minimizes staff time in assembly. Or, individual forms or parts of the system may be ordered separately. Several variations of the forms are available for specific specialties such as periodontal records or children's records. Color-coding labels also can help simplify even the largest record filing system.

Dr. Paul Oberbreckling, Chairman of the Quality Assurance Committee that first developed the record and dental practitioner for 27 years, is passionate about making dentists' lives easier. "Converting to The Dental Record system may sound like a large task, but it's actually quite simple", he explains. "It's easiest when the entire staff is involved in the process. With our highly efficient system, dentists from all 50 states are reporting ease of use, lower malpractice risk and increased office productivity."

Perhaps the adage is true: "Dentists and patients forget, but good records remember." To find out more about the benefits of The Dental Record, or to place an order, contact The Dental Record at 800.243.4675 or visit them on the web at [www.dentalrecord.com](http://www.dentalrecord.com).

# DENPAC Listed in "TOP 10"

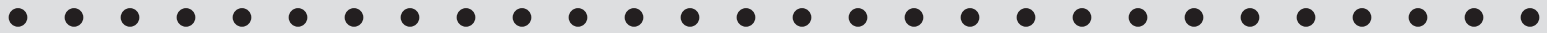
DENPAC was #10 in the Non-Party PAC Contributors for this most recent election cycle. As published in the Oklahoma Gazette, DENPAC made campaign contributions to dental-friendly candidates totaling \$59,800. The others in the top 10 were the Oklahoma Independent Petroleum Association, the Oklahoma Ag Fund, the Oklahoma Bankers Association, the Oklahoma State Medical Association, the Oklahoma Trial Lawyers Association, the Oklahoma Association of Optometric Physicians, the Orthopedic Hospital of Oklahoma, Speak Up for Rural Electrification, and the Oklahoma Land Title Association.

**DENPAC continues to grow and make progress each year.**

# DENPAC

HELPING TO MAINTAIN THE QUALITY OF YOUR PRACTICES AND THE INTEGRITY OF DENTISTRY

## PUT YOUR MONEY WHERE YOUR VOTE SHOULD BE!



**DENPAC** WITH  
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**\$150** GOING  
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# WHO&WHAT

## 2007 ANNUAL MEETING SPEAKER PREVIEW

The 2007 ODA Annual Meeting is scheduled for April 26 – 29, 2007, at the Cox Convention Center and Renaissance Hotel in downtown OKC. One of the highlights of the ODA Annual Meeting is the renowned Scientific Sessions that take place throughout the meeting. The *ODA Journal* has been running previews of the 2007 ODA scientific speakers each month, giving you an insight into the biographies of each speaker and what you can expect from their presentations at the 2007 meeting.



### Keith D. Rossein, DDS

Dr. Rossein, consultant, author and lecturer, received a DDS from New York University College of Dentistry in 1970 and went on to 23 years of clinical practice. He is president of International Dental Consultants, a partner

in *WebDentalMarketing.com*, editor of *Implant News & Views*, is listed in the Seattle Study Club's Speakers Bureau, and has been a speaker for the ADA Seminar Services. He has appeared at numerous national and international dental meetings. Visit his website at [www.implantnewsandviews.com](http://www.implantnewsandviews.com).

Dr. Rossein will also present the CE sessions "Care and Maintenance of Dental Implants" and "Patient and Personal Stress Assessment and Management" on Saturday, April 28th. Watch for more information in your Registration Packet coming your way in February!

### **"Increase Income & Reduce Stress with Electrosurgery/Radiosurgery"** (hands-on)

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Electrosurgery instruments use high frequency radio waves to cut, coagulate, or remove tissue with little or no bleeding. This hands-on workshop will teach the clinical and histological significance of frequency and waveform and how to control lateral heat to reduce tissue alteration. The "shave technique," unique to electrosurgery/radiosurgery, will be discussed. This allows the practitioner to contour or remove tissue without using sutures and with minimal discomfort to the patient. The advantages, disadvantages, precautions and indications for the use of electrosurgery will be discussed. Fifty percent of the time will be hands-on participation, performing dental procedures on beefsteak around model teeth, allowing the participants to develop competence and confidence in this type of instrumentation. Specific clinical techniques will be practiced including clinical crown elongation, troughing before crown & bridge impressions, pulpotomies, gingivectomies and more. Clinicians will see how electrosurgery can become a routine, safe and predictable procedure in their practices. All participants will receive a lab/reference manual and can put to use what they have learned the very next day.

Upon course completion participants will be able to:

- Understand the electronics, theory and principles of electrosurgery;
- Describe the electrosurgical instrument and its component parts;
- List the indications for the clinical uses of oral electrosurgery;
- List the indications and contraindications for the clinical uses of oral electrosurgery;
- Understand how to get better restorative/cosmetic results;
- Learn to do surgery that requires no sutures;
- List the criteria for selecting an electrosurgery instrument;
- Teach auxiliaries to assist during the clinical applications of electrosurgery; and
- Implement how to get started using electrosurgery in your practice.

**This course is limited to the first 40 registrants. It is recommended that participants bring magnifying loops.**

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# FEATURES



In the spirit of celebrating our 100th birthday, the *ODA Journal* has been featuring articles, trivia and advertisements from past Journals. Join us now as we rewind to the Winter 1989 issue of the Oklahoma Dental Association's *Journal*.

Features

A black and white photograph of a group of approximately ten dental professionals, mostly women, smiling and posing together. The photo is tilted slightly to the right. The background is a light blue sky with a white grid pattern.

**OKLAHOMA  
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(see page 27)

**INSIDE**

Resolving Referral Errors  
Infection Control Update  
Dental Care For  
Radiotherapy Patients

**winter journal 89**

# Has The Dental Profession Been Had?

by  
Donald A. Ballew, D.D.S.\*

More recently, Listerine bought a large advertisement in the *JADA* which states it is 20.8% better at taking away plaque than a mixture of alcohol and water. The gingivitis reduction was said to be 28.7%. From this information, the American Dental Association has given its endorsement to Listerine as a substance which is helpful in plaque reduction. Is this change of enough significance to warrant endorsing the product?

Listerine was pitted against alcohol and water in the tests. Is alcohol and water supposed to remove plaque or be helpful in controlling gingival disease? What would the results be if the subjects rinsed with water?

Bhaskar, a noted lecturer on the treatment of gingival disease, endorses Viadent oral rinse. *He also admits to being part owner of the company.*

The dental profession is inundated with literature and samples of materials from manufacturers, attempting to get us to endorse their particular product. The profession, caring as it does, genuinely wishes for a miracle cure of gum disease and obligingly dispenses the materials.

This writer has seen **no** change after having the patients try these new products.

Conversely, many patients have fared poorly using over-the-counter products. We've stopped individuals from using Crest because of red and bleeding gingival tissue and their condition changed for the better. On this, I called the ADA and the woman who answered the phone said she too had gums which were "broken out" from using Crest. She

sent me some forms to fill out which were to be sent to Procter and Gamble. Plax, not endorsed by the ADA but highly advertised, at times causes a sickly brown colored gingiva which appears most unhealthy.

In some, the use of Anbesol or Ora-jel, to stop pain inside the mouth, is akin to eating a fire ant.

Has the dental profession been had? Does the American Dental Association run ads on over-the-counter products which are not an adjunct, and in some cases, detrimental to good oral health? Is the money so great they have to run them? A trustee told me the ADA was compelled by the Federal Trade Commission (FTC) to run all the ads, no matter whether they agreed with them or not.

From this, one can assume, if a school was developed on a new and exciting way to get rid of the Stenson's papilla, its virtues could be extolled in the *JADA*.

This writing is a plea for a testing program dealing with oral, over-the-counter products, to see if they do what they say. Maybe our dental school could embark on such a program. The Food and Drug Administration has little interest in this. To questions such as the ones posed in this paper, the FDA has a pamphlet already printed which deals with the subject, but gives no direction.

**L**isterine is a substance which has been with us all our lives. Their advertising claims it kills harmful, odor-causing bacteria, whatever that is. Is it safe to have a substance placed in the mouth which is strong enough to kill bacteria? Could something so potent take off the top layer of epithelial tissue? Does such a chemical upset the ecological balance inside the mouth? Their ad said it did not. By now, our profession should know if materials such as this are harmful, beneficial, or worthless. On this point we only have the words of the advertiser to guide us.

\*Dr. Ballew is in private practice in Elk City, Oklahoma.

**N**ew emergency care guidelines include dramatic changes to cardiopulmonary resuscitation (CPR) and emphasis on chest compressions, according to authors of the 2005 American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care.

The guidelines provide recommendations for how lay rescuers and emergency healthcare providers should resuscitate victims of cardiovascular emergencies.

The 2005 guidelines emphasize that high-quality CPR, particularly effective chest compressions, contributes significantly to the successful resuscitation of cardiac arrest patients. Studies show that effective chest compressions create more blood flow through the heart to the rest of the body, buying a few minutes until defibrillation can be attempted or the heart can pump blood on its own. The guidelines recommend that rescuers minimize interruptions to chest compressions and suggest that rescuers “push hard and push fast” when giving chest compressions. The most significant change to CPR is to the ratio of chest compressions to rescue breaths – from

15 compressions for every two rescue breaths in the 2000 guidelines to 30 compressions for every two rescue breaths in the 2005 guidelines. The change resulted from studies showing that blood circulation increases with each chest compression in a series and must be built back up after interruptions. The only exception to the new ratio is when two healthcare providers give CPR to a child or infant (except newborns), in which case they should provide 15 compressions for every two rescue breaths.

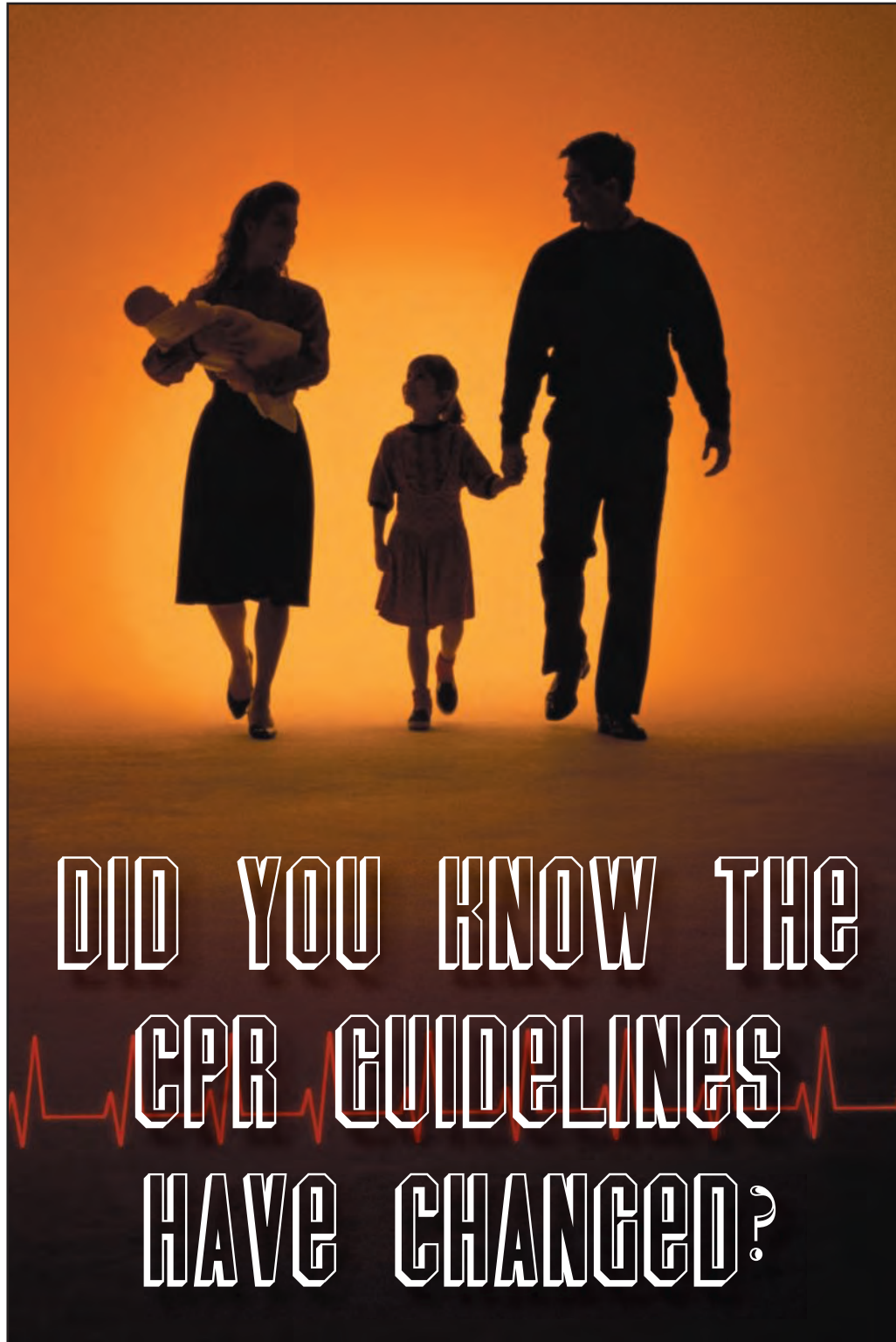
### Automated External Defibrillators (AEDs)

Another guidelines change emphasizing the importance of CPR is the sequence of rhythm analysis and CPR when using automated external defibrillators (AEDs). Previously, when AED pads were applied to the chest, the device analyzed the heart

rhythm, delivered a shock if necessary, and analyzed the heart rhythm again to determine whether the shock successfully stopped the abnormal rhythm. The cycle of analysis, shock and re-analysis could be repeated three times before CPR was recommended, resulting in delays of 37 seconds or more. Now, after one shock, the new guidelines recommend that rescuers provide about two minutes of CPR, beginning with chest compressions, before activating the AED to re-analyze the heart rhythm and attempt another shock. Studies have shown that the first AED shock stops the abnormal cardiac arrest rhythm more than 85 percent of the time and that a brief period of chest compressions between shocks

can deliver oxygen to the heart, increasing the likelihood of successful defibrillation. The guidelines also recommend that healthcare providers minimize interruptions to chest compressions by doing heart rhythm checks, inserting airway devices, and administering drugs without delaying CPR.

The new CPR Guidelines also state that AED programs should be implemented in public locations where there’s a relatively high likelihood of witnessed cardiac arrest. Dental



practices are seeing an increasing number of elderly and medically compromised patients, making it likely that staff will be called upon to respond to medical emergencies in the office, including cardiac arrest. In adult cardiac arrest victims, the most frequent cause of sudden cardiac arrest is ventricular dysrhythmia, either ventricular tachycardia or ventricular fibrillation. The development and availability of the automated external defibrillator (AED) represents a promising advance in the pre-hospital early defibrillation of victims of sudden cardiac arrest in a variety of settings, often remote from hospitals or EMS personnel. Given the medically compromised segment of the population treated in many dental practices today, it is imperative that dental practitioners become trained in the recognition and prompt initiation of emergency care, including basic life support with early defibrillation. The AED is becoming more accessible, with increasingly widespread availability, training in its use and relative ease of operation, making the goal of increased survival one in which dental health professionals can play a part.

### **CPR Requirements for the Oklahoma Dental Team**

According to the Rules and Regulations of the State of Oklahoma Board of Dentistry, a dentist who holds a permit to provide general anesthesia (including deep sedation) is required to hold current certification in Basic Life Support (BLS) and Advanced Life Support (ACLS) or Pediatric Advanced Life

Support (PALS) by the American Heart Association. It is also required that a minimum of two (2) Assistants who are currently certified in Basic Life Support for Health Care Providers by the American Heart Association be involved in the procedure.

For Dentists and Hygienists, proof of a CPR course provided by the American Heart Association/Health Care Provider Level or the American Red Cross/Professional Rescuer shall be required at least once in each three (3) year reporting cycle. For Assistants, all expanded duty permit holders are required to maintain current CPR certification provided by the American Heart Association/Health Care Provider Level or the American Red Cross/Professional Rescuer.

### **REFERENCES**

1. American Heart Association. Currents in Emergency Cardiovascular Care. Dallas, TX: AHA. Circulation 2005; 16:4.
2. Boyd, B, Fantuzzo, J, Votta, T. The Role of Automated External Defibrillators in Dental Practice. The New York State Dental Society Journal 2006; 72: 20-23.

**On the following pages are charts for you to use as a reference in your practice.**

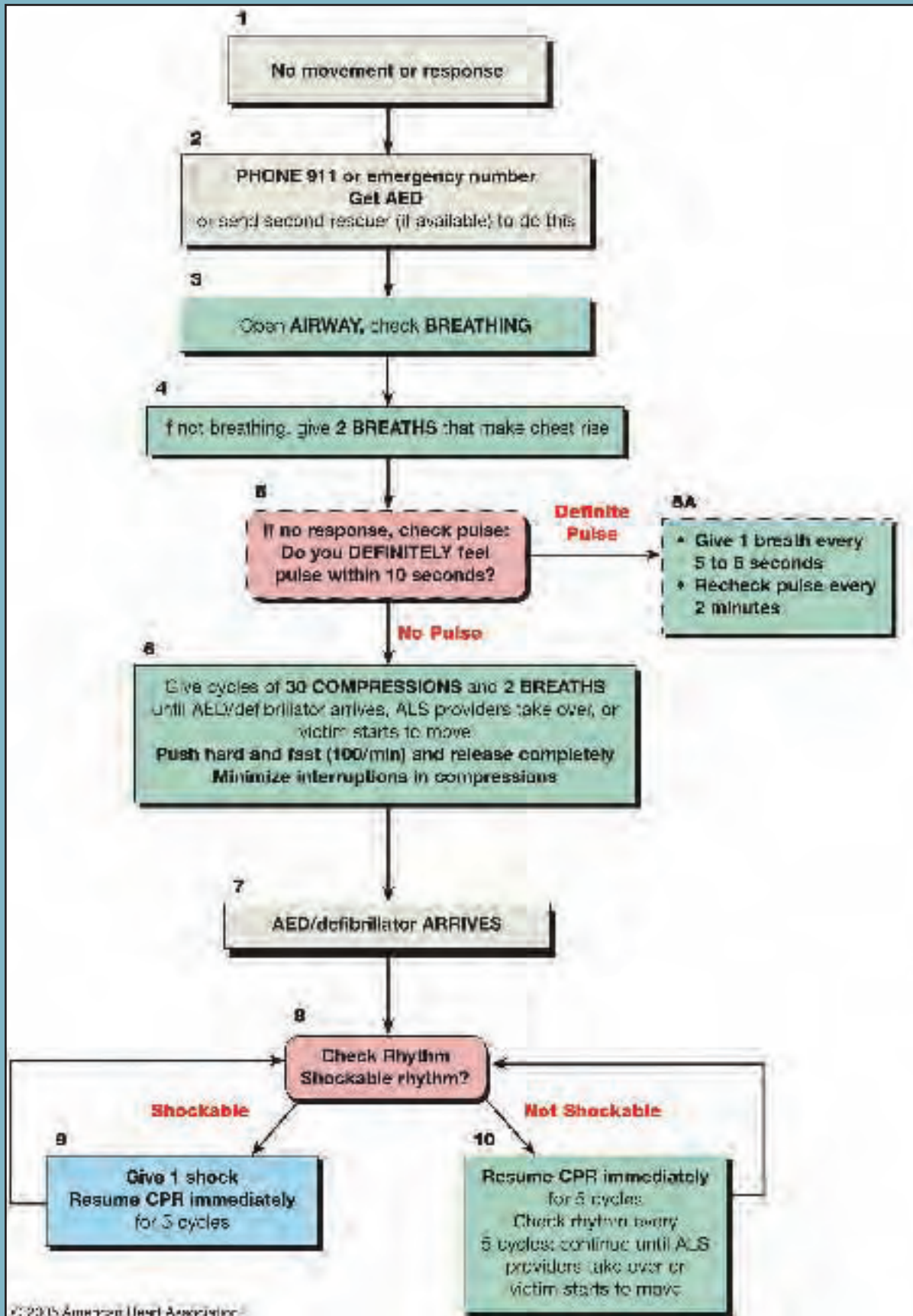
**The ODA will offer Basic Life Support for the Healthcare Provider at the ODA Annual Meeting. If it is time for you or members of your dental team to update these certifications, please make plans to attend the ODA Annual Meeting, April 27 and 28, 2007, at the Cox Convention Center in downtown Oklahoma City. Look for registration information in February 2007.**

**The ODA endorses LifeGuard Medical Solutions' Phillips Heart Defibrillator and recommends that all ODA members consider purchasing this AED for use in the practice. LifeGuard Medical Solutions offers the Phillips Heart Defibrillator at a special ODA discount available to ODA members only. For more information, please contact LifeGuard Medical Solutions at (866) 932-2331, or visit their website at [www.lifeguardmed.com](http://www.lifeguardmed.com). Be sure to indicate you are a member of the ODA and request the ODA member discount.**



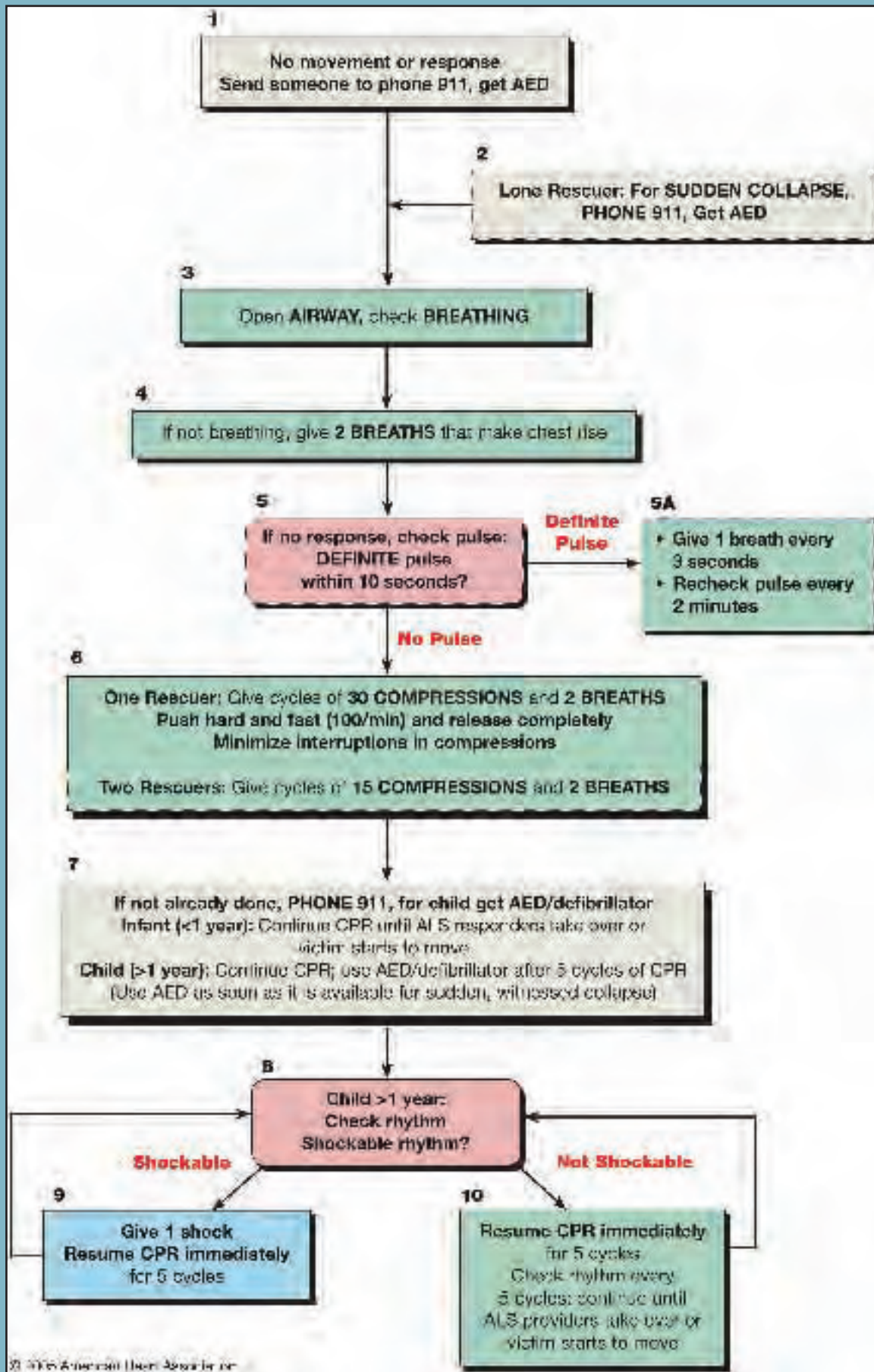
# Adult BLS Healthcare Provider Algorithm

Features



Reproduced with permission  
 2005 American Heart Association Guidelines for Cardiopulmonary Resuscitation and  
 Emergency Cardiovascular Care, Part 4: Adult Basic Life Support. Circulation 2005;112 (suppl IV):IV-22  
 © 2005, American Heart Association

# Pediatric BLS Healthcare Provider Algorithm



Features



# FIVE QUESTIONS DENTISTS SHOULD ASK ABOUT THEIR MONEY--

Question 5: Am I familiar with the current tools and laws that affect the implementation of my financial plan?

The final question in this financial planning series covers a universe of possible products, laws, and services that impact dentists. These ideas are organized according to the six components of a financial plan and are just a few comments to get you started asking the right questions.

## Six Areas of a Financial Plan:

### ☞ CASH FLOW (Convert business income to personal net worth)

- ◆ Track spending – Ultimately, everything financial comes down to cash flow. Separate business income and spending from personal for easy tax reporting and personal budgeting (especially important when nearing retirement or sale of business.)
- ◆ Rules of thumb for regular citizens don't usually apply to dental business owners. Do your own analysis.
- ◆ Think of tracking spending as the brushing and flossing of your finances. There are many types of brushes and flavors of floss and toothpaste. Find a tracking system you like and use it regularly.
- ◆ If you have kids or grandkids – google “finances and kids” and look around at what is available.

### ☞ RISK MANAGEMENT/INSURANCE

- ◆ What is your HEALTH plan? This is not about insurance but about taking care of your health.
  - Main causes of dental disabilities (stress, neck, back)
  - Emphasize quality of life for longer life expectancy
  - Employ in-the-office techniques like stretching, breathing, meditation
  - Most dentists' largest asset is their ability to earn an income

- ◆ CYA Plan (cover your assets) – This is an agreement between 5-10 peers to help cover a practice if one of the participants dies or becomes disabled. Insurance provides money, but these agreements actually help preserve the patient base and staff. The plan works especially well in smaller cities or specialty groups.
- ◆ Medical expense insurance – the number one risk facing dental business owners today.
- ◆ Asset Protection Strategies – It is always good for a business owner to have some assets that are exempt from the claims of creditors, in addition to your normal liability insurance. Some examples might be:

- Equity in home (some limitations)
- ERISA qualified plans (not one person plans)
- Insurance company cash values— (including annuities)
- Limited liability company for holding assets

- ◆ Disability Insurance/Long-Term Care
  - Take a look at the ADA and ODA plans in combination with other individual disability insurance.
  - Your cost of living would go down if they went to a nursing home.

### ☞ INVESTMENTS

- ◆ Comprehensive Balance Sheet Asset Allocation. Include all of your assets (building, practice, royalties, etc) in this to get the complete picture — not just the ones on your brokerage statement.
- ◆ Strategies to improve return and manage risk (simplify & consolidate)
  - Time horizon – the longer you stick to the plan the better chance of a desirable result (lifetime, not retirement age).
  - Expenses – pay through business to minimize costs.
  - Intra Family loans – private mortgages can be the best risk/return asset we've seen for fixed income.

- ◆ Think of reviews here as being like three-month or six-month recalls.

#### ☞ RETIREMENT

- ◆ Practice as an asset – project value conservatively and consider demographics
- ◆ Social Security you can plan around, but you can't plan around Medicare.
- ◆ Include employee retirement contributions as a part of compensation – not as an additional cost item.
- ◆ The most common and newest retirement plan design is the Safe Harbor Roth 401K with cross-tested profit sharing features.
- ◆ Review these external forces regularly and form an opinion on inflation, life expectancy, rate of return on assets, taxes, retirement age.

#### ☞ ESTATE

- ◆ If you are in business with another dentist then create a Buy-Sell agreement to plan for death, disability or retirement. This agreement can help protect your family, staff, associates and patients.
- ◆ Have a conversation with parents/children regarding helping a loved one live versus helping a loved one die. Plan a family meeting.

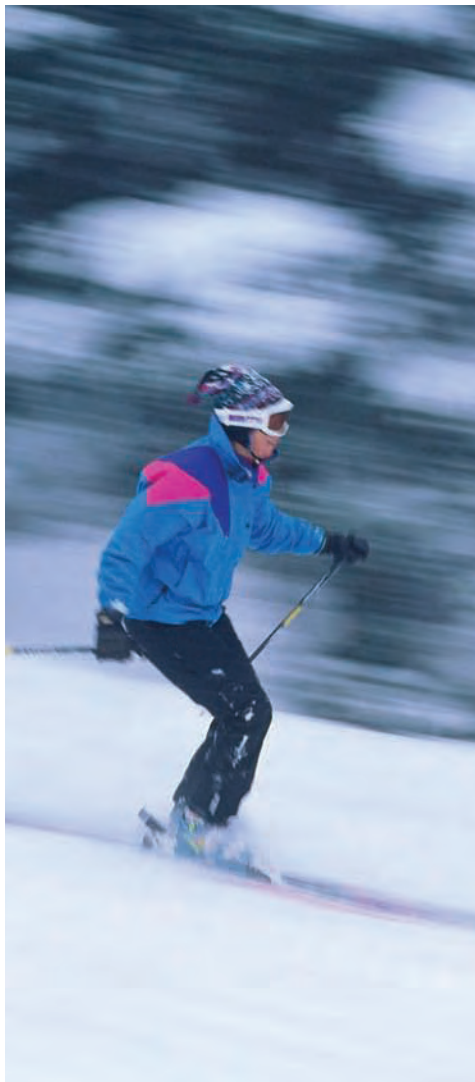
#### ☞ TAXES

- ◆ Roth IRA for kids/grandkids (\$3,500/yr from age 7-12 at 8% = \$1.1 million dollars at age 65 tax-free!)
- ◆ Put ordinary income assets (bonds, CD's etc) in retirement plans and tax-favored (dividend, capital gains) assets in taxable accounts.

- ◆ In 2004 75% of U.S. households paid taxes on \$56,000 of income; the top 1% earned \$297,000+, the top 2% earned \$200,000+. Most dentists are on the wrong side of the voting power curve.

*Fortune Magazine* recently had an article talking about how much more uncertainty there is in the markets now than in the past, mainly due to globalization and technology. Change—rapid change is all around us. The 5 Questions process will help you stay grounded and engage change as it occurs in the most complete manner possible.

*Troy E. Jones, a CERTIFIED FINANCIAL PLANNER™ practitioner is the President and Founder of Access Financial Resources, Inc. (www.afadvice.com). He currently teaches financial planning courses at the University of Oklahoma Colleges of Family Medicine and Dentistry.*



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