THE OFFICIAL PUBLICATION OF THE OKLAHOMA DENTAL ASSOCIATION

ODA JOURNAL

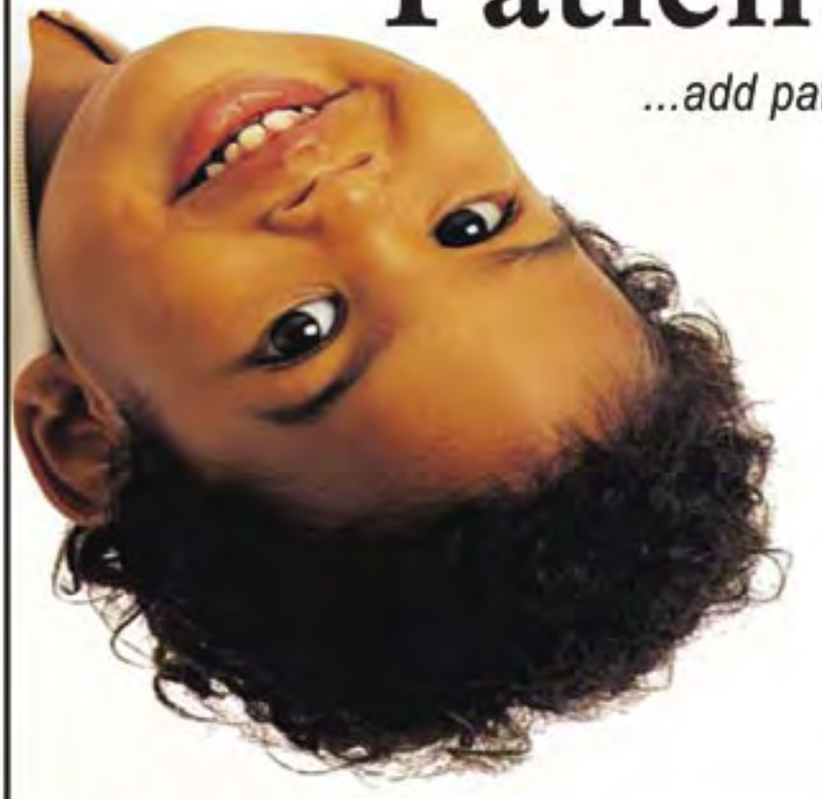
VOLUME 97/ISSUE 8 MAY 2006

Sailing into the Second Century with Dr. Pam Low

pg. 16

Patient Direct™

...add patients without adding cost!



1.5 Million Oklahomans have no access to employer-sponsored benefits!

At Delta Dental of Oklahoma, we're working to stem this trend with Patient Direct™ - our recently introduced discount referral program designed specifically for individuals and families.

For a low annual fee of $60 for individuals or $84 for an entire family, more Oklahomans will now be able to access quality dental services from our network of participating Patient Direct™ dentists. There are no maximums, no deductibles, no waiting periods, no claim forms, and everyone is eligible - regardless of preexisting conditions. Patients simply pay the participating dentist a discounted rate at the time of service according to the Patient Direct fee table.

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!***

Only Dental. Nothing Less.

DELTA DENTAL

THE OKLAHOMA DENTAL ASSOCIATION JOURNAL (ISSN 0164-9442) is published ten times per year by the Oklahoma Dental Association, 629 NW Grand Blvd, Ste. A, Oklahoma City, OK 73118, (405)848-8873. Annual subscription rate of $6 for ODA members is included in their annual membership dues. Rates for non-members are $36. Single copy rate is $6, payable in advance. Periodical postage paid at Oklahoma City, OK POSTMASTER: Send address changes to OKLAHOMA DENTAL ASSOCIATION JOURNAL, 317 NE 13th Street, Oklahoma City, OK 73104. Opinions and statements expressed in the OKLAHOMA DENTAL ASSOCIATION JOURNAL are those of the author and are not necessarily those of the Oklahoma Dental Association. Neither the Editors nor the Oklahoma Dental Association are in any way responsible for the articles or views published in the OKLAHOMA DENTAL ASSOCIATION JOURNAL.

MEMBER PUBLICATION
AMERICAN ASSOCIATION
OF DENTAL EDITORS

INSIDE

ON THE COVER:
Dr. Pam Low, Tulsa, ODA President 2006-2007

ADVERTISER'S INDEX

ODA Today

Who & What

Features

Classifieds

ODATODAY

EXECUTIVE DIRECTOR'S MESSAGE

By Dana A. Davis

What's In It For Me?

I have mentioned on numerous occasions the number of years I have been in Association management (29 years.) In a profession where the only constant is change with new leaders, new laws, new policy, and new generations, there are some questions that never change. "What does my Association do for me?" "What are my membership benefits?" "What am I getting for the dues I pay?" "Why should I join?" And the "classic" responses are: continuing education, networking, newsletters, journals, reduced rates on insurance programs and other services, public relations and education programs, a "home" when you are a student or just entering practice, legislative advocacy, and a place to get reliable answers.

Association members are so accustomed to hearing these responses that I wonder if they really see them as benefits. I would like you to imagine for a few minutes that there is no such thing as the ODA and ADA, let alone a local component dental society. Yet, you are still a dentist. I really mean this. Just stop and think how this could impact you and your practice. Okay, so you are about a $1,000 dollars richer.

- You need to obtain 60 hours of continuing education credit from an accredited CE provider. Numerous companies (some listed on Wall Street) have programs for $1,500 per credit hour. Are they accredited? By whom? There are none being offered in Oklahoma so you will have to travel to New York City.
- You want to purchase a subscription (electronic or print) to a peer reviewed scientific journal to keep abreast of the latest technological advances in dentistry. You make a few calls to other dentists and each has a different recommendation. And of course the cost is $500 per year for the cheapest.
- Congress just amended the Indian Health Service Act creating a dental health aide practitioner with 18 months of training after high school. Several have been employed in Oklahoma to provide dental care on Indian reservations.
- Your practice no longer does a denture business as most people go to a denturist because of lower rates.
- You want to purchase new equipment for your office and want to make sure you check out all that is on the market. You plan to attend the only annual dental trade show in the country and you guessed it, it's in New York City. The show is conducted by dental equipment and supply companies. You visit 100 companies all claiming to have the best there is. You wonder who has tested this equipment. How do I select a company? Where do I turn?
- Blue Cross just sent you changes to your provider contract. You decide to pay an attorney to review it at a standard $250 per hour fee.
- You want to propose a change to Oklahoma's Medicaid program so you call your Senator and Representative who inform you they will look into it. Legislative session is over and no change. So you call the legislators again. They tell you that when they looked into it by calling the Oklahoma Health Care Authority, they were informed that there was no need for the change.
- You just received a photo copy letter from some organization called "CMS" requesting your social security number so you can be assigned an NPI (national provider identification) number. You are told that by 2007 all insurance companies will require you to use your NPI to process claims. Who is CMS? Should you send your SS number?
- You have a patient who threatens to sue you if you do not refund their money. The patient claims you performed inferior dental work. You wish there was a professional group of peers to review the patient's records and advise you and the patient without going to court.

You are frustrated but after two trips to New York City you are happy that you live in Oklahoma and only have to pay $1.25 for a cup of coffee. You spent $3,000 to go to New York and still have not purchased your new equipment. You also attended a CE course at a cost of $5,000 and you hope the Board of Dentistry will accept the hours. Your attorney charged you $500 to review the Blue Cross contract. The Oklahoma Medicaid program has not changed even though you contributed $500 to your legislators' campaign funds. The new journal you are reading has some really weird articles and 60% of it is advertising. You still do not know what to do about the NPI thing. And the patient has filed suit.

You begin to wonder why you and other dentists haven't gotten together to create an association that helps you address these problems. Maybe you should call it something like the American Dental Association or the Oklahoma Dental Association. ●

MAY

MAY 1 – ODA Offices Closed

MAY 10 – Children's Oral Health Coalition - 10:00 AM-12:00 PM

MAY 13 – ODF Mobile Dental Care Program - Ambassador Courts

MAY 15 – Retired Dentists Lunch - 11:30 AM - ODA Building

MAY 19 – SC States Leadership Conference - New Orleans

MAY 20 – SC States Leadership Conference - New Orleans

MAY 26 – Okla. Academy of General Dentistry presents Gordon Christensen, Marriott, OKC, 8:30 AM

MAY 26 – ODF Mobile Dental Care Program - Will Rogers Courts

MAY 29 – ODA Offices Closed

JUNE

JUN 10 – Children's Oral Health Coalition - 10:00 AM-12:00 PM

JUN 16 – ODF Mobile Dental Care Program - Fred Factory Garden

JUN 19 – Retired Dentists Lunch - 11:30 AM - ODA Building

JUN 20 – OHCF Council Meeting - 11:30 AM - ODA Building

JUN 22 – ADA New Dentist Conference - Boston

JUN 23 – ADA New Dentist Conference - Boston

JUN 24 – ADA New Dentist Conference - Boston

Do you have an event that you would like added to monthly the calendar?
Email or fax your event to Stephanie at strougakos@okda.org or send by fax to 405-848-8875

In Memoriam

Dr. James Thomas
Birth: June 25, 1920
Death: March 19, 2006
Ada, Okla.

Dr. Loyd Dudley
Birth: June 1, 1930
Death: March 10, 2006
Durant, Okla.

THANK YOU

To Our 2006 Annual Meeting Sponsors!

The ODA Annual Meeting is made possible by the gracious investment of the following companies. Please take time to thank and patronize them!

PLATINUM
Alexander & Strunk
Delta Dental

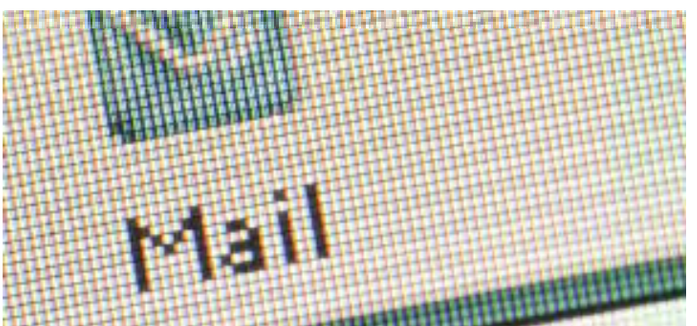
GOLD
Brasseler
ODASCO
Patterson Dental Supply

SILVER
Bank of Oklahoma
Endodontic Associates

BRONZE
Bezan, Warden & Gonzalez
BlueCross Blue Shield
Braum's
Dentsply
Eastern District Dental Society
IP Financial Solutions
Nobel Biocare
ODA Alliance
OK Society of Oral & Maxillofacial Surgeons
POH
Stillwater National Bank
Sullivan-Schein

WELCOME!
ODA New Members

Dr Mark D Smith 1205 E Ross Bypass	Tahlequah, OK 74464-4188
Dr Kerry Edwards 5432 E 65th Pl	Tulsa, OK 74136-2056
Dr Marlo Miller 3501 NW 50th St	Oklahoma City, OK 73112
Dr Eric D Kyrk 824 N Cedardale Dr	Oklahoma City, OK 73127
Dr Jamie C Talley 1616 Park Lane Dr	Edmond, OK 73003-4607
Dr Jason Carper PO Box 1637	Durant, OK 74702-1637
Dr Khanhlam K Phan 500 NW 18th St	Oklahoma City, OK 73103
Dr Casey A Roberts 1305 E Kirk St	Hugo, OK 74743-3601
Dr Warren L Good 2112 S Atlanta Pl	Tulsa, OK 74114-1709



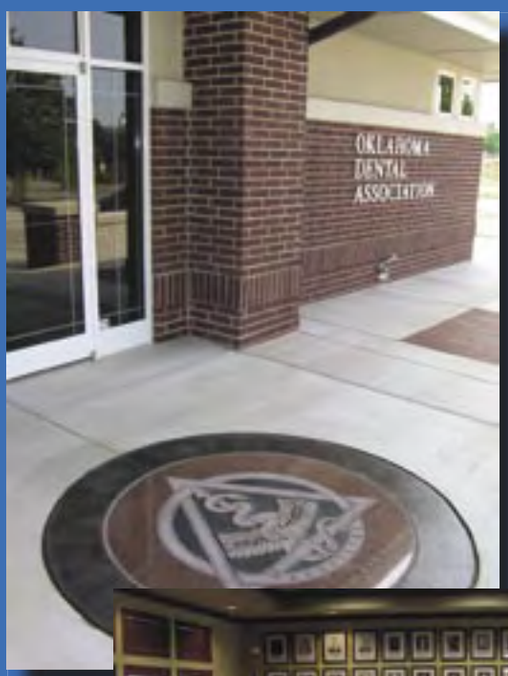
ARE YOU RECEIVING THE ODA UPDATE NEWSLETTER VIA EMAIL?

If not, contact **lmeans@okda.org** to sign up!

THE FUTURE IS NOW...

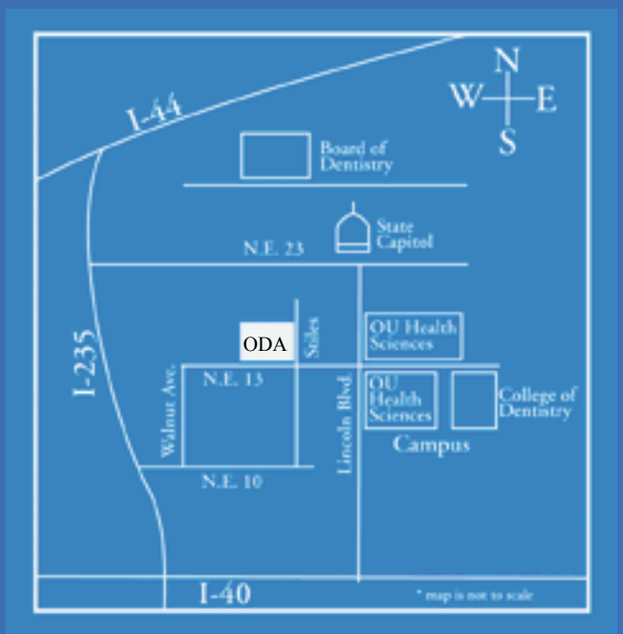
THE NEW ODA HEADQUARTERS

Be a part of the headquarters for organized dentistry in Oklahoma by making a pledge to the ODA Centennial Membership Section. Your contribution to the new ODA Headquarters is tax deductible as a business expense. Paying for the new ODA Headquarters now instead of later helps build the financial strength of the ODA by **eliminating an annual interest payment** of $25,000, **decreasing the annual operating budget** by $65,000, and **creating a one million dollar asset** for the Association. The financial support your pledge provides will be recognized in the new ODA Headquarters.



Contact the ODA today to make your contribution to the new building

405-848-8873 / 800-876-8890



2006 ODA NATIONAL CHILDREN'S DENTAL HEALTH MONTH POSTER CONTEST

Winners of the ODA National Children's Dental Health Month (NCDHM) poster contest were recently selected from the 1,600 entries received for this year's contest. Madeline Smith of Bethel Elementary school in Shawnee won first place in this year's state contest for her fashion-inspired poster (see below). Christina Bevien-Guevarra of Parkview Elementary in Oklahoma City won second place for her health-inspired poster and Destiny Lawrence of Hobart won third place in the contest for her patriotic-inpired rendition (see below).

1st Place - Madeline Smith

2nd Place - Christina Bevien-Guevarra

3rd Place - Destiny Lawrence

The ODA poster contest is an annual event that takes place as part of NCDHM. The contest is open to all fourth-grade students in the state. All posters received at the ODA headquarters are divided into Districts and sent to the Council on Dental Education and Public Information members for selection of District poster winners. District winners receive $100 for first place, $60 for second place, and $40 for third place. The State winners were then selected from all District winners by ODA President, Dr. Sid Nicholson. The first place state prize is $500, second place receives $300, and third place receives $200. All winners also receive complimentary ice cream for a year from Braum's, the ODA's corporate sponsor for Children's Dental Health Month.

"We are so honored to once again work with the ODA in celebration of National Children's Dental Health Month," said Drew Braum, President of Braum's. "We believe in educating Oklahoma kids on the importance of good dental health. A healthy smile starts with proper nutrition, which means drinking plenty of calcium-rich products, like Braum's milk."

district poster winners

northern district
1st Place – Chase Morris, Grove
2nd Place – Justin Smith, Claremore
3rd Place – Jennie Arlene Bergman, Grove

southwest district
1st Place – Kayla Silver, Hinton
2nd Place – Destiny Lawrence, Hobart
3rd Place – Selena Rodriguez, Roosevelt

tulsa county
1st Place – Madison Pride, Broken Arrow
2nd Place – Zoe Heath, Tulsa
3rd Place – Whitney Barnes, Tulsa

southcentral district
1st Place – Tristan Austin, Lawton
2nd Place – Jessie Hames, Piedmont
3rd Place – Stetson Clawson, Blanchard

oklahoma county
1st Place – Harley Martinez, Cleveland
2nd Place – Corbin Fain Darnell, Edmond
3rd Place – Christina Bevien-Guevarra, OKC

eastern district
1st Place – Cary Hayes, Warner
2nd Place – Madeline Duncan, Choctaw
3rd Place – Dominic Cartassa, McAlester

northwest district
1st Place – Micah Tautkus, Kingfisher
2nd Place – Garrett Menendez, Enid
3rd Place – Samuel David Clemens, Enid

Professional Practice Transistions LLC

Enhancing and Protecting the Value of Your Practice

SPECIALIZING IN:

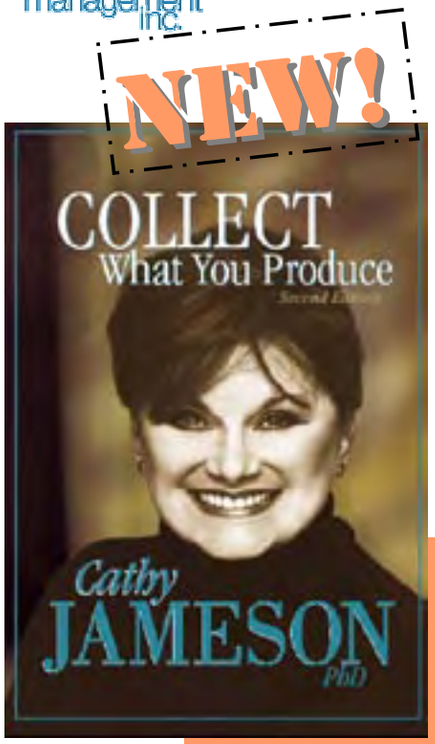
- Practice Sales
- Mergers
- Associate Buy-Ins
- Exit Strategy Design & Implementation

For More Information Please Contact
Todd F. Hudgins, C.P.A., J.D., LL.M. (taxation) or
Denise Fiorucci
7030 S Yale Ave Suite 300, Tulsa, OK 74136
918-346-6923 Phone 918-493-1667 Fax

The NUMBER ONE REASON people DON'T COME to the dentist is COST.
according to ADA survey results

Jameson management Inc.

Learn to help patients overcome that fear of cost as you & your team begin to ***Collect What You Produce.***



*"*I am so excited about our current and total account receivable figures! In addition, we already have an amazing number for production scheduled and it's only the 7th of the month! Our last collection percentage was 102%. We ARE collecting what we're producing and having a blast. **It can be done with Jameson Management systems**," said Consulting Clients Drs. Mori & Teri White of Woodward, Oklahoma.

For a sneak preview of the Jameson Method and the difference it can make in YOUR life, **order your *Collect What You Produce* book today by calling 877.369.5558**.

*Mention this ad for a **special reward** when you order!*

ODA PROFILE:
ODA Membership Services Manager, David Duden

David R. Duden was born in Oklahoma City at Baptist Hospital on July 7, 1978 and then lovingly raised in nearby Yukon. His mother and father, Rick and Kathy Duden, armed themselves with a barrage of headache suppressants and began the overwhelming task of raising a boy who frequently landed himself in one emergency room or another. And so it went for the next 22 years until May of 2001 when David graduated from Oklahoma State University with a Bachelors of Science in Journalism & Broadcasting-Advertising. Rick and Kathy breathed a collective sigh of relief as David was now responsible for any and all insurance.

In the fall of 2001, an ambitious David began his professional career at Ackerman McQueen Advertising in the Traffic Department of the Oklahoma City office as their Insertions/Photography Archives Manager. For a year-and-a-half he worked directly with the Creative Services team and many publications and vendors nationwide to ensure the accuracy of the agency's print insertions.

For the next year, a more experimental and curious David set out for Las Vegas, Nevada and Sedona, Arizona to take advantage of several freelance writing opportunities, as well as personal ones, and experience first-hand the incredibly gratifying feeling of living in the high desert. The desert, which David grew to respect and admire as a gallifmaufry of vast and inspiring extremes, catered to the cumulative benefit of his mind.

Beginning in 2004, David began at Ascend Media working as a Production Supervisor. In this role based on quality control and logistical planning, he produced daily newspapers, membership directories and many other publications for an array of clients such as the Sundance Film Festival, Ace Hardware, the American Academy of Dermatology and the American Film Institute. The logistical portion of this position was predicated upon the ability to effectively coordinate many time-sensitive schedules with multiple vendors in many cities around the country. Daily deadlines fused one week to the next for close to two years.

Now, as ODA's Membership Services Manager, David hopes to immediately and seamlessly merge into the ODA's operations to act as a positive resource tool and liaison for all ODA members.

The ODA *Journal* caught up with David in an effort to help define what assets he brings to the ODA. Here is what he had to say:

ODA: What has been the most exciting aspect of your first week of work here at the ODA?

DD: All of the different responsibilities have greatly peaked my interests. I have a great penchant for variety and this first week has shown me the wide array of tasks and duties I will be performing here at the ODA. Also, it has been an excellent homecoming for me. My two nephews, Ian(3) and Connor(2), had better be prepared to wrestle.

ODA: Which of your personal traits do you believe will contribute to your success in the Membership Services Manager role?

DD: Initially, what comes to mind is that I am very detailed and organized. Now, I wouldn't say that I'm OCD but you can bet there's always a method and an agenda to my workload! Additionally, I am a genuinely easy-going person who enjoys aiding in the resolution of issues and problems, and I feel that will translate into positive relationships between the ODA's members and myself.

ODA: What have you learned about the dental profession that you did not know before you worked for the ODA?

DD: Coming from an advertising/publishing background there have been many things I've learned in just one week on the job. The business structure of an association like the ODA is quite different than what I'm used to in an advertising agency or publishing company. There is much more philanthropy and service correspondence in an association like this than there is in a profit-driving, deadline-heavy, independently-owned company. As each day passes I will learn more and more what the dental profession is all about and what a wonderful resource the ODA, and the ADA, is for its members.

Proven

providers of financial solutions for dentists.

- Personal Lines of Credit
- 100% Dentist's Mortgage
- Personal Financial Services
- Start-up Practice Financing
- Real Estate & Equipment Financing
- Practice Consulting Services
- SNB Digital Lockbox
- Cash Management Services

SNB

STILLWATER NATIONAL BANK

1.888.762.4762 • www.banksnb.com • Member FDIC

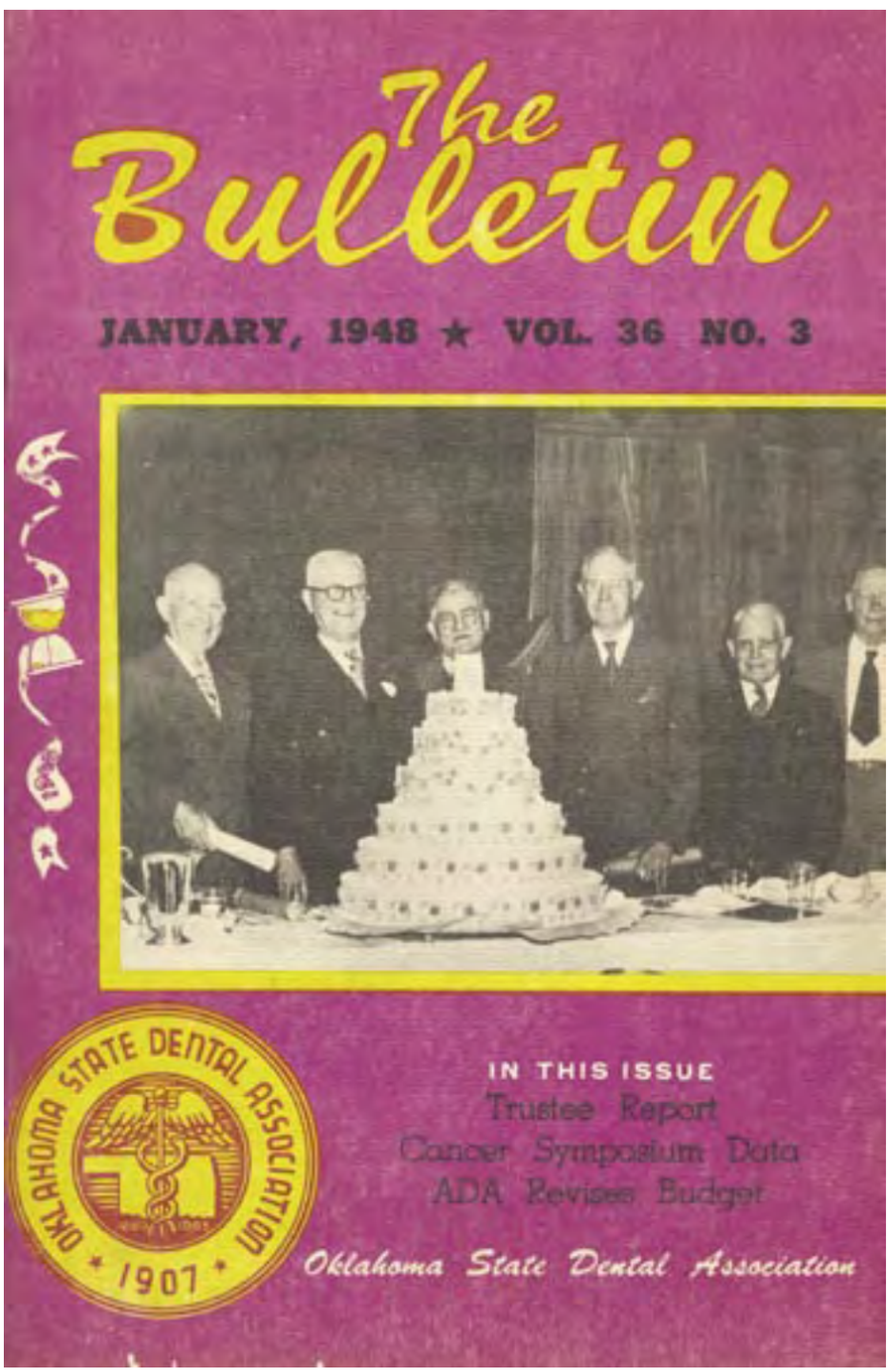
Subsidiary of Southwest Bancorp, Inc. NASDAQ: OKSB

In Oklahoma: Stillwater • Oklahoma City • Tulsa • Chickasha **In Texas:** Dallas • Frisco • Austin • San Antonio

EQUAL HOUSING LENDER

FEATURES

In the spirit of celebrating our 100th birthday the *ODA Journal* will be featuring articles, trivia and advertisements from past Journals over the course of the next two years. Join us now as we rewind to the January, 1946 issue of the Oklahoma Dental Association's *The Bulletin.*



Technique of Impregnation for Caries Prophylaxis and Desensitization of Dentin

B. Gottlieb, Dallas, Texas
Baylor University College of Dentistry

Teeth, which are to be extracted, should be extracted before impregnation. A thorough prophylaxis should be done, tenacious plaques should be removed and the tooth surfaces polished. A group of three, or at most, four teeth destined for impregnation should be isolated with cotton rolls. It is of utmost importance to keep the teeth surfaces, which have been impregnated, meticulously dry. If that cannot be accomplished quite reliably with cotton rolls and saliva ejector, rubberdam can be applied. Afterwards the teeth should be dried with compressed air. If no compressed air is available the teeth should be dried at first with dry cotton pellets and then with the chip blower. Remaining moisture on the tooth surfaces proved to be the most common cause for failure.

The teeth are then washed thoroughly with benzin. This should not be considered superfluous and omittable. Experience in desensitization of dentin proved its value. Some people complained that they did not get desensitization after repeating impregnation three times. Inquiries revealed that they had omitted benzin. The slightest film formed by the saliva in minutes seems to be enough to prevent penetration of a chemical into the tooth substance. On the other hand—if we dry the tooth thoroughly with benzin it is prepared to let any fluid penetrate better.

The surface tension of different chemicals shows great differences. Sometimes the surface tension is too high that the fluid forms globules which roll off, and we do not even succeed to make it penetrate into a cotton pellet. If we add to such a fluid a drop of a surface tension lowering chemical the fluid penetrates into the pellet easily. We moisten therefore the dried tooth surface with such a surface tension lowering chemical to each portion. If we do that, we have no difficulty in picking up the fluid with a cotton pellet. We use 1% solution of Nacconol LAL as wetting medium. Any other wetting agent mat be used;

there are many on the market. It should be made sure that the used wetting agent does not precipitate following chemicals. If it does, it can not be used. The zinc chloride—potassium ferro cyanide has been brought on the market with the surface tension lowering already added.

It is always advisable to pick up the surplus of any chemical used from the gingival margin with a cotton pellet. We do it with nacconal, and especially so with zinc chloride and potassium ferro cyanide. If we allow the nacconal to flow freely over the surrounding soft tissue we have paved the way for following strong chemicals which flow also over the soft tissue and damage it. If we pick up the surplus from the gingival margin right after moistening the teeth we will never experience limited or extended sloughing of the tissue. In the past, when we carelessly used phenol the same thing happened. Phenol was not to be blamed, but the carelessness. If we allow the Nacconol to moisten an extended area outside the rubberdam, in impregnating a prepared cavity, the zinc chloride will follow the Nacconol—especially when a large amount is taken up with the cotton pellet. Removing the rubberdam, after having been on for some time, we should not be surprised to find an extended area of the mucous membrane damaged. Especially when impregnating cavities, one should be cautious not to leave excessive fluid in the cavities which may dilute following chemicals. The tooth should be left only moistened. Now the coagulation of the organic material the precipitation of an insoluble salt follows. We recommend a 40% solution of zinc chloride in distilled water. If we do not allow it to contact the mucous membrane for a prolonged time we may use this concentration without hesitation. In order to make sure that it penetrates between the contact points we pass dental floss through contacts. We the apply 20% potassium ferro cyanide, again pass dental floss between the contacts and pick up the surplus from the gingival margins. The water insoluble zinc ferro cyanide forms. The zinc chloride should be left on the tooth one minute in order to ascertain good penetration. Where a thin wall of dentin separates the tooth surface from the pulp, we precipitate the zinc chloride with potassium ferro cyanide after less that thirty seconds and repeat the impregnation more often. That way we do not allow the zinc chloride to penetrate to the pulp, damaging it. The application of the potassium ferro cyanide should be repeated after every 30 seconds until a milky precipitation appears. This precipitation develops slowly.

If we see a white precipitation on the cotton pellet which was used for rubbing in when we turn it for inspection we have an indication that the precipitation has formed. The precipitated surface should then be moistened with water which completes the precipitation (in cavities) A pellet soaked with water should be placed into the cavity. Never being sure that some place has not been omitted, it is advisable to check on the result of our impregnation by checking its power of desensitization of dentin which gives us instant information about the action caries prophylaxis. Some dentists report that the desensitization effect on dentin is best when we impregnate with zinc chloride-potassium ferro cyanide. While the tooth is still moist from the potassium ferro cyanide we apply 10% silver nitrate solution. We produce zinc-ferro cyanide, silver ferro cyanide, silver chloride, and three water soluble salts. After this impregnation we achieve the best desensitization.
It appears advisable to use the same procedure also in impregnation for caries prophylaxis, impregnating the bicuspids and molars with the mentioned three chemicals and the front teeth every time twice with zinc chloride potassium ferro cyanide, especially cavities under silicates. The combination of the three did not discolorate until now but zinc-chloride potassium ferro cyanide can not discolor even under silicates.

It is of utmost importance to impregnate the occlusal surfaces of the first molars as soon as they come through. When we save pits and fissures of these teeth from becoming carious, we render great service.

Between the ages of six and twelve new teeth and new belts of teeth continue to erupt. At this period at least three double impregnations a year are necessary. After that the continuous tooth eruption slows down and one double impregnation a year seems to be enough in order to take care of the newly erupted belts. At such occasions the entire clinical crown is impregnated. The constant wearing down of the contacts may expose here non impregnated layers. When the cementum surface has to be taken care of, again three double impregnations a year seem to be advisable. It is difficult to penetrate the cementum.

Harold Younger in experiments made at Freeman Clinic for children at Dallas, Texas, with impregnation by silver nitrate precipitation has reported the following results: After one year: 25 treated mouths had 11 new cavities or .44 new cavities per child while 5 untreated controls had 21 new cavities or 4.2 new cavities per child.

After two years only 20 of the treated group was available for re-examination. Twenty treated mouths had 13 new cavities or .65 new cavities per child while the same 5 untreated controls had 26 new cavities or 5.2 new

cavities per child.

After three years only 12 of the treated group were available for re-examination. Twelve treated mouths had 4 new cavities or .33 new cavities per child, while 2 of the untreated controls which were available for examination had seven new cavities or 3.5 new cavities per child. On another group in which half mouths consisting of the upper right and lower left quadrants were treated—leaving the upper left and lower right untreated as controls—he reported the following results:

After one year: 20 had four new cavities in the treated quadrants or .2 new cavities per half mouth and 39 new cavities in the untreated quadrants or 1.95 new cavities per half mouth. After two years: 16 of the original group had 8 new cavities in the treated quadrants or .5 new cavities per half mouth, and 30 new cavities in the untreated quadrants or 1.87 new cavities per half mouth. Six others who had a similar treatment with another silver nitrate compound had 4 new cavities in the treated quadrants after one year or .66 new cavities per half mouth and 14 new cavities in the untreated quadrants or 2.33 new cavities per half mouth.

In all these experiments only one impregnation was made per year at the time of re-examination. When the yearly examinations were made only cavities which had occurred since the last examination were counted as new cavities.

Other Occasions When Impregnation Should Be Used In Dentistry

Whenever we make a prophylactic cleaning of the tooth surfaces we expose a deeper layer. When the quality of the saliva, of which we know is so little, is ideal this new surface is taken care of instantly and no harm develops. But we certainly don't run any risk of fortifying the newly exposed surface by impregnation and don't take any chances. In cases where the anatomical root is exposed, we often encounter sensitivity of the root surface, having removed the thin cementum layer and exposed dentin. It is advisable to impregnate every case after cleaning and to check the root surface for sensitivity to cold, not leaving such sensitivity unattended. After some time, the sensitivity of brushed surfaces come back. It indicates that the thickness of the dentin to which the first impregnation had penetrated has been wasted away and a non impregnated layer has been exposed. Another impregnation must be performed.

Whenever we expose dentin either in cavity preparation or in tooth preparations for any kind of crown we open a great number of dentinal tubuli. If they are not sensitive to cold it indicates that the tubuli have been obstructed by calcium salts in the past by the tissue fluid following in the tubuli. But if there is sensitivity to cold it indicates that the tubuli are open to the pulp. We should not allow infection in these tubuli. They should be impregnated right after preparation and the impregnation should be repeated in the same sitting until cold water is not felt. The reputation of dentistry has suffered a lot in the past by pulps becoming necrotic under fillings or crowns. The prevention of sensitivity to cold after a restoration has been made will help our reputation. Such happenings may be prevented by obstructing the opened tubuli and preventing micro-organisms from penetrating to the pulp. That will be doubly useful under silicates.

In subgingival cavities, especially in premolars and molars, we have to fight against the moistening of the cavities from the exudation by the soft tissue. We impregnate such cavities with 10% silver nitrate solution and precipitate it instantly with one percent hydrochloric adrenalin (R. Boelsche). The dentin turns black and becomes insensitive and the exudation from the soft tissue stops.

Green stain is apparently the result of an invasion into the surface of the tooth of microorganisms which produce green stains. Some microorganisms remain in the recesses of the prism sheaths and lamellae. If we coagulate these microorganisms, and obstruct their living space by additional precipitation, experience shows that the green stain does not come back.

In Orthodontics and in cases of clasped teeth we sometimes observe a greater incidence of dental caries. It has long been known that tooth surfaces which are prevented from being washed by saliva are more susceptible to dental caries. Orthodontic appliances as well as clasps of partial dentures provide such cases. In partial dentures we render great service by advising the patient to remove the denture during the night in order to give the saliva a chance to wash the clasped tooth. In addition we will do good to impregnate all teeth at least three times before fixing the appliance. Such impregnation can only protect the enamel from invasion of microorganisms but not from acid action eventually produced on the teeth surface by fermentation or carbohydrates.

Before filing of treated infected root canals we impregnate the infected root canals, moistening the walls with nacconal after drying with benzin, and using paper points as carriers. We experience no irritation of the periodontal tissue as we did sometimes in using ammoniacal silver nitrate. The silver nitrate irritates like any coagulating chemical, but if we precipitate the silver nitrate or zinc chloride to an insoluble salt the irritation is arrested instantly. We may impregnate in this way a thin dentinal wall where the pulp shines through pink and we will not get pulp irritation, provided we don't leave the zinc chloride unprecipitated unreasonably long.

Prevention of Accidental Pulp Exposure

When we prepare a cavity in a tooth which has not evidenced spontaneous pain, we have a definite indication that the pulp is not affected by the caries process. If we expose the pulp in such a case, there is hardly any excuse for it. We should perform cavity preparation under control of histological knowledge. After chiseling away the overhanging enamel margins we should remove he necrotic dentin with an excavator. In some cases we will hit the hypercalcified barrier. The hypercalcified dentin appears yellowish. It is very hard and we have no reason to dig deeper. We shape the cavity and our task is accomplished. In other cases we peel off layer by layer of decalcified dentin. Nearly every dentist will remember cases where he continued peeling off until a red point appeared, the pulp was exposed. This problem needs clarification. Such exposures should, and can be avoided. The term carious dentin is misleading. We have to differentiate between necrotic and decalcified dentin. The necrotic dentin has lost its histologic character and appears clinically disintegrated to powder. That cannot be salvaged and must be removed. The decalcified dentin has lost its calcium salts, but is otherwise histologically intact. As soon as we peel off the first continuous layer with the excavator we have already removed the necrotic dentin, and are in the decalcified area. There is not the slightest reason for removing it when we run the risk of exposing the pulp. If we suspect this risk we don't continue the peeling off, impregnate till cold water is not felt, but make a temporary cement filling. This filling should not be removed before three months have elapsed. When we remove it after three or more months we usually find the dentin hardened and we can finish preparation and filling in comfort. By this procedure many cases of pulp exposure can be prevented.

The term NECROTIC DENTIN needs clarification. Generally the term NECROSIS is used in connection with cells indicating that the nucleus has disintegrated. The conditions in the dentin are different. Necrosis here means that the continuity of the tissue as coherent material ceased to exist and powder is present instead.

When we use porcelain restorations of any kind, jacket crowns, or porcelain facings in fixed bridges, we observe often the best color matching with the neighboring natural teeth lost after a number of years, the latter ones becoming more yellowish, by additional deposition of calcium salts into their enamel. None can be deposited into porcelain. H. Crawford proposed thorough impregnation of the neighboring teeth of a porcelain restoration before selecting the color of the restoration. That way we obstruct all possible places for deposition of new calcium salts and may expect that the natural teeth will not become more yellowish in the future. That will prevent a disharmony in color from developing.

Reference: Barnhard Gottlieb Dental Caries; Lea & Febiger, Philadelphia, Pa. 1947

FUN FACTS

from the January, 1948 Oklahoma State Dental Association's, *The Bulletin*

DENTAL BRIEFS

American's sweet tooth, which results in an average per capita consumption of more than 112 pounds of refined sugar annually, is repsonsible for a major portion of tooth decay according to scientists of the American Dental Association

***

More than 90 percent of freshmen and sophomore students in the nation's dental schools are veterans of World War II.

***

Teeth should be brushed immediately after eating, it is recommended by the American Dental Association.

***

Dental scientists report that diseases of the gums and supporting structures of the teeth are among the most common ailments of adult mankind.

***

At the age of 60 years, the average American has only two of his original 32 permanent teeth, according to the American Dental Association.

Sailing into the Second Century

Pam and Karey celebrating their 25th wedding anniversary at Breckenridge.

For Dr. Pam Low leadership is natural. It was the first day of class for the first-year dental students at the University of Nebraska in 1974. During orientation the instructor suggested that it would be nice for those interested in season football tickets to buy them in a block. After a lengthy silence, Pam raised her hand and volunteered to collect the student IDs and money and purchase the tickets. When the class was told the following week that they needed to elect officers, Pam was unanimously elected President. This was the beginning of the path that would lead to her newest and possibly most challenging position, President of the Oklahoma Dental Association, where she is the first woman to hold the position.

Volunteering had always been a significant part of Pam's life at school, church, and in the community. Her first experience as a volunteer in the health care field was as a candy striper in high school. In 1983 Pam and her husband Karey (a dental classmate) went on a medical/dental mission trip to Haiti with their church. Working outside in assembly line fashion, they extracted over 900 teeth that week. After returning to Tulsa, they began volunteering their services at Neighbor for Neighbor, which continues today. They also went on mission trips to Mexico, Bolivia, and Guatemala through their church. In 1984 they spent a month in Hong Kong working in the Vietnamese refugee camps through the Rotary Foundation. She has provided dental care for young ladies in the Frances Willard Home, and participated in Senior Dent, D-Dent, EODDS, and the Share a Smile programs.

Pam and Karey met in dental school and began dating after summer clinic of their junior year. They were married during Christmas break of their senior year, December 1977. They had thoughts of moving to Wyoming or Montana, but after a bitter cold winter with too many 30 degree below zero days, they decided to head south instead. Following graduation, they moved to Sand Springs. Pam started her practice in downtown Tulsa and Karey joined an office in Mannford. In 1979 Karey relocated his practice to the Utica Square Medical Center in Tulsa. Finally, in 2001 they formed their second legal partnership (their marriage being the first), Low Family Dentistry, LLP, and started practicing together at their new location, a 3000 square-foot renovated house near Utica Square.

The third of five children, Pam was born in Omaha, Nebraska. Because her father was in the Air Force, she moved

Pam working in Bolivia with Rev. Bob Younts assisting.

Working in Haiti after dark - using flashlights and lights from the Jeep.

around frequently and attended five different elementary and junior high schools and three different high schools. She lived four years in Zaragoza, Spain, and two years in Ankara, Turkey. Her family also lived in Indiana, Texas, and North Dakota. Upon her father's retirement, they moved to Lincoln, Nebraska, where she spent her senior year in high school, and eventually attended dental school.

Pam and Karey began sailing after moving to Oklahoma. They are members of Windycrest Sailing Club and enjoy racing their Capri 25 sailboat named Low Key. This is one of her favorite hobbies. Other hobbies include windsurfing, scuba diving, and snow skiing. She also enjoys traveling, playing the piano and working on the computer. They are also very active at Boston Avenue United Methodist Church.

Pam and Karey working in Guatemala with assistant Rev. Rod Newman

Pam ready to hoist the spinnaker while racing on Lake Michigan.

Pam received her Bachelor of Science from the University of Nebraska with a major in dentistry. She is a member of Phi Beta Kappa and Omicron Kappa Upsilon. Pam has been involved with organized dentistry since beginning her practice. She has been a member of the House of Delegates numerous terms. She has served on TCDS's Mediation Review Committee and on their Executive Committee. In 1987, she was secretary of the Tulsa Metropolitan Association of General Dentists, and then served as president in 1988. She moved through the offices of the Tulsa County Dental Society, becoming President in 1996. She served two terms as Secretary for the Oklahoma Dental Association, first in 1997 and then again in 2000. Pam was chair of the Council on Annual Session for 2004. In 1997 she became a member of the Pierre Fauchard Academy. She earned TCDS's A. L. Walters Award (outstanding dentist of the year) in 1998, and their James A. Saddoris Award (outstanding contributions to organized dentistry) in 2003. She began her term as Vice-President of the ODA in 2004 and was inducted into the International College of Dentists in 2005.

Windsurfing in Bonaire.

The *ODA Journal* had a chance to sit down with Dr. Low, here is what she had to say:

ODA: Describe your first involvement with the ODA.

PL: My first experience at the state level was when I was asked to be a substitute delegate at a meeting of the House of Delegates. I remember walking into my first meeting right at the starting time, seeing most of the delegates seated, and thinking "Wow! This is an impressive group."

ODA: Who has been the most influential ODA member you have come in contact with?

PL: Undoubtedly, Jim Saddoris and Richard Haught. They were among the first dentists I met after moving to Tulsa, and their dedication to organized dentistry has been an inspiration. Al Keenan and Steve Hogg have had a tremendous influence in getting and keeping me active in state leadership, as I served as Secretary/Treasurer for both men when they were President of the ODA. They kept encouraging me to move up the ladder.

ODA: What do you consider to be the greatest strengths of the ODA?

PL: The knowledge, insight, and experiences from our members who have served at the national level benefit our state association. We have many members who have expertise in a wide range of subjects outside of dentistry. This is also a valuable resource. I certainly consider our excellent staff to be a great strength. Our staff is dedicated and they are a pleasure to work with.

ODA: What goals have you set for yourself and the ODA to be accomplished during your presidency?

PL: The first goal is to put into action the Strategic Plan approved by the House. This document is the result of much time and effort by many members. The first brainstorming session was February 11, 2005. The President of each district was invited, along with other members, representing all segments of our Association. Then three task forces worked diligently to further develop the plan. I hope to have our association work hand in hand with Dr. Mayer and the Oklahoma Dental Foundation to utilize their new mobile dental units to provide dental care for needy Oklahomans. Another goal is to make our Centennial Celebration a great one. At the House of Delegates last year, I stated my official theme would be "Sailing into the Second Century" and the unofficial theme would be "Party with Pam". As my dental class approached its 5th anniversary, I phoned classmates in Nebraska to works, I organized our reunion activities from Tulsa.

contd. on pg. 21

By: Dr. Ken Coy, Associate Dean for Student Affairs and Admissions and Director of Behavioral Sciences, University of Oklahoma College of Dentistry
Dr. Frank Miranda, Senior Associate Dean, Academic Affairs, Alumni Affairs and Continuing Education, University of Oklahoma College of Dentistry

MENTORING

A TEAM-BASED APPROACH

In Greek mythology, Mentor was the loyal friend and advisor of Odysseus and the teacher of his son, Telemachus. Today, the word "mentor" has come to mean "wise advisor, teacher or coach". It has even been morphed into a verb whereby to "mentor" someone is to serve as a counselor or teacher. Mentoring as a conscious activity can probably be traced back to the earliest beginnings of civilization when fathers taught their sons the art of fighting saber-toothed tigers (or settling for vegetarian fare after successfully fleeing from them!). In the Oklahoma Territory, a little more than a century ago, a great deal of training was acquired through apprenticeships, with village blacksmiths, carpenters, self-proclaimed physicians and others passing on their arts to selected trainees.

While the early practice of learning at the feet of a guiding teacher has been supplanted by the formal educational process of universities and multi-instructional teaching modalities, mentoring has played a significant and integral role in the elevation of the health sciences from the level of trades, to that of respected professions. Although some believe these wise sages of the past are a dying breed,[1] mentoring as it is classically envisioned, remains a vital tool in the learning process. In a report from the ADEA President's Commission on Mentoring, it has been shown that mentoring benefits all parties involved. It benefits the person mentored by providing "encouragement, direction and career development" as well as "personal and professional growth and development". It also benefits the mentor by providing "an opportunity for intellectual engagement and stimulation" as well as "an opportunity to 'create a legacy' by helping to prepare the next generation".[2] Studen-Pavlovich also found that mentoring can make a significant difference in terms of professional growth and development.[3] Romberg described the characteristics of effective mentors as being "supportive, friendly, available, flexible, considerate, attentive, responsive, knowledgeable, and motivated.[4]

In recent years, several different attempts have been made at the University of Oklahoma College of Dentistry to provide unique experiences for dental students through some fairly traditional mentoring practices. The "Big Brother/Big Sister" program, for example, pairs each incoming student with a student from one of the upper classes who can offer insight into how best to manage the rigorous dental school curriculum. While conceptually sound, this arrangement has had limited success because upper-level students must deal with their own issues and limitations, which can preclude the attention necessary to make the program work as intended.

A second approach has involved pairing selected students and faculty on specific research projects during the summers following the first or second year. In this mentoring model, the faculty advisor directs his/her student(s) through the research process, providing valuable instruction and guidance in relevant aspects of the art and science of dentistry. This unique one-on-one interaction introduces many educational opportunities not available in the classroom. Students engaged in summer research with a faculty mentor are more likely to choose to continue their education in graduate specialty programs.[5] While the summer research program has enjoyed a measure of success, it has been limited by funding, insufficient numbers of faculty actively engaged in research, and reduced opportunities due to increasing demands on faculty time.

A third mentoring avenue has for many years been an integral part of the curriculum offered through the Department of Dental Services Administration. A formal externship program provides

all junior and senior dental students with the opportunity to experience multi-week assignments in either a private practice or an institutional setting. In this model, practicing dentists and/or institutional administrators serve as mentors to provide valuable, "real world" experiences not available in a formal academic setting. The preceptor/extern program has been very successful and is touted by many students as one of their most valuable learning experiences. Boston University even experimented with allowing students to intern in dental practices while gaining paid professional work experience.[6] This program of linking professional students with private practice opportunities has also been implemented at the postdoctoral level at some institutions.[7] Pilot programs utilizing mentoring and personal development plans (PDPs) are also being used in postdoctoral dental education to instill a life-long learning mindset.[8] Unfortunately, the main drawback of the externship model is the difficulty in calibrating the various externship assignments to ensure equivalent learning experiences for all students. Although mentoring is by common understanding a one-on-one activity, its inclusion as a required part of the curriculum demands attention to the relative equality of student experiences.

A new team-based approach to mentoring is currently under consideration. It is a joint venture of three separate entities -- the College of Dentistry, the Oklahoma Dental Association (ODA), and the Oklahoma Chapter of the American Student Dental Association (ASDA). In this model, the mentoring provided to each first-year student would be the combined responsibility of a team of three mentors: [1] an upper-level dental student; [2] an in-house faculty advisor; and [3] a practicing dentist from the private community. Through this team concept, each mentoring group would enjoy increased support, integration, learning, collaboration, experience and accountability in the advice and counsel they provide to their student charges. Collectively, a "mentoring team may be able to provide a holistic perspective on professional growth and development.[2] The following method of selecting mentoring team members would be critical to the success of this model:

Student Upper-level student mentors would be recruited by the local ASDA chapter to provide advice and counsel from the time a new student arrives on campus. Selection as a mentor would be based on the upper-level student's availability, willingness to participate, academic standing, and degree of campus activity. Student mentors would be encouraged to meet with their charges at least twice a month to exchange information as well as provide insight and encouragement.

Faculty Each incoming first-year student would also be assigned a faculty mentor. Faculty and their assigned student(s) would meet at least once a month to discuss the student's strengths and weaknesses, set achievable goals, identify perceived challenges, and realistically address any concerns. A regular meeting schedule would address necessary accountability, hopefully improve student-faculty relationships, and serve as a means of identifying and addressing problems at their earliest perception. Students with academic, clinical or behavioral problems could be appropriately referred for additional assistance or guidance as necessary.

Practitioner To complete the team, a private dentist from the practicing community would be selected as a "guide-on-the-side" for the student's four-year tenure in school. The practitioner would be introduced to his/her student at the White Coat Ceremony held early in the fall semester of the first year during which new students are symbolically welcomed into the profession as their dental careers begin. Practitioner mentors could come from anywhere in the state and would be identified with the assistance of the ODA. They would be active practitioners in Oklahoma who are in good standing with the Board of Dentistry. They would of course be life-long learners, strongly committed to their patients, families and communities, and possess a strong desire to share their experiences with their student charges. As a result, these volunteer dentists will influence the future of dentistry in Oklahoma.

Each practitioner mentor would agree to meet with his/her student at least once each semester for lunch or dinner, and to host an event involving the student and the other mentoring team members. For example, the dentist might invite his/her student to visit the practice during a time when academic commitments would pose no conflict. The practitioner might also possibly serve as the preceptor for the student's required externship assignments during the third and/or fourth year, or provide advice and counsel as the student pursues career opportunities. This mentor would obviously play a major role as a model of ethical behavior and proper professional development.

A team-based approach to mentoring is an excellent example of the whole being greater than the sum of its parts. It offers the opportunity to enjoy a number of beneficial outcomes that could not be fully realized with a single mentor. Each team member would be professionally and personally enriched by interactions with the other members. This team model could also serve as a superb means of forming and cementing strong coalitions between the dental school and the practicing community. It could increase the retention in Oklahoma of graduates willing to stay and practice in the state because of the relationships cultivated within the mentoring team. It could better ensure the "passing of the torch" to the next generation of new energetic practitioners who will in turn support and mentor their own new students. Team mentoring could also easily develop into a forum for integrating critical thinking into the curriculum. This concept was explored by Walsh, et al. at the University of Queensland (Australia) as they examined desirable tutor attributes in problem-based learning.[9] As new "buzzwords" in the dental school accreditation process, critical thinking and problem-based learning are important parts of an innovative curriculum. Hence,

contd. on pg. 24

Annual Report to ADA's CDEL Supports Validity of DANB Exams

The Dental Assisting National Board, Inc. (DANB) is proud to be recognized by the American Dental Association (ADA) as the national credentialing agency for dental assistants. To maintain this national recognition, DANB submits an annual report on the state of the business of the DANB organization to the Council on Dental Education and Licensure (CDEL), the agency within the ADA responsible for approving national certifying boards for special areas of dental practice and for dental auxiliaries.

In addition to ADA recognition of DANB as an organization, DANB's national exams are also independently accredited by the National Organization for Competency Assurance's (NOCA's) National Commission for Certifying Agencies (NCCA). NCCA accreditation indicates that DANB's certification examination programs meet NCCA standards, thus helping to ensure validity, reliability, and objectivity in the testing process.

An accounting of the number of candidates who challenged DANB's national Certification and Certificate of Competency exams in fiscal year 2005 (9/1/04 through 8/31/05) is included in DANB's report to the CDEL, in addition to the pass rates for each exam. The following summary is offered as an opportunity for DANB stakeholders and other communities of interest to view the statistical results that support the reliability and validity of a national DANB Certification.

In addition to providing the only ADA-recognized Certification exams for the dental assisting profession, DANB develops and administers state-specific exams for several state dental boards. In FY '05, DANB tested 15,605 individuals, with approximately 20% of those taking state-specific DANB exams.

Since dental assistants can earn their Certified Dental Assistant (CDA) and Certified Orthodontic Assistant (COA) credentials by a "stepladder" approach (one component at a time, as long as all three [CDA] or two [COA] components are passed within a five-year period), scores for the individuals who have passed the Radiation Health and Safety (RHS), General Chairside (GC), and Infection Control (ICE) exams but who are not yet DANB Certified are included below.

The FY '05 pass rates for each DANB national exam are as follows:

- CDA (consisting of all three component exams: GC, RHS, and ICE): 65%
  - o RHS (component exam): 78%
  - o GC (component exam): 80%
  - o ICE (component exam): 80%
- COA (consisting of both OA and ICE component exams): 52%
  - o OA (OA component only): 70%
  - o ICE (component exam): 80%
- Certified Dental Practice Management Administrator (CDPMA-1) (for current DANB Certificants): 52%
- Certified Dental Practice Management Administrator (CDPMA-2) (for non-DANB Certified Assistants/office personnel): 65%

Overall, the number of candidates who tested for DANB national Certification exams in FY '05 remained nearly the same as in FY '04. Candidates who sat for the entire CDA exam numbered 2,234 (1.63% fewer than last year). However, the number of candidates who took the GC, RHS, and ICE component exams separately increased by approximately 4% overall in FY '05.

DANB includes any planned change in practices or operations, such as the 2006 exam fee increase, in its report to the CDEL. Examination pathways are evaluated if changes are made and any alterations to exam content or fees are presented. This year's report contains information on many exciting projects, including the following:

- Completion of Phase IV of the DANB/ADAA Study to Define and Rank Core Dental Assisting Competencies (see the Summer 2005 issue of Certified Press)
- Publication of the Position Paper of the ADAA/ DANB Alliance: Addressing a Uniform National Model for the Dental Assisting Profession (see the Fall 2005 issue of Certified Press). Visit www.danb.org for an Executive Summary of the Paper and a publication order form.
- Publication of DANB's State Fact Booklet, Vol. 3. (DANB's publication order form is available at www.danb.org.)

While the DANB Board of Directors is the direct overseer of DANB operations and DANB is held accountable by NCCA, the ADA recognition holds value because the ADA is the primary membership organization and voice for the dentists, the largest employer of DANB Certificants.

DANB looks forward to another successful year of working with its valued stakeholders to provide the highest quality of testing and credentialing services for dental assistants.

For a complete listing of the results from the national DANB Certification and component exams for FY '05 and FY '04, see the Winter 2006 issue of Certified Press (available for download at www.danb.org).

contd. from pg. 17

see what was being planned. Hearing nothing was in the works, I organized our reunion activities from Tulsa.

ODA: What do you think are the biggest challenges facing the ODA?

PL: The ongoing challenge is participation. Members need to be involved. This can be as simple as letting our officers know of their concerns. Our association does want to address the needs of our members. Of course, we always need volunteers to help with our programs, activities, and leadership roles. Another big challenge is meeting the needs of different generations. Our membership ranges from those who have a paperless office, to those who have never sent an email or owned a computer.

ODA: What are three major changes to dental practice that have occurred since you started practice?

PL: Gloves, computers, and advertising.

ODA: And as always, any final comments?

PL: I am looking forward to my year as President. I welcome comments and suggestions from any member. I especially want to thank Karey, my partner in life and at the office, for covering all of my emergencies while I'm out of the office doing ODA business.

THE FIVE QUESTIONS DENTISTS SHOULD ASK ABOUT THEIR $ & WHY

QUESTION #2
WHAT ARE YOUR VALUES AND BELIEFS ABOUT MONEY?

By Troy E. Jones, CERTIFIED FINANCIAL PLANNER™ practitioner

This is the third article in a series addressing the five questions all dentists should ask about their money. Just to quickly review, the five questions are:

#1 Who can I trust to help make money decisions?
#2 What are my personal beliefs and values?
#3 How do the communities – family, neighborhood, religious, country, business – in which I live affect my decisions?
#4 Do I know and understand my numbers?
#5 Am I familiar with the many different strategies, resources, products and laws available to implement my financial plan?

This issue we are going to talk about personal beliefs and values related to money. But first, put away your self-imposed limitations and let yourself dream.

When you are seeking the advice of a financial planner, there are a few questions that need to be answered. The questions cover the six areas of financial planning and the answers help reveal and clarify personal beliefs and values.

CASH FLOW

- How much is enough?
- Do my spouse and I have similar values on spending and saving?
- What values do I want to pass on to my children?
- What are my earliest memories of money?
- What do I believe about my current level of income and spending?
- Does my personal spending affect my values as a dentist?

RETIREMENT

- Do I love what I do?
- When I think about retirement what do I feel? (Shame, fear, joy, optimism)
- Do I value a good retirement for my long-term employees?
- Do I feel I have sacrificed too much or too little today for retirement?
- What does retiring with dignity mean to me?

RISK MANAGEMENT

- Do I worry about being sued or losing my assets?
- Do I believe insurance companies are untrustworthy?
- Do I generally feel comfortable with my risk management plan?
- Do I value my employees having a decent health care plan?
- Do I really know what is involved with risk management vs. just insurance for a dental business owner?
- Do I believe in taking great care of my biggest asset? (My ability to continue to produce an income)

ESTATE

- What do I want my life to stand for?
- How do I envision the life of my heirs?
- Do I want to be sure that my patients and staff be cared for in the event of my death or incapacity?
- Do I believe the dental profession should be included in my plan?

TAX

- How do I feel about paying taxes--anger, pride, frustration, fear?
- Do I believe my money is being well spent?
- Am I inclined to consider cheating? (Even a little?)
- Am I afraid of being audited?
- Do I value communicating with my staff the taxes paid on their behalf?

INVESTMENTS

- How do I feel about people who make a lot of money on their investments without working? (jealous, suspicious, inspired, etc.)
- How much risk keeps me awake at night?
- Do my investment beliefs affect my values as a dental business owner?
- Am I motivated more by risk of loss or the greatest gain?
- Do I make investment decisions based upon my values?
- Do I sometimes feel like I am just missing out on the inside secret?

In conclusion, these questions help reveal your key values. From here, you can make money decisions that support the life that you have deemed worth living, both personally and professionally. Much like good dentistry, this process will help improve your chances of getting it right the first time while minimizing unnecessary damage including wasted time and money.

An upcoming article will address the following question: "Am I aware of how the communities in which I live affect my decisions?"

The article will discuss how societies' beliefs about dentists and social systems influence your own beliefs and expectations for the future.

Troy E. Jones, a CERTIFIED FINANCIAL PLANNER™ practitioner is the President and founder of Access Financial Resources, Inc., one of Oklahoma's oldest and largest independent financial planning firms (www.afradvice.com). Troy has served on the 29,000-member board of the national Financial Planning Association (www.fpanet.org). He's also the past chairman of the Oklahoma State Association of Certified Financial Planners ®, and the past President of the Central Oklahoma Society of Certified Financial Planners. He's served as an adjunct professor at Oklahoma City University. He currently teaches financial planning classes at the University of Oklahoma College of Family Medicine and College of Dentistry.

contd. from pg. 19

this mentoring model could prove to be beneficial to the college as the curriculum is redesigned. It has been shown to be a critical component for the professional growth and academic success of faculty members, as well as students.[2, 10] Finally, the combined efforts of three mentors with their individual strengths, contributions and outlooks, would provide the optimal chance of ensuring that what is learned in dental school fully prepares each student for what he/she will encounter in the practicing community.

A team approach to mentoring embraces the proven value of individualized guidance while acknowledging that the burgeoning information required to succeed in dentistry must come from multiple sources. It is an age-old instructional system cloaked in the needs of the 21st century. Only time will gauge the success of this new approach, but it would appear that the group participants themselves would be the main factors in its success or failure. To ensure success, we must obviously recruit sixty well-respected, firmly committed, and highly energetic practitioners willing to make an immediate impact on the future of dentistry. We must identify those faculty members willing to "go the extra mile" in providing innovative and individualistic guidance to their students. And we need sixty third- and fourth-year dental students willing to encourage and facilitate those who follow them.

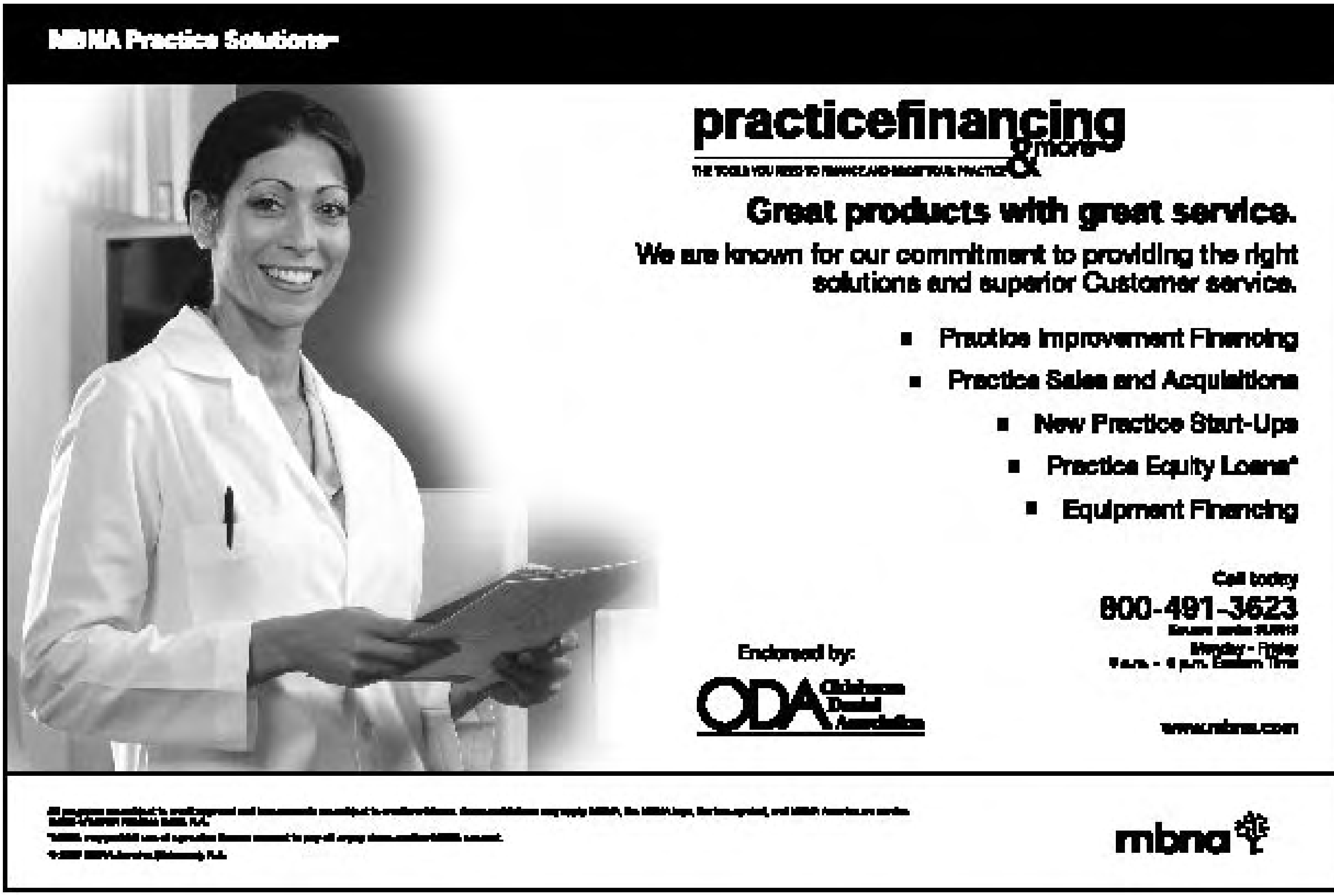
If you have an interest in being part of a mentoring team, please call Judy Peterson or Erica Phillips, Office of Student Affairs, University of Oklahoma College of Dentistry (405-271-3530), and an application will be mailed or faxed upon request. You may also contact Judy or Erica at judy-peterson@ouhsc.edu or erica-phillips@ouhsc.edu, and an application will be forwarded to you via return e-mail. We hope to initiate this team-based mentoring concept with the next entering class (fall of 2006). Please note that this new class will begin school on June 27, 2006.

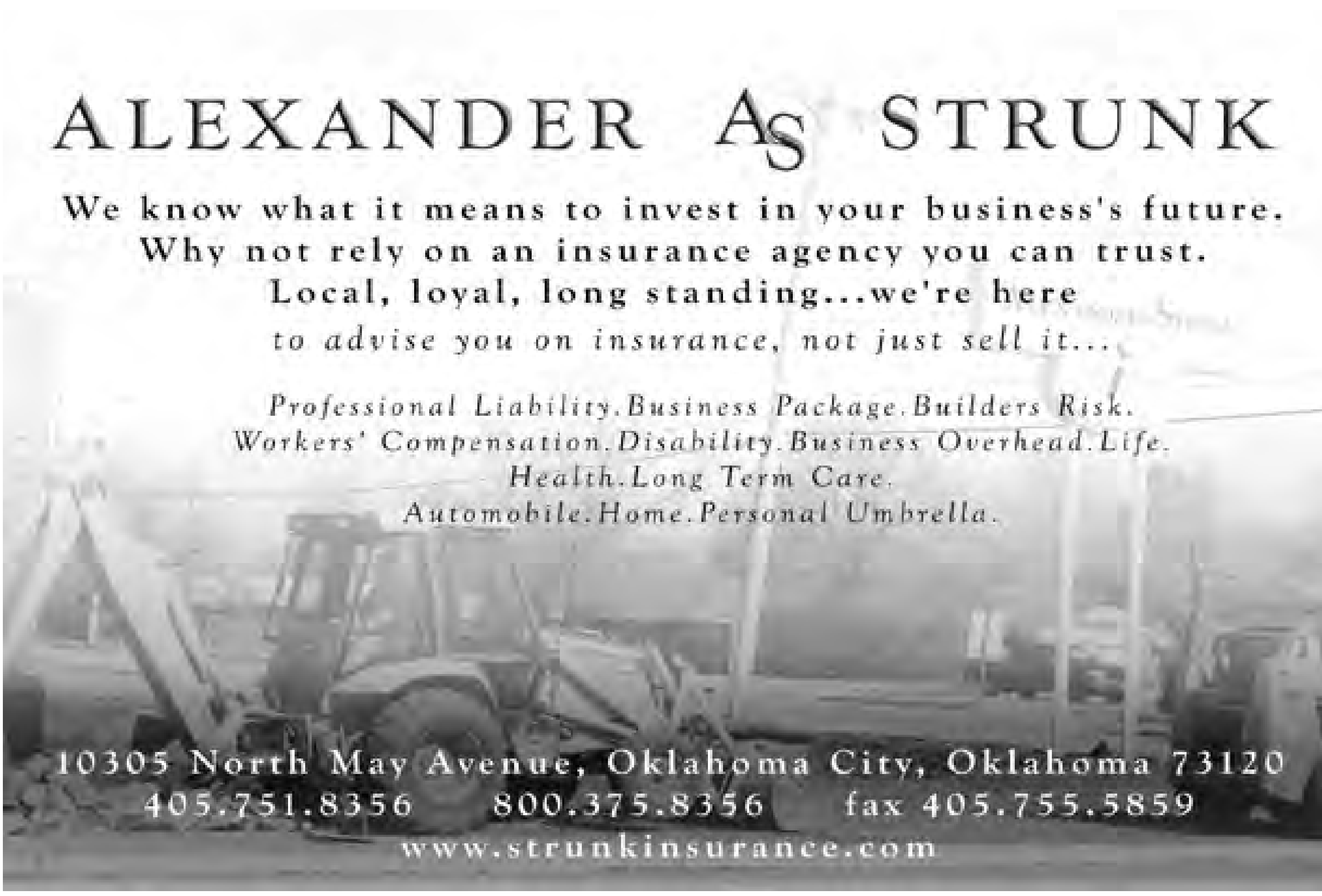
Special thanks are extended to the following for their assistance in developing this concept: Dr. Fräns Currier, Faculty Chair; Dr. Scott Waugh, American College of Dentists; Dr. Raymond Cohlmia, ODA representative; Dr. Stephen Young, Dean of the College of Dentistry; and the Oklahoma chapter of ASDA.

References

1. *Cochran, M. A. Where have all the mentors gone? Operative Dentistry. 2003; 28:1-2.*
2. *Friedman, P. K., Arena C., Atchison, K., Beemsterboer, P. L., Farsai, P., Giusti, J. B., Haden N. K., Martin, M. E., Sanders, C. F. Sudzina, M. R., Tedesco, L. A. Williams, J. N., Zinzer, N., Vaachvic, R. W., Mintz, J. S., & Sandmeyer, M. S. Report of the ADEA president's commission on mentoring. Journal of Dental Education. 2004; 68(3): 390-396.*
3. *Studen-Pavlovich, D. Mentoring makes the difference. Pennsylvania Dental Journal. 2003; 70(3):32-34.*
4. *Romberg, E. Mentoring the individual student: Qualities that distinguish between effective and ineffective advisors. Journal of Dental Education. 1993; 57: 287-90.*
5. *Keller, J. C. The development of a dental student research program. Journal of Dental Education. 1993; 57(5): 369-372.*
6. *Frankl, S. N. An experiential education program. Journal of Dental Education. 1993; 57(8): 637-642.*
7. *Weaver, R. G. Linking postdoctoral general dentistry programs with private practice settings.Journal of Dental Education. 1997; 61(2): 305-31.*
8. *Spicer, R. Mentoring and personal development planning in postgraduate dental education: A review. Dental Update. 2004; 31(8): 472-474, 477-480.*
9. *Walsh, L. J., Seymour, G. J., Forrest, A. S., Aldred, S. E., & Aldred, M. J. Differing roles of the* tutor in problem-based learning: The Queensland experience. Journal of Dental Education. 1998;62(9): 634-639.
10. Schrubbe, K. F. Mentorship: A critical component for professional growth and academic success. Journal of Dental Education. 2004. 68(3): 324-328.

Features


MBNA Practice Solutions
practicefinancing & more
Great products with great service.
We are known for our commitment to providing the right solutions and superior Customer service.
Practice Improvement Financing
Practice Sales and Acquisitions
New Practice Start-Ups
Practice Equity Loans*
Equipment Financing
Call today
800-491-3623
Monday - Friday
Endorsed by:
ODA Oklahoma Dental Association
www.mbna.com
mbna


ALEXANDER AS STRUNK
We know what it means to invest in your business's future.
Why not rely on an insurance agency you can trust.
Local, loyal, long standing...we're here
to advise you on insurance, not just sell it...
Professional Liability. Business Package. Builders Risk.
Workers' Compensation. Disability. Business Overhead. Life.
Health. Long Term Care.
Automobile. Home. Personal Umbrella.
10305 North May Avenue, Oklahoma City, Oklahoma 73120
405.751.8356 800.375.8356 fax 405.755.5859
www.strunkinsurance.com

MARK YOUR CALENDARS NOW!

2007 Oklahoma Dental Association Annual Meeting

Renaissance Hotel
Cox Covention Center

OKLAHOMA DENTAL ASSOCIATION 100 1907 2007

Downtown Oklahoma City
April 26-29, 2007

Dental Systems Is Offering More Than Ever Before!

Serving Dental Practices Since 1987

Insurance Answers Plus

DentalSystems™ INCORPORATED

Detailed benefit answers on Local, Statewide and National employer's dental plans!

Updates weekly or monthly - you choose.

Service includes Fee Tables and Schedules.

BeMyDentist.com

Join our Online Directory where patients can search for a dentist familiar with their dental plan.

With **Insurance Answers Plus** you can go the extra mile for your patients' smile!

Newly Released!

An Electronic Claim & Eligibility Service

Patient Educational Brochures

"About Your Insurance"

Make these attractive brochures available in your reception room, include with new patient packets or along with treatment plans.

1-800-683-2501 **281-838-3950** **www.iaplus.com**

Think you know financial planners? Think again.

Meet Access Financial Resources.

AFR planners specialize in financial planning for dentists. Celebrating 25 years in business, AFR serves more dentists than any other independent financial planning firm in the state.

They give you all the facts.

Registered Investment Advisors are different than "financial advisors." RIA's are legally bound to act in your best interest and to reveal all fees and potential conflicts of interest.

Their business is personal financial planning for business owners. AFR planners integrate the business of dentistry with your personal needs, hopes and dreams.

Call 405.848.9826

Find out why other legal and financial professions say AFR's holistic approach is unique.

ACCESS FINANCIAL RESOURCES

TROY E. JONES AND ASSOCIATES

3621 NW 63rd, Suite A-1 • Oklahoma City, OK 73116
405.848.9826 phone • 888.942.3933 toll-free
www.afradvice.com

CLASSIFIEDADVERTISING

Opportunities available for a Pediatric Dentist and also General Dentist in a unique private practice model with Six Day Dental '& Orthodontics. Candidates should be highly-skilled and self-motivated. The candidates will be consummate professionals with excellent organizational skills, meticulous attention to detail, easy-going personalities and the ability to work well in a team environment. Six Day Dental & Orthodontics is an established, elite, fee-for-service dental practice that provides customer oriented, full service dental care in a first class, well designed facility utilizing the best materials, technology and equipment available. Please visit our website at http://www.6daydental.com. To be considered for this rewarding position, email resume to ejohnston@6daydental.com or fax to (469) 635-1107.

Pt to Ft Dentist needed for busy N.W. Oklahoma City Practice. Send resumes to Christina Kim, DDS 2816 N.W. 58th Street Suite 101 Oklahoma City, OK 73112 or Fax 848-0654.

Associate/Partner
Tulsa - Well-established pediatric practice in stand-alone buildings. 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. Visit www.TransDent.com to view or call Mercer's Associate Placement Service **480.471.5522**

General Practice for Sale. Pittsburg, Kansas (southeast). Est. 25 years RDH. 3-6 ops. 2300 sq. ft. building for sale or lease. Call 620-231-1721 (day), 620-231-0144 (evening).

DENTAL INSTRUCTOR
Seeking outgoing, energetic, professional Dental Assistant with 3+ current years experience in a dental office to instruct students in our new night program. Hours are Mon-Thurs 5:00 to 10:00 pm. Please fax resume to (405)943-2150 or mail to Platt College, 309 S. Ann Arbor, OKC, OK 73128

VINEYARD CLIMATE CONTROL STORAGE
DRIVE INDOOR UNLOADING AND MOVING
COMPETITIVE RATES - 24 HOUR VIDEO SURVEILLANCE
PHONE 752-8585 - LOCATION - 2208 W. HEFNER, OKLAHOMA CITY, OK ALMOST NEW!

Golden opportunity for progressive pediatric dentist. Well-established Medicaid and private-pay pediatric practice in stand-alone building looking for associate to become co-owner. Fully computerized, open bay concept, digital x-rays, performs hospital dentistry and conscious sedation. Good clinical skills, a desire to learn and a lifetime commitment to continuing education and serving others are essential. Please send your inquiries/resumes to: Pediatric Dentistry, Attn: Laura, 1421 East 13 Street, Tulsa, OK 74120 or e-mail: llproffitt@sbcglobal.net.

SMALL-TOWN CHARM WITH BIG-CITY OPPORTUNITIES. Well-established, fee-for-service practice located in southwest Missouri is seeking a full-time dentist. Carthage is located within one hour of five major lakes and 1-2 hours of four large metropolitan areas. Partnership potential for the right individual. Four-day work week with excellent compensation and benefits. Please fax your resume to (417) 359-5002.

TEMPORARY COVERAGE: We have more jobs than we have dentists! Help! Just name your flat daily fee. Paid weekly, like clockwork. Bread-and-butter procedures. Maternity, disability and personal leaves. FFS practices, not mills. But we can't call you until you FIRST call us. Say hello sometime. No strings or obligations, ever. Doctors per Diem, Inc., 800-600-0963. Temporary and permanent professional placement, nationwide, since 1997. Ask us the secret to working out of state occasionally or as often as you wish, in state. Email: docs@doctorsperdiem.com or visit http://www.doctorsperdiem.com

PRACTICE FOR SALE: SOUTHEAST OKLAHOMA. $502,200 gross in four-day week. Priced below appraised value. Three operatories. Take home $279K per year. (405) 720-2093
PRACTICE FOR SALE: WESTERN OKLAHOMA. For Sale or ASSOCIATE. Beautiful office. Grossing $896,500. Take home $450K per year. (405) 720-2093
PRACTICE FOR SALE: NEAR TULSA. Grossing $309,000 in 26 hour week. Low overhead and $200K profit per year. Available immediately. (405) 720-2093
PRACTICE FOR SALE: NORTHEAST OKLAHOMA. For Sale or Associate. New office building and equipment. Grossing $543,000 in four day week. (405) 720-2093
PRACTICE FOR SALE: NORTHERN OKLAHOMA. Condominium office. Four doctor operatories plus two hygiene chairs. Grossing $400,000 in a 3-day week. (405) 720-2093
PRACTICE FOR SALE: TULSA. A one of a kind practice opportunity. Six operatories. Grossing $686,000 in four day week. (405) 720-2093
PRACTICE FOR SALE: NORMAN. Three operatories. Beautiful building. Highly visible on major street. (405) 720-2093
PRACTICE FOR SALE: I-40 Corridor-West. New office and equipment. Perfect location. Grossing $310,000 in four day week. (405) 720-2093
THE OFFICES LISTED ABOVE MAY BE SEEN AT www.ppa-brokers.com **OR CALL PROFESSIONAL PRACTICE ASSOCIATES** AT (405) 720-2093. FINANCING AVAILABLE.

LIMITED PRACTICE

ENDODONTICS

Endodontic Associates

Wm. Lee Beasley, DDS, MS, PC
4500 West Memorial Circle
Oklahoma City, OK 73142
8101 S. Walker
Oklahoma City, OK 73139
405-748-6000

Dayna S. Duke, DDS
4500 West Memorial Circle
Oklahoma City, OK 73142
8101 S. Walker
Oklahoma City, OK 73139
405-748-6000

Leslie B. Hardy, Jr., DDS
4500 West Memorial Circle
Oklahoma City, OK 73142
8101 S. Walker
Oklahoma City, OK 73139
405-748-6000

Myron S. Hilton, DDS
4500 West Memorial Circle
Oklahoma City, OK 73142
8101 S. Walker
Oklahoma City, OK 73139
405-748-6000

Endodontic Practice Associates

Fred W. Benenati, DDS, MEd
Diplomate American Board of Endodontics
707 24th Ave., S.W., Suite 100
Norman, OK 73069
405-329-7936

John T. Biggs, DDS, MEd, MS
Diplomate American Board of Endodontics
707 24th Ave., S.W., Suite 100
Norman, OK 73069
405-329-7936

Percy G. Bolen III, DDS
707 24th Ave., S.W., Suite 100
Norman, OK 73069
405-329-7936

James B. Roane, DDS, MS, Inc.
Diplomate American Board of Endodontics
707 24th Ave., S.W., Suite 100
Norman, OK 73069
405-329-7936

Norman Endontics, P.L.LC.

Steven E. Powell, DDS
Diplomate Am. Board of Endodontics
410 24th Ave, S.W.
Norman, OK 73096
405-307-8200

Oklahoma Endodontics

Dennis A. Leseberg, DDS MS, Inc.
Practice Limited to Endodontics
Grand Park Commons
1008 NW Grand Blvd., Suite A
Oklahoma City, OK 73118
405-843-9330 800-522-0160

David B. Shadid, DDS, MSD, PC
Practice Limited to Endodontics
Grand Park Commons
1008 NW Grand Blvd., Suite A
Oklahoma City, OK 73118
405-843-9330 800-522-0160

David W. Pedicord, DDS, MS
Warren Clinic
4606 E 67th Street, Bldg 7,
Suite 208, Tulsa, OK 74136
918-491-5888

ORAL & MAXILLOFACIAL SURGERY

James A. Baker, DDS
Diplomate, American Board of Oral and Maxillofacial Surgery
North Shore Office
10900 Hefner Pointe Dr, Suite 204
Oklahoma City, OK 73120
405-463-0004
8301 South Walker, Suite 101
Oklahoma City, OK 73139
405-636-4230

M. Edmund Braly, DDS
Diplomate, American Board of Oral and Maxillofacial Surgery
Medical Plaza, Suite 302
620 South Madison
Enid, OK 73701
580-242-2800

Perry L. Brooks, DDS
Diplomate, American Board of Oral and Maxillofacial Surgery
620 24th Avenue, S.W.
Norman, OK 73069
(405) 364-6777

Lester L. Cowden III, DDS
Diplomate, American Board of Oral and Maxillofacial Surgery
3100 West Britton Road, Suite A
Oklahoma City, OK 73120
(405) 751-3321

Neil M. Glass, DDS, MD
Diplomate, American Board of Oral and Maxillofacial Surgery
4320 McAuley Boulevard
Oklahoma City, OK 73120-9307
(405) 755-4826

Ron L. Graves, DDS
Diplomate, American Board of Oral and Maxillofacial Surgery
1119 Walnut Drive, Suite #2
Ardmore, OK 73401
(580) 226-1727
720-C Bryan Drive
Durant, OK 74701
(800) 773-1727
100 Valley Drive
Pauls Valley, OK 73075

Jay A. Harlan, DDS
Diplomate, American Board of Oral and Maxillofacial Surgery
8101 S. Walker Ave., Suite E
Oklahoma City, OK 73139
(405) 632-9726

Edwin E. Henslee, III, DDS
Diplomate, American Board of Oral and Maxillofacial Surgery
8811 East Reno, Suite 103
Midwest City, OK 73110
(405) 733-1701

Richard L. Johnson, DDS
Diplomate, American Board of Oral and Maxillofacial Surgery
7509 N.W.23rd St.
Bethany, OK 73008 (405) 787-7814
340 W. Vandament Ave.
Yukon, OK 73099 (405) 354-6999
228 Chickasha Ave. #710
Chickasha, OK 73018 (405) 222-0900

David M. Lindley, DDS
Board-Certified Oral & Maxillofacial Surgeon
Main Office: 1315 West Gore Blvd.
Lawton, OK 73501 (580) 353-7037
2nd Office - Thursday Afternoons
1002 Chestnut, Duncan, OK 73533
(580) 255-7537

Robert J. Livingston, DDS, Inc.
Diplomate, American Board of Oral and Maxillofacial Surgery
1331 South York, Muskogee, OK 74403
(918) 687-5462

Steven D. Meltzner, DMD
Oral and Maxillofacial Surgery
The Plaza, Suite 201
4140 W. Memorial Rd.
Oklahoma City, OK 73120
(405)749-4267

Oral and Maxillofacial Assoc., Inc.
Diplomates, American Board of Oral and Maxillofacial Surgery

Paul C. Brown II, DDS
3727 N.W. 63rd, Suite 300
Oklahoma City, OK 73116
(405) 848-7994
2828 Parklawn, Suite 3
Midwest City, OK 73110
(405) 733-4296

Kent Cohenour, DDS
3727 N.W. 63rd, Suite 300
Oklahoma City, OK 73116
(405) 848-7994
2828 Parklawn, Suite 3
Midwest City, OK 73110
(405) 733-4296

William M. Croom, DDS
3727 N.W. 63rd, Suite 300
Oklahoma City, OK 73116
(405) 848-7994

Michael T. Duffy, DDS
3727 N.W. 63rd, Suite 300
Oklahoma City, OK 73116
(405) 848-7994
8301 S. Walker, Suite 101
Oklahoma City, OK 73139
(405) 636-4230

Vincent E. Montgomery, DMD
112 Rambling Oaks
Norman, OK 73072
3727 N.W. 63rd, Suite 300
Oklahoma City, OK 73116
(405) 292-8900/(405) 848-7994

Scott Searcey, DDS
3727 N.W. 63rd, Suite 300
Oklahoma City, OK 73116
(405) 848-7994
8301 S. Walker, Suite 101
Oklahoma City, OK 73139
(405) 636-4230

Oral and Maxillofacial Surgeons of Okla.

Sam P. Jones IV, DDS, MD
10900 Hefner Pointe Dr, Ste 204
Oklahoma City, OK 73120
(405) 463-0004
1218 E 9th St., Ste 7
Edmond, OK 73034
(405)285-7466

Zeneida G. Vasquez, DDS
8301 S Walker, Ste. 101
Oklahoma City, OK 73139
(405)636-4230
1218 E 9th St., Ste 7
Edmond, OK 73034
(405)285-7466

David L. Schwartz, DMD
Diplomate, American Board of Oral and Maxillofacial Surgery
11317 S. Western, Suite 100B
Oklahoma City, OK 73170
(405) 691-0100
905 C NW 24th Ave.
Norman, OK 73069
(405) 579-9800

C. Ken Templeton, DDS
Diplomate, American Board of Oral and Maxillofacial Surgery
404 S. Mustang Rd.,
Yukon, OK 73099
1204 E. Main, Suite B.,
Weatherford, OK 73096
(405) 577-7744 or
Fax: (405) 577-7747
www.yukonoralsurgery.com

Patrick L. Wallace, DDS
Diplomate, American Board of Oral and Maxillofacial Surgery
1119 Walnut Dr., Suite #2
Ardmore, OK 73401
(580) 226-1727
720-C Bryan Dr., Durant, OK 74701
(800) 773-1727
100 Valley Dr., Pauls Valley, OK 73075

Craig A. Wooten, DDS
Diplomate, American Board of Oral and Maxillofacial Surgery
13301 N. Meridian, Bldg. 100
Oklahoma City, OK 73120
(405) 751-7600
801 East Tamarack Rd
Altus, OK 73521
580-482-5424/866-370-6812

The Oral and Facial Surgery Center

Steven M. Sullivan, DDS
Kevin S. Smith, DDS
Alan Miyake, DDS, MD
College of Dentistry
1000 N. Lincoln, Suite 200
Oklahoma City, OK 73104
(405) 271-4955
(405) 271-4525 - Fax

ORTHODONTICS

Jeff T. Cohlmia, DDS, MS
Diplomate, American Board of Orthodontics
13313 North Meridian, Suite D-4
Oklahoma City, OK 73120
(405)751-0300
2909 Azalea Park Dr.
Muskogee, OK 74401
(918) 687-3111

Terry Linda Cotterell, DDS, MSD
1382 S. Douglas Blvd.
Midwest City, OK 73130
(405) 741-1962

Craig A. Gerken, DDS
2401 N. Commerce, Suite D2
Ardmore, OK 73401
(580) 226-8868

E. Vann Greer, DDS
Diplomate, American Board of Orthodontics
2816 West Hefner Rd.
Oklahoma City, OK 73120 (405) 751-7007
1600 East 19th, Suite 201
Edmond, OK 73013 (405) 341-9071

Michael J. Kierl, DDS, MS
Diplomate, American Board of Orthodontics
5818 NW 50, Ste. 500
Oklahoma City, OK 73122
(405) 787-2001
112 N. Oak Pauls Valley, OK
(405)238-2192

Herbert A. Klontz, BA, DDS, MS
3621 N.W. 63rd St.
Oklahoma City, OK 73116
(405) 848-4809

Kelly J. Klontz, DDS, MSD
Diplomate, American Board of Orthodontics
9721 South Penn
Oklahoma City, OK 73159
(405) 691-8100
3621 N.W. 63rd St.
Oklahoma City, OK 73116
(405) 848-4809

Stephen K. McCullough, DDS, MS
Diplomate, American Board of Orthodontics
508 W. Vandament, Suite 200
Yukon, OK 73099
(405) 350-1343

Orthodontic Associates
David J. Birdwell, DDS
Diplomate, American Board of Orthodontics
John N. Archer, DDS, MS
Brian D. Amy, DDS, MS
Geoff D. Sparks, DDS, MS
P. Justin Power, DDS, MS
10914 Hefner Pointe Dr.
Water Oak, Suite 300
Oklahoma City, OK 73120
(405) 947-1526

Phillip R. Parker, DDS, MS, MS
Member, American Assoc. of Orthodontics
3700 W. Robinson, Suite 102
Norman, OK 73072
(405) 329-8853

C. Edwin Polk, DDS, MSD
Diplomate, American Board of Orthodontics
1518 West 8th
Stillwater, OK 74074, (405) 372-1300

Timothy M. Shannon, DDS, MS
Orthodontics Exclusively
114 S. Berry Rd., Norman, OK 73069
(405) 321-2735
708 N. Cedar, Perry, OK 73077
(580) 336-2227 * Fax: (405) 321-7877

J. Michael Steffen, DDS, MS
Diplomate, American Board of Orthodontics
1601 South Blvd., Edmond, OK 73013
(405) 341-2587
114 South 5th, Clinton, OK 73601
(580) 323-3098

Tom R. Stewart, DDS, MS
Diplomate, American Board of Orthodontics
Practice Limited to Orthodontics
607 South Orchard Lane
Stillwater, OK 74074
(405) 624-1005

Tony Stretesky, DDS
Diplomate, American Board of Orthodontics
Practice Limited to Orthodontics
1119 Walnut Dr., Suite 4
Ardmore, OK 73401
(405) 226-2331

James S. Torchia, DDS, MSD
Diplomate, American Board of Orthodontics
6565 S. Yale,
Tulsa, OK 74136, (918) 492-4822
217 South 5th, Henryetta, OK 74437
109 North Fairland, Pryor, OK 74361
120 West Delaware, Vinita, OK 74301

Thomas P. Weirich, DDS, MSD
Diplomate, American Board of Orthodontics
4320 McAuley Blvd.
Oklahoma City, OK 73120
(405) 755-8151

Thomas H. Williams, DDS, MS
Diplomate, American Board of Orthodontics
2424 North Milt Phillips Ave.
Seminole, OK 74868, (405) 382-2877

Christian G. Zylinski, DDS
1400 S.E. 4th, Suite B,
Moore, OK 73160, (405) 799-7711
3727 N.W. 63rd, Suite 100,
Oklahoma City, OK 73116

PEDIATRIC DENTISTRY

Bobby Don Cheatham, DDS
2800 North Kelly, Suite 200
Edmond, OK 73003
(405) 562-2222
1501-A Brookwood
Duncan, OK 73533
(580)255-4940

Thai-An Doan, DDS
11318 N. May Avenue, Suite B
Oklahoma City, OK 73120
405-752-KIDS

Tim Fagan, DDS, MS, PLLC
Practice Limited to Pediatric Dentistry
423 N. Van Buren, Enid, OK 73703
(580) 233-0043

Barry J. Farmer, DDS
806 North York
Muskogee, OK 74403
(918) 683-3451
info@DrBarryFarmer.com

Andrew Guthrie, DDS
Pediatric Dentistry
3616 N.W. 50th St.
Oklahoma City, OK 73112
(405) 946-0686

Donald W. Haskins, DDS, MSD
5222 N. Portland, Suite 10
Oklahoma City, OK 73112
(405) 947-1525
2828 Park Lawn, Suite 10
Midwest City, OK 73110
(405) 733-2525

Gene Litteken, DDS
Pediatric Dentistry
1103 Walnut Dr., Ardmore, OK 73401
(580) 226-6290
Diplomate, Am. Board of Pediatric Dentistry

Janna McIntosh, DDS, MPH
Pediatric Dentistry
321 South Third St., Suite 3
McAlester, OK 74570
(918) 423-2897

Brent Moody, DDS
Pediatric Dentistry
Dental Specialties Center
4320 McAuley Blvd.
Oklahoma City, OK 73120
(405) 755-8020

Phillip R. Parker, DDS, MS, MS
Diplomate, Am. Board of Pediatric Dentistry
3700 W. Robinson, Suite 102
Norman, OK 73072
(405) 329-8853

Donald H. Roberts, DDS, MSD
Pediatric Dentistry
1001 24th Ave. NW
Norman, OK 73069
(405) 360-5233

Wavel L. Wells, DDS
Nicholas J. Chelenza, Jr., DDS
4417 West Gore, Suite 11
Lawton, OK 73505
(580) 248-8418

Tamara Worthen, DDS
Pediatric Dentistry
1103 Walnut Dr., Ardmore, OK 73401
(580) 226-6290
Diplomate, Am. Board of Pediatric Dentistry

PERIODONTICS

Michael D. Allen, DDS, MS
Practice Limited to Periodontics
3621 N.W. 63rd St.
Oklahoma City, OK 73116
(405) 840-2834

Terry D. Blackburne, DDS, MSD
Periodontics
Professional Building
707 24th Ave. S.W., #202
Norman, OK 73069 (405) 329-6106

Robin D. Henderson, DMD, MS
Practice Limited to Periodontics/Implants
3330 NW 56th St., Suite 110
Oklahoma City, OK 73112
(405) 947-0486/Fax: (405) 942-4392
1908 South Post Rd., Bldg #1
Midwest City, OK 73130
(405) 869-0700/Fax: (405) 732-2109

G. Conrad Hornbuckle, DDS, MS
Practice Limited to Periodontics
8203 South Walker, Oklahoma City, OK 73139
(405) 636-1411 or (800) 525-9355

Timothy E. Moore, DDS, MS
Diplomate, Am. Board of Periodontology
Executive Center II
7134 South Yale, Suite 400
Tulsa, OK 74136-6351
(918) 494-7676

Gregory S. Shanbour, DDS, MS
Diplomate, Am. Board of Periodontology
Practice Limited to Periodontics
Oklahoma City Office
8117 South Walker
Oklahoma City, OK 73139
(405) 634-2239

Paul Sommer, DDS
6465 South Yale, Suite 722
Tulsa, OK 74136
(918) 481-7755

PROSTHODONTICS

Roman Lobodiak, DDS
3232 East 31st Street
Tulsa, OK 74105
(918) 743-1558

Thomas J. McGarry, DDS
Practice Limited to Prosthodontics
Implant and Prosthodontic Associates
4517 Memorial Circle
Oklahoma City, OK 73142
(405) 755-7777

L.E. Shelton, DDS
Removable Prosthodontics
3223 East 31st St., Suite 206
Tulsa, OK 74105-2444
(918) 747-5817

Dr. J. Robert Reneau
Prosthodontist
2751 NW Expressway Suite #5
Oklahoma City, OK 73112
(405)840-3363 (405)840-3494/fax

MIDCO DENTAL INC.

OKLAHOMA CITY – TULSA – DALLAS

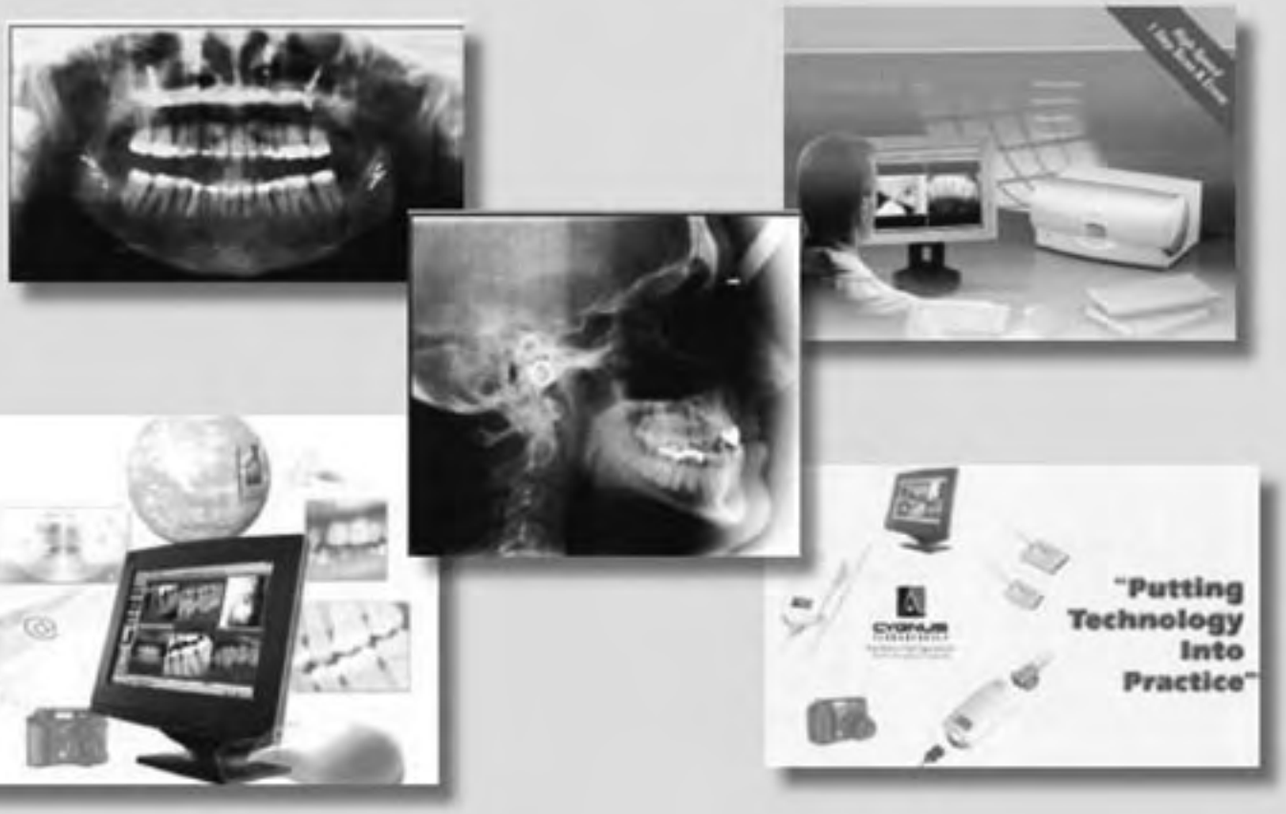
800-657-7324 **FAX 405-381-4559**

OKLAHOMA CITY: 405-381-4308 – TULSA: 918-369-2680 – DALLAS: 214-349-0007

FOR YOUR DENTAL EQUIPMENT NEEDS

Sales & Service, Dental Office Design & Construction,
Family Owned & Operated, Rick & Taylor Owens
26 Years Service to the Dental Community

DENTECH • BELMONT • SUMMIT DENTAL • BEAVERSTATE • PROGENY X-RAY
XGENUS X-RAY • PAXORAMA IMAGING • APOLLO • MATRX • DENT-X
MIDMARK • STATIM • BIEN AIR • HANDLER • TUTTNAUER • MARUS
BOYD • TPC DIGITAL CAMERA • BREWER • VELOPEX • CYGNUS TECHNOLOGIES
• TPC ADVANCED TECHNOLOGIES •



The Father of Dentistry to Usher in ODA Centennial

To commemorate the Oklahoma Dental Association's Centennial in 2007, Dr. Gary Gardner, ODA Past President, 1976-1977, has created an original, life-size sculpture, "Father of Dentistry", of Pierre Fauchard, the French dentist and founder of modern dentistry.

During the 2005 ODA Annual Meeting, several ODA Past Presidents were discussing the completion of the new ODA Building and the upcoming Centennial celebration – two extraordinary events in recent ODA history. Knowing it was an exceptional time for Oklahoma dentistry, they were trying to identify the perfect way to memorialize the two events. From this brief brainstorming session came the Pierre Fauchard Statue Project.

With the gracious donation of his time and tremendous talent, our own Dr. Gary Gardner, the commissioned artist of several well-known pieces around our fine state, has sculpted a beautiful statue of Pierre Fauchard. His "Father of Dentistry" will be placed at the entrance of the ODA Building and will serve to greet ODA members and visitors for years and years to come. This gorgeous, life-size figure will commemorate the Centennial Celebration of the Oklahoma Dental Association and will be dedicated during the 2007 ODA Annual Meeting.

Dr. Gardner, who donated his entire artist fee to the project, considers this a true labor of love. He welcomed this project as a way to give back to the place that has provided him so much over the years. He and his wife, Judie, have spent many, many volunteer hours with the ODA, and Dr. Gardner established many of his dearest and longest-tenured friendships through the Association.

As part of the celebration, seventy-five numbered, bronze miniatures have been fashioned. You can have your own piece of ODA history and support your state professional organization by purchasing one of these beautiful replicas for your office or home. There has been no outlay of expense to the ODA. All proceeds will directly benefit the ODA Building Fund by helping to retire the mortgage on the new ODA building.

$1,400 per statue **To order your Pierre Fauchard statue today!**

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Number of Statues: _____ Email: _____

Phone Number: _____ Fax Number: _____

Return to: Oklahoma Dental Association, 317 NE 13th Street, Oklahoma City, OK 73104 *Or fax to: 405-848-8875*