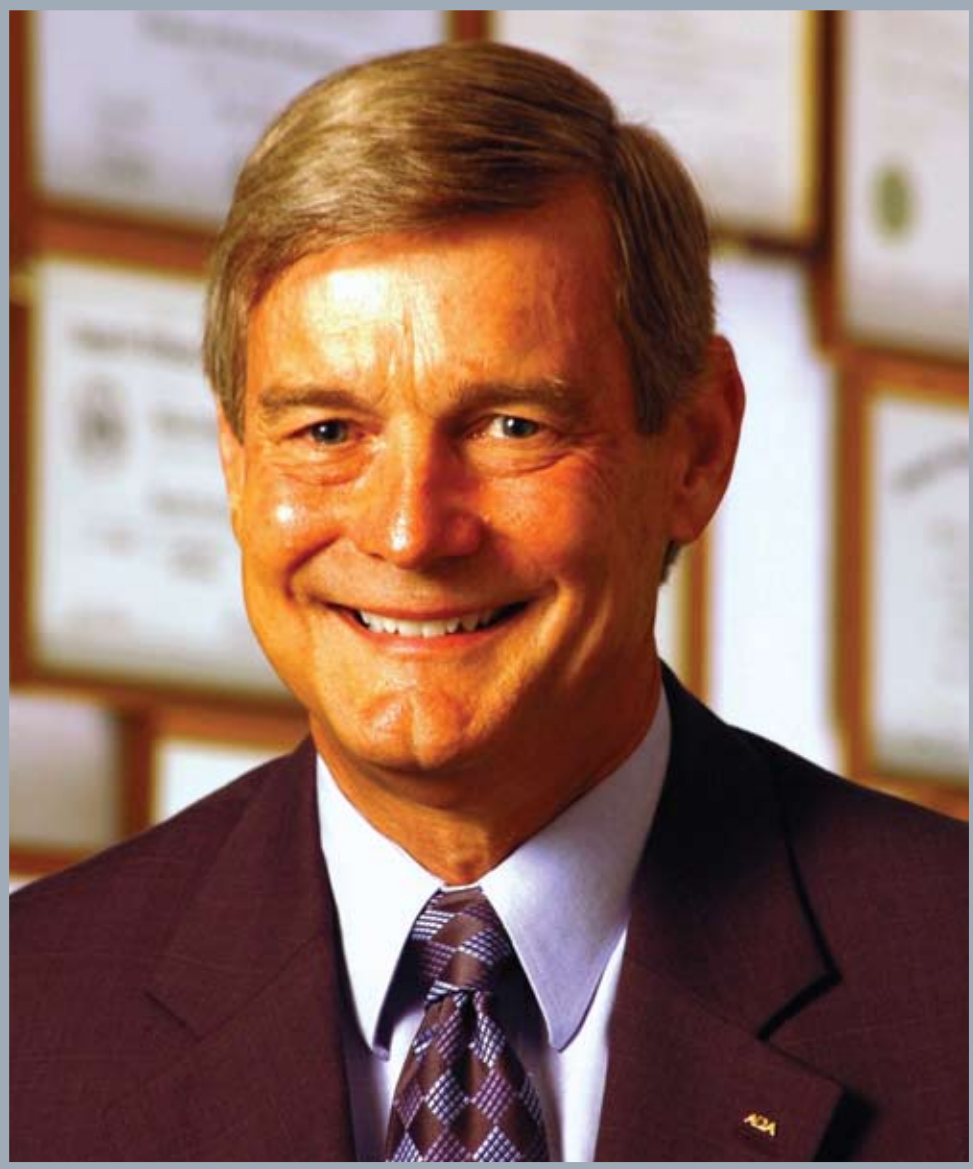




Virginia Dental Association

**JOURNAL**



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*Candidate for President-Elect 2008*

*American Dental Association*

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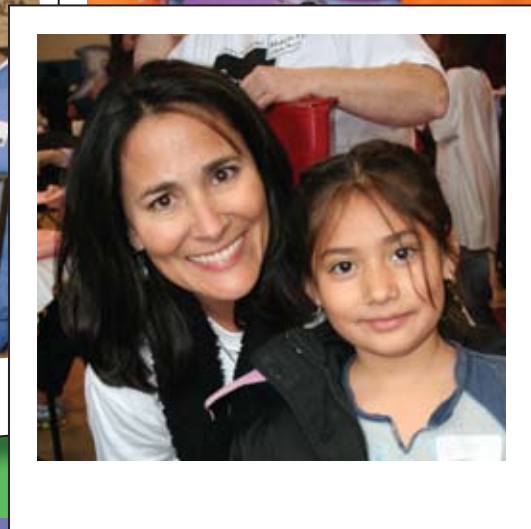
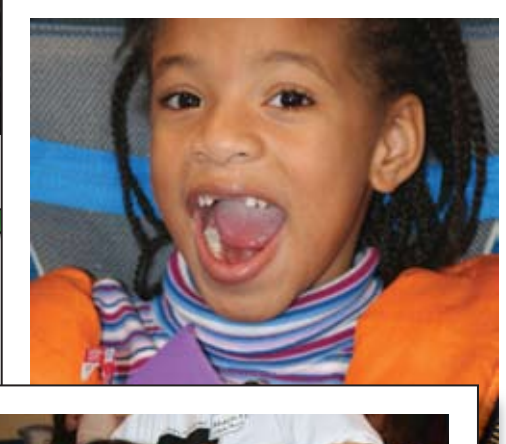
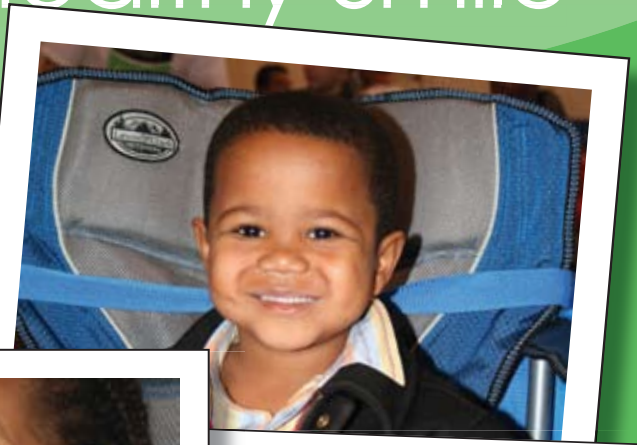
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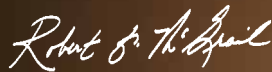
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# Message from the Editor

Dr. Richard F. Roadcap



Nineteenth-century German Chancellor Otto von Bismarck once cheerfully remarked "Politics is the art of the possible." A century later economist John Kenneth Galbraith noted the art had withered to "choosing between the disastrous and the unpalatable."

Virginia General Assembly campaigns have ended and, thanks to the efforts of VADPAC and many VDA members, the results should prove much easier to swallow. At first opportunity thank your VADPAC representative and other colleagues, who donated time and money, for their endeavors in electing legislators amicable to our profession. The annual installment of "A Day at the Capitol" occurs this month, and if you are unable to participate please thank those who make this all-important personal contact with our solons.

Methicillin-resistant *Staphylococcus aureus*, best known by its acronym MRSA, has been a long-term resident of hospital environments. Reports of its occurrence in non-clinical settings surface almost daily in the lay press. Dr. Ellen Byrne contributes to this issue a review of the science, some historical perspective, and advice to doctors and staff on precautions or restrictions to dental care.

Dr. Ronald Tankersley, 16<sup>th</sup> District ADA Trustee and former President of the VDA, is seeking the office of ADA President-Elect. His friends and colleagues know him as a tireless advocate of the profession, both at the state and national level. Every member of organized dentistry has benefited from his service as Chair of the ADA's Council on Dental Benefit Programs. Give him your encouragement and if possible your time as a campaign volunteer. The ADA and the VDA will profit from his leadership as national president.

My predecessor, Dr. Les Webb, is the subject of a heartfelt tribute penned by Dr. Anne Adams, immediate Past-President of the VDA. If this volume of the *Journal* is easy on the eyes and reads well, praise is assigned to Dr. Webb for his foresight, planning, and diligence during his years as Editor. Besides wielding the editor's red pen, he served the Association in countless ways, as Dr. Adams has chronicled for us.

Following a long absence, the Annual Meeting returns in June to family-friendly Colonial Williamsburg. A sampling of programs and speakers is included in these pages, enough to whet appetites for the full course at a later date. Members present at previous sessions in the colonial capital will recall many opportunities for entertainment and recreation. Carve out time in the calendar to attend what promises to be an enjoyable event.

Readers of the *Journal* are keen observers of all things political, judging by response to the photo caption on page 15 of the previous issue. We mistakenly identified former North Carolina Senator (and presidential candidate) John Edwards as Virginia Senator John Warner. Our apologies are extended to the senators and to our faithful readers.



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# Letter to the Editor:

## The significance of Pre-doctoral Dental Education

**Marvin E. Pizer, D.D.S., M.S., M.A. (Ed)**

I was in the process of throwing away old reprints when I opened the latest VDA journal and read the excellent publication "Special Needs Dentistry: Uncovering the Mystery" authored by Parris-Wilkins and Pellegrini. These authors are to be commended for their superb presentation. The article struck a note of a similar thought that I published in the same journal 22 years ago.

Since my graduation from M.C.V. Dental School in 1949, I have seen an increase of Special Needs Patients. The dental care for these patients is often sadly neglected. Why? The emphasis on cosmetic dentistry overwhelms common sense dental care of the medically compromised patient. The knowledge the general dentist must have about the mouth and systemic disease is frequently inadequate.

The reason for this points directly to the undergraduate dental education. The basic sciences have been reduced at the VCU Dental by 20%, at a time when they are needed by this generation of dentists who serve an elderly population many of whom are economically stressed. At the expense of a good biological background, dental students begin restorative dentistry earlier.

Starting to restore teeth early means the Dental School can send their students to satellite clinics in indigent regions of Virginia and use this as an inducement for financial rewards from Richmond's capitol hill to increase the size of the Dental School. This would allow the Dental School to accept more students, who, in turn, would receive an inadequate education. How much more important it would be to send dental students with knowledge to look beyond teeth at the whole person.

In conversation with patients, or in reviewing a medical questionnaire, the general dentist could pick up a major medical problem and refer the patient to a medical source. The dentist may be the first health care provider who should and could recognize altered physiology and refer the patient accordingly. To be a competent dentist, he must understand oral manifestations of systemic disease and recognize how a diseased mouth affects the other organs of the body. Dentistry is a biomechanical profession- let's get the "bio" on an equal par with the "mechanical" aspect of this profession.

In component 8, the continuing dental education programs are how to improve the cosmetic appearance and good function of the patient's dentition. Attendance at these programs is excellent for many reasons: (1) the necessary credits to retain dental license (2) possible new innovations in treating patients and (3) how to increase the dentists' income. This is all very acceptable because the dentist has spent many years of education and now has high expenses. Maybe this explains why there are so few programs on physical diagnosis, pharmacology, and emergency medicine. Seldom does one hear in these lectures the responsibility of inspection and palpation of the oral hard and soft tissues in and about the mouth. When a patient recognizes the dentist is a specialist on oral and perioral disease and is concerned about the patient's general health- that too is a practice builder.

I have the privilege of participating in quite a few MOM (Mission of Mercy) programs. In a recent MOM program I was advised there will be no biopsies. To make certain there were no bottles of formalin available. If a patient presented a "lump" on the tongue, what do we do? Answer---insert a restoration in the aching tooth and send them home. If they are told to see someone about the tongue these patients are financially unable to visit a specialist who can diagnose and treat this "lump." (Incidentally there are almost always oral surgeons at the MOM project.) Later we may find out that the lesion on the tongue was malignant and if biopsied and treated could have saved that patient's life.

Dental Educators---wake up!

There is no objection to a pleasant smile, if, in fact that patient has a healthy mouth. This is far different from the smile showing bright, shiny teeth in good anatomical position while the remainder of the dental system is sick, or the patient's general health presents a prognosis of short longevity.

Let's not have a war against Smiles; but this cannot be the Gold Standard for competent dentistry. The dental educators who are responsible for undergraduate education should read and re-read the definition of Dentistry as defined by the Virginia Board of Dentistry and/ or the American Dental Association. (1)

How can some of these deficiencies be corrected? First, good basic sciences and physical diagnosis in the early curriculum. Second, have dental, medical and pharmacy students making hospital rounds together. All three health professions could learn from one another and, most important, provide the patient the ultimate in health care. This might serve as an incentive for the dental student to take a general practice residency in a JCAHO hospital. This may not be an option in a few years, as a number of states require this hospital residency after graduation in order to obtain a state dental license.

A third approach could require the dentist or someone on his staff to take vital signs (pulse, blood pressure, and respiration) on all new patients and on regular patients on a once a year basis. The dentist in Virginia is required to be certified in CPR by the Virginia Board of Dentistry. Taking vital signs could mean less need of CPR by the dentist. If the patient has an irregular pulse, or elevated blood pressure, the dentist himself should re-check these findings and phone the patient's primary care physician of these irregularities. The patient will know that this health care provider, a general dentist, is really concerned about his patient's well-being. This is a practice builder and sometimes a life saver.

Dentistry is a most gratifying profession with many challenges if the dentist is effectively educated in dental school. The dental curriculum must prepare the future dentist to meet the changing times and dental needs of all patients.

(1) Wilson R., Defining Dentistry. Virginia Board of Dentistry Bulletin, Fall 2001.

*Dr. Pizer is a Diplomate of the American Board of Oral and Maxillofacial Surgery and a previous contributor to the Virginia Dental Journal*



# Message from the President

Dr. Gus Vlahos



By the time you read this, I will have completed a very busy and fast three months as your President. I recently received a congratulatory note from a Past-President and he stated it looks like I have hit the ground running. As of today, (December 4<sup>th</sup>), I have already been on eleven trips as your VDA President. And, I am just beginning!

I would like to bring you up to date of what is happening nationally and locally in our profession that has significance for our future. In August 2007, the American Dental Hygiene Association released a draft of standards for Clinical Hygiene Practice and competencies for the Advanced Dental Hygiene Practitioner. It includes the current dental hygiene model but, in addition, includes one with more 'independence' by the hygienist. This model proposes the hygienist as a mid-level provider performing irreversible procedures. Note the importance of the word 'independence' as they don't seem to consider this person a member of the dental team any longer. The ADHA asked the ADA and other interested parties for an evaluation of its proposals. The ADA's response to this proposal was as follows: "After careful review by ADA leadership and appropriate agencies, the ADA concluded that these proposed documents do not reflect a commitment to the dental team philosophy and do not recognize that the dentist is ultimately responsible for the patient". As you can imagine, we are in full agreement with that statement. The future will be interesting!

I will now go over some issues affecting the dentists of Virginia. The Virginia Board of Dentistry has submitted proposed statutory language reflecting changes on a new dental assistant classification. The new language includes a definition of the traditional Dental Assistant (DA I) along with a new 'expanded' duty dental assistant (DA II). The Board of Dentistry, once the legislation has been passed, will propose regulatory guidelines outlining the training, etc., for that position. The Board of Dentistry, by the time you read this, should have completed all the requirements concerning the training, etc. of dental hygienists to give local anesthesia and hopefully will have submitted the final language to the Governor for his signature.

Another regulation the Board is looking to add is "Informed Consent". On page 42 of the last VDA Journal you will find information concerning that regulation. If you have concerns or comments please let me know. The VDA's position is that the current regulations address this issue well enough without further regulations from the Board of Dentistry.

In addition, The Virginia Dental Hygiene Association has approached the VDA with a new definition for a dental hygienist. The VDA Board met with the VDHA's lobbyists and after reviewing their proposal informed them that the definition they presented was far too broad but that we were willing to work with them and representatives from all the stakeholders to develop a new definition.

In October, at the ADA House of Delegates meeting, a major resolution was passed that stipulated that amalgam separators would now be part of the ADA's BMP's (Best management Practices) Policy. The policy is voluntary, however, but would be looked upon as part of the profession's concern and interest in the environment. Currently, many states in the Northwest and Northeast require separators by law. We would encourage our members to consider the installation of separators as part of our concern about the environment and avoid the need for mandatory edicts from the government.

In October 2007, I had the pleasure of representing the VDA at the VCU School of Dentistry's ground breaking for the new addition to the dental school. This new facility will allow the school to recruit and train ten additional dental students a year. These students would be recruited from remote and rural areas of the state. By accepting these students from these areas our hope is that this will help alleviate the dentist shortage in these areas. This would also help with the access to care problems in these areas.

By the time you read this article, we will have completed our legislative day on the Hill. VDA members and VCU dental students will be meeting with the 140 members of the House and Senate to discuss issues important to dentistry. In November 2007, all 140 Members of the state legislature were up for re-election. The Republicans maintain a majority of the House of Delegates, however, the Democrats now have a majority in the Senate. The VDA continues to maintain a good working relationship with both House and Senate members of both political parties. In 2003, when all 140 members were up for election, thirty million dollars was spent by the people running for the legislature. In 2007, sixty million dollars was spent. The cost will only continue to go up, thus making it important for the VDA to have a very strong Political Action Committee. In this election cycle we contributed around \$350,000 from the PAC. For us to continue to have access to these legislators, we must have a strong PAC. Your contributions to the PAC are a vital key to allowing us to have our voices heard in the legislature.

The task forces on Mentoring, Direct Reimbursement and Work Force are up and running. These task forces will report their findings to the VDA House of Delegates meeting in September, 2008.

We now have over one thousand Medicaid dental providers in Virginia, however many areas still need more providers and I would ask you to step forward and be a part of the solution to the access to care problem and become a Medicaid provider. By now you should have received your 2007 dues statement. When you return this please don't forget your contribution to the Virginia Dental Health Foundation. The foundation is very important key to our success with our MOM Projects. Please be aware that through the efforts of VDSC (Virginia Dental Services Corp.) and its endorsed products, your dues in effect have been reduced by \$80 due to the contributions from our for-profit arm. So please remember to use VDSC endorsed products. The VDSC also provides funding to the components for their continuing education programs.

As you now know, Dr. Ron Tankersley is running for ADA President-Elect. Please help with a campaign contribution, as it would be great to have one of our own as ADA President.

In closing, in June we will be holding the Virginia Meeting in Williamsburg, Virginia. This will be the first VDA meeting there in eight years. The Williamsburg Lodge has been completely remodeled with new hotel rooms and conference center. I hope that you will attend this meeting as it will provide over 100 hours of continuing education, great golf and fun social events.

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Gus C Vlahos DDS • VDA President

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# Trustee's Corner

## Dr. Ron Tankersley • 16th District Trustee



### The Association

The American Dental Association (ADA), the largest of American dental organizations, has a long tradition of serving the dental profession and the public well. It serves as an umbrella for the variety of dental specialty and special-interest organizations within the profession. Most members recognize the value of the ADA's member services and its advocacy for the profession and the oral health of the public. But, some forget that the ADA also provides the infrastructure for dental education, licensure, standards maintenance and development, and professionalism. The ADA is, largely, responsible for dentistry in this country being a self-governing profession, instead of a trade.

There are dentists who choose not to belong to the ADA, presumably because they do not perceive value in membership. But, without the ADA, the dental profession, as we know it, would not even exist. In countries without strong dental associations, dentists do not provide the high level of care or enjoy the level of public respect of American dentists. So, the health of the ADA is actually important to all dentists in this country, members and non-members alike.

The following is a brief update on the current state of the ADA:

#### Governance

All ADA policy is established by our House of Delegates (HOD). In our rapidly changing environment, it is essential that these policymakers have the necessary knowledge to appropriately respond to new developments with contemporary strategies. We are fortunate to have incredibly dedicated volunteers who expend the energy and resources necessary to acquire that necessary knowledge base. The debate among them is often spirited, which results in an enlightened governing body. The ADA was cited as one of the country's better managed associations in the book, *7 Measures of Success*. There are ongoing efforts to assure that the HOD receives timely information and that communications within the Association continue to improve.

#### Tripartite

The tripartite is one of the ADA's greatest strengths. So, the strength of the tripartite itself is extremely important to the ADA. Several initiatives designed to further enhance the relationship between the ADA and its constituents and components are increasing the tripartite's effectiveness. The sharing of information and resources within the tripartite is greater than ever and that improves the effectiveness of the ADA.

#### ADA Professional Staff

The ADA's professional staff members are often the most knowledgeable people in the world concerning their respective areas of interest. Our staff members work on our behalf full time and are among our greatest assets. They represent us well in multiple venues on a daily basis. It is important that they remain empowered to carry out their responsibilities to the best of their abilities, within the policies set by the HOD.

#### Membership

At over 71%, our membership market-share is the envy of most other associations. This is, largely, the result of a strong Tripartite, our ongoing membership initiative, and a unity of purpose among those in the dental community.

#### Fiscal Status

The ADA is fiscally sound. The financial affairs of the Association are well managed and transparent. Steady increases in our non-dues revenue, combined with our dues-stabilization policy, permit us to keep dues increases at or below inflationary levels while increasing member services. In addition, the ADA partners with other organizations for initiatives of mutual importance. These activities enhance important relationships and increase member benefits at a reduced cost to our members.

#### Challenges

This is a time of unprecedented social and professional changes. Some of the challenges faced by the ADA today include: 1) educating non-member dentists about the relevance of ADA membership to their futures, 2) gaining the trust of other stakeholders in oral health that we share common goals, 3) remaining nimble enough to appropriately respond to the rapidly changing environment, and 4) convincing policy makers that we advocate for the oral health of the public, not just the practice health of dentists. If the ADA can effectively address those challenges, we will be better postured to deal with some of the critical challenges to the dental profession itself. These challenges include increased federal regulation of healthcare, historic changes in the diversity of the population, increased ethical misconduct, and needed changes in dental education.

#### Summary

The ADA has a healthy market-share of practicing dentists and is blessed with dedicated, talented volunteers. It is fiscally sound, well staffed, and effectively managed. The tripartite continues to become stronger. But, we can't be complacent about the future. There are dentists who do not understand the value of membership. There are policy makers, as well as other stakeholders in oral health, who question our motives. In this changing world, complacency will be disastrous for both the public and the profession. We need a strong ADA to effectively address the critical challenges to the profession in a changing world.

If we all work together, we can meet our challenges and make the ADA even stronger. A stronger ADA will assure a stronger dental profession, which will benefit both patients and dentists. I encourage those of you who are not actively involved in organized dentistry to become active during this important time in our history. Those who are involved in organized dentistry today will define the profession for tomorrow.

# Responding to the Wake-Up Call

## A Workforce Strategy for Improving Access to Dental Care for Underserved Virginians

Ronald J. Hunt, DDS

Member, VDA Board of Directors and Dean, VCU School of Dentistry

*The content of this article was presented in a speech delivered at a Mega Issues Forum at the 2007 Virginia Dental Association Governance Meeting in Falls Church, VA on September 7, 2007.*

### **The Access to Dental Care Problem: A National Wake-up Call**

Most everyone in dentistry has heard of Deamonte Driver, a 12-year-old boy in Maryland who died last February because he didn't receive treatment of a diseased tooth. Newspapers ran articles about the death and editorials about the failure of the dental health care system, the emergency medical system, and the Medicaid program. Deamonte's death should have been a wake-up call for dentistry. Instead, organized dentistry noted his death was a rare and tragic event, one entirely preventable, with plenty of blame to go around, especially for the child's mother. Then we forgot about it.

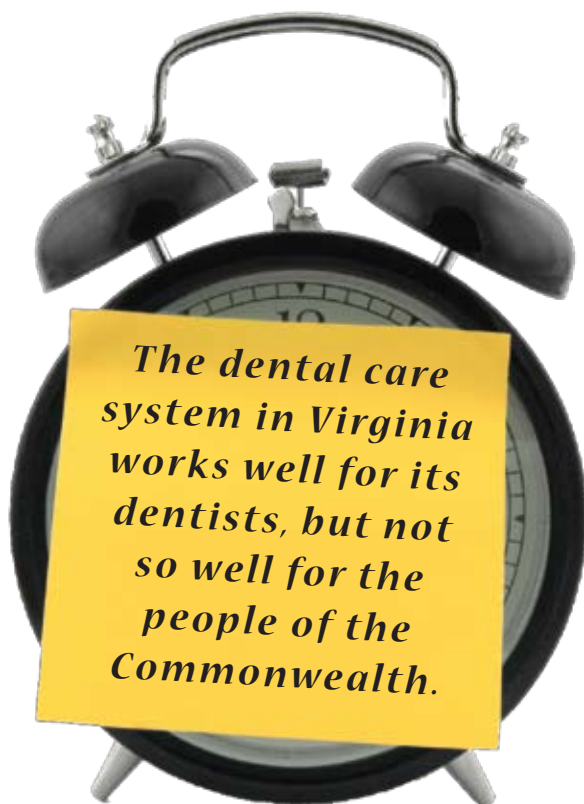
If this death didn't wake up dentists, it awakened

others. Politicians, advocacy groups concerned about limited access to dental care, and groups who want greater involvement in addressing the dental access problem, most notably the American Dental Hygienists' Association, rallied to the cause of improving access. The keen interest of others in solving the dental access problem should be a wake-up call. If we do not address the access to dental care problem ourselves, we can expect that politicians, advocacy groups, and the American Dental Hygienists' Association surely will, and it likely will be in ways that we do not like.

Oral health care in the United States ranks among the world's best, but remains beyond the reach of over 45 million Americans who live in dental health profession shortage areas. To put this number in perspective, the combined populations of Virginia and its five contiguous states totals 35 million, still 10 million shy of the number living in federally designated shortage areas. Moreover, the Surgeon General's Report on Oral Health concluded Americans with low income, racial and ethnic minorities, older adults, and rural residents have disproportionate levels of untreated dental disease.

Without access to dental care, preventable problems become acute, leading to costly emergency room visits. The cost of Deamonte Driver's dental care ultimately exceeded \$250,000. Again, that was a rare situation, but dental problems driven to emergency rooms for treatment should be a wake-up call for us. If we do not address the access to dental care problem ourselves, we can expect that hospitals, health departments, and politicians surely will, and it likely will be in ways that we do not like.

When residents of Alaskan villages lacked access to much needed dental care, especially for their children with rapidly growing caries problems, their tribal leaders sent some indigenous Alaskan young adults to New Zealand's two-year Dental Health Aide Therapist, or DHAT, program. They now do irreversible procedures in their remote Alaskan



## VDA House of Delegates 2007 Resolutions on the Dental Workforce and Access

1. The VDA supports the Dental Assistant I and Dental Assistant II as proposed by the Virginia Board of Dentistry.
2. The Association should explore the concept of adding new members to the dental workforce team under supervision by a licensed dentist in practices providing care to underserved populations.

villages, under very loose general supervision. Alaskan dentists and the American Dental Association heard the wake-up call, and filed suit to stop the DHATs from performing these irreversible procedures, but the suit failed. If we do not address the access to dental care problem ourselves, we can expect that someone else like the DHATs surely will.

To increase access to dental care, the American Dental Hygienists' Association proposed the Advanced Dental Hygiene Practitioner (ADHP). They have circulated draft competencies for dental hygienists with a master's degree to go to underserved areas and populations and expand dental hygiene practice to include basic restorative and surgical services in community settings and offices. If we do not address the access to dental care problem ourselves, we can expect that someone else like the ADHPs surely will.

In September, the provincial government in Ontario, Canada removed the restrictions tying dental hygiene practice to dentistry. Legislators amended the Dental Hygiene Act to improve public access to preventive oral care services by allowing dental hygienists the freedom to clean teeth outside the traditional dental office without a procedural "order" from a dentist. If we do not address the access to dental care problem ourselves, we can expect that someone else in government surely will.

All these alternatives to traditional dental practice should be a wake-up call for the American Dental Association and its members.

### The Access to Dental Care Problem in Virginia

These events also should be a wake-up call for Virginia's dentists and the leaders of the Virginia Dental Association. Do we hear it? We must ask ourselves some key questions. First, are there over a million citizens in the Commonwealth without access to our oral health system and our dental offices? Second, do we have a system that serves our citizens well? Third, could Alaskan-type DHATs or the Advanced Dental Hygiene Practitioner or some other types of new dental practitioners come to Virginia?

The answers to these questions are critical to the future of dentistry in Virginia. Unless we can reply with a definite "No", and it is doubtful we can, this should be a wake-up call to the members of the Virginia Dental Association. It MUST be a wake-up call for us.

Virginia's public health departments, social services departments, community service agencies, and the General Assembly recognize the seriousness of Virginia's problem with access to dental care. Less than 20 percent of Virginia dentists accept Medicaid patients, and many of those who do will accept only a few, in spite of the success of the VDA in obtaining reasonable Medicaid reimbursement rates through the Virginia General Assembly and the streamlining of required paperwork through the Department of Medical Assistance Services. Our dental care system fails far too many Virginians.

The Virginia Dental Association now sponsors six Missions of Mercy, or MoM Projects, each year. The sight of long lines of people who wait for hours to be seen at the MOMs dramatically illustrates the

magnitude of the access problem. The VDA receives many kudos, thank you's, and favorable press for its missions, but the missions only touch the tip of the iceberg. They can't be the answer to the access to dental care problem in Virginia. Long lines of needy people should be a wake-up call to us in the Virginia Dental Association. If we do not address the access to dental care problem in Virginia, someone else surely will.

We must see these wake-up calls as imminent threats to the dentists of Virginia and be proactive. Recent examples of progressive political action by the VDA include establishing private practice preceptorships for dental students, acceptance of general supervision of dental hygienists, and administration of local anesthesia and nitrous oxide by dental hygienists. We now face an imminent threat from recent events and outside parties that force us to think and act progressively and proactively about potential solutions to Virginia's access to dental care problem.

*The task force envisioned an expanded model that preserves the positive features of the existing dentist-controlled dental care system, while increasing access to care.*

### **Workforce Models as Potential Solutions**

The dental care system in Virginia works well for its dentists, but not so well for the people of the Commonwealth. Working in our own offices and using a workforce model that employs dental assistants and dental hygienists who serve under the supervision of dentists, we remain relatively free from governmental intrusion into the way we practice. Those features of our dental care system are precious to us; we want to keep them. Our challenge as leaders of the Virginia Dental Association -- find ways to preserve the features of our dental care system we value, while increasing access to dental care for our citizens. The VDA Task Force on Access to Care seeks to widen the dental safety net and has suggested a number of steps. Some of these strategies ask dentists to provide uncompensated care through MoM Projects, the VDA's Donated Dental Services (DDS) Program, or other pro bono work in their offices. Most

of the other strategies involve third parties, especially governmental agencies using tax dollars.

But the recommendation from the task force that the Virginia Dental Association must carefully and seriously consider is one that expands the existing dental workforce model. The task force envisioned an expanded model that preserves the positive features of the existing dentist-controlled dental care system, while increasing access to care. The task force's vision places the licensed dentist at the top of the workforce model, as head of the dental team, supervising four types of allied dental personnel.

1. At the entry level in the envisioned workforce model is the Dental Assistant I, as currently employed and supervised in dental practices throughout Virginia. Their role remains unchanged from the traditional dental assistant.
2. At the second level is the Dental Assistant II as recommended by the Virginia Board of Dentistry, who may perform expanded reversible intraoral procedures under the direction of a dentist. The Board's regulations would specify permissible procedures and the additional training required.
3. At the third level is the Dental Hygienist with a two-year certificate or four-year degree in dental hygiene. The dental hygienist's role remains unchanged from what currently exists in Virginia, performing educational, preventive, and dental hygiene services under the general direction of a licensed dentist. As advocated and promoted by the VDA, soon their scope of practice will include administration of local anesthesia and nitrous oxide.
4. At the fourth and highest level beneath the licensed dentist, the task force envisioned an additional allied dental practitioner. This person might provide basic restorative and surgical services. The Board of Dentistry, through thoughtful and extensive input from the VDA, would determine the education required and develop the scope of practice permitted. To assure patient safety and maintain the dentist as the head of the dental team, this practitioner would work only under the direction of a licensed dentist. To promote increased access to dental care, this practitioner would work only in dental practices that are in designated underserved areas in Virginia or provide a specified amount of Medicaid services to Virginians.

## **Workforce Proposals Made by Others**

What might this additional practitioner look like? The task force wasn't sure and left that for VDA members to consider. Other groups have made proposals.

First, let's look at the ADA's Community Dental Health Coordinator. This provider would be a dental hygienist with advanced education who would undertake a combination of community-based practice to promote oral health at the community level and clinic-based practice to provide preventive services and emergency services such as removal of gross caries with hand instruments and placement of temporary restorations. The ADA currently is piloting education programs for this coordinator.

A new Pennsylvania law recently took this model a step further, creating the position of public dental hygiene practitioner. This new category for dental hygienists requires additional training and experience enabling them to perform services, without a supervising dentist, in public health and institutional settings. Patients treated by these public health dental hygienists would have to be seen by a dentist once a year.

Second, let's look at the Alaskan DHAT mentioned earlier. With only two years post-high school education, this practitioner is entry-level. Their scope of practice includes a variety of basic irreversible

***We now face an imminent threat from recent events and outside parties that force us to think and act progressively and proactively about potential solutions to Virginia's access to dental care problem.***

services. Experience in New Zealand, and now developing in Alaska, shows the DHATs are capable of performing these procedures competently and safely. They work in remote Alaskan villages under a very loose form of general supervision by a dentist who rarely or never sees the patients before the DHAT does. So the dentist is only loosely defined as the head of the team.

Third, let's look at the Advanced Dental Hygiene Practitioner as advocated by the American Dental Hygienists' Association. This master's prepared dental hygienist would treat underserved

## **Proposed Workforce Model to Improve Dental Access**

The dental care system in Virginia works well for its dentists, but not for all its citizens. The VDA Task Force on Access to Care and Workforce suggested strategies to improve dental access, including expanding the existing dental workforce model, with the licensed dentist at the top of the model, supervising four types of allied dental personnel.

Dental Assistant I - role remains unchanged from the traditional dental assistant.

Dental Assistant II - additional training and education and under the direction of a dentist, could perform expanded reversible procedures specified by the Board of Dentistry with input from the VDA. Supported by the Virginia Board of Dentistry and the VDA House of Delegates.

Dental Hygienist - education and role remains unchanged from what currently exists in Virginia. As advocated and promoted by the VDA, their scope of practice in Virginia soon also will include administration of local anesthesia and nitrous oxide.

New Allied Practitioner - scope of practice or educational requirements developed by the Board of Dentistry through thoughtful and extensive input from the VDA. Would work only under the supervision of a licensed dentist in dental practices and only in designated underserved areas or providing a specified amount of Medicaid services. The VDA House of Delegates has recommended exploring this concept.

populations and expand dental hygiene practice to include community-based health promotion and prevention and office-based basic restorative and surgical services. This model hybridizes the ADA's Community Dental Health Coordinator, with its community-based practice, and the Alaskan DHAT, with its office-based basic restorative and surgical services. These practitioners would partner with dentists through teledentistry and strong referral networks. In this model the dentist is a partner in oral health care, rather than being at the head of the team.

### **Workforce Models from Other Health Professions**

Workforce models in nursing and medicine might provide useful parallels for dental practice. Exploring the scope of practice and educational requirements of nurse practitioners and physician assistants could prove useful to proposals for a new dental workforce model. Nurse practitioners are nurses with master's level education in nursing. They work in public clinics, urgent care centers, hospitals, research facilities, rural health clinics, and private offices in collaboration with physicians and other health care professionals. Their legal scope of practice is not procedure-based, but based on the level of comfort between the physician and the nurse practitioner resulting from the education and experience of the nurse practitioner and the willingness of the physician to delegate tasks, roles, and responsibilities. In a few states and Washington, DC, nurse practitioners may work autonomously and they refer patients to physicians for more definitive diagnosis and care. In other states, the physician is the head of the team, and determines the scope of practice for each nurse practitioner.

The physician assistant is a practitioner with a master's degree in medicine. As with the nurse practitioner, physician assistants collaborate with physicians, based on comfort level and clinical expertise, with the physician as the head of the team. Both nurse practitioners and physician assistants can

prescribe Schedule II medications. The physician assistant tends to work more on specific skill-related, sickness-defined aspects of practice, while the nurse practitioner focuses more on the whole patient, wellness broadly defined, and holistic practice.

### **Recommendations for Action**

The dental profession faces imminent threats to the way dentistry is practiced in Virginia, and must heed wake-up calls about the failures of the current dental care system to provide universal access to dental care to Virginians. It will take a change in the dental workforce model in Virginia to successfully meet these threats. Others have proposed four new types of allied dental personnel - the ADA's Community Dental Health Coordinator, the Pennsylvania Public Dental Hygiene Practitioner, the Alaskan DHAT, and the Advanced Dental Hygiene Practitioner. Each of them is lacking in significant ways. The nurse practitioner and physician assistant are parallels in nursing and medical practice providing ideas that could be adapted to dental practice.

The leaders and members of the VDA must choose the course of action. The VDA Task Force on Access to Dental Care called for action. The VDA Board of Directors heard the wake-up calls, saw the imminent threats, and called for the Association's engagement and dialog about Virginia's dental workforce. The VDA House of Delegates also heard the wake-up calls, saw the imminent threats, and passed two resolutions. One supports the Dental Assistant I and Dental Assistant II as proposed by the Virginia Board of Dentistry. The other recommends the Association explore the concept of adding new members to the dental workforce team under supervision by a licensed dentist in practices providing care to underserved populations.

The VDA must begin thinking progressively and proactively about potential solutions to Virginia's access to dental care problem. If the VDA does not address the access problem in Virginia, and do it through new workforce models that promote care for under-served Virginians, someone else surely will, and it likely will be in ways that we do not like. Heed the wake-up calls, see the imminent threats, and act accordingly. Do not leave it to someone else to decide for you.

***... an expanded model that preserves the positive features of the existing dentist-controlled dental care system, while increasing access to care.***



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On Saturday, October 27, 2007, a dental outreach project for underprivileged people was held in Petersburg, Virginia, where more than \$ 53,148 worth of dental care was donated on more than 130 patients by members of the Virginia Dental Association, the Medical College of Virginia School of Dentistry, the Medical College of Virginia School of Dental Hygiene, dental office and community volunteers, and dental supply company employees, through a collaborative program known as the Petersburg mini-Mission of Mercy program. This was the third time that this project has been done in Petersburg, and is a partnership with the above named volunteers and Pathways (formerly known as Petersburg Urban Ministries), and was conducted at Pathways new facility located at 1200 West Washington Street in Petersburg, VA. This project was coordinated by Dr. Paul Brinser, III, an oral and maxillofacial surgeon with Southside Oral and Facial Surgery, and received additional support from Dr. Carol Brooks, a faculty member at M.C.V. Dental School, Jackie Owens, a social worker with Pathways, and Virginia Dental Association staff. Services that were donated during this project included examinations and evaluation, patient education, extractions, restorations, cleanings, x-rays, and referrals. This program was advertised by Pathways, and patients were screened and appointed by Dr. Frank Farrington, a retired M.C.V. Dental School faculty member.

A team of volunteers, including Bill Hall (equipment specialist with Benco Dental) met on Friday evening, October 26<sup>th</sup> and set up 14 portable dental chairs, along with lights, handpieces, x-ray center, supplies, sterilization areas, instruments, patient and volunteer sign in and reception area. On Saturday, October 27<sup>th</sup> patients were seen between the hours of 8 a.m. and 4 p.m. The M.O.M. project was first held in Wise County, Virginia in July 2000, and to date more than 24,726 patients have been treated at no charge, and have received more than \$ 11.2 million in free dental care. The M.O.M. projects are an outreach by organized dentistry to highlight the access to dental care crisis that presently exists in this country, and the proactive measures that dentists are taking to give back to the underserved and underprivileged, and to highlight this plight to decision and policy makers so that this situation can be corrected. State Senator Steve Martin visited this project. The previous two mini-M.O.M. projects were also very successful, the November 15, 2003 project generated \$ 11,140 in free dental care, and the March 12, 2005 project generated \$ 16,119 in free dental care.

The following dentists and volunteers helped make this project possible: Drs. Paul Brinser, Brad Trotter and Robert O'Neil with Southside Oral and Facial Surgery (along with Betty Harger, R.N., Kim Veale, R.N., Julie Root, Elizabeth Reighard, LaTasha Jones), Dr. Shaman Al-Anezi, Dr. Howard Baranker, Dr. Shannon Bowman (along with Jennifer Deadmon, Jennifer Maitland, and Sarah McSwain), Dr. Carol Brooks, Drs. Steven Castro and Marci Morris (along with Jennifer Berry and David Lewis), Dr. Conan Davis, Dr. Martha Dawson (along with her son John Calvin Barnard), Dr. David Ellis, Dr. Sam Galstan (along with Linda Gottschalk, Michelle Lawton, and Jan Boles), Dr. Michael Hanley, Dr. Monroe Harris (along with LaTeseau Rodwell, James Gray and Monroe Harris, III), Dr. Charles Johnson, Dr. David Jones, Dr. Jeffrey Maurer (along with Jennifer Dickens), Dr. Marissa Mule', Dr. Karen McAndrew (along with Becky Davis, Sandra Easley and Katie Wysocki), Dr. Harold Neal (along with Amanda Mountford, R.D.H., Jamie Neal and Sloan Neal). Dr. Richard Roadcap, Dr. Earl Shufford, Dr. Tonya Parris-Wilkins, and Dr. Ronnie Wray. Other volunteers include Tonya McRae from the Health Department, Sandra Brown with DMAS and her husband, and Vindu Redue. There were at least 12 dental students and 2 dental hygiene students present. If we forgot to list any volunteers please forgive us, and we thank you all for your service!

### Statistics:

130 patients treated  
130 exams  
208 extractions  
49 restorations  
41 cleanings  
113 x-rays

By  
Samuel W. Galstan, D.D.S., M.A.G.D.



Dr. Sam Galstan



Jackie Owens and Dr. Paul Brinser



'Dr. Conan Davis, Chief Dental Office for the Centers for Medicaid and Medicare Services (CMS), visited the recent Petersburg MOM Project headed up by Dr. Paul Brinser. He was accompanied by Dr. Mark Nehring, Captain, USPH Service, who is with the Maternal and Child Health Bureau in DC. They both came away very impressed with the MOM Project and its many benefits to the patients it serves and to the profession.' To the left of Dr. Davis is Dr. Terry Dickinson, Executive Director, Virginia Dental Association and to the right of Dr. Nehring is Dr. Gus Vlahos, President, Virginia Dental Association.



Dr. Brad Trotter

# Grundy MOM 2007

*Held at Riverview Elementary & Middle School*

One and a half day Dental Clinic (14 hours) Provides Dental Care for 551 Southwest Virginia Area Residents. Through four Grundy MOMs 1,731 area patients have received free dental care valued at \$991,991.



Photo courtesy of Jim Doyle



## Statistics:

551 exams  
109 cleanings  
5 gross debridements  
1,135 extractions  
867 fillings  
8 denture adjustments  
21 root canals  
415 x-rays



## Thanks to all those who volunteered for the Grundy MOM!

Dr. Mike Abbott  
Kate Adams  
Amy Adams  
Rhiannan Aesy  
Matt Aldred  
Rachel Allen  
Dr. Stephen Alouf  
Sandy Anderson  
Ryan Bailey  
Brenda Bazemore  
Kristen Blevins  
Jennifer Bobbio  
Nathan Bobbitt  
Dr. Carol Brooks  
Heather Brown  
Derek Brown  
Marlaina Carson  
Stephanie Chambers  
Bud Chambliss  
Jessica Clark  
Dr. Tom Cooke  
Jill Cooke  
Stacy Cornett  
Emily Craft  
Kaitlin Cronan  
Jonathan Croudron  
Dr. Paige Crowder  
Emily Danielson  
Diane Dare  
Chris Davenport

Lindy Davis  
Becky Delvechio  
KC Dietz  
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Christine Farah  
Dr. Robert Findley  
Pat Finnerty  
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Linda Gardner  
Dr. Richard Goldin  
Brenda Gore  
Mayra Granados  
Jaqueline Green  
Greg Greenstein  
Jordan Greenstein  
Shelagh Greenwood  
Greg Grey  
Bill Hall  
Donna Hall  
Ken Handy  
Ashley Hanson  
Dr. James Hartigan  
Harlan Hendricks  
David Herce  
Heidi Hessler-Allen  
Corrine Hoffman  
Brandy Holt

Ruth Houchens  
Stacy Houchins  
Dr. Nathan Houchins  
Dr. Wallace Huff  
Omar Hussain  
Dr. Steve Jackson  
Cathy Jackson  
Qasim Jaffri  
Ingrid Johnson  
Conner Johnson  
Mantique Johnson  
David Jones  
Sarah Kandrac  
Kris Keeton  
Sharon Kennedy  
Zach Kuenzli  
Kim Kwang  
Dr. James Lance  
Jocelyn Lance  
Jimmy Lee  
Bonnie Leffingwell  
Trevor Lindgren  
Tabby Lloyd  
Bobby Lunka  
Megan Lutz  
Harrison Lutz  
Dr. Steven Lutz  
Steven Lutz  
Thor Lynch  
Bernadette Mabanglo

Bridget McDowell  
Ruth McNamara  
Brent Moses  
Jeppy Moss  
Jayde Moxey  
Karina Munoz  
Brandon Neal  
Sarah Nelson  
France Nielsen  
Jason Nikkhhah  
Joshua Nussbaum  
Dr. Doug Overstreet  
Cameron Overstreet  
Christy Owens  
William Pack  
Dr. Shruti Patel  
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Caitlin Stangel  
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Jessica Thompson  
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#### Northern VA MOM 2008

- Friday, March 14, 2008  
 Saturday, March 15, 2008

#### Eastern Shore MOM 2008

- Saturday, March 29, 2008  
 Sunday, March 30, 2008

#### Roanoke MOM 2008

- Friday, April 25, 2008  
 Saturday, April 26, 2008

#### Wise MOM 2008

- Friday, July 25, 2008  
 Saturday, July 26, 2008  
 Sunday, July 27, 2008

#### Grundy MOM 2008

- Saturday, October 4, 2008  
 Sunday, October 5, 2008

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 Extractions     Adults only  
 Triage           Children only

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For more information on the Mission of Mercy projects and to register online please visit us at [www.vadental.org](http://www.vadental.org). Contact Barbara Rollins at VDA: 804-261-1610; email: [rollins@vadental.org](mailto:rollins@vadental.org); FAX 804-261-1660.

Hope you can join us!

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**On February 1, 2008, hundreds of dental volunteers will reach out to provide much needed dental care and education to children. Please join us and volunteer for Give Kids a Smile Day 2008!**

Last year **5,079 children** from throughout the Commonwealth received **\$338,311 in free dental care** as part of the National Give Kids a Smile initiative and Children's Dental Health Month.

**National Children's Dental Access Day**

**If you would like to become a part of this important initiative for children's access to dental care, contact your Component Secretary to find out about events in your area or consider organizing an event at your office or a local school.**

Please remember to report your Give Kids a Smile activities to your Component or to the VDA central office. Thank you to all participants!

The first annual "Give Kids a Smile!" "Promising Practices Symposium" was held on August 27, 2007 in Chicago, Illinois at the A.D.A. headquarters. Ninety people from 23 states and Puerto Rico gathered to discuss a variety of topics to move local access to care projects forward by benefiting and learning from each other's experiences. The symposium was held concurrently with the ADA's "GKAS!" National Advisory Board, and was co-sponsored by the ADA, the Dental Trade Alliance and Sullivan-Schein. A number of prominent speakers delivered tips, covering such topics as organizational skills, networking, engaging volunteers, fundraising, event planning, and motivation. Representing Virginia were VDA Executive Director Dr. Terry Dickinson, Elise Woodling, Director of Marketing and Programs for the VDA, Drs. Sam Galstan and Sharone Ward, co-state directors for Virginia's "Give Kids a Smile!" access to dental care initiative, and Tina Bailey, Executive Director of "Smart Smiles". The 6<sup>th</sup> annual "Give Kids a Smile!" Access to Care project will be held February 1, 2008. Presently, there is an access to dental care crisis that exists in this country, and this project is designed to help inform the public and decision and policy makers of this situation and the fact that dentists give generously in their volunteer outreach work to help underserved children. Any interested persons please contact the VDA or Sam Galstan and Sharone Ward.

**By Samuel W. Galstan, D.D.S., M.A.G.D.**

## VCU School of Dentistry Breaks Ground on Third Building



School of Dentistry friends, faculty, students and supporters ignored much-needed rain to watch officials turn shovels and break ground on the site of the W. Baxter Perkinson Jr. Building on October 26, 2007.

At the noontime ceremony, Dean Ron Hunt acknowledged the three major partners who helped move the building's plans from vision to reality-- the membership of the Virginia Dental Association, the membership of the Virginia General Assembly, and the leadership of VCU.

Named in honor of alumnus Dr. W. Baxter Perkinson, the 55,000 square foot building situated on Leigh Street will provide more classrooms, clinics, and laboratories to meet the current and future oral health needs of Virginians. The additional space will allow the school to educate PhD students and generate new knowledge through research in collaboration with VCU's Massey Cancer Center and School of Engineering. The space also permits expanded patient care and increased enrollment in the school's dental and dental hygiene degree programs.

At the ceremony, Dr. Gus Vlahos, President of the Virginia Dental Association said, "Our hope is that the new building here at VCU with its space for additional students can help address the need for more dentists in the underserved areas of Virginia and meet the needs of the citizens of the Commonwealth."

In his remarks Dr. Vlahos enumerated several reasons to celebrate the expansion of the School of Dentistry. They included the wonderful partnership between VCU and the VDA, the accomplishments of the legislative champions who believed in the expansion and worked to make it happen and finally, the opportunity to improve the quality of life for Virginians that the expansion provides.

Echoing those thoughts, VCU President Dr. Eugene P. Trani said, "This \$20 million teaching, research and patient care facility is about more than walls and windows or bricks and mortar. It is about improving the quality of life of the citizens of Virginia and beyond."

An opening and ribbon-cutting are expected in summer 2009.

To read more about the ground-breaking, see photos of the ceremony, visit the school's website at [www.dentistry.vcu.edu](http://www.dentistry.vcu.edu)



Don't forget  
to pay your  
membership  
dues!

Questions? Contact Leslie Pinkston at the VDA Central Office.  
[pinkston@vadental.org](mailto:pinkston@vadental.org) 804-261-1610



## Identity Theft ALERT

### *Indiana Dental Association (IDA)*

The IDA was recently contacted by a member who was the victim of identity theft. His office received a call from an individual identifying himself as a security officer with the doctor's credit card company. He told staff that he needed to talk with the dentist regarding an urgent matter. When the doctor came to the phone, the caller claimed that the doctor had been a victim of identity theft and that he needed personal identification and account information in order to protect the doctor's other accounts.

"He was very smooth," the doctor said. "I can't believe I fell for his pitch, but by calling me at the office, he caught me while my mind was on my patient, not banking security." According to the doctor's credit card company, they are aware of this particular con man, and he seems to be targeting dentists in the mid-west.

A reminder that you should never give out personal or account information to anyone calling you. If in doubt, contact your bank or credit card's customer service number to confirm the identity of the caller.

# A Tribute to Former Journal Editor - Dr. Leslie S. Webb, Jr.

By: Dr. Anne Adams



I hope that you all will read this honorary tribute to a person who has served dentistry for almost forty years unselfishly, ten of these as editor of our juried journal. He has contributed more time, effort, expertise, and caring over that span of years than we will ever know and is still a resource for our profession.

I have known Les Webb for about twenty years. I know that you all know him as a graduate of University of Richmond, graduate of Medical College of Virginia Dental School, and practicing dentist in Richmond for thirty-nine years.

You all know that he was President of the Richmond Dental Society, President of the Virginia Dental Association, served both associations well as an alternate delegate and delegate to the VDA and American Dental Association. He served us well as Council Chair to the ADA Council on Dental Benefits Programs.

I could go on and on about his commitment and his talents; however, this is not a laundry list of his accomplishments. This is to honor him for his talents and caring. I have contacted people that have known him and appreciated him for many more years than I have known him.

## **Charlie Cuttino had this to say about Les:**

Les Webb is a leader who served the VDA when leadership was necessary. He was there when the Association needed to change its direction as an association. With much forethought he, along with Raleigh Watson, and Ron Tankersley, changed the direction of the VDA that helped transition the association into the twenty-first century.

He is one of four appointees from the ADA Sixteenth District elected as Chairman of the ADA Council on Dental Benefit Programs, which has been decisive in leading to the ADA becoming an advocate for all of us in practice today.

His tenure as Editor of the Virginia Dental Association Journal has led to changes in the format of the journal and the developing of a juried journal. His contributions have developed an outstanding educational benefit for our membership.

As a friend, I will remember the blind “eagle” on the eighteenth hole of the Hermitage Golf Course, the Africa big game hunts which required the addition of a room to his home to display his conquests, fishing on on the Bay and touring trips with Les and Carolyn over the years.

The best thing about Les is that he is a friend for a lifetime.

## **When I contacted Dr. Richard D. Wilson, he had this to say:**

I appreciate that the “Webb Phenomenon” (appearing to be sound asleep during a meeting and then suddenly “awakening” to verbalize an astute and wise comment) is a cause for surprise from those who do not know Les and a cause of ongoing wonder among us who do. However, Les runs a lot deeper.

An excellent student (at both the University of Richmond-Phi Beta Kappa and MCV/VCU-OKU) and an excellent dentist, it would have been easy for Les to confine his many talents to his dental office.

Fortunately, for the rest of us, he elected to devote time and energy to organized dentistry and he has sustained those activities for a generation.

Most Virginia dentists identify Les Webb with the Virginia Dental Journal. His excellence as our editor leaves a legacy that all of us are compelled to admire and esteem. When I complimented Les recently on his years of dedication to organized dentistry, I commented that most of his colleagues are totally unaware of his abundant sacrifice of personal and professional time. He responded, as one might expect, “Recognition is not the reason any of us do this.”

That is an indicator of the man.

## **Dr. J. Gary Maynard added insight to the man Les Webb:**

We are all aware of Les Webb’s very successful career in dentistry. As a periodontist, I have witnessed first hand the excellent quality of his dental restorations and his dedication to superb patient care. His commitment to detail and excellence is second to none. His office management skills have resulted in long term employees who are equally dedicated to his practice and patients.

Les is also quite human. He is a handyman, capable of fixing any and everything that might go wrong around his office, Rivah house or his Richmond home. His old suburban used to look like the repairman's truck, filled with every imaginable tool.

He is also an avid hunter of big game, waterfowl and upland birds. He has been fortunate to organize trips to South America and numerous occasions to hunt doves, pigeons, perdiz, ducks, and geese. He is an excellent wing shot. Missing his target is rarely observed. His knowledge level about the sport is refreshing and challenging.

Les approaches his golf in the same methodical fashion that he practices dentistry. He knows his strengths and his distance capabilities for each club he uses. He studies the layout of the upcoming tee shot like the scientist he is. He evaluates the greens, their undulations, speed, grass type and then addresses the ball with determination and expertise of a professional golfer. As a result, he is an excellent and consistent golfer and constantly wins in our foursome.

It has been my pleasure to know Les for as long as he has practiced. I am honored to have him as a friend.

**Dr. Bud Zimmer had this to share:**

In his work with organized dentistry, Les Webb is the personification of courage and compassion.

When Les was VDA President, it was time to renew our credit card agreement with the ADA. Les had the courage to tell the ADA "No" when the ADA was pressuring the VDA to renew without knowing the terms of the new agreement. His courage to go another direction gave the VDA a tremendous boost in non-dues revenue that continues to this day.

When it was time to look for some new association management personnel, Les oversaw a transition that allowed change with great dignity. He also participated in the selection of some key people (like Chuck Duvall) who helped take the Association to the next level.

Les Webb was there when we selected Terry Dickinson as our new Executive Director in 1999. The Association's prestige continues to grow from his (and others) wisdom. He has been a great resource for me and others on numerous occasions.

**Dr. Richard LeHew has shared the following insight about his friend and his dentist:**

I met Les Webb through my relationship with his parents, Isabel and Les Sr. Les Sr. worked for Remington Arms Company and kept my guns functioning during my competition skeet shooting days. Isabel was a six-time All-American skeet shooter and secretary of the Virginia Skeet Shooting Association for a number of years. Les and I met and became life long friends.

We fish together. Trips to Florida and Mexico have been fun and interesting, especially when the black tip shark stole the big speckled trout off the gunnel of the boat.

Les and I have hunted all over the world, fowl and deer in Virginia, fowl in Argentina, Uruguay, Nicaragua, and big game in South Africa and Zimbabwe. Les's wife Carolyn says his trophy room is full and he does not need any more animals.

Les, Carolyn, Betty and I have traveled to Spain, Mexico, Alaska, Florida, and other places. Les and Carolyn are always ready for an adventure. Les is a wonderful friend and my personal dentist. He has a great chair side manner, an organized and compassionate staff so he can administer the best dental care.

He has always given his time and energy to promote organized dentistry. He has held all of the local and state offices up to and including President of the Virginia Dental Association and has attended most of the ADA meetings as a Delegate and, or a member of a committee or council of the ADA. Les is always ready to try to make dentistry a better profession. Editor of the Virginia Dental Journal was his next challenge and served well in that capacity for the past ten years. We all owe Les a debt for his unselfish devotion to his profession.

Les, you are the best and I salute you for all you have accomplished.

**Dr. Benita Miller volunteered this about Les:**

Les is the master of taking complex issues simplifying them so everyone can understand. He lives the theory we were all taught in dental school, "keep it simple stupid."

**Barbara Nunnally, long time employee for Dr. Les Webb,** says that Dr. Webb is a good man to work with and he presents opportunities to contribute in the office. She says that he has good business practices. He runs his practice with low overhead and has no cabinet full of unused materials. Barbara reports that Les is a man of diverse interest and talents. He loves dentistry and likes and enjoys his patients. He can build and fix most anything.

Les Webb has been honored by many honorary organizations but the best award is when your peers recognize you for your dedication and skills. He was awarded the highest award by the Richmond Dental Society, the Harry Lyons Award.

I am proud and glad to have had the opportunity to know Les Webb over the last twenty years. I hope we will always be friends.

I hope through the eyes and lives of others you can better understand the complexity of a man who is talented in many fields and who has dedicated his life to a profession that he has served well so that we all can have the pleasure and responsibility of practicing dentistry as we do today and tomorrow.



# Methicillin-Resistant *Staphylococcus aureus* (MRSA)

by: Dr. B. Ellen Byrne - Assistant Dean, Academic Affairs, VCU School of Dentistry

*Staphylococcus aureus* (*S. aureus*), often referred to simply as "staph" are gram-positive bacteria commonly colonizing the skin and anterior nostrils of healthy people. It has been reported that 20%-30% of all individuals are colonized with staphylococci.<sup>1</sup> *S. aureus* is the most common cause of skin and soft-tissue infections in the United States. Most of the skin infections are minor such as pimples, impetigo, and abscesses. In addition, staphylococcus bacteria can cause serious infections, such as surgical wound infections, pneumonia, and septicemias. Before the introduction of the penicillins in the 1940's, the mortality rate of *S. aureus* bacteremia at the Boston City hospital was reported to be 82%.<sup>2</sup> With the introduction of benzylpenicillin into chemotherapy in the early 1940s *S. aureus* isolates were fully susceptible and several of the first successes of penicillin therapy were related to the cure of formerly untreatable staphylococcal diseases. This widespread control lasted only a few years. By the mid 1950s the number of *S. aureus* showing high-level resistance increased rapidly. This resistance was due to the production of beta-lactamase enzymes which destroyed the penicillin activity. Methicillin, originally called celbenine, is a semi-synthetic derivative of penicillin chemically modified to withstand the degradative action of the beta-lactamase enzymes, also known as penicillinase. The drug was introduced in Europe in 1959-1960 and only 1 year later, the first methicillin-resistant *Staphylococcus aureus* strains were detected.<sup>3</sup> The first clinical failure by MRSA strain was described,<sup>4</sup> followed by the first MRSA outbreak in 1963.<sup>5</sup> In 1968 the first reported case of MRSA occurred in the United States.<sup>6</sup> In the subsequent years, the prevalence of MRSA has steadily increased. Methicillin-resistant *Staphylococcus aureus* made the headlines in Virginia with the death of a Bedford County high school student in October, 2007.

MRSA caused more than 94,000 life-threatening infections and nearly 19,000 deaths in the United States in 2005. Most of the infections were associated with healthcare settings, according to the most thorough study of life-threatening infections caused by these bacteria, experts with the Centers for Disease Control and Prevention (CDC) report.<sup>7</sup>

The October 17, 2007 edition of the *Journal of the American Medical Association (JAMA)* establishes the first national baseline by which to assess future trends in invasive MRSA infection. Klevens (DDS, MPH at the Centers for Disease Control) et. al., based on 2005 data, found that about 85% of all invasive MRSA infections were associated with healthcare settings such as acute and chronic long-term care facilities. Two-thirds of these infections appeared in the community among people who were hospitalized, underwent a medical procedure, or resided in a long-term care facility within the previous year. These outbreaks are known as hospital acquired MRSA (HA-MRSA). About 15% of the reported infections were considered community-associated, which means the infection occurred in people without documented health care risk factors.<sup>8</sup> Until recently, the community outbreaks were generally assumed to be associated with contemporaneous hospital outbreaks. However, recent clinical and research data supports a community acquired MRSA (CA-MRSA) which is a uniquely distinct strain from the HA-MRSA. Widespread reports of CA-MRSA now exist.<sup>9, 10</sup>

CA-MRSA can cause a spectrum of infections similar to methicillin-sensitive *S. aureus* (MSSA). In patients with skin and soft-tissue infections, the prevalence of CA-MRSA may reach 75%.<sup>11</sup> There are several common themes in the reported cases of CA-MRSA:

- The patients appear to have no other risk factors.
- Transmission appears to be a minor skin trauma and patients often associate it with a "spider bite."
- Sharing close quarters, sports equipment and personal care equipment such as razors.
- Associated with younger patients CA-MRSA median age is 23 years vs. HA-MRSA which is 63 years.
- Among pediatric patients age <18, dermatological conditions are the most common underlying medical condition.
- Among adults >18, the most common underlying medical conditions include smoking, diabetes and dermatological conditions.<sup>6</sup>

## Clinically Important Take Home Messages

*S. aureus*, CA-MRSA and HA-MRSA are treated different therapeutically. Typically treatment of skin infections, boils, cellulitis, furunculosis have been treated with the beta lactam antibiotics, penicillins and cephalosporins, but it is important to realize that CA-MRSA is a distinct pathogen that is therapeutically resistant to beta-lactams.<sup>13</sup> The health care provider should suspect CA-MRSA when a skin or soft tissue infection does not respond to a beta-lactam after a few days. If the lesion(s) increase or lymphangitic streaking occurs, antibiotics should be changed. CA-MRSA appears to be sensitive to sulfamethoxazole/trimethoprim (*Bactrim*®) also known as TMP/SMX, minocycline (*Minocin*®), doxycycline (*Vibramycin*®) and clindamycin (*Cleocin*®). Incision and drainage are of great importance and antibiotics are adjunctive.

HA-MRSA, a more life-threatening disease, is treated with vancomycin (*Vancocin*®), linezolid (*Zyvox*®), daptomycin (*Cubicin*®), quinupristin-dalfopristin (*Synercid*®), and tigercycline (*Tygacil*®).

*S. aureus* has been identified both in the oral cavity<sup>14, 15</sup> and on surfaces in the dental operatory.<sup>16</sup> In a retrospective analysis Smith et. al identified *S. aureus* from 1,017 oral specimens, of which 967 (95%) were sensitive to methicillin (MSSA) and 50 (5%) were resistant to methicillin (MRSA). The 1,017 specimens were provided from 615 patients. MRSA was isolated from 37 (6%) of patients. The most common specimen from which MSSA was isolated was an oral rinse (38%) while MRSA isolates were from a tongue swab. The clinical condition most commonly reported for MSSA isolates was angular cheilitis (22%). Erythema, swelling, pain and burning of the oral mucosa was the clinical condition most commonly reported for MRSA isolates (16%). The majority of MRSA patients were seen in nursing homes, hospices and general dental practices (51%). The MSSA isolates were recovered

from patients seen in an oral medicine clinic at a dental hospital.

Transmission of CA-MRSA is almost always spread by direct physical contact and not through the air. This may occur through indirect contact by touching objects such as towels, wound dressings, clothes, and sports equipment.

Prevention strategies involve preventing direct transmission.

- Do not share person items such as razors, soaps, towels, water bottles etc.
- Monitor, treat and dress all open skin abrasions and cuts.
- Universal infection control procedures and barriers should always be adhered to.
- Hand hygiene is imperative.

It is important to remember that humans are the natural reservoir of *S. aureus*. The anterior nostrils and skin are the usually sites of MRSA colonization. Approximately 20%- to 30% of the population may be colonized with MRSA.<sup>6</sup> Treatment of the nares and fingernails twice daily for five to ten days with mupirocin (*Bactroban*®) to eradicate the carrier state has been suggested. However widespread use of mupirocin should not be recommended due to the high risk of creating resistance.

Despite its pathogenic potential, *S. aureus* is only infrequently associated with acute dento-alveolar infections.<sup>16</sup> Other oral infections from which *S. aureus* has been cultured include infected jaw cysts, oral mucosal lesions and denture-induced stomatitis. More usually *S. aureus* infection is associated with angular cheilitis.

Kurita et al pointed out the possibility that surfaces in the dental operatory including the air-water syringe and reclining chair could act as a reservoir for contamination. Potentially pathogenic organisms could be transmitted from the patients' mouths or wounds to dental staff and dental operatory surfaces. Implications for the dental practitioner include the fact that they may be passive vectors for the disease however with proper infection control this reservoir is eliminated.

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## Virginia Dental Association Hosts 2008 Big Sky Ski 'n Learn Seminar

The Virginia Dental Association will join at least ten other states in hosting a Ski 'n Learn Seminar at Big Sky Resort in Big Sky, Montana, March 8-15, 2008. Other state dental associations co-sponsoring the trip include Alabama, Indiana, Kentucky, Maryland, Missouri, Montana, Oklahoma, South Dakota, Tennessee, and West Virginia.

This will be our fourth consecutive trip to Big Sky. Over fifty dentists from eleven states participated in the 2007 trip.

Montana is known for its vast, beautiful landscapes and at Big Sky, there's no exception. Big Sky Resort is Montana's largest destination resort, featuring uncrowded skiing on 3,600 acres with a vertical rise of 4,350 feet. World-class skiing and riding is spread across three interconnected mountains with 150 trails and 400 inches of annual snowfall. With two terrain parks, a half-pipe, and the Lone Peak Tram whisking skiers and riders to 11,150 feet, Big Sky is the choice of many winter enthusiasts from around the globe.

### Continuing Education

The Ski 'n Learn Seminar offers 16 hours of continuing education held Monday, March 10 through Thursday, March 13. A morning session will be held from 7:30-9:30 a.m., with an afternoon session from 4:30-6:30 p.m. A full breakfast will be served to seminar attendees at the morning sessions and snacks and beverages are offered during the afternoon sessions.

### Lodging

**Huntley Lodge** - This three-story hotel was part of the late NBC news broadcaster Chet Huntley's original vision. With recent remodeling, it is as tasteful as it is convenient. The Huntley complex includes a fine dining room, lounge, coffee cart, concierge, shops, ski storage, meeting rooms and Solace Spa.

**Shoshone** - Shoshone combines the service of a hotel with the comforts of a condominium. This recently remodeled seven-story landmark is attached to the Yellowstone Conference Center and Huntley Lodge. Solace Spa, shops, espresso cart, and Kids Club are located in the lobby.

**The Summit** - This 10-story luxury complex combines the convenience of a hotel with the amenities of a condominium. Flexible lock-offs allow for many sleeping configurations. The Summit melds European sophistication with Western style with three high-capacity lifts within 100 yards of the entry.

**Big Horn** - Big Horn Condominiums are truly a home away from home. These units are spacious, well-planned and especially comfortable for groups. Enjoy views of Lake Levinsky and Lone Mountain.

### Transportation

Located just 45 miles south of Bozeman, Montana, and only 18 miles north of the Yellowstone National Park border, the resort is easily accessible via jet service into Bozeman on Northwest, Delta, United, Horizon, and Skywest Airlines. Ground Transportation is available by way of rental car or shuttle.

### Resort Amenities

Located at the base of Lone Mountain, the complex includes meeting rooms, an amphitheater, a scenic Main Dining Room, Chet's Bar, two outdoor heated pools, jacuzzis, saunas, a health facility, tennis and volleyball courts, a massage studio, and retail shops all in the same area. Next door is the Mountain Mall, providing additional restaurants/bars, shops, and services.

### Skiing and Recreation

The skiing at Big Sky is truly legendary. The experience is based on huge vertical, tremendous elbow room and breathtaking scenery. The facts tell the story -- two mountains, 3,600 acres, seventeen lifts, 400 inches of light, dry snow annually, no lift lines and the nation's 2nd largest vertical drop of 4,350 feet. Group ski rates will be available for registered attendees.

And when you're not skiing, the Big Sky area offers plenty of winter activities like snowmobiling and wildlife viewing in Yellowstone National Park, snowshoeing, sleigh ride dinners, ice skating, free children's après ski activities, or relaxing with a spa treatment from the Solace Spa.

### How To Register

For registration information visit [www.aldaonline.org](http://www.aldaonline.org), or contact the Alabama Dental Association via phone (800) 489-2532, fax (334) 262-6218, or email [greger@aldaonline.org](mailto:greger@aldaonline.org).

# 15<sup>th</sup> Annual Ski n' Learn Seminar

# REGISTRATION FORM

Name \_\_\_\_\_ Badge Name \_\_\_\_\_  
                    **First**                    **M.I.**                    **Last**

**Mailing Address** \_\_\_\_\_  
                                    Street, P.O. Box, etc.                                    City                                    State  
                    Zip

**Email** \_\_\_\_\_ **Phone** ( \_\_ ) \_\_\_\_\_ ( \_\_ ) \_\_\_\_\_ ( \_\_ ) \_\_\_\_\_  
  Office  Home  Fax

Guests (include first and last names for all guests): Spouse \_\_\_\_\_

Other adult guests (include adult children):  
\_\_\_\_\_

Children (include first and last names for all children):  
Child/Youth Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_  
Child/Youth Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_  
Child/Youth Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

### LODGING RESERVATIONS

**Check-In Date** \_\_\_\_\_ **Check-Out Date** \_\_\_\_\_

**Special Requests** \_\_\_\_\_

*Check-in time is after 5:00 p.m. – Check-out time is before 10:00 a.m.  
The current tax and service charge of 15% has been included in the room rates.*

Choose from the following accommodations:

#### Huntley Lodge

- \_\_\_\_\_ Huntley First Class - \$244 per night (2 guests)
- \_\_\_\_\_ Huntley Deluxe - \$290 per night (2-4 guests)

- \_\_\_\_\_ Summit 2 Bedroom Condo - \$659 per night (6 guests)
- \_\_\_\_\_ Summit 3 Bedroom Condo - \$953 per night (10 guests)

#### Shoshone

- \_\_\_\_\_ Shoshone Suite - \$372 per night (4 guests)

#### Big Horn

- \_\_\_\_\_ Big Horn 3 Bedroom Condo - \$505 per night (8 guests)

#### The Summit

- \_\_\_\_\_ Summit Studio - \$264 per night (2 guests)
- \_\_\_\_\_ Summit 1 Bedroom Condo - \$494 per night (4 guests)

#### Beaverhead

- \_\_\_\_\_ Beaverhead 4 Bedroom Condo - \$1,030 per night (10-12 guests)

#### Powder Ridge Cabins

- \_\_\_\_\_ Powder Ridge 3 Bedroom Cabin - \$678 per night (8 guests)

Williamsburg was the thriving capital of Virginia when the dream of American  
powerful land stretching west to the Mississippi River and north to the Great  
as the political, cultural, and educational center of what was then the largest  
foundational concepts of our republic—responsible leadership, a sense of pub  
ship of patriots such as George Washington, Thomas Jefferson, George  
city of Richm  
half afterward,

# THE Virginia MEETING

## JUNE 19-21, 2008

A  
*Revolutionary*  
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*Williamsburg*<sup>®</sup>  
WILLIAMSBURG, VIRGINIA

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*March 3, 2008*

[www.vadental.org](http://www.vadental.org)

# Virginia Meeting • 2008

## SNEAK PEEK

### WELCOME BACK TO **WILLIAMSBURG!**



Much has changed since the last meeting held in Williamsburg. If if you have not been to the Colonial Capital recently you will be surprised at all that has taken place.

Our meeting location THE WILLIAMSBURG LODGE AND CONFERENCE CENTER is brand new. Almost all the buildings and rooms that were present at the last VDA Meeting have been replaced or renovated. See if you can remember or find what still remains of the old structures! It is a new modern facility which we feel you will enjoy. Of course it is still Williamsburg and fit for the Queen of England who has just recently left.

Williamsburg is celebrating its 400<sup>th</sup> year. It is the birthplace of our nation and abounds with the history of the past and all things modern for your interest and entertainment. Discount shopping malls, the Williamsburg Pottery, museums, dining in top-rated restaurants, ghost tours, Jamestown Island, Jamestown Settlement Park, Yorktown, Busch Gardens, Water Country and of course some of the best golf in Virginia.

Speaking of golf, are you ready to sign up to compete in the VDA Golf Tournament on Thursday? The Golden Horseshoe is one of the top courses in the country. Can you and your team make the cut?

The location and excavation of the original fort on Jamestown Island is international in scope. For you history buffs it is a must to see and visit. The work there is changing

history. Along the same lines is a greatly enlarged facility at Jamestown Festival Park. See the new *Godspeed* and an original copy of the Magna Carta. In Yorktown, the surrender of the British and a new waterfront mall has taken place.

Of course there will be all our great dental exhibitors that support our meeting and assist us in our practice. They will be present in the new Williamsburg Lodge and looking forward to the very popular **BIG PRIZE GIVEAWAY** which stole the show last year. Walk away with a big prize, almost as good as winning the lottery!

Invisalign is again presenting part 1 and 2 at the meeting. Dr. David Hornbrook is presenting a day of Aesthetics "The pursuit of Excellence" Dr. Mike Miller is discussing "Products and Techniques ---- What you need to know before using them on patients" He should know being the Editor of *Reality*. Over 100 hours of other great courses and speakers will also be there.

We welcome you and your family to the **2008 Virginia Meeting**. We will be there to assist in anyway possible.

Dr. William Bennett & Dr. Don Cherry  
2008 LAC Co-Chairs

## DATES TO REMEMBER

Early Bird Registration begins **March 3, 2008** (visit [www.vadental.org](http://www.vadental.org))

Registration Brochures to me mailed **mid-March 2008**

Pre-Registration DEADLINE **June 13, 2008**

Hotel Reservation DEADLINE **May 23, 2008**

### 2008 Council On Sessions

Chair: Dr. Elizabeth Reynolds  
Dr. Sharon Colvin  
Dr. Claire Kaugars  
Dr. Anthony Peluso  
Dr. Andrew Zimmer  
Dr. Michael Abbott

### 2008 Local Arrangements Committee

Co-Chair: Dr. William Bennett  
Co-Chair: Dr. Don Cherry  
Social: Dr. Guy Levy  
Events: Dr. Ross Fuller  
Golf: Dr. Cory Butler  
Hosts: Mike McCormick

Don't miss the 2nd Annual  
**BIG PRIZE GIVEAWAY**  
in the VDA exhibit hall  
**Friday, June 20, 2008**

**5:00pm**  
Chances for everyone to win!  
(must be present to win)

# Virginia Meeting • 2008

## FEATURED SPEAKERS



### **"Bread and Butter Adhesive and Esthetic Dentistry"**

**Harald O. Heymann, DDS, M.Ed.**

**Thursday, June 19, 2008**

Confused by all the different dental adhesives and materials? Blue LEDs? Desensitizers? New ceramics? Is a metal-free practice really the way to go? How can you achieve optimal esthetics with minimal intervention? This presentation will separate fact from fiction regarding what works in adhesive and esthetic dentistry. Hear a review of the latest products. Learn sound esthetic principles for creating porcelain veneers that will last. Hear an update of the latest whitening materials and techniques. See restorative options for posterior teeth. Learn "bread and butter" information vital to improving your practice.



### **A day of Aesthetics "The pursuit of Excellence"**

**David S. Hornbrook, DDS, FAACD**

**Friday, June 20, 2008**

Dentistry is changing at a rate that is difficult to comprehend. New techniques and materials combined with the public's desire to look and feel better about themselves has truly created the "Golden Age of Dentistry". Conservative preparations, combined with true bonding to dentin, have changed dentistry forever. Those who don't take the time and effort to understand the materials and learn the techniques will be lost as dentistry enters the 21st century. This course is designed to maximize your learning experience and benefit to you patients by introducing and expounding on ideas that can be used immediately and reliably in your own office. Ideas presented will motivate and excite you, your staff, and patients. RENEW YOUR PASSION FOR DENTISTRY and discover the creative and artistic side of dentistry!



### **"Periodontal-Systemic Link"**

**Joan Otomo-Gorgel, DDS, MPH**

**Friday, June 20, 2008**

The connection between periodontal disease and systemic infection is of increasing interest to the dental profession. Periodontal disease and oral infections have been linked to systemic diseases such as cardiovascular diseases, adverse pregnancy outcomes, respiratory diseases, diabetes and osteoporosis. This course will review the aforementioned systemic diseases and the recent research evaluating their correlation with periodontal diseases. The second half of the course will emphasize "female considerations in periodontal therapy." Clinical therapy from both the medical and dental (periodontal) management will be described.



### **"The Reality View"**

**Michael B. Miller, DDS**

**Saturday, June 21, 2008**

This presentation will cover many of the latest and most valuable products, materials, and equipment that you can immediately put to use in your office. New products will be compared to the classic ones and unbiased recommendations for purchasing will be given. If you ever wonder whether all those new products are better than the ones you've been using, this is the seminar you should attend. Proper clinical use of various products will also be shown. You'll see many helpful technique tips that will make your life easier and your practice more productive. Cut through the marketing hype and see what works and what doesn't.



### **"Healthy for Life: A Woman's Guide to Wellness"**

**Tieraona Low Dog, MD**

**Saturday, June 21, 2008**

Health is experienced when our emotional, physical and spiritual needs are being met. Dr. Low Dog will offer practical advice for women seeking to optimize their health by blending the most cutting-edge scientific research with the traditional wisdom that has been handed down through the ages.

**invisalign**

LEARN HOW TO SMILE AGAIN.

**Invisalign Certification - Clear Essentials I**

**\$1695**

**Friday, June 20, 2008**

**Invisalign Certification - Clear Essentials II -**

**\$350**

**Saturday, June 21, 2008**

# Virginia Meeting • 2008

## EVENTS



### Private VDA Ghost Tour

Thursday, June 19, 2008  
9:00pm

A guide will lead you through the streets of Colonial Williamsburg by candlelight while sharing eerie and fun folklore of this very old city. Performed in a true story telling format that is great fun for all ages.

**Tickets: \$7**

Children 6 and under are FREE

### Colonial Williamsburg Historical Area

#### **VDA conference special rate: \$20 per person**

Tickets must be purchased through the VDA during registration

Tickets good for length of conference June 19-22, 2008

You're invited to embark on a revolutionary adventure in Colonial Williamsburgs Historic Area. Travel back in time and discover what life was like in Virginias capital city in the years surrounding the American Revolution.

Throughout the 301-acre Historic Area, you'll find skilled craftspeople creating saddles, garments, and cart wheels for the use of other Colonial Williamsburg tradespeople and citizens. And, for two hours of each day, youre encouraged to become an active participant in Revolutionary City, our newest, interactive program. " The adventure continues when you explore the gardens, trade shops, homes, and government buildings throughout the Historic Area. Around every corner, you'll find new experiences that offer insights into life in the early years of our nation.



### VDA President's Party

Join the VDA President, Dr. Gus Vlahos for  
" A Taste of History"

Friday, June 20, 2008

6:30pm

Enjoy the Colonial inspired Buffet, Live music and plenty of time for some good old fashioned camaraderie.

**Cost:** Adults \$15.00

Children \$7.00

(children 2 and under are FREE).

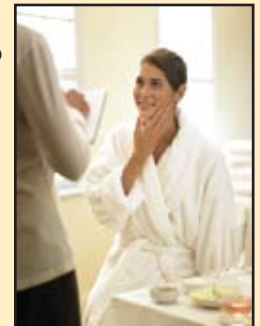
**Location:** Oval Garden

Just steps away from the Williamsburg Lodge.

### **The NEW spa of Colonial Williamsburg is open!**

Appointments are limited so  
book your spa  
treatment today!

Mention that you are a VDA  
member for our exclusive  
appointment block.



### **Annual VDA Golf Tournament - in Memory of Dr. Donald Martin**

Thursday, June 19, 2008

Golden Horseshoe Golf Club  
**Gold Course**

401 S. England Street  
Williamsburg, VA 23185



# RON TANKERSLEY, DDS

*Candidate for President-Elect 2008 • American Dental Association*

## Dear Colleague,

This is a great time to be a part of the dental profession. Private dental practices are thriving as they provide the most sophisticated oral healthcare services in history. Dentistry is ranked among the top five respected professions by the public and the quality of applications to dental schools continues to rise.

The future should be even brighter. With emerging technology and innovations in dental education, we can offer higher quality oral health services to more people.

To realize that bright future, we must be the leaders in developing realistic solutions to providing needed oral healthcare to the underserved while preserving ethical market-based private care. It is essential that the ADA maintain the trust of the profession and the public in order to fulfill that leadership role.

In order for us to achieve our potential, inclusive, informed, strategic thinking will be required by all of us in the coming years. I hope that I can be a part of the ADA's leadership team during these important times.

Sincerely,

Ron Tankersley



### **RON TANKERSLEY**

condensed CV

#### **PRACTICE**

Practice: Oral & Maxillofacial Surgery, Newport News, VA  
Partners: Dr. Les Davenport and Dr. Ken Tankersley

#### **ACADEMIC BACKGROUND**

Undergraduate Education: College of William & Mary  
Dental School: Medical College of Virginia School of Dentistry  
Residency: Oral & Maxillofacial Surgery, MCV  
Board Certification: ABOMS  
Adjunct Professor: Virginia Commonwealth University

#### **AMERICAN DENTAL ASSOCIATION**

Delegate  
Reference Committee: Dental Benefits, Practice and Health  
Council on Dental Benefits Programs: Chair  
Advisory Committee on the Code: Chair  
Diagnostic Coding Subcommittee: Chair  
Dental Practice Parameters Development Committee  
Strategic Planning Committee: Chair  
Board of Trustees



# THE CHALLENGE

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Innovative thinking is required to properly position the dental profession for the future as we contend with globalization, increased federal regulation of healthcare, changing demographics, and ethical misconduct. We must focus on three mutually dependent goals necessary for the ADA to maintain its credibility as we go forward. In today's environment, none of them are achievable without the others.

## GOALS FOR THE ADA

---

### GOAL 1: The Voice for the Profession

The ADA's credibility with the profession and public is dependent upon a broad participation by dentists.

### Goal 2: The Most Reliable Source for Oral Health Information

The ADA's credibility is dependent upon the accuracy of the information that we provide.

### Goal 3: The Leading Advocate for Public Oral Health

The ADA's ability to advocate for dentistry is dependent upon our credibility as an oral health advocate.



*Ron with his wife, Gladys, and their family.*



*Ron evaluating a patient with his son, Ken.*

AFTCO is pleased to announce . . .

**Shehzad M. Sheikh, D.M.D.**

has acquired the practice of  
**Gregory W. Geldart, D.M.D.**  
Sterling, VA

**Jameal Kurd-Misto, D.D.S.**

has joined the practice of  
**James B. Schwartz, D.D.S.**  
Garrisonville, VA

**Ronald C. Davis, D.D.S.**

has acquired the practice of  
**Thomas M. Latouche, D.D.S.**  
Elkton, VA

AFTCO is pleased to have  
represented both parties in this  
transactions.

*"There is really something special about AFTCO's dual representation process. I never once had to discuss or express any of my concerns with the seller. Since the seller and I are now working very closely together in the practice, this dual representation approach made it possible for us to start off and remain on the right foot. Our relationship has been strong from the first day. The fee I paid for AFTCO's expert advice and representation was the wisest investment I could have made."*

Michael H. Gorman, D.D.S.  
Centreville, VA

*"I highly recommend AFTCO's services. Truly they are amazing. I believe AFTCO always gets the best value for a practice and match the personality of the doctor to the personality of the practice. Also, AFTCO's documentation package for closing is the most comprehensive package I have ever seen, saving both legal fees and time for the doctor."*

Ralph A. Lazaro, D.D.S.  
Great Falls, VA

**AFTCO has over 150 practice transition programs customized to meet your needs.**

- Stockholder Program
- Pre-sale Program
- Practice Sales
- Practice Mergers
- Equity Associateships

**Receive a \$2500 value FREE practice appraisal. Call for details.**



VADPAC IN TOP ECHELON OF BUSINESS PACS
CHALLENGE FUNDRAISERS WRAP UP BUSY YEAR
FOR VADPAC AND VDA MEMBERS

By Chuck Duvall & Denny Gallagher, VDA Lobbyists

VADPAC really stepped up to the plate this year! According to the Virginia Public Access Project (VPAP.org), VADPAC trailed only Dominion Virginia Resources as the business PAC raising the most money during the 2007 election cycle.

VADPAC is also listed among the top donors to all candidates during the 2007 cycle. Within the business and professional communities, VADPAC placed 6th behind only Dominion, the auto dealers, realtors, trial lawyers and Verizon.

VADPAC's contributions from its supporters and our PAC's campaign expenditures are typical of the money war in which political campaigns are now being waged. While the final results from this year's fundraising and expenditures are yet to be tallied, it appears likely that candidates will have spent almost \$65 million or nearly twice as much as was spent during the 2003 House and Senate campaigns.

VADPAC participated in all 100 seats in the House and in 37 Senate races. The PAC's enviable batting average continued into 2007, supporting only four candidates in the House who lost and three who lost in the Senate.

The November elections changed the composition of the 2008 legislature, which convenes on January 9. In the Senate, the Democrats will hold a slight majority with 21 Senators versus 19 Republicans (there will be a recount in Senator Cuccinelli's Northern Virginia district). In the House of Delegates, House Speaker Bill Howell will lead 54 Republicans against 44 Democrats. There are two Independents.

Obviously, we'll see big changes in the Senate with old friends of the dental profession chairing key committees. Chuck Colgan, a strong supporter of the VDA, will be chairing the Senate Committee on Finance. Edd Houck, another strong VDA supporter, will chair the Senate Committee on Education & Health.

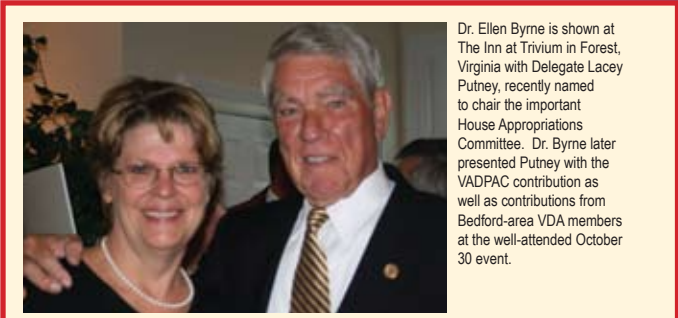
In the House, there will also be some committee changes, but Delegate Phil Hamilton will likely remain as Chairman of both the Appropriations Committee's health subcommittee and the Committee on Health, Welfare & Institutions.

We would be remiss if we didn't commend those dentists who sponsored and attended a series of nine Challenge Fundraisers that were extremely successful for the following candidates:

Table with 2 columns: HOUSE and SENATE. Lists names of delegates and senators supported by VADPAC.

We cannot rest on our laurels. Before we know it, 2009 will be here and we will be faced with House of Delegates' races. These races will be expensive since the battle for control of the House going into legislative redistricting will be at hand.

Please extend a sincere appreciation to everyone who participated in VADPAC. Keep up the good work!



Dr. Ellen Byrne is shown at The Inn at Trivium in Forest, Virginia with Delegate Lacey Putney, recently named to chair the important House Appropriations Committee. Dr. Byrne later presented Putney with the VADPAC contribution as well as contributions from Bedford-area VDA members at the well-attended October 30 event.



Delegate Katherine Waddell (3rd from the right) is surrounded by friendly VDA members at an October 17 Richmond event held at the home of Dr. Benita Miller's parents. From left to right are: Jocelyn Lance, Benita Miller, Michael Miller, Delegate Katherine Waddell, and Mr & Mrs. Wes Atiyeh..



Senator Steve Martin (2nd from the left) is shown with Dr. Ed Griggs, Linda Trawick and Dr. Don Trawick at the September 25 Swift Creek Mill Playhouse fundraiser. Senator Martin (R-Chesterfield) is Chairman of the Committee on Education and Health's Health Professions Subcommittee and also serves as a member of the Joint Commission on Healthcare.



House Speaker Bill Howell and Mrs. Howell are shown with their hosts, Dr. and Mrs. Bob McGrail and Dr. John Coker, Jr. at the October 16 Challenge event held at the McGrail's home in Fredericksburg.



Delegate Ward Armstrong (D-Martinsville) is surrounded by part of the large crowd attending his October 3 Chatmoss Country Club event near Martinsville. Shown with Armstrong (3rd from the left in the last row) are: Dr. John Wheless, Dr. Raymond Mallinak, Dr. Craig Detrich, Dr. David C. Jones, Dr. Ed "Chopper" Snyder, Dr. Kenneth Midkiff, Dr. James Shearer, Dr. Greg Gendron, and Dr. Payton Moore. Armstrong will lead House Democrats at the 2008 General Assembly.

# Election 2007

## Welcome Freshmen

The 2008 General Assembly will include nineteen new members – nine new Senators and ten new Delegates. A brief introduction for each of the new freshmen legislators appears below. VADPAC has provided financial assistance to each of these new legislators.

### HOUSE OF DELEGATES:



**Charles Poindexter – Republican – District 9**  
Counties of Floyd, Franklin, and Pittsylvania (part)

Charles Poindexter, 65, defeated Eric Ferguson (D) for the open seat vacated by Allen Dudley in Virginia's 9<sup>th</sup> District. Poindexter is a native of Franklin County, with family roots dating back to the late 18<sup>th</sup> century. He spent much of his career working as an engineer and site manager for Mitre Corp.'s Air Force Systems Engineering Operations for the Air Force Command in Hampton. After retiring from Mitre, he has served two terms on the Franklin County Board of Supervisors. He said in a press release that he thinks individual freedoms are best protected through a "lean and hungry" government.



**Don Merricks – Republican – District 16**  
Counties of Henry (part) and Pittsylvania (part); City of Martinsville (part)

Republican Don Merricks, 55, defeated Andy Parker (D) for the open seat vacated by Robert Hurt in Virginia's 16<sup>th</sup> District. Merricks is a small business owner and a native of Pittsylvania County. He and his wife own and operate J.W. Squire Co. and RiverCity Specialties & Interiors Inc. in Danville. He attended local public schools and earned a certificate in Bank Administration from the University of Wisconsin.



**Bobby Mathieson – Democrat – District 21**  
City of Virginia Beach (part)

Bobby Mathieson defeated incumbent Republican John Welch for the seat in Virginia's 21<sup>st</sup> District. Mathieson is a former Virginia Beach police officer who recently retired from his appointed position as chief deputy of Criminal Justice Services in Richmond. He now works in business development for Rileen Innovative Technologies, a Virginia Beach firm providing biometric security solutions.



**Margi Vanderhye – Democrat – District 34**  
County of Fairfax (part)

Margaret "Margi" Vanderhye defeated Republican Dave Hunt for an open seat being vacated by retiring Delegate Vince Callahan. Vanderhye is a graduate of Northwestern University with a masters degree in International Relations and Economics from Johns Hopkins. She's a graduate of the Sorensen Institute at UVA and was appointed by Governors Warner and Kaine to the Northern Virginia Transportation Authority. She was appointed by President Bill Clinton to the National Capital Planning Commission and also previously served as assistant to both Henry Kissinger and Brent Scowcroft at the National Security Council.



**Paul Nichols – Democrat – District 51**  
County of Prince William (part)

Democrat Paul Nichols defeated Faisal Gill (R) in an open seat vacated by Michele McQuigg in Virginia's 51<sup>st</sup> District. Paul Nichols is a principal in the firm of Nichols, Bergere, Zauzig & Sandler, with offices in Woodbridge and Tyson's Corner. He specializes in family matters. He was graduated from Kings College in 1974 and received his law degree from George Mason University in 1978.



**Manoli Loupassi – Republican – District 68**  
County of Chesterfield (part); City of Richmond (part)

Manoli Loupassi was able to defeat incumbent Katherine Waddell (I) in a three way race with another Independent, Bill Grogan, for Virginia's 68<sup>th</sup> District. Manoli Loupassi, a Richmond lawyer, is a former president of Richmond City Council. He is a first-generation native Virginian; his father immigrated to the US from Crete and became a restaurateur and real estate investor.



**Jimmie Massie – Republican – District 72**  
County of Henrico (part)

Jimmie Massie defeated Democrat Tom Herbert for the open seat vacated by Jack Reid in Virginia's 72<sup>nd</sup> District. Jimmie Massie clobbered Jimmy Wheat in a June Republican primary, winning 58% of the vote in a contest that is tantamount to election in this strong GOP district. Massie is a conservative member of the Henrico County Republican Committee and a former Director of the Family Foundation.



**Joe Morrissey – Democrat – District 74**  
Counties of Charles City, Henrico (part), and Prince George (part); Cities of Hopewell (part) and Richmond (part)

Former Richmond Commonwealth's Attorney Joe Morrissey, won a five-way primary in the 74th House District to replace Delegate Don McEachin, who gave up his seat to run a successful primary campaign against incumbent state senator Benny Lambert.



**Joe Bouchard – Democrat – District 83**  
City of Virginia Beach (part)

Joe Bouchard defeated Dr. Chris Stolle (R), brother of Sen. Ken Stolle, for the open seat vacated by Del. Leo Waldrup in Virginia's 83<sup>rd</sup> District. Bouchard is a retired Navy captain who once commanded NAS Norfolk, and a military analyst who served as a military adviser in the White House during the 1990's. He is currently executive director of the Center for Homeland Security and Defense at ZeiTech, in Hampton.



**Brenda Pogge – Republican – District 96**  
Counties of James City (part) and York (part); City of Newport News (part)

Brenda Pogge defeated Democrat Troy Farlow in an open seat vacated by Melanie Rapp who retired from Virginia's 96<sup>th</sup> District. Pogge, a GOP activist, won a 23-vote margin over York County Supervisor Sheila Noll in a June 9 firehouse primary.

**SENATE**



**John Miller – Democrat – District 1**  
Hampton City (Part), Newport News City (Part), Poquoson City (All), York County (Part)

John Miller defeated Republican Tricia Stall for the seat held by Marty Williams in the 1<sup>st</sup> Senatorial District. Williams, the incumbent Senator, was defeated by Stall in the GOP primary. John Miller is a former local television news anchor who works at Christopher Newport University. Miller has a bipartisan political background, having worked as press secretary and chief of staff for former Republican U.S. Sen. Paul Triple.



**Ralph Northam – Democrat – District 6**  
Accomack County (All), Mathews County (All), Norfolk City (Part), Northampton County (All), Virginia Beach City (Part)

Ralph Northam defeated incumbent Senator Nick Rerras (R) in the 6<sup>th</sup> Senatorial District. Dr. Ralph Northam is a child neurologist at Children's Hospital of The King's Daughters (CHKD), a former Army major and former resident of the Eastern Shore.



**Donald McEachin – Democrat – District 9**  
Charles City County (All), Henrico County (Part), Richmond City (Part)

Delegate Donald McEachin defeated incumbent Senator Benny Lambert in a Democratic primary and went on to defeat Silver Persinger (I) in the general election for the 9<sup>th</sup> Senatorial District. McEachin vacated his own Delegate seat to run for the Senate.



**Robert Hurt – Republican – District 19**  
Campbell County (Part), Danville City (All), Franklin County (All), Pittsylvania County (All)

Similar to Don McEachin, Del. Robert Hurt resigned from his seat in the House of Delegates to run for the Senate in a seat vacated by Charles Hawkins. Hurt defeated Independent challenger Sherman Witcher for the 19<sup>th</sup> Senatorial seat. Robert Hurt, a lawyer with deep roots in the Southside tobacco belt, has represented the Pittsylvania County area in the House of Delegates since 2002.



**Ralph Smith – Republican – District 22**  
Botetourt County (All), Montgomery County (Part), Radford City (All), Roanoke County (Part), Salem City (All)

Ralph Smith defeated incumbent Brandon Bell in a GOP primary and went on to defeat Dr. Mike Breiner (D) in the general election race for the 22<sup>nd</sup> Senatorial District. Smith's is a former mayor of Roanoke.



**Jill Vogel – Republican – District 27**  
Clarke County (All), Fauquier County (Part), Frederick County (All), Loudoun County (Part), Winchester City (All)

Jill Vogel defeated Democrat Karen Schultz for a seat vacated by Independent Russ Potts for the 27<sup>th</sup> Senatorial District. Vogel is a Director of VCAP, the Virginia Conservative Action PAC. She's a native of the Shenandoah Valley with deep family roots in the region. She is a graduate of William & Mary with a law degree from DePaul University, and is a nationally recognized lawyer in Republican political circles.



**Richard Stuart – Republican – District 28**  
Fauquier County (Part), Fredericksburg City (Part), King George County (All), Lancaster County (All), Northumberland County (All), Prince William County (Part), Richmond County (All), Stafford County (All), Westmoreland County (All)

Richard Stuart defeated Albert Pollard (D) for an open seat vacated by John Chichester for the 28<sup>th</sup> Senatorial District. Stuart, 43, is a former commonwealth's attorney and a lawyer in Westmoreland County in Virginia's Northern Neck.



**Chap Peterson – Democrat – District 34**  
Fairfax City (All), Fairfax County (Part)

Chap Peterson defeated incumbent Republican Jeannmarie Devolites-Davis for the 34<sup>th</sup> Senatorial District. Both Devolites-Davis and Petersen had combined war chests of well over \$1 million in what was a clash of Titans and one of the most interesting bouts in recent Virginia politics.



**George Barker – Democrat – District 39**  
Fairfax County (Part), Prince William County (Part)

George Barker defeated incumbent Senator O'Brien (R) in the 39<sup>th</sup> Senatorial District. Barker ran against Jay O'Brien for the newly-created, open 40<sup>th</sup> House seat in Northern Virginia in 1991, losing 56%-44%. He ran against O'Brien again in 1993 with similar results. That was a gubernatorial year with Fairfax splitting tickets for Allen (R), Beyer (D), and Dolan (D). Barker is Associate Director of the Health Systems Agency of Northern Virginia, a nonprofit organization planning the development of health care facilities and services.

**Information provided by Virginia FREE.**

# Thank you to everyone who contributed in 2007!

## Component 1 Tidewater

Albinder, Kenneth  
Amos, Roxzanne J  
Andersen, Holly H  
Anderson, JW Jr  
Aragon Sweeney, Pia  
Arnaudin, Richard A  
Asam, Stephen A  
Ashby, John O Jr  
Baker, J P  
Barr, Bruce K  
Barton, Daniel M  
Bivins, William T  
Blanchard, Deborah R  
Bradshaw, J D  
Brown, Townsend Jr  
Brownstein, Morton A  
Buch, Robert J  
Cahoon, Roger H  
Candler, Robert A  
Caravas, Jerry G.  
Cash, Lawrence H  
Cavallari, Kenneth J  
Chau, James Y  
Cherin, Jack I  
Chickey, Stanley L.  
Clarke, Jerry C  
Clarkson, Carrie L  
Clayton, C G  
Cleckner, Dennis E  
Cooper, Kevin C  
Cox, Thomas L.  
Cox, William R Jr  
Cox, William W  
Cranham, John C  
Cruser, Melvin E III  
Davis, Debra A  
DeMayo, Thomas J  
Dilaura, Thomas J  
Dodson, William S Jr  
Dolenuck, Richard P  
Dorfman, Howard S  
Drescher, Charles A  
Dunham, Thomas P  
Dusek, Thomas O  
Edenfield, Michael E  
Edmonds, Robert M  
Einhorn, Bernard I  
El-Attrache, Dean S  
Elgohary, Anthony A  
Engel, Gregory T  
Etheridge, Daniel M.  
Fernandez, Miguel  
Ford, Melvin L  
Fosque, Fletcher D  
Frazier, Rita W  
Fuhrmann, Ronald C  
Funda, Ann-Marie  
Furman, Randall I.  
Galloway, Michelle A  
Gigliotti, Frank B

Goldstein, Stephen M  
Graham, David B  
Guthrie, Alfred R Jr  
Guter, Klaus  
Hamlin, Daura C  
Hartman, Gary A  
Hatcher, William R  
Hearne, Sandra S  
Hearne, Stephen P.  
Hechtkopf, Michael L.  
Hendricks, Arthur C  
Heriford, Susan E  
Heriford, William D  
Herman, Barry L  
Hermelin, Mark  
Hooper, Christopher A  
Hopkins, Thomas U  
Hosek, Eric  
Howell, Ralph L Jr  
Howell, Robert W  
Iervolino, Robert A  
Ishom, Thomas J  
Jett, Lynn T  
John, Vinita  
Kail, James J  
Kaiser, David L  
Karp, Allen C  
Kent, Dean E  
Kesser, Howard L  
King, Chistopher T  
Konikoff, Stepehn E  
Korman, Robert  
Krochmal, James E  
Kuenzli, Peter G  
Lapetina, John B Jr  
Laurence, Charles J  
Lefcoe, Daryl L  
Leidy, Jeffrey R  
Mahanes, Alan W.  
Mahanes, C M  
Marinak, Kenneth W  
Marshall, David T  
Mc Kee, Thomas A  
Meares, James W  
Midgette, Brian P  
Mikulencak, Allen R  
Milner, Jan E  
Morgan, Michael S  
Morgan, Pamela A  
Morris, Glenwood E  
Morrison, Marshall W Jr.  
Mosher, John D.  
Mueller, David P  
Newell, Gary  
Nido, Arthur A  
Nottingham, James H  
O' Berry, Vernon Jr  
O'Hara, Thomas  
Oliver, Tracey S  
Paul, David P III  
Pellerin, Robert D.  
Peluso, Anthony R

Pope, Robert A  
Quigg, Richard K  
Rai, Shaun B  
Ramsay, Harry E Jr  
Ramsey, Harry E III  
Rawls, Holman C  
Reske, James F  
Rhodes, James N  
Richmond, Leslie I  
Rogge, Rod M  
Ross, John J  
Rowe, David E  
Rowe, Caril P  
Rutlege, James L. III  
Sabol, George J.  
Salyer, Laymon A  
Savage, Anthony W.  
Savage, Randolph E  
Schonfeld, Jerome W  
Schrumpf, Gregory A  
Self, Oscar W. Jr  
Sellers, Vernon A  
Sharrock, Michael F  
Shiflet, Harvey H III  
Shivar Walker W  
Simmons, Robert A  
Smith, Theodore R  
Spain, Murray  
Tabor, William D Jr  
Taylor, Gary E  
Taylor, Ned D  
Thomas, Bennett A  
Tomchik, Jayme D  
Tompkins, Stanley P  
Turck, Michael D  
Vendetti, Curtis S  
Visser, Britt E.  
Walls, William H Jr  
Waterman, Jennifer R  
Weisberg, A J  
Weisberg, Edward J  
Wernick, Robert  
Wexel, Walter K  
Wiggins, Benjamin E Jr  
Willis, Julian D III  
Woodlock, Krista L  
Zaki, Tarek O  
Zak-Ramsay, Heather N  
Zimmer, Andrew J

## Component 2 Peninsula

Allen, W H Jr  
Artzer, Mark B  
Babcock, Daniel M  
Barnes, Richard D  
Barnwell, Velma W  
Bass, Jeffrey W  
Becker, Sidney  
Bennett, William J.  
Bernhard, Elizabeth A  
Blaney, Theodore A

Bowe, Thomas P Jr  
Bowler, Michael W  
Boxx, Eric W  
Burden, James A  
Butler, Corydon B Jr  
Cathey Jr., Henry A  
Cook, Phillip M Jr  
Cornette, William R  
Covaney, Michael  
Covaney, Sharon C  
Creal, Albert F Jr  
Dailey, Geroge C  
Dameron, Karen C  
Davenport, William L  
DeGinder, Bruce R  
Denison, John J  
Dollar, James F  
Dreelin, Robert A  
Dumas, Harold B  
Ellis, Robert B.  
Epstein, Ross  
Fashing, Gisela K  
Feild, Robert J  
Foretich, Jerome F Jr  
Forrest, David L  
Francis, Scott H  
Frey, Gilbert J Jr  
Fulton, Catherine O  
Gallop, Ceceil C  
Geary, Thomas R Jr  
Gibbons, Walter S. Jr  
Golrich, Scott J  
Goodwin, Clifford T  
Green, Barry L  
Griffin, William T  
Harper, William G  
Hartmann, Paul K  
Hinson, Lanny C  
Hobbs, Jesse A  
Hunt, Elizabeth D  
Hunt, John F III  
Hunt, William S  
Jacobs, George A  
Katz, Dennis  
Kenney, Jeffrey N  
Kokorelis, Michael J.  
Le Jeune, Barry J  
Lee N R  
Leigh, Timothy A  
Levy, Guy G  
Link, Michael J  
Lombard, Joseph A Jr  
Luckham, John P  
Lynn, Anne C  
Martin, Anthony L  
Martin, Shannon M  
Maya Adkins, Ana  
Mc Cormick, Michael P J  
Menges, Martin J Jr  
Mello, Kenneth J  
Moore, Alfred P  
Morris, David A

Morris, Thomas J  
Pape, Frank L Jr  
Pape, Russell A  
Parrott, Thomas R Jr.  
Pauley, Richard L  
Pearlman, William  
Perlman, Steve L  
Piascik, Christine L  
Piche, Jon E  
Plauka, Gail V  
Price, McKinley L  
Render, Philip J  
Rubenstein, Loretta K  
Sagman, Michael E  
Samaha, Lisa M  
Sarmiere, Lawrence R  
Sheild, Francis W  
Siragusa, Joseph J  
Sotack, Maryjean  
Speegle, John H  
Springman, Sebastiana  
Stall W M  
Steele, Ben T  
Syed, Chand  
Tankersley, Kenneth  
Tankersley, Ronald L  
Trimmer, William T III  
Venne, Marko  
Vogt, Nathan M  
Warren, Laurence A.  
Watson, Benjamin T III  
Wendell, Peter D  
West, L Warren  
Williams, Daniel S  
Witty, Thomas E. Jr  
Woodruff, Harvey C III

## Component 3 Southside

Bach, Melanie A.  
Bailey, Stephen W.  
Baranker, Howard J  
Bates, Richard W  
Beam, David R  
Beltrami, Marco A  
Boyd, Herbert R III  
Brinser, Paul W III  
Browder, Joseph W  
Callery, William F  
Coghill, Thomas M  
Dixon, Bryan L  
Ellis, David L  
Ferry, David R.  
Friend, Basil J II  
Galston, Samuel W.  
Gee, Carroll M Jr  
Gerard, Scott  
Griffin, Charles  
Hanley, Michael R  
Henry, Edward P Jr  
Henry, William C  
Holmes, Sheilandice M

Johnson, James K  
Keeton, James M Jr  
Kilbourne, Michael S  
Kitts, Connie S  
Koontz, Gregory N  
Lynn, John W  
Meade, Raymond L  
Neal, Harold J.Jr  
Oertel, Ellen R  
O'Neill, Robert L  
Palmer, Roger A  
Pearson, Bonnie  
Pond, A Wright  
Prugh, Reed D  
Ragsdale, John R III  
Rhodes, Daniel R  
Rice, John D  
Roadcap, Richard F  
Rutledge, Ralph J Jr  
Shufford, Earl L  
Slagle, James L Jr  
Spalding, Harry E  
Thompson, Harvey K  
Thornton, William N III  
Trotter, Bradley S  
Vernon, June K  
Ward, C. S.  
Webb, James P  
Wray, R L  
Yandle, Kent  
Young, Reginald S

#### **Component 4 Richmond**

Adams, Anne C  
Adams, Randy  
Adams, William R  
Adili, Mehdi S  
Alexander, John M  
Almy, Diana M  
Anderson, Ralph L  
Andre, John J  
Angus, William H  
Atkins Jr., Carl O  
Ball, Shari L  
Barbieri, Stephen L  
Baum, Philip J  
Betzhold, William F  
Biggers, Hood E  
Bird, Eliot W  
Boone, Melanie  
Booth, Stephen C  
Brassington, Bryan A.  
Bryant, Joseph C.  
Burns, Donna A  
Bush, Francis M  
Carter, Roy T II  
Caspersen, Matthew H  
Certosimo, Alfred J  
Chevalier, Jack W  
Circeo, David C  
Cleveland, Russell A  
Cole, Gregory A  
Cook, Bruce C  
Cooke, Thomas S III  
Cottrell, Richard W  
Covington, William D

Cox, Gregory O.  
Cox, Joseph C Jr  
Cox, Robert Y  
Crawley, Theresa Y  
Crockett, Donald H Jr  
Cumbey, James L Jr  
Cuttino, Charles L III  
Cyr, Jeffrey E  
Dabney, Charles W  
Dameron, Stanley D.  
Davia, Allen J  
Davis, George E III  
Day, Jeffrey  
Dickinson, Terry  
Doswell, John C II  
Duff, James S III  
Dunlevy, Harry A  
Dymon, William D  
East, Virginia N  
Elias, Thomas G  
English, Sam E III  
Epperly, Ashley C  
Eschenroeder, Thomas A  
Evans, Robert G  
Evens, Steven E  
Faber, Beth L  
Falls, William F III  
Farrington, Frank H  
Fernandez-Ward, Gloria  
Finley-Parker, Kathryn S  
Forte, Stephen G.  
Foster, Francis M  
Gambrel, Madelyn G  
Gardner, E D  
Gardner, William G  
Gaskins, Charles E III  
Gilliam, Robert  
Gordon, Marshall P III  
Gore, Michael S  
Griffin, Barry I  
Griggs, Edward N III  
Gupta, Reena  
Hagan, Betsy A  
Hamilton, Michael D  
Harris, Monroe E Jr  
Harris, Sharon F  
Herold, William K  
Hershkin, Adam T  
Howard, Paulette C  
Huband, Michael L  
Hubbard, Maury A Jr  
Huddle, David F  
Hudgins, Jeffrey L  
Hudson, Edward Jr  
Hunt, Lindsay M Jr  
Hunt, Ronald J  
Hurt, Alfred D Jr.  
Hylton, Richard D  
Iuorno, Frank P Jr  
Johnson, Robert A  
Jones, Perry E  
Kaugars, Claire C  
Keeney, Kanyon R  
Kendig, Robert O  
King, John W  
Kittrell, John S.  
Kontapanos, Gregory K

Korpics, Loid J Jr  
Krone, Michael E  
Kuhn, Todd  
Lambrechts, Marcel G Jr  
Lance, Joslyn  
Layman, Thomas O  
Levenson, Lanny R  
Levitin, Donald G  
Lewis, Holly C  
Lipscomb, Jason T  
Livick, Brockton A  
Lombardozi, Nicholas C  
Londrey, James F  
Maestrello, Christopher  
Major, David W  
Marks, Brandon S  
Marks, Norman J  
Marks, Samuel A  
Martinez, Harold J.  
Mason, Erika C  
Maynard, John G Jr  
Mc Andrew, Karen S  
Mc Artor, Michael J  
Mears, Gene C  
Metzger, Lawrence C  
Miller, Benita A  
Miller, Michael E  
Moore, Wendy M  
Moretti, Joy S  
Morgan, Gary H`  
Morgan, Joseph H  
Morris, Christa E  
Mosher, Russell N  
Moss, Lloyd F Jr.  
Moss, Patricia A  
Mourino, Arthur P  
Mueller, Travis L  
Mullins Jr. , Edmund E.  
Murchie, Peter R  
Murphy, Walter K  
Neale, M M Jr  
Neighbors, Robert B  
Nelson, James F  
Niamtu, Joseph III  
Norris, Clinton J III  
Nyczepir, David J  
Ottersberg, Christine E  
Overstreet, Benjamin  
Overstreet, Douglas R Jr  
Overstreet, Susan R  
Overton, Bruce W  
Padgett, Alan M  
Padgett, Thomas B  
Palmer, Charles B  
Patel, Nrupur  
Pendergrass, C A  
Penterson, Robert  
Pirok, Stephanie M  
Pugh, Roy E  
Radcliffe, Stephen S.  
Randazzo, Janine  
Reddy, Harini  
Redwine, William J  
Reynolds, Elizabeth C  
Richardson, Christopher  
Rogers, Dale C  
Rose, John B III

Ross, Edward F Jr.  
Rossetti, Michael A  
Sarrett, David C  
Saunders, Paul L  
Saxon, Walter E Jr  
Schroeder, James R  
Selden, Stephen F  
Sill, L S  
Smith, Emily P  
Smith, Sandra J  
Sorenson, Robert  
Steadman, Robert B  
Stein-Fuller, Janis L  
Stenger, Al J  
Sterling, Arden M  
Stewart, Henry I  
Straus, Frank D  
Strauss, Robert A  
Swanson, Kimberly  
Swisher, David M.  
Tabor, Christian S  
Taylor, Robert H  
Terrill, David G  
Thweatt, Bradford R  
Todd, Stephen J  
Townsend, David E  
Trahos, Michael N  
Trawick, Donald G  
Trow, Thomas H  
Truong, Quynhmai  
Villa, Richard H  
Vitsky, Paul L  
Vranas, Ronald N.  
Wade, Frank A  
Wallace, James C  
Way, William W  
Webb, Leslie S Jr  
White, E A  
White, Joseph S  
White, Paul R II  
White, Pranee C  
Whitlow, Odie A  
Wilkerson-Cox, Sherri L.  
Williams, Jeffrey S  
Wiltshire, Curits B  
Wlodawsky, Ross N  
Wood, Richard H  
Wood, Roger E  
Wood, William C Jr  
Young, M W  
Zoghby, Gregory M

#### **Component 5 Piedmont**

Ah, Michele K  
Alouf, Stephen  
Andrew, Sandra  
Austin, Keith H.  
Ayers, Charles E  
Black, David E  
Blanchette, Mark E.  
Carter, John C  
Childress, David D  
Coots, Fred A Jr  
Crabtree, Mark A  
Crist, Frank C Jr  
Crist, Jason S  
Cross, Griffin A  
Davis, Michael J  
Dearment, Damon W  
Deyerle, William A  
Dietrich, Craig B  
Downey, Ronald G  
Evans, James R  
Fields, Julian W IV  
Fitzgerald, David K  
Gendron, Gregory T  
Gentry, Garland G  
Gilbert, James I III  
Goodloe, John L III  
Greenway, Ralph K  
Greenway, Ralph N  
Grogan, Frank T  
Hammond, Albin B III  
Harvey, Paul D  
Helton, Donna F  
Hinrichs, Robin E.  
Howard, Gregory D  
Hughes, Gregory S  
Hunt, Michael G  
Jenkins, Charles W  
Johnson, Geoffrey E  
Jones, Michael L  
Julian , James P.  
Kevorkian, George Jr  
King, Robert D  
Krempl, Robert J.  
Lampros, Penny L.  
Lynch, Richard A  
Mallinak, Laura R  
Mallinak, Raymond F  
Mayhew Jr., Jesse W.  
McCorkle, Maston R Jr  
Meador, Larry R  
Mesaros, Samuel V  
Moore, J Peyton Jr  
Newton, Richard M Jr  
Norbo, Randy J  
O' Keefe, Edward M.  
Overby, Timothy  
Patel, Kalpita J  
Payne, Christopher A  
Phillips, Walter I  
Plapp, Robert L  
Prillaman, William N II  
Riley, Jeffrey O  
Rockhill, Amy D.  
Shearer, James W.  
Sherwood, Richard L  
Silvers, Arthur T  
Slaughter, Terry W  
Smith, C F  
Smith, Mark P  
Smock, Sherman O  
Snyder, Edward P  
Sowers, Steven E  
Sprinkle, G M III  
Strange, Charlton B Jr.  
Turner, Mark  
Vess, Freemont A.  
Wall, Jesse R  
Wallace, Donald M  
Walrod, John H  
Walton, Guy W Jr

Wheeler, Kyle W  
Wheless, John R III  
Wolfe, Barry  
Woods, Michael L  
Zechini, Richard R

### **Component 6 Southwest**

Abbott, Michael A  
Abrahams, Rodney R.  
Anderson, A S III  
Armour, William O  
Ball, Mark S  
Bassham, Deborah A  
Bays, Thomas F  
Bettis, Victoria C  
Bittel, David E  
Boswell, Cramer L  
Boyle, Richard P III  
Brown, Bobby L  
Brown, Ronnie L  
Chamberlain, Dana H  
Clemons, Mark D  
Cole, Jack D  
Collins, Timothy E  
Copas, Jeffrey M  
Copenhaver, Richard G  
Cox, B N  
Davis, H N  
Dillow, Walter R Jr  
Gates, J L  
Gilliam, George D  
Glascock, W S  
Glasgow, Matthew W.  
Gleason, James M Jr  
Goad, Marlon A  
Graham, Robert F  
Harman, Marvin D  
Harris, Charles E  
Harrison, Glenn A  
Higginbotham, Henry K I  
Hilton, J E Jr  
Hilton, Ronnie M  
Hollyfield, Neil D  
Hoskins, Robert G  
Householder, Ronald W  
Howard, Clinton W  
Jessup, Ronald D  
Joachim, Richard J  
Keene, Carla  
Kilbourne, James E Jr.  
Kyle, Lawrence J  
Lawrence, Leighton E  
Lykins, Lee F III  
Martin, Sonya K  
Matheson, Barry R  
Mc Cuin, Stephen D  
Mc Donald, Peter J  
Miller, Scottie R  
Moore, French H III  
Moore, French Jr  
O' Connor, Susan F  
Paget, Joe A Jr  
Parks, William R  
Perkins, Dennis W  
Perkins, Nancy B.  
Pittman, Tyler L

Raymond, Mark A  
Richardson, Emmett V III  
Ritchie, David C  
Schambach, Richard G  
Schnecker, Dennis C  
Schneider, Joesph P  
Schuster, Robert G  
Seaver, James M  
Semones, John D  
Shelburne, Roy S  
Southern, Cynthia  
Sparger, H M  
Spraker, Michael W  
Stepp, David L  
Stubbs, Julie S  
Stubbs, Paul C  
Thompson, Damon B  
Thompson, Daniel E  
Thompson, William B  
Throckmorton, Dennis  
Umstott, Paul T  
Vlahos, Gus C  
Webb, J L  
Wheeler, Steven L  
Wilson, David T.  
Young, Glenn A

### **Component 7 Shenandoah**

Akeel, Ed A  
Alvis, Stephen G  
Angelopoulos, Chris  
Aronson, Jon A  
Bagheri, Desiree A  
Baisey, Teresa A  
Bang, Jeffrey E  
Barb, Stacie D  
Berbes, William C  
Bickers, Duane J  
Bickers, Duane J  
Bigelow, William C  
Binda, Robert L.  
Binda, Robert L. Jr  
Boggs, Anna-Maria  
Bollinger, Nancy C  
Bradford, Henry B III  
Brannon, Lawrence S  
Bream, Alan J  
Breedon, Steve  
Brill, Byron A  
Brooks, Cynthia  
Brown, Donald R  
Byers, Paul G  
Catchings, Sandra J  
Clarke, Stephen M  
Cloth, Mark S  
Crowder, Curtis R Jr  
Crowder, E Paige  
Davis, Ronald C Jr  
Driscoll, Robert M Jr  
Dwyer, Patrick W  
Farmer, James R  
Fortney, Clark D  
Fowler, J T  
Gardener, William A  
Garnes, Richard  
Garrett, Steven G  
Garrison, C Mac

Gilrain, David L  
Greene, Joseph M Jr  
Grogan, Frank T III  
Gromling, Thomas A  
Grupp, William A II  
Hagert, Christie L  
Haines, Gary W  
Hall, Robert B Jr  
Hamblin, Merinda  
Hamer, David B  
Hamer, Fred C Jr.  
Hammock, Mark A  
Hanna, W B  
Heath, Richard T  
Herring, Carolyn C  
Hodges, Jeff E  
Horbaly, William  
Hull, Richard R  
Hull, Robert C  
Hutson, Hammond M.  
Inouye, David K  
Iuculano, Giovanni P  
Jones, David C  
Kayton, Jack T III  
Kelly, Daniel  
Kelly, Ellen R  
Klamut, Kenneth M  
Kleine, Jared C  
Knight, John H  
Knight, John Jr.  
Kray, Frances M  
Krese, David L  
Lacy, John J Jr  
Lutz, Wallace B  
Mansfield, Richard S  
Marchibroda, Diana  
Mc Grail, Robert F  
McCorkle, Allen D.  
Mc Intyre, Joseph M  
Pemberton, Berkley M  
Priest, James H  
Remington, Wayne  
Robbins, Alan  
Roller, John R  
Ruffner, Scott A  
Sartelle, Harry M III  
Schroeder, Richard A  
Schultz, James M  
Sherman, Heidi A  
Sherwin, J T  
Spano, Donald M  
States, Michael E  
Stiebel, William L  
Stone, James R  
Stoner, Craig C  
Stout, Michael E  
Stover, Pamela K  
Sutherland, William M  
Sweeney, William T  
Swett, David  
Swett, Rebecca  
Tamkin, Lewis D  
Taylor, Emery F Jr.  
Thomas, Katherine G  
Tisdelle, George W  
Tran, Julie  
Viglione, William

Waff, Joseph J III  
Wheeler, David L  
White, Alan J  
Wright, Douglas D  
Zebarth, Stephen M

### **Component 8 Northern Virginia**

Abdelrazek, Jaliam M  
Abel, Anna V  
Adili, Mehdi S  
Alachnowicz, J David  
Alejandro, Rodney A  
Ali, Wissam F  
Allison, William H  
Anderson, David C  
Anoushfar, Scheherazad  
Apt, Kolman P  
Argentieri, Robert D  
Ashton, Gary J  
Averne, Robert M  
Ayati, Marjun  
Babington, William W  
Bachour, Maya  
Banaji, Girish  
Banker, Lawrence K  
Banks, Robert J  
Barrett, HJ  
Bath, Gregory D  
Bell, Alonzo M  
Bell, Hunter C  
Bell, John A Jr  
Berman, Robert S  
Berman, Scott C  
Bernhart, Brendan J  
Bertman, David  
Besner, Edward  
Bisson, Anna E  
Bluhm, Andrew E  
Bolil, Joseph M  
Bonacci, Christopher E  
Brandt, Jason D  
Brazinksi, Adolph D  
Brendmoen, Sara T  
Brigleb, Richard C  
Broth, Stuart A  
Bubernak, Fred A  
Bukzin, Mitchell J  
Burch, Stephen E  
Burger, Brenton W  
Burke, Carol P  
Burton, Francesca M  
Butts, David L Jr  
Byrne, Kenneth P  
Caligan, Geoffrey B  
Callahan, Karen M  
Callahan, Paul W  
Canby, Frederick  
Cassidy, Daniel E Jr  
Cattafesta, Michael  
Chaudhry, Maqsood A  
Chioariu, Ilie Jr  
Christian, James H  
Chun, Edward  
Chung, Michael K  
Citron, Albert A  
Clark, C B  
Clark, Jeffrey S  
Claybrook, Robert A Jr  
Cocolis, Peter K Jr  
Collins, Michael J  
Colon, Enid C  
Conrad, Paul W  
Corcoran, Theodore P  
Cote, David P  
Covel, Jerome A  
Crutchfield, William E  
Cusumano, Joseph  
Daczkowski, Thomas W  
Dang, Tuongan N  
Davis, Jeffrey P.  
Davis, Rhea D  
Dean, Henry D  
Dean-Duru, Lynda N  
Delaney, Jayne E  
Delatour, Frank A Jr  
Delgado, Edward B  
Deutsch, Charles M  
DeVera, Genevieve B  
Diaz, Jennifer H  
Dibbs, Frederick N  
Dillon, Kathleen G  
Direnzo, Gregory S  
Dixon, Byron P  
Donahue, James J  
Donohue, Richard F  
Doriot, Robert E  
Dougherty, William V III  
Dryden, James S Jr  
Dunegan, Michael G  
Duong, Truc Q  
Economides, Mino  
Egber, Mark  
Ehreth, John S  
Eichler, Thomas J  
Elhady, Tamer N  
Ellenbogen, Gary F  
Ellington, Paul  
Emad, Neal R  
Emam, Atiyeh  
Epstein, Jerrold H  
Estwani, Isam  
Evans, Candace E  
Fabio, Michael A  
Fagan, Harold H  
Falbo, Anthony D  
Fallon, Steven D  
Farahi, Fredrick  
Farr, Michael V  
Favis, Raymund V  
Ferramosca, Timothy L  
Ferrara, Charles M  
Ferris, Philip S  
Fink, Bernard B  
Finnerty, Raymond J  
Fischer, Richard D  
Fletcher, Charles F  
Fleming, Harold A  
Flikeid, Robert C  
Foretich, Eric A  
Forsbergh, Eric J  
Forsee, James H Jr  
Fox, Lawrence T  
Fraga, Ana M  
Francioni, Sonia E  
Frank, Gerald I  
Frank, Harold L  
Franks, R A  
Fresch, Danine  
Fuentes, Agnes



Gallegos, Robert A	Kallas, Geith J	Mc Donald, Robert A	Pousson, David M	Stoller, Stanley M
Ganji, Nazila J	Kamali, Touraj	Mc Grath, Katherine A	Price, Stephen A	Stone, Richard T
Garai, Allen S	Kan, Maryann	Mc Grath, Kevin M	Przybyla, Ted P.	Storm, Matthew T
George-Job, Anita G	Kasperowski, Chad	Mc Intire, Michael K	Pugh, George S	Strange, Robert S
Gerald, Glenn D	Kavianpour, Zahra	Mc Kinney, Scott D	Qiu, Kenneth	Strauss, Arthur M
Ghatri, Ali Y	Kayes, Stanley F	Mc Millan, Alex IV	Rasmussen, Wayne G	Striano, Thomas S
Gh-Zolghadr, Mandana	Keat, Josie S	Mc Quiston, Scott A	Razavi, Ramin	Stringham, William R
Gibberman, Avi	Kelley, Howard L	Mc Vay, Thomas J	Reardon-Davis, Christine	Stuver, David R
Gibberman, Paul	Khalili, Mojdeh	Mercantini, John A	Reeves. E A III	Suon, Rainy R
Giberson, Kenneth R	Khasraghi, Faranak A	Mestas, Eric	Reynolds, Donald F	Supan, Paul F
Gillespie, M Joan	Khoury, John H	Metzdorf, David W	Reynolds, Gavin E	Sushner, Leo J
Godlewski, Richard J	Kim, Jerry C	Metzdorf, David W Jr	Rice, Richard O	Synnot, Scott A
Golden, Alan H	Kim, Robin S	Michael, Adele K	Rich, Jerry H	Tajalli, Flora B
Golestani, Parastoo	Kim, Sonny S	Miller, Glen R	Richards, Thomas C	Tami, Richard G
Golian, Timothy J	King, Hoang N	Miller, Jeffrey P	Roberts, Sharon S	Tari, Kianoush M
Golub, Mark E	Kitchen, Kim I	Miller, Juliana F	Roberts, Thomas C	Tarpley, Elizabeth
Good, John A	Klima, Rodney J	Miller, Mark A	Roca, Aureilo A	Thariani, Hani
Gordon, Mark R	Kling, John D II	Miller, Robert A	Rolf, Kurt	Thlick, Su-En C
Gorman, Michael H	Klioze, Earl E	Mitnick, Howard M Jr	Romano, Frank	Thomas, Judith A
Gouldin, A G	Klioze, Jeffrey I	Monsalve, Carlos	Rosenberg, Jack J	Thomas, Stephen J
Graves, Stuart L	Kokel, Deidra L	Montalto, Sanford	Rosenberg, Ronald M	Thomas, William J
Greco, Donna	Kotler, Lawrence M	Montalvan, Cesar M	Rosenblum, Steve F	Thorpe, Jeffrey R
Green, Michael J	Kousaa, Mai Y	Moon, Sue K	Rosenman, Larry	Torrey, Edwin A
Greenspan, Gary	Krishnamoorthy, Savitha	Morabito, Robert A	Rosenthal, Leo J	Tran, Anhthu P
Gregory, Mary	Krygowski, John J	Morch, Michael H	Rothman, Gerald	Tran, Linh T
Griffin, Alfred C Jr	Kunec, Peter P	Mortvedt, David M	Rothman, Jeffrey R	Tran, Quang
Griffin, Susan S	Kuzmik, Michael D	Muller, Lawrence R	Rotter, Michael	Tritinger, Karen
Grimes, Mark A	Kwon, Hyue K	Musmar, Qais	Rowhani, Bahar	Tupman, Stephen C
Grimmer, Bryan L	La Briola, J D	Muss, Nicholas A	Rudolph, Barry S	Vakay, Rena T
Grimmer, Lonny D	Lanzaro, Peter J	Naik, Priti M	Ruparelia, Shreyesh	Valleru, Silvija
Grosso, Michael E	Laurent, Barry	Nardiello, Charles A	Ruzzo, Joseph A	Valltos, Rachael M
Grubbs, John T	Lavecchia, Gregory L	Nelson, Charles H Jr	Ryals, William T	Vann, Maribel
Gruntz, Richard	Le, David Q	Nelson, Edward J	Saba, Shadi	Variapapa, Charles A
Gyuricza, James L	Le, Lan P	Newman, Jerome W	Sabharwal, Smita	Vasey, Eric C
Haggerty, Kenneth M	Lea, Townes III	Nguyen, Denise T	Santos, Raoul H	Viscomi, Anthony C
Hahn, Raymond C	Lebonitte, Robert A	Nguyen, Hanh M	Sapperstein, Evan R	Wali, Sofiya
Hall, Robert G	Lee, Benjamin K	Nguyen, Kristina T	Scelfo, Peter J	Waqar, Rukhsana
Hanna, Peter J Jr	Lee, Brian	Nguyen, Monique	Schecht, Wayne	Weil, Jack
Hardin, Michael T	Lee, Chong W	Nguyen, Nikki Trinh T	Schneider, Grant H II	Weinkam, William H Jr
Harre, John W	Lee, Edwin	Nguyen, Thi	Scheider, Phillip C	Whiston, David A
Harrison, Michael B	Leekoff, David I	Nikkhah, Pouran	Schell, Robert E	Whittington, Richard M
Hart, Patrick D	Legum, Marty S	Niles, Raymond R Jr	Scimeca, Craig M	Wiger, John C
Hartman, Melanie Wilson	Leiner, Zachary	Norbo, Kirk	Sellers, John G Jr	Williams, Jon W
Hartz, Gary L	Leipzig, Robert J	Nosal, Gregory	Shaaffer, Elizabeth T	Williams, Suzanne S
Hauptman, Ronald S	Lenz, H T Jr	Novick, Arthur J	Shannon, Theresa L	Winkler, Mark A
Helvey, Gregg A	Lessne, William	Novick, Kendra	Sharif, Sherry	Winkler, Thomas J
Hemedan, Nada	Levine, Paul E	O' Donnell, William A	Sherman, William B	Withers, James A
Henon, James P	Levine, Robert A	Oh, Joseph J	Shewmaker, Dale P	Wooddell, Carol B
Henry, Rolin S	Li, Tin W	Olenyn, Paul T	Shingler, Arshia	Wooddell, J Douglas
Herbst, Heidi A	Lillard, Jonathan F	Ortega, Thu-Nga H	Sibley, David P	Woodside, Jason S
Hindman, Edward Jr	Lindemann, Scott P	Ossakow, William	Silloway, Kimberly A	Wortman, Michael J
Hinkle, R A	Lindsey, Thomas F	Oутten, W L III	Silveus, Michael D	Wright, Rita
Ho, Charlton	Line, Richard V	Pace, Warren J Jr	Sklar, Andrew M	Wu, Linda W
Ho, Stewart C	Longauer, E J	Palabrica, Rosario T	Small, Neil J	Wyman, Bruce S
Hoang, Binh	Longman, Eddie S	Palmieri, David	Smith, Hubert R Jr	Yann, Borin
Hoffman, Howard	Love, Melanie R	Parvizian-Yazdani, Foro	Smith, Karl A	Yi, Chang
Hollander-Kyle, Joyce P	Lupi, James E	Pash, John W Jr	Smith, Valerie A	Yi, Yeun-Hee
Horgan, Robert E	Luposello, Mark A	Passero, Peter L	Solier, George A	Ykeda, Cecilia
Howell, John N II	Maharaj, Barry R	Patel, Ajit	Sours, Charles L Jr	Young, Brenda J
Hughes, David R	Mahn, Douglas H	Patil, Sudha P	Sours, Elaine K	Yun, Samuel
Hughes, Herbert M	Mai, Christine L	Patterson, Adrian L Jr	Snider, Lawrence A	Yung, Susan A
Hughes, Timothy J	Malekuti, Sina	Patterson, Paul H	Spagna, Christopher R	Zacko, George B
Ivy, Gregory	Marcus, Carlene D	Patterson, Travis T	Spitler, Nathan S	Zaletel, James G
Jackson, Ronald D	Marino, John A	Pell, James A	Spurrier, Bryan R	Zarrinfa, Ali
Jarrell, Whitney S	Markoff, Bruce W	Perez-Febles, Joaquin M	St. Louis, Stephen	Zeineh, Arwa
Java, Robert G	Marzban, Pamela	Perez-West, Clementina	Stack, Brendan C	Zier, Tara L
Jay, Bruce W	Matsui, Toshiki	Phan, Truc	Stack, Hollie B	Zimmet, Paul N
Jelinek, James W	Mauil, Deirdre	Phass, Dean J	Stecher, Roland E	Zwibel, Burton C
Johnson, Fred D Jr	Mayberry, Rodney S	Phass, Sophia C	Stephenson, John	
Johnson, Steven R	Mc Crary, Thomas A Jr	Piccinino, Michael V	Stern, Richard K	
Jordan, Ralph	Mc Donald, Anne S	Pisciotta, Dominick J		

## VDA AWARD NOMINATIONS



The Board of Directors Awards Subcommittee selects recipients for VDA awards which are presented at the Annual Session of the VDA. In order to choose those who are most deserving of these honors, we would like to ask for your help in identifying potential recipients. Nominations for awards may be made to the Awards Subcommittee by individual members of the VDA or by components. Please

submit nominations to the VDA Awards Subcommittee, attention Bonnie Anderson, at the VDA Central Office (7525 Staples Mill Rd., Richmond, VA 23228) by March 30, 2008.

**Dental Team Member Award** The nominee must be a dental team member of a VDA dentist. This award may be presented to multiple recipients only when worthy candidates are recognized. The nominee(s) should demonstrate that she/he holds the profession of dentistry in highest regard, promotes the interest and betterment of the profession through the team concept of dentistry and has five or more years of experience in the dental field.

**Emanuel W. Michaels Distinguished Dentist Award** This award is presented to a member dentist who has demonstrated outstanding service, leadership and dedication to the profession of dentistry and for the improvement of the health of the citizens of Virginia. This award is presented only when a worthy candidate is recognized by the President and approved by the Awards Committee.

**New Dentist Award** This award is presented yearly to a VDA member who has been in practice ten years or less. This award is only presented when a worthy candidate is recognized. The nominee must have demonstrated leadership qualities through service to dentistry.

**Special Service Award** This award is presented to a non-dentist who has demonstrated outstanding service, support and dedication to the profession of dentistry. This award is presented when a worthy candidate is recognized.

## PUBLICATION OF CANDIDATE INFORMATION IN THE Virginia Dental Journal

Candidates for the elective offices of the Virginia Dental Association may be submitted for consideration to the VDA Nominating Committee by each component representative on the committee, on behalf of the component he/she represents; or by endorsement of at least 25 members of the VDA, as verified by the Secretary-Treasurer of the Virginia Dental Association (Dr. Ted Sherwin, c/o VDA Central Office). The following positions are up for election at the 2008 Governance Meeting. President-elect; four ADA Delegate positions (3-year terms) and five ADA Alternate Delegate positions (2-year terms).

All candidates must have submitted their CV's, biographical information, position papers and picture (color head shot preferred) to the attention of Dr. Richard F. Roadcap, Editor, at the VDA Central Office (7525 Staples Mill Rd., Richmond, VA 23228) no later than February 28, 2008 for publication in the April-May-June issue of the *VA Dental Journal*. **All candidate information must be submitted electronically via email [jacobs@vadental.org](mailto:jacobs@vadental.org) or a disc by mail (VDA Central Office 7525 Staples Mill Road, Richmond, VA 23228).** Forms of submission of candidate information have been mailed to all VDA component society presidents.

Candidates for the office of President-elect will be allowed a maximum of 500 words. Candidates for all other offices will be allowed a maximum of 250 words. Candidates are asked to limit their biographical information to major accomplishments, but to include such pertinent data as education, memberships, honors, positions of leadership held in the ADA, VDA and component societies, and community leadership activities. Due to space limitations, the Journal Editor will reserve the right to condense biographical information.

Should you have any questions regarding the VA Dental Journal criteria, please contact Shannon Jacobs at (804) 261-1610 or [jacobs@vadental.org](mailto:jacobs@vadental.org). Questions regarding Candidate Information, please contact Bonnie Anderson at [anderson@vadental.org](mailto:anderson@vadental.org).



## St. Paul's Oxbow Center Opens Dentists, hygienists & dental assistants needed!

Dentists, dental assistants and dental hygienists are needed to volunteer for a free dental clinic being held at the Oxbow Center in St. Paul, VA. The clinic is dedicated to providing dental care to the uninsured who are suffering and cannot pay for dental services. On our second day of operation, a husband and wife walked and hitch hiked the 50 miles from their home and spent the night under a bridge near our Mobile Dental Unit in order to get badly needed extractions for the husband the next morning.

The Oxbow Center Clinic is organized by The Health Wagon in Clinchco, VA. Volunteers are asked to donate just one day of their time. It will make such a difference in the lives of so many. For more information please call 276-835-9474

## VDA Seeks Applicants for Board of Dentistry

The VDA encourages members to submit applications to serve on the Virginia Board of Dentistry. Doctors who wish to perform this important public service should send a Curriculum Vitae (C.V.) in Microsoft Word format to Bonnie Anderson, [anderson@vadental.org](mailto:anderson@vadental.org). The deadline for applications is March 31, 2008. The VDA Board of Directors will forward the names of qualified candidates to the Governor's Office for consideration.

# Dr. Hugh Douglas • Honoring Excellence

Labor Day 2006 Hugh Douglas was diagnosed with Pancreatic Cancer. Since then he has had chemotherapy, surgery, more chemotherapy and radiation. There have been some bumps along the way but you will be happy to know that he is handling his condition in the most remarkable manner—he would have it no other way.

A campaign has been launched to honor him at the VCU School of Dentistry. The campaign is based not on his expertise as a Prosthodontist but on his example and teaching of **excellence**. No matter what kind of dentistry you practice, excellence is your goal. No one exemplifies excellence better than Hugh. It is fitting that someone who demonstrated this for over 35 years as a faculty member be honored at the School.

It is time, right now, for us to say thanks for all he has done, and still does, for each of us, his students, the School and the dental community. I look at him, today, and he still gives of himself—I just think “wow” if only I could help others half as much as Hugh...

Our needs are twofold. We need your contributions in the form of a pledge or a contribution. The pledges may be made over one to five years. For this campaign when we meet our goal of pledges, we will be able to answer the question of “How will he be honored?” We plan to have his name preserved in perpetuity, but at what level depends on what we raise. Your support and participation will help us decide how Hugh will be honored. Just as importantly, we need you to contact others in your classes, your study clubs and your organizations and tell them about the campaign.

A pledge form is provided below. Please fill it out today.

The contact for this campaign is: VCU School of Dentistry Development Office  
Post Office Box 980566  
Richmond, VA 23298  
804-828-9245

Fill out the Pledge form and if you are ready to make the contribution then make checks payable to: MCV Foundation – School of Dentistry. Please include the notation “Hugh Douglas” in the memo line.

Gibby Button, D.D.S.



## Honoring Hugh Douglas for his Quest for Excellence VCU School of Dentistry

To honor a man who has meant so much to so many, I hereby pledge, barring unforeseen circumstances, \$ \_\_\_\_\_.

Enclosed is an initial gift of \$ \_\_\_\_\_ with the balance of \$ \_\_\_\_\_ to be paid

beginning: month year over a \_\_\_\_\_ year period.

I would like reminders to be sent to me **annually** [ ] **semi-annually** [ ] **quarterly** [ ]

- My employer or spouse's employer will match my gift. [ ]
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Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Date \_\_\_\_\_  
Signature \_\_\_\_\_

Checks may be payable to: **MCV Foundation – School of Dentistry.**

**Please include the notation “Hugh Douglas” in the memo line and mailed to  
VCU School of Dentistry Development Office  
Post Office Box 980566  
Richmond, VA 23298**

If you would like to make your gift by credit card please complete the following:

Visa [ ] MasterCard [ ]

In the amount of \$ \_\_\_\_\_

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

Cardholder's signature \_\_\_\_\_

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

•If you would like to make a gift of securities please document your pledge on this form by writing “stock gift” in the blank above, mail it to the address above AND call William Kotti, President, MCV Foundation at 828-9734 to handle your gift transaction.

Please call Edward G. Kardos, Director of Development, VCU School of Dentistry  
At 804.828.0324 or egkardos@vcu.edu for additional information.

Thank you for your investment.

Virginia Dental Association  
Board of Directors  
Actions in Brief  
November 16, 2007

I. Actions of the Board of Directors:

A. The following Bylaw and Policy changes were considered:

1. Background: The date the budget requests are due needs to be changed in VDA Policy. An earlier date will allow the Council on Finance adequate time to develop the next year's budget:

Resolution: Revise VDA Committee Policy # 12 (page 6)

12. All committee budget requests will be submitted by ~~April 1~~ **March 1** to the Council on Finance.

**The Board of Directors approved the above resolution with a recommendation the House of Delegates vote yes.**

2. Background: Due to the split of the Governance Meeting and The Virginia Meeting, the Council on Sessions believes the terms of Council members should change at the conclusion of each Virginia Meeting.

Resolution: Article VII, Section 4.A will be revised as follows:

- A. All Committees and Councils shall serve at the direction of the President from one Annual Meeting to the next. **However, Council on Session members shall serve from one Virginia Meeting to the next.**

**The Board of Directors approved the above resolution with a recommendation the House of Delegates vote yes.**

3. Background: The Council on Sessions is a unique Council. Each member has a specialized knowledge of the working of The Virginia Meeting. Thus, it is proposed to change the number of members from four to five. The fifth member being the most recent year's chair. In addition, the Local Arrangement chair for the next two years would be an ex-officio member. Future local arrangements chairs would then have two years of "learning" time before their year to serve as chair. The Council on Sessions hopes this would allow for better informed members to both the Local Arrangements Committee and the Council on Sessions.

Also, to be in compliance with ADA CERP Certification requirements, the Council on Sessions needs to have input from a dental hygienist or assistant on CE courses offered at The Virginia Meeting. Therefore it is recommended that the President appoint either a dental hygienist or assistant as an additional advisory member. This advisory member would only have input on speaker selections.

Resolution: Article VII, Section 7.2.a will be revised as follows:

- a. Membership: This Council shall consist of ~~four~~ **five** members, **the fifth member being the most recent year's chair.** One member would be appointed each year by the President to serve a four year term **except for Council on Session's chair whose term would be five years.** The Local Arrangements Committee Chairs shall be an ex-officio member for the next two years. **The Council would also consist of one advisory member who is either a hygienist or dental assistant.** No member shall serve more than two consecutive terms.

**The Board of Directors approved the above resolution with a recommendation the House of Delegates vote yes.**

II. The following actions of the Board of Directors are included for information only:

A. The following items were approved:

1. Notification will be sent to ADABEI of the VDA's intent to end the current contract at the end of the current term on March 31, 2008.
2. Background: Due to the Enron Scandal and other high profile business frauds and failures, Congress passed the Sarbanes-Oxley Act in 2002. This greatly expanded the audit requirements of public companies. Though mainly aimed at large entities, in 2008 the revised IRS 990 will require a much more thorough look at management, internal control and risk management with the goal of raising the bar in transparency for stockholders/members. To assure VDA members, who fund the VDA, that we have transparent and low risk management of the VDA, its funds and activities the following is recommended:

Resolution: A Risk Management Task Force will be appointed to review the expanded IRS 990 requirements, as well as review all areas where there is risk of fraud or improper conduct of staff or leaders and make recommendations to the BOD in time for the 2008 VDA House of Delegates meeting.

Budgetary Impact: \$2,000.00 from the BOD discretionary fund.

- 3. Dr. Carole Pratt will serve on the National Rural Health Association Policy Institute, as a representative of the VDA, in 2008.
- 4. The Board of Directors directs the Executive Director to place a hold, if possible, or contract with Colonial Williamsburg for the 2010 Virginia Meeting.
- 5. A contribution will not be made to the YMCA Model General Assembly Scholarship Program.

B. The following item was referred:

- 1. To the Legislative Committee for their information –  
Background: The Virginia Department of Health Professionals has requested that the VDA withdraw its proposal to charge an administrative fee to individuals found in violation of the State Dental Practice Act. These fees would help offset the cost incurred by the Board for the investigation of the case. They would like to see this pursued in 2009.

Resolution: Per the request by the Virginia Department of Health Professionals, the VDA will postpone sponsoring legislative action on the proposal to seek an administrative fee charge to individuals found in violation of the Dental Practice Act until 2009.

C. The following item was defeated:

- 1. A motion to hold the Board of Directors meeting on Saturday April 12, 2008.
- 2. Background: At the 2007 Governance Meeting the student HOD delegates were ready to vote for the officers of the VDA and they were told they did not have a vote. They were told that this would be brought up before the Board of Directors.

Resolution: The students that are delegates to the VDA House of Delegates should have the right to vote for the officers of the VDA.



### HIGHLIGHTS

- ★ Springtime in Washington
- ★ Hygiene Program
- ★ Participation Clinics
- ★ Table Clinics
- ★ The Night Photo Tour

### FEATURED CLINICIANS

- |   |   |
|---|---|
| <b>Gordon Christensen, DDS, PhD</b><br><i>Materials</i> | <b>Samuel Low, DDS</b><br><i>Periodontics</i>                     |
| <b>Dennis Brave, DDS</b><br><i>Endodontics</i>          | <b>Linda Miles, CSP</b><br><i>Practice Management</i>             |
| <b>Randy Huffines, DDS</b><br><i>Geriatrics</i>         | <b>Wilbert Milligan, DMD, PhD</b><br><i>OSHA</i>                  |
| <b>Henry Lee, PhD</b><br><i>Forensic Dentistry</i>      | <b>John Svirsky, DDS</b><br><i>Oral Medicine / Oral Pathology</i> |
| <b>Brian LeSage, DDS</b><br><i>Esthetics</i>            |   |

**For a preliminary program, complete and return to:**

DC Dental Society, 502 C Street, NE  
Washington, DC 20002-5810  
202-547-7613 FAX: 202-546-1482 www.dcdental.org

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# ADA 16th District • REPORT

M. Joan Gillespie, DDS, MS  
Chair of Virginia Delegation- Chair of the 16th District



The ADA 16<sup>th</sup> District Caucus was held in Ashville, NC in September. We met with North Carolina and South Carolina, our partner states in the 16<sup>th</sup> District, to review all of the ADA Resolutions. We are also assigned to reference committees to discuss the resolutions in detail. The reference committees include communication and membership services, legal and legislative, dental benefits and practice, dental education and budget. The VA Delegation is also a member of the Southern Leadership and the conference was held in Atlanta. Drs. Tankersley, Vlahos, Howell, Dickinson and I represented Virginia. It was an unbelievably busy and productive September with the VDA meeting, the 16<sup>th</sup> District Caucus, the Southern Leadership Conference and the ADA Annual Session in San Francisco at the end of September.

Some of the resolutions passed at the ADA HOD include:

Revised guidelines on the use of sedation and general anesthesia.

The ADA recommended support for the reauthorization of SCHIP with a provision to emphasize that funds be used to provide medical and dental care to children with family income less than or equal to 200% of the federal poverty level before any expansion to children in families above that level (and that this decision be made on a state by state basis).

The ADA defined “dental best management practices” to mean a series of amalgam waste handling and disposal practices. The ADA and constituent and component societies are urged to make appropriate policy choices on behalf of their members based on local conditions.

Research into dental tourism.

Notification to the dentist of prosthetic cases sent to foreign or ancillary labs.

And, there is a new category of membership for individuals who hold a dental degree but not a US license, do not provide patient care for remuneration and live in the US or its territories.

The 2007 Delegates were Drs. Anne Adams, David Anderson, Richard Barnes, Mark Crabtree, Charles Cuttino, M. Joan Gillespie, Bruce Hutchison, Rodney Klima, Gus Vlahos and Edward Weisberg. The Alternate Delegates were, Drs. Alonzo Bell, Ralph Howell, Ronald Hunt, Michael Link, Kirk Norbo, McKinley Price, Elizabeth Reynolds, J. Ted Sherwin, Neil Small and Roger Wood.

We would like to thank Charlie Cuttino for the years of dedication to the delegation. His contributions and networking have been invaluable. This was his last year of eligibility to the delegation. We will miss you Charlie. Thank you to all the Delegates and Alternates who worked so hard this year.

## Public Health Dentist Opportunities

Here is an opportunity to enjoy dental practice in Virginia, contribute to the community, be a part of a healthcare team and grow professionally. Duties typically include comprehensive general dentistry for school children and limited services for adults. VDH offers a competitive compensation package to the best-qualified applicants, including negotiable base salary and potential recruitment incentives. An array of valuable benefits for classified employees include: employer-paid retirement, employer-paid life insurance, employer-paid malpractice protection, employer-subsidized health insurance, tax-free 457/401A deferred compensation plan with child care reimbursement plans, employer-paid short term & long term disability plan, annual leave, sick leave, and paid holidays. Although an unrestricted VA license is preferred, a restricted temporary licensure is available as a VDH employee. National criminal records and background check required. Contact Dr. R. Lynn Browder for additional information at (804) 864-7776 or [lynn.browder@vdh.virginia.gov](mailto:lynn.browder@vdh.virginia.gov). The Virginia Department of Health is an Equal Opportunity Employer.

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## VDA Services Shares Revenue with Components

In September 2007, VDA Services supported each Component Society through the annual revenue sharing program. Based on their members' usage of VDA Services vendors, each Component Society received money that is used to sponsor CE programs at the component level. **Since the start of the revenue sharing program in 2001, VDA Services has shared over \$246,000 with the Component Societies of the VDA!** On an annual basis, the revenue sharing amount for each component is based on each component member's usage of the VDA Services vendors (please see the list of vendors to the right). To increase the amount of money that your component receives from revenue sharing, simply use more of the products and services that are recommended by VDA Services.

Help Us, Help You!



Pictured above, Dr. Jason Crist (l), President of the Piedmont Dental Society accepts the 2007 Revenue Sharing check from VDA Services Board Member, Dr. Frank Crist, Jr. during the PDS meeting on October 12, 2007 at the Institute of Learning and Conference Center in Danville, VA.

### Endorsed Vendors and Discount Programs

Winter 2007-2008

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<b>Banc of America Practice Solutions</b>	<b>800-491-3623</b>
practice and equipment financing services	
<b>Bank of America</b>	<b>866-438-6262</b>
please request the Virginia Dental Association credit card	
<b>BI Investment Services</b>	<b>877-377-1101</b>
investments; financial planning & management services	
<b>CareCredit</b>	<b>800-300-3046</b>
patient payment plans	ext. 4519
<b>CE On-line</b>	<b><a href="http://www.vadental.org">www.vadental.org</a></b>
library of on-line CE courses powered by ArcMesa	
<b>Dell</b>	<b>800-695-8133</b>
computers; for discount # call VDA or <a href="http://www.vadental.org">www.vadental.org</a>	
<b>Hertz</b>	<b>800-654-2200</b>
car rental	<b>CDP#1220431</b>
<b>JoS. A. Bank</b>	<b>800-285-2265</b>
clothing; corporate discount card (call # or visit store)	
<b>LifeServers</b>	<b>866-543-3500</b>
automated external defibrillators (AED)	
<b>Medical Protective</b>	<b>800-463-3776</b>
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<b>Paychex</b>	<b>800-729-2439</b>
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<b>RBS Lynk</b>	
<b>(The Royal Bank of Scotland Group)</b>	<b>866-336-5965</b>
credit card processing	
<b>SMARTMOVE</b>	<b>877-645-6560</b>
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## A Comparison of Flexural Fracture of Three Different Nickel-Titanium Rotary File Systems

Matthew Lloyd, DMD, MSD

**Abstract** of a thesis submitted in partial fulfillment of requirements for the degree of Master of Science in Dentistry at Virginia Commonwealth University, June 2007.

The purpose of this study was to compare the number of rotations to failure of three different rotary file systems. ProFile, Sequence, and Liberator files in sizes 25 and 40 with 0.04 taper were divided into groups of five and rotated against a grooved metal block mounted to a Universal testing machine at 31 and 34 degrees. Each file was rotated at 300 rpm until fracture occurred. The numbers of rotations to fracture were calculated. Use of a three-way ANOVA and Tukey's HSD multiple comparison tests revealed significant differences for the angle of deflection, size, and type of file. An increased angle of deflection resulted in a decreased number of rotations to failure for all three file types. An increased size of file also resulted in a decreased number of rotations to failure in all the groups. Liberator and Sequence files required fewer rotations to failure than ProFiles in all groups tested except the size 25 files rotated at the less severe angle. ProFiles appear to be more resistant to flexural fracture than Liberator and Sequence files unless the files are of smaller size with a less severe curvature. Care should be taken to limit the number of uses when using larger size files, especially Liberator and Sequence files, around severe curvatures.

## Immunohistochemical Study of Phenotypes of Dendritic Cells in Dental Pulp from Noncarious and Carious Teeth

Melissa A. Harmon, DDS, MSD

**Abstract** of a thesis submitted in partial fulfillment of requirements for the degree of Master of Science in Dentistry at Virginia Commonwealth University, June 2007.

Mature dendritic cells (DCs) in inflamed tissues may promote inflammation but the status of DCs in pulpitis is not known. We hypothesized that DC maturation would correlate with carious lesion depth and that CD4+ cells would be found in association with mature DCs. Pulp were collected from teeth exhibiting: (I) no caries (n=9), (II) shallow dentinal caries (n=5), and (III) deep caries (n=9). Pulpal tissues were cryo-sectioned and positive cells were examined with immunohistochemistry. Mature DCs (CD83+) were almost exclusively restricted to pulps from deep caries. Furthermore, CD209+ DCs in deep caries were elevated over other groups and CD209+ cells about doubled the CD83+ cells suggesting that immature DCs had accumulated and were available for terminal maturation. CD4+ cells were found associated with both mature DCs and macrophages in pulps from deep caries suggesting that T cells may be a source of pro-inflammatory cytokines at this inflamed site.

## Sodium Hypochlorite's Effect on Nickel-Titanium Rotary Instruments and its Effect on Resistance to Fracture

Michael S. Smith, DDS, MSD

**Abstract** of a thesis submitted in partial fulfillment of requirements for the degree of Master of Science in Dentistry at Virginia Commonwealth University, June 2007.

The purpose of this study was to examine the effect of partial and total immersion in sodium hypochlorite on nickel-titanium rotary files and to determine whether resistance to fracture was influenced by the immersion time. One hundred K3™ and 100 ProFile® rotary files were either partially or totally immersed in 5.25% sodium hypochlorite for zero, one, five, thirty, or sixty minutes. After immersion, files were subjected to cyclic fatigue testing. Time to fracture was recorded and analyzed by a two-way ANOVA. Tukey's Honest Significant Difference (HSD) was used to identify any differences in immersion times. Within all ProFile groups and partial immersion K3 groups, there was no significant decrease in time to fracture with increased immersion time in sodium hypochlorite. Only the K3 total immersion groups revealed a significant decrease in time to fracture with increased immersion time in sodium hypochlorite.

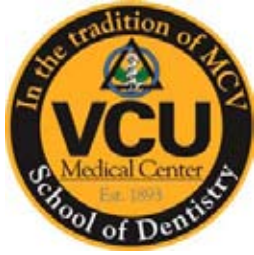
## An *In Vitro* Leakage and Viscosity Analysis of Root End Filling Materials

Paul Clark, DDS, MSD

**Abstract** of a thesis submitted in partial fulfillment of requirements for the degree of Master of Science in Dentistry at Virginia Commonwealth University, June 2007.

The purpose of this study was to determine if the viscosity of MTA Angelus Fluid is lower than that of Pro Root MTA and MTA Angelus, and to compare the viscosity, leakage and particle size of these materials to determine whether a relationship exists between these properties. The viscosity of each material was measured and compared with the Student's t test. MTA Angelus Fluid's viscosity was significantly lower than the other two materials tested. Microleakage of root end fillings was assessed in a passive diffusion model. Leakage groups were compared with a one-way ANOVA ( $p < 0.05$ ). No significant difference was found. Particle size and shape were evaluated with the SEM. MTA Angelus Fluid has a lower viscosity than the other materials tested. There was no significant difference in the sealing ability of the three materials tested and there was no apparent variation in each material's particle size or shape.

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## **Tidewater Dental Association**

\*Dr. Glenn Familant received his DDS from Howard University. He then received his AEGD Certificate from the University of Florida in 2001.

He is currently practicing in Norfolk, VA, with Drs. Lefcoe, Weinstein, Sachs, and Schiff

\*Dr. Kimbrough Hornsby graduated from Emory School of Dentistry in 1984. He is currently practicing in Norfolk, VA, with Drs. Lefcoe, Weinstein, Sachs, and Schiff.

\*Dr. Clara Llodra graduated from the University of Florida in 1985. She then attended National Naval Dental School and received her Certificate in Comprehensive Dentistry in June 2000. Dr. Llodra is currently practicing in Norfolk, VA, with Drs. Lefcoe, Weinstein, Sachs, and Schiff.

\*Dr. Barry Barger graduated from the University of Louisville School of Dentistry in 2006. He is currently practicing in Norfolk, VA, with Drs. Lefcoe, Weinstein, Sachs, and Schiff.

## **Peninsula Dental Society**

\*Dr. Kristin Mastros graduated from VCU School of Dentistry in May, 2006. She then completed her GPR from VAMC in Hampton, VA, in 2007. Dr. Mastros is practicing with Dr. Thomas Witty in Newport News, VA.

\*Dr. Ariel Wartofsky graduated from University of Southern California in 2002. He then received his AEGD Certificate in 2006 from US Army, Ft. Bragg, NC. Dr. Wartofsky will be practicing in the Peninsula area.

\*Dr. Bryan Geary graduated from VCU School of Dentistry in 2007. Dr. Geary is currently practicing in Yorktown, VA.

## **Southside Dental Society**

\*Dr. Kendall Morris graduated from VCU School of Dentistry in 2006. Dr. Morris is currently practicing in South Hill, VA.

## **Richmond Dental Society**

\*Dr. Ashley Peat graduated from the University of Kentucky College of Dentistry in 2007. Dr. Peat is currently practicing at Commonwealth Dentistry in Colonial Heights, VA.

\*Dr. Allison Robeson graduated from VCU School of Dentistry in 2007. Dr. Robeson is currently practicing dentistry in Richmond VA.

\*Dr. Kevin Kelleher graduated from the Medical University of South Carolina in 2005. He then attended the Medical College of Virginia where he received his Certificate in Orthodontics, MSD, in 2007. Dr. Kelleher is currently practicing with Dr. Richard Byrd in Richmond, VA.

\*Dr. Erika Sachno graduated from Virginia Commonwealth University in 2002. She then completed her AEGD at Naval Education & Training Center Great Lakes in 2003. Dr. Sachno currently practices with MCV/VCU Dental Faculty Practice Association.

## **Piedmont Dental Society**

\*Dr. Curtis Pressley graduated from the Medical University of South Carolina in 2007. Dr. Pressley is currently practicing in Vinton, VA.

\*Dr. Michele Mills graduated from the Medical University of SC in 2001. She then completed her AEGD at the Naval Dental Center in Norfolk in 2002. Dr. Mills currently practices in Salem Virginia.

\*Dr. Travis Shannon graduated from the Medical University of SC in 2001. Dr. Shannon received his AEGD Certificate from the Naval Dental Center in Norfolk, VA, in 2002. Dr. Shannon is currently practicing in Roanoke, VA.

## **Southwest Virginia Dental Society**

\*Dr. Glen Catron graduated from University of Louisville in 1988. Dr. Catron currently practices in Tazewell Virginia.

## **Shenandoah Valley Dental Association**

\*Dr. Siobhan Stephen graduated from the University of Connecticut in 1994. She then completed her training as an Oral Surgeon from Massachusetts General Hospital. Dr. Stephen is currently practicing with Central Virginia & Facial Surgeons, PLC, in Charlottesville, VA.

\*Dr. Matthew Cline received his DDS from the University of Maryland in 2005. Dr. Cline then received his GPR at the University of VA Hospital in 2007. He is

currently practicing with Clarke & Farmer, DDS, in Charlottesville, VA .

\*Dr. Joel Smith graduated from University of Nebraska in 2003. Dr. Smith is currently practicing dentistry in Lexington, VA..

\*Dr. Kent Archibald graduated from the University of Minnesota in 2007. Dr. Archibald is currently practicing general dentistry in Charlottesville, VA, with Dr. Kenneth Rasmussen.

\*Dr. Benjamin Tolley graduated from Virginia Commonwealth University in 2006. Dr. Tolley is currently practicing dentistry in Winchester, VA.

\*Dr. Terry Butterfield graduated from VCU School of Dentistry in 2004. Dr. Butterfield is currently practicing in Winchester, VA, with Dr. Robert Hall.

### **Northern Virginia Dental Society**

\*Dr. Lucas Thompson graduated from University of Kentucky in 2005. Dr. Lucas then received his Certificate in 2006 after completing the Bolling AFB AEGD 1 Program. Dr. Thompson currently practices in Vienna, VA, with Marzin Alayssami and Associates, PC.

\*Dr. Cristina Swanson graduated from Howard University in 2004. Dr. Swanson is currently practicing dentistry in Manassas, VA.

\*Dr. Ryan Bailey graduated from the University of Iowa in 1999. He then attended the University of Maryland where he received his Oral Surgery Certificate and MD in 2005. Dr. Bailey is currently practicing in Fredericksburg, VA.

\*Dr. Olan Parr graduated from the Medical College of Virginia in 1980. Dr. Parr then completed a US Army 2 year AEGD program in 1987. Dr. Parr is currently practicing in Culpeper, VA.

\*Dr. Michael Pichardo graduated from UTHSCSA in 1997. He then attended the Keeshler Medical Center in 2005, where he received his Certificate in Endodontics. Dr. Pichardo currently practices in Falls Church, VA, with Levine, Leff, and Pollock.

\*Dr. Sandra Glikman graduated from the National University of Tucuman in 1995. Dr. Glikman then completed her AEGD from Berkshire Medical Center in 2006. Dr. Glikman is currently practicing in the Northern VA area.

\*Dr. Bhavani Parvathaneni graduated from NYU College of Dentistry in 2006. Dr. Parvathaneni is currently practicing in Reston, VA, at Oakite Dental Mobile Practice #7.

\*Dr. Jose Loza graduated from the University of Maryland in 2001 after completing his AEGD. Dr. Loza is currently practicing in Great Falls, VA.

\*Dr. Cindy Knotts graduated from West Virginia University in 2007. Dr. Knotts is currently practicing with Dr. Kirk Norbo, in Purcellville, VA.

\*Dr. Brian Feeney graduated from the University of Pittsburgh in 1998. He then received his Certificate in Periodontics from the University of Maryland in 2001. Dr. Feeney is currently practicing in McLean, VA.

\*Dr. Ginette Morneau received her DDS from Universite de Montreal in 1997. She then attended University of Maryland where she received her AEGD in 2004. Dr. Morneau will be practicing in the Northern VA area.

\*Dr. Brian Peyser graduated from University of Maryland in 2007. Dr. Peyser is currently practicing in Falls Church, VA, with Dr. Richard A. Peyser.

\*Dr. Andrew Shannon graduated from Tufts Dental School in 2005. Dr. Shannon then attended Lutheran Medical Center in Brooklyn, NY, where he received his certificate in Pediatric Dentistry. Dr. Shannon is currently practicing dentistry in McLean, VA, with Drs. Michael and Chris Ternisky.

\*Dr. Raja Gupta graduated from University of Maryland in 2005. Dr. Gupta then received his GPR in 2006 from Philadelphia VAMC. He currently practices in Fredericksburg Virginia.

\*Dr. Jae Kwon Bok graduated from Loma Linda University in 2005. He comes to us from the Illinois State Dental Society and is now practicing in Annandale Virginia.

\*Dr. Shehzad Sheikh graduated from Tufts in 2005. He then received his GPR at Columbia University in 2006. Dr. Sheikh currently practices in Sterling, Virginia.

\*Dr. Sang Lee graduated from VCU School of Dentistry in 2005. He then attended UNLV and received his certificate in Orthodontics. Dr. Lee currently practices in Springfield, VA.

\*Dr. Jazriel Cruz graduated from the University of Iberoamericana in 2003. He then attended Jackson Memorial Hospital/ University of Miami and received his GPR in 2007. Dr. Cruz currently practices with Neibauer Dental Care in Culpeper, Virginia.

\*Dr. Tamesha Morris graduated from VCU School of Dentistry in 2003. Dr. Morris then received her GPR from St. Barnabus Hospital , NY, in 2004. Dr. Morris is currently practicing dentistry in Fredericksburg Virginia.

\*Dr. Jaklin Bezik graduated from Tehran University in 1990. She then attended the University of Pittsburgh where she received her certificate in Periodontics. Dr. Bezik currently practices as a periodontist in Fairfax Virginia.

\*Dr. Loc Nguyen graduated from the VCU School of Dentistry in 1984. Dr. Nguyen then joined the VA Public Health Dept and worked there until 2000. Dr. Nguyen is currently in private general practice in Sterling, VA. She and her husband reside in McLean with their three children.

In Fall 2007, the VDA mailed out a laminated reference card to all practicing members offices describing Dental Direct Reimbursement and Assignment and what your office should do if a patient says they have a Dental Direct plan in place. Overwhelmingly the response was that many offices had never heard of Dental Direct Reimbursement and Assignment! Below please find some frequently asked questions about Dental Direct that will help you and your office better understand these dental benefits:

**Q: Are Dental Direct Reimbursement and Assignment insurance plans?**

A: No, Dental Direct Reimbursement and Assignment are simple reimbursement based dental benefits, not dental insurance.

**Q: Why do the VDA and ADA support Direct Reimbursement and Direct Assignment?**

A: DR and DA plans support fee-for-service dentistry and maintain the dentist-patient relationship. The VDA has been working since 1996 to promote Dental Direct and the ADA has been supporting these types of plans since 1986.

**Q: Do I have to join a network or sign a contract to be a provider for Dental Direct Reimbursement (DR) and Assignment (DA) Plans?**

A: There is no network for these types of plans as they are fee-for-service. You may currently have patients who have a DR plan in place but you might not be aware as they simply pay at the time of service.

**Q: What is the fee schedule for DR/DA plans?**

A: There are no fee schedules with DR and DA. Simply bill the patient your price for services and they will pay at the time of service or your office will be reimbursed by the third party administrator (TPA).

**Q: I have a patient whose company is interested in finding out more about DR/DA, what should I do?**

A: You can refer them to call Elise Rupinski at the VDA (800-552-3886), C.P. Coyner at Benefits Administration, Inc. (888-379-2218) or you can refer them to the VDA website ([www.vadental.org](http://www.vadental.org)) or the ADA website ([www.ada.org](http://www.ada.org)) to find out more about DR/DA and to submit a cost estimate form. Please remember that Dental Direct plans are for groups, not individuals.

**Q: Are there any resources available for my office to promote DR/DA?**

A: Yes! The VDA and ADA both have free resources available to dental offices to promote DR. For the VDA please contact Elise at 800-552-3886 and for the ADA please call the Dental Benefits Information Service at 800-621-8099 ext. 2746 and ask about free resources for your office.

**Q: Are there employers in Virginia who are using Dental Direct right now?**

A: Yes! There are over 7,000 people covered under DR and DA Plans in Virginia. A number of employers in Virginia have these plans in place including public schools, manufacturers and retail. A comprehensive list of employers using Dental Direct in Virginia is not available at this time.

If you or your office has any additional question about Dental Direct Reimbursement and Assignment, please contact Elise at the VDA at 800-552-3886.

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# The Blessings of Dentistry

By William T. Griffin, DDS

## Guest Editorial

Every so often a patient will ask me, "So how do you like being a dentist?" Sometimes the question comes out in a less objective format, such as, "How could anyone spend their life looking at teeth all day?" There's never enough time to truly do the question justice, so my response is chosen from all the possibilities that compete in my brain for air time. Possible responses that I've managed to stifle up to now include, "It's not the teeth that bother me, it's the people they're connected to," and "It wouldn't be so bad if folks like you would brush once in a while." I'm still holding back...

So how do you like being a dentist? The fast-approaching 25th anniversary of my dental career has inspired me to contemplate both the challenges and the rewards of our profession. I'll begin by saying that I truly enjoy dentistry a large majority of the time, and do not find myself consciously yearning for the day when I can hang up my handpiece for good. Of course there have been frustrations along the way – the patients who wouldn't get numb, the treatment that didn't come out like I had hoped – but to a great extent the blessings have outnumbered the drawbacks.

Following are some of the blessings for which I am most appreciative, with the hope that others in dentistry will be able to identify with at least a few of them:

1. **Camaraderie with Team Members** – in the midst of the uniquely grueling challenges of a dental practice, it is imperative that team members – dentists, assistants, receptionists, and hygienists – pull together as a team in order to deal with the physical and emotional battles that typify our profession. There's a certain admiration and mutual respect that develops with those with whom you go through challenging times, not unlike that which develops in the military or on sports teams. My appreciation for those with whom I work increases with each difficult procedure and each passing year.
2. **Making New Friends** – Dentistry is a great opportunity to meet new people on a regular basis. Of course not all of my patients have become friends, but the opportunity to see people at least a few times a year means that over the years precious relationships will develop. Oddly enough, sometimes the most difficult treatment renders the most valuable relationships. Go figure.
3. **Mental and Physical Labor** – In dentistry we get to work with our hands AND our heads. This is in contrast to many other professions which emphasize one at the expense of the other. The necessary blend of part scientist and part artist can keep things interesting long after other careers might have become dull and boring.
4. **The Amazing Human Body** – It's such a privilege to be able to see up close and personal what an amazing creation we humans are. Next time you're doing an exam, take note of how teeth 6-11 and 22-27 are designed to bite into things, and how the shape of the posteriors enables them to take it from there. Consider how all the muscles of the jaw are designed to work in perfect harmony to enable our TMJ to open and close our jaw. Realize how fortunate it is that the enamel is on the outside, the pulp is on the inside, and the dentin is in between. When I began my practice of dentistry, I was an evolutionist, but in the last 25 years I've seen too much evidence to the contrary. It's just not possible that the beautiful, purposeful design we see and work with every day was brought about through millions of years of mere reproductive advantage. There had to be a Creator, a very loving Creator.
5. **Benevolent Care** – We have been given the skills necessary to alleviate dental pain experienced by so many around the world, through procedures that are usually pretty simple for an experienced dentist. Of course, you don't need a passport to find poor people in need of dental care. However, traveling to other countries to give your services away will likely change your definition of "poor," and could also increase appreciation for all that we have in this country.
6. **Socio-Economic Opportunities** – With average incomes significantly above the norm in the richest country in the world, we are afforded many opportunities that most people will never have. We can choose to visit remote parts of the world, send our children to expensive colleges, enjoy gourmet foods beyond what kings of prior ages could have imagined. We can also choose to contribute to causes near and dear to our hearts, in ways that can bless those less fortunate than ourselves. If we see giving to others as a privilege, an opportunity, rather than a burden, then we will probably do more of it.

It is my hope that the blessings listed above will resonate with many of you, and that they will increase your enjoyment of the wonderful profession to which we have been called.

Dr. Griffin is in private practice in Newport News, VA. He may be reached through his web site at [www.dentalcare4u.com](http://www.dentalcare4u.com).

This article previously appeared in the Peninsula Dental Society newsletter

## Virginia State Board of Dentistry Requirement

“... A DENTIST WHO ADMINISTERS OR A DENTAL HYGIENIST WHO MONITORS PATIENTS UNDER GENERAL ANESTHESIA, DEEP SEDATION OR CONSCIOUS SEDATION SHALL COMPLETE FOUR HOURS EVERY TWO YEARS OF APPROVED CONTINUING EDUCATION DIRECTLY RELATED TO ADMINISTRATION OR MONITORING OF SUCH ANESTHESIA OR SEDATION...”

### The Virginia Association of Dentists for Intravenous Sedation

Proudly Presents:

## “Conscious Sedation and Adverse Drug Reactions”

Hillel Ephros, DMD, MD

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Hillel Ephros, DMD, MD is a graduate of the University of Pennsylvania School of Dental Medicine and St. George's University School of Medicine. He completed his residency in general dentistry at St. Joseph's Hospital and Medical Center in Paterson, NJ and got his oral and maxillofacial surgery training at the VA Medical Center in East Orange, NJ. Dr. Ephros currently directs St. Joseph's residency training program in oral and maxillofacial surgery. It is one of only two in the State of New Jersey and is affiliated with Seton Hall University. He also chairs the Department of Dentistry at St. Joseph's and Seton Hall and is the medical director of the Regional Craniofacial Center at the Children's Hospital at St. Joseph's. He was named to New Jersey Monthly's list of "Top Dentists" for 2005 and to "America's Best Dentists" (Woodward-White, 2004-5). In April, 2005, he also received the Sergio Award from Healing the Children, an organization dedicated to the care of children with complex medical needs locally and around the world. Among the most cherished of his recent honors is the 2003 Archbishop John J. Meyers Outstanding Educator Award from Seton Hall University School of Graduate Medical Education. Dr. Ephros served as Chairman of the Oral Cancer Consortium in 2003-4 and is on the Board of Trustees of Medical Missions for Children / Global Telemedicine and Teaching Network. In addition, since 2003, he has served on the examination committee of the American Board of Oral and Maxillofacial Surgery

### Registration Information

**Date:** Saturday, April 19, 2008  
**Time:** 8:00 a.m. Registration  
8:30 a.m.-12:30 p.m. Lecture  
**Location:** Fredericksburg, Virginia  
Site TBA  
**Fee:** \$295 (non-members)

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### Also available in April:

## “Advanced Resuscitation Techniques”

Harvey Allen, DDS, MSD

This four hour hands-on/lecture is designed with the dentist in mind. Training includes airway management and cardiac resuscitation. You will learn to recognize problems before they occur and be prepared when they do. The Virginia State Board of Dentistry requires those dentists who use conscious sedation to have advanced resuscitation training every two years.

Class sizes limited to no more than 20. Fee of \$250 per participant. Two dates available: Saturday, April 5, 2008 and again on April 12, 2008, from 9:00 a.m. to 1:00 p.m. Both to be held at 242 Butler Rd., Fredericksburg, Virginia

# Not Just About Money?

*Ken Jones, DDS, JD – Guest Columnist*

*Reprinted by permission of “ODA Today” (Ohio Dental Association)*

That’s the question. What’s the answer? You decide.

Last week I heard a young dentist address a group of first year dental students about organized dentistry. She was late getting to the class, and apologized, explaining how she had been covering for two other dentists and needed to see a couple of emergencies, as well as meeting with her own new patient. She told of her interactions with all these folks, the hand holding and reassurances that had been necessary with them.

Then she blew me away with her final statement before she discussed organized dentistry and all its advantages.

“It’s not just about money, you know,” she said.

Later, we talked a while, and she explained her off-the-cuff remark, saying, “I just thought they needed to hear that before they go any further in their education.”

Later, I followed up with some comments of my own, but I couldn’t come close to the impact she should have had with the students. I say “should,” because too many of the ones I watched just rolled their eyes in disbelief and disagreement as she spoke. That night, on the way home, I started thinking; what is it all about these days?

Today I received an article entitled “Concierge Dentistry.” Dr. Cameron Jayson of the Minnesota Dental Association writes that some physicians are offering 24/7 access, no-waiting, same-day appointments, house calls and other “value-added” services, all for a fee.

I asked a friend if he had ever heard of this concept, and he told me that his own physician now offered it – for a thousand dollar annual fee. (He declined to participate.) Such a deal! (But, it’s not just about money.)

Jayson argues that dentists already practice this way. He states (and I agree) that “the notion that ...dentists treat all patients the same is patently false.” For example, “patients who wish to pay more for veneers or crowns are rarely turned down by their dentists on...principle.” (Like, maybe even if they don’t need them? But, it’s not just about money.)

Another money-maker came to light when a patient complained that his former dentist had him return every three months to “check the bacteria level” in the sulci and the perio pockets (for a fee), and then, at the same appointment, used his laser to kill the bugs. (For another fee, but, remember, it’s not just about money.) If his oral condition was that bad (and it was) how about a referral to a periodontist?

How about the clinic that submits and collects the insurance money, then collects the money from the CareCredit loan, all before any treatment is started, and then delays the patient’s dental care for months? (But, it’s not just about money.)

Have you seen an ad for any dental product, service or procedure that says it’s so great and inexpensive and easy to use that you can lower your fee? Of course not. Anyway, that’s just more for the dentist’s bottom line, right? (But, it’s not just about money.)

How many of your patients have done internet searches for “wealthy” or “rich” and “dentist.” How often do we get e-mails from sites like theWealthyDentist.com? And it’s a shame we can’t leave dental journals in our waiting rooms any more, since they all seem to tout the newest “profit center” to increase our income.

How many of you have, by your own example, shown your kids that dentistry is a good profession, and generally, a lucrative one? How many have shown them that it’s at least equally important to respect your patients, to commit to them or to be honest with them?

In other words how many have shown your kids, your friends’ kids and maybe even your patient who wants to be a dentist some day, that it’s about professionalism, integrity, ethics and obligation?

How many of you have shown anyone at all that it’s not just about money – or is it? That’s the question. What’s your answer?



# NEWS YOU CAN USE!

## ADA Outlines Successful Environmental Efforts

CHICAGO, Nov. 14, 2007 --Through the implementation of its best management practices (BMPs), the American Dental Association is taking the lead on protecting the environment, the ADA told Congress today.

"The ADA actively promotes its BMPs, which have had a very positive impact," said J. Rodway Mackert, D.M.D., Ph.D., an ADA spokesperson testifying before the House Oversight and Government Reform Committee's domestic policy panel. "As one example, we have virtually eliminated the use of bulk mercury in dentistry. Dentists now use encapsulated amalgam, capsules containing a small amount of elemental mercury and the powdered metals with which it is mixed."

The Association's BMPs have contributed to a significant reduction in the amount of dental amalgam that enters the waste stream. The ADA has recently taken the further step of adding the installation of amalgam separators to its list of BMPs.

"I am proud that the ADA and the nation's dentists are taking these steps voluntarily," Dr. Mackert said. "We are working to protect the environment by educating our members, encouraging recycling and promoting highly effective best management practices."

## ADA Professional Product Review

Reprinted from: Electric handpiece systems. ADA Professional Product Review 2007;2(1):6.

### Severe Burns Associated with Inadequate Maintenance

The U.S. Food & Drug Administration has received reports of severe burns caused by pneumatic and electric micromotor handpieces. In a majority of cases, burns were caused by overheating of various handpiece components. In these events, overheating was due to failure to service and maintain the handpieces in accordance with the manufacturer's recommendations.

"While any handpiece can overheat," says Dr. Janie Fuller, an analyst in the device surveillance office at FDA, "it appears that when electric handpiece systems aren't well-maintained, the handpiece head can overheat very rapidly. The overheating can cause third degree burns before the user realizes there's a problem."

Dr. Fuller emphasizes that electric handpieces are reported to become dangerously hot in a matter of seconds, without any warning to the user.

"Air-driven handpieces begin to feel and sound differently when the gears are worn or they need maintenance," explains Dr. Fuller, "but electric handpieces don't bog down like air-driven handpieces. Instead, the electric micromotor sends more power to the worn gears and friction in the gears and/or the bearing assemblies transfers into heat."

Among the incidents FDA has investigated to date, the users had not followed the handpiece manufacturer's recommended maintenance schedule. Additional data that the FDA has obtained from manufacturers' representatives suggest that similar overheating can result from improper use conditions (for example, running the 1:5 handpiece as a "low-speed" instead of switching to a prophylaxis attachment). "We are studying the issue and may provide some additional guidance to users in the future," says Dr. Fuller. For now, to reduce the risk of burns, FDA urges you to strictly adhere to the manufacturer's instructions for use, maintenance, servicing and lubrication.

If you experience overheating of an electric handpiece, or have any other adverse experience with any dental equipment or material, contact the FDA's MedWatch program. Information about MedWatch is available online ([www.fda.gov/medwatch/how](http://www.fda.gov/medwatch/how)) or by phone (1-800-FDA-1088).

Document posted

## 2008 Registration for Noted ADA/Kellogg Executive Management Program for Dentists Announced

CHICAGO, Nov. 26, 2007 – The American Dental Association (ADA) and Northwestern University's Kellogg School of Management, announce that registration is open for the 2008 session of the noted "ADA/Kellogg Executive Management Program" for dentists. Now in its fourth consecutive year, the executive program is designed for dentists wanting to learn more about business management from one of the nation's top-rated management schools.

"It takes business training for dentists to another level, exposing them to the many dynamics involved in effectively managing an organization in the 21st century," explains James B. Bramson, DDS, ADA executive director.

### Based on core MBA curriculum

The program's content is based on the core curriculum of matriculating Kellogg MBA students, including business strategy, organizational leadership, marketing, finance, accounting, economics, quantitative methods and information systems.

Consisting of three sessions separated by seven-week intervals, the executive management program is conducted at Northwestern University's Chicago campus. The 2008 sessions are set for July 11-16, September 12-17 and November 6-10.

### May 31, 2008 registration deadline

Application materials and program details are available for viewing and downloading at <https://www.ada.org/goto/kellogg> or by contacting Connie Paslaski, 312-440-3541, [paslaskic@ada.org](mailto:paslaskic@ada.org). Registrations will be accepted on a first-come, first-served basis. Class size is limited to 45. Deadline for registering is May 31, 2008.

## Extension Granted for Medicaid Prescription Rules

An extension has been given to Medicaid providers for complying with new regulations requiring tamper-resistant prescription pads. The American Dental Association had asked for a delay in the requirements, citing the short notice given by Congress. Previously all Medicaid providers were required to use these pads by October 1, 2007. The new deadline is April 1, 2008. The text of the order, printed below, is taken from the website for the Centers for Medicare & Medicaid Services ([www.cms.gov](http://www.cms.gov)).

Update: On September 29, 2007, President Bush signed the "Extenders Law", delaying the implementation date for all paper Medicaid prescriptions to be written on tamper-resistant paper. Under the new law, as of April 1, 2008, all written Medicaid prescriptions must be on tamper-resistant prescription pads.

CMS' guidance on the tamper-resistant law, set forth in an August 17, 2007 State Medicaid Director letter, contains two phases. For the first, a prescription must contain at least one of the three tamper-resistant characteristics in order to be considered "tamper-resistant". For the second, prescriptions must contain all three characteristics.

The two-phased approach is still in effect. At least one of the three tamper-resistant characteristics is required on April 1, 2008. All three characteristics are required on October 1, 2008.

# Waste Recyclers and Disposal Services

## An update to “The Environmentally Responsible Dental Office”



The Infection Control and Environmental Safety Committee of the VDA has conducted a review of vendors listed in the publication above, first sent to VDA members in 2005. (For proper handling and disposal of dental office wastes, refer to section 3 of the manual.) Every attempt was made to verify the information below, but accuracy cannot be guaranteed. In addition, the listing of a vendor or recycler does not constitute endorsement by the VDA, VDA Services, or the committee. This data is for information only, presented as a service to members of the VDA.

<u>Company</u>	<u>Website</u>	<u>Services</u>
Healthcare Compliance Service 888-726-8505	<a href="http://www.hcstoday.com">www.hcstoday.com</a>	amalgam, Hg, Pb, Ag , RMW
Dental Recycling North America 800-360-1001	<a href="http://www.drna.com">www.drna.com</a>	amalgam, Hg, Pb, Ag,
Enviro Medical Waste, Inc. 866-6699201	<a href="http://www.enviromedicalwaste.com">www.enviromedicalwaste.com</a>	amalgam, Pb, RMW
AERC Recycling Solutions 804-798-9295	<a href="http://www.aerc-mti.com">www.aerc-mti.com</a>	amalgam, Hg
Heritage Environmental Services 888-437-4224	<a href="http://www.heritage-enviro.com">www.heritage-enviro.com</a>	amalgam, Pb
Maguire & Strickland Refining, Inc. 800-486-2858	<a href="http://www.maguireref.com">www.maguireref.com</a>	amalgam, Pb
SolmeteX, Inc. 800-216-5505	<a href="http://www.solmetex.com">www.solmetex.com</a>	amalgam, Hg
Stericycle 866-783-7422	<a href="http://www.stericyle.com">www.stericyle.com</a>	RMW
Commodity Resource & Environmental 800-943-2811	<a href="http://www.creweb.com">www.creweb.com</a>	Ag
Virginia Hospital & Healthcare Assn. 800-808-1177	<a href="http://www.vhhaservices.com">www.vhhaservices.com</a>	RMW
Safety-Kleen 800-669-5740	<a href="http://www.safety-kleen.com">www.safety-kleen.com</a>	Ag
Sci-Med Waste Systems, Inc. 800-662-0088	<a href="http://www.vhhaservices.com">www.vhhaservices.com</a>	RMW
Mercury Waste Solutions 800-741-3343	<a href="http://www.mwsi.com">www.mwsi.com</a>	amalgam, Hg
Veolia Environmental Services 540-829-8010	<a href="http://www.veoliaes.com">www.veoliaes.com</a>	amalgam, Hg
Rotex Silver Recovery 937-322-0198	<a href="http://www.rotexsilver.com">www.rotexsilver.com</a>	Ag
Medtrace, Inc. 410-620-2202	<a href="http://www.medtrace.com">www.medtrace.com</a>	amalgam, RMW
Petrochem Recovery Service 757-627-8791	<a href="http://www.petrochemrecovery.com">www.petrochemrecovery.com</a>	Hg

**Abbreviations:** Hg = bulk mercury recycling; Ag = X-ray fixer disposal; Pb = lead foil disposal; RMW = regulated medical waste; amalgam = recycling of waste amalgam

# Component News

Component II  
Peninsula



## Component 2

Dr. Ben T. Steele, Editor

Greetings from the Peninsula! Dr. Les Davenport takes over the helm as president of the PDS. He has been instrumental in planning informative and productive meetings and CE events. The September general membership meeting was conducted by Dr. Jim Rapson. He graciously returned to the PDS to share some important information in his presentation entitled, "Analgesic Management of Chronic Pain." In addition, Dr. John Tullner highlighted pertinent information that every dental office needs to know in his half day OSHA update course. During the November general membership meeting, our very own Dr. Ron Tankersley discussed the major changes and challenges that are surfacing in the dental profession. At this same meeting, VDA President Dr. Gus Vlahos and VDA President Elect Dr. Ralph Howell visited Component II.

We are eagerly anticipating the upcoming events beginning in 2008. In January, Dr. Karen McAndrew will be sharing her vast knowledge on implants in her seminar entitled "Treating Implants." Furthermore, PDS members will get an opportunity to earn some CE by attending an all day course presented by Dr. George Priest. It will cover topics concerning outcomes of implants in young patients and enhancing the smile line with crowns, veneers, and implants. Moreover, our members are preparing to volunteer for Give Kids A Smile (GKAS) and the MOM Project.

It is with great pleasure to highlight that our esteemed colleague Dr. Ron Tankersley is running for ADA President! Component II will strongly support his campaign efforts in every way possible. We know that he would do a fantastic job serving in this capacity; dentistry needs his vision and passion. We ask that all members of the VDA make every effort to support Dr. Tankersley as he embarks on this monumental endeavor.

We hope everyone has a great holiday season and a productive and prosperous year in 2008.

Component III  
Southside



## Component 3

Dr. Mike Hanley - Editor

Greetings from Southside! The air is biting cold and flurries are everywhere. Milk and bread are flying off the shelves. It must be winter in Chester.

It was very warm however, at our recent Mini-MOM in Petersburg. Paul Brinser and Sam Galstan somehow rounded up more volunteers than ever as we treated more than 130 patients: providing over \$50,000.00 in restorations, prophies, extractions, and x-rays. In spite of the spacious accommodations, we could have used even more room as we had that many volunteers ready to work. What a great service! State Senator Steve Martin (whom we supported for re-election) was there to see not only the tremendous need for dental services, but the generous, giving nature of those donating their Saturday representing our profession. Thanks again Paul and Sam.

Sam and Sharone are also working on another GKAS in February. Perhaps as you read this there is still time to get involved. I will report on our success next journal.

Just met Dr. Paul Hamilton, who has taken over the late Dr. Hensley's practice. Paul lives in Pungo (no, it's not a small country with grass huts, but rather a small town by the beach) and drives a very fuel-efficient vehicle to South Hill 2.5 days a week. Give him a call and urge him on. Welcome Paul!

ALSO-Dr Shannon Bowman has joined the practice of Dr. Kent Yandle in Prince George. Kent-don't even think you can now take time off to work on your already superior golf game!

Last night I attended the office warming party in the new building of Drs. Randy Ragsdale, Jay Slagle, & Scott Gerard. Talk about one stop shopping- Get your root canal and crown extension (perhaps your eventual implant) without leaving the building. If there is such a thing as Southside Dental glitterati, they were in attendance. Nice job guys.

And finally, I was listening to David Ellis telling a group of children the names of Santa's reindeer. He won't believe me, but it's NOT Vomit & Nixon.

See you at the first thaw. Mike

Component IV  
Richmond



## Component 4

Dr. Gregory Cole - Secretary

Happy Holidays from Component 4! We have had several successful meetings this fall, including a lecture from Dr. Dan Fischer of Ultradent. We will be having a Ski and Learn weekend Feb 8-10, 2008 at Wintergreen Resort. This event will consist of four CE speakers on Saturday morning, followed by skiing Saturday evening and Sunday. We will also have speakers from Dental Boot Camp on March 7, 2008 at the Holiday Inn Select. If you are interested in attending any of these programs, contact Linda Simon at (804) 323-5191. On February 1, 2008, our component will hold Give Kids A Smile Day. Anyone interested in volunteering can contact Dr. Roger Wood. We hope everyone has a safe and happy Holiday season and a Happy New Year!

Gregory Cole  
Secretary, Component 4



## Component 5

Dr. Gene Ayers, Editor

A Happy and Joyful New Year to all from our Piedmont Component!

We closed our calendar year with a great meeting at which we installed new president Dr. Jason Crist of Lynchburg and enjoyed an inspiring esthetic dentistry presentation by Dr. Ross Nash. The site was the superb Institute Learning Center in Danville, Virginia.

At the same meeting our component voted to purchase two portable chairs for ongoing M.O.M. projects at a cost of \$5000. We would like to challenge other components to consider similar support to the gratifying M.O.M. volunteer effort.

We hope many of you will join us April 11, 2008 in Lynchburg for our meeting featuring Dr. Patrick Wahl sharing practical tips to “Make Your Practice Twice as Good Monday Morning”.

Gene Ayers, editor



## Component 7

Dr. Jared Kleine - President-Elect

Greetings SVDA members:

Please mark your calendars for our **spring meeting**, which will be held **March 28, 2008**, at Blue Ridge Community College. Our speaker will be **Dr. Gregory Folse, a nationally recognized speaker, who will speak on “Dentistry for the Aging Population”**. We are seeing more and more elderly patients, with many having a good number of natural teeth. Dr. Folse will offer many suggestions to handle this emerging population, one that many of us will soon be a part of.

“How can the VDA/SVDA improve efforts to reach out to non-member dentists and build stronger relationships with VDA member dentists?” Every quantitative survey done and focus group held has confirmed that the overwhelming majority of non-member dentists are open to the idea of ADA

membership. There are two keys to unlock the membership door: building a personal relationship and demonstrating the value of membership (ADA Tripartite Grassroots Membership Initiative).

The ADA is the only umbrella organization to represent all dentists; yet membership among licensed dentists still struggles to reach even 75%. As one involved on the VDA membership committee, I’ve seen a strong focus on *selling* the merits of membership to non-members. The VDA/ADA have tried to achieve this goal by reinforcing the value(s) of organized dentistry to all dentists.

This effort has unfortunately netted the VDA/ADA very limited gains. As a result, I’ve been compelled to think on this issue from different angles. One angle is the belief that membership in the VDA is a privilege, an honor, something of a prestige. Not that we would exclude or limit membership, this would go against the mission of the VDA/ADA. Rather the association could truly become just that, an association of all dentists. This is the only way in which the VDA is exclusive—the fact that you must be a DENTIST. Let’s face it, there is no other reason for us to be associated with such an organization other than the fact that we have DDS/DMD following our name. Regardless of the merits of membership in other dental organizations, we could all benefit from an increased appreciation for what the VDA/ADA have done and are doing for all members, as well as non-members. I know I’m preaching to the *choir*, but I hope we’ll all feel a passion for the association that will move us to *sing* its praises to our fellow non-member dentist friends. We will all enjoy the greatest benefits of the association, when we first *associate*. I encourage all members of the SVDA to extend an invitation of involvement, membership, CE attendance, or any other VDA activity, to a non-member colleague, as an act of **sincere** friendship. We need each other, if we are to remain strong as an association, but more importantly, as a profession.



## Component 8

Dr. Chris Spagna - Publications Chair

We are pleased to announce that Dr. A. Garrett Gouldin was inducted as our new President at the NVDS Annual Business Meeting held on September 5, 2007.

Outgoing president W. Vincent Dougherty became the Chairman of the Board of Directors. Also at the meeting Dr. David A. Whiston was presented with the Life Time Achievement Award for his tireless dedication to the profession of dentistry.

The VDA Annual Business Meeting was held on September 8, 2007, and at the Awards Banquet, several members from our component were recognized. Dr. David Anderson received with Emmanuel Michaels Distinguished Dentist Award, Tom Wilson received the Community Service Award, Wendy Hicks received the Dental Team Member Award, and Cathy Griffanti received the Special Service Award.

We are very happy to report that we have exceeded the first year fundraising goal of \$15,000 for our Ellen S. Flanagan Memorial Fund by \$9000, collecting over \$24,000. This was due in large part to the success of our raffle and the generosity of our members.

Looking forward, we will be hosting our Legislative Brunch on December 9th at the Lee-Fendall House in Old Town, Alexandria. And our MOM Project is scheduled for March 14-15, 2008.

Finally, we’re very excited that our new NVDS website will soon be up and running. We’re hoping to be on the web by the new year - so check us out!

# Awards & Recognition



Elaine Pritchett Bowser, CDA, FADAA of Hampton, Virginia received her Fellowship in 2002 and completed her Mastership requirements in October 2006. She has worked with Dr. McKinley L. Price for eight years in Newport News, Virginia. Of her thirty-seven years as a dental assistant, she has maintained her certification (CDA) for twenty-seven years. Elaine's professional affiliations include lifetime membership in the American Dental Assistants Association since 1975, membership in the Peninsula Dental Assistants since 1975, the National Association of Dental Assistants since 1977, and Dental Assistants National Board since 1980. She is also past President of the Old Dominion Dental Assistants Society, the oldest African-American dental assistants' society in Virginia. Elaine volunteers for the VDA M.O.M. Project (since 2001) and the Peninsula Christian Free Clinic (since 2006). Further, Elaine educates students at Thomas Nelson Community College Workforce Development in Hampton, about Dental Anatomy & Physiology and Dental Terminology. In her free time, Elaine loves to sew and says that her inspiration comes from her two children: Tonya D. B. Byrd, B.S.M.E., MBA and Edward M. Bowser, B. Arch., M. in Dsn.



## Virginia Dentists Honored for Support of National Museum of Dentistry

BALTIMORE, MD (October 15, 2007) — The Dr. Samuel D. Harris National Museum of Dentistry honored members of its National Advisory Committee and state dental organization leadership at the ADA Annual Session in San Francisco in September. National Advisory Committee members work in their home states and districts to engage colleagues with NMD's mission to raise awareness of the importance of good oral health in overall health, and to secure support for NMD's educational programs and preservation efforts. Its members have leadership roles in important dental and oral health organizations, and their work is invaluable in raising the national level of awareness and support for NMD. Dentists from the state of Virginia contributed the highest dollar amount to NMD's Annual Fund during FY07. Pictured: Chair of the NMD Board of Visitors Mike Sudzina (l) and National Advisory Committee Chair Dr. Alan Singer (r), present a plaque honoring Virginia dentists to NAC member Dr. Bruce Hutchison.



The Free Clinic of the New River Valley's Dental Program held its first annual Halloween "Tooth-Tacular" on October 26th at its Christiansburg facility. Four volunteer dentists (Dr. William Armour, Dr. Charles French, Dr. Michael Bond and Dr. John Semones) provided extractions and fillings for 35 patients to help decrease the number of adults on the clinic's wait list. The Free Clinic held a similar event in July when 43 clients were provided long awaited dental services with the help of Dr. William Armour, Dr. Peter McDonald, Dr. Vaughn and Dr. Stephen McCuin.) The Free Clinic of the NRV is also fortunate to have several other steadfast volunteer dentists that treat the clinic's eligible patients once a month at the Clinic or in their own private offices. Our New River Valley community is so fortunate to have such a dedicated group of dental volunteers.



Commonwealth Dental Hygienist Society members Jo Lee Kenney, Eva Yarema, and Trudy Levitin presented Dr. Terry Dickinson with a donation of \$1,000 for the Mission of Mercy project. The Society is a statewide dental hygiene organization interested in MOM.

(Left to Right) Dr. Terry Dickinson, Jo Lee Kenney, Eva Yarema, Trudy Levitin



## Missions of Mercy to Receive Funding in Governor's Proposed Budget

Governor Timothy M. Kaine's proposed budget, released December 12, 2007, includes funding for Missions of Mercy projects. Attending the news conference was Dr. Terry Dickinson, VDA Executive Director and a member of the Governor's Health Reform Commission. The proposal also includes \$700,000 to be used by the Virginia Health Care Foundation for dental health projects. The Governor's Budget includes:

**"Support for the Virginia Dental Health Foundation's Mission of Mercy Project. The Virginia Dental Health Foundation is a nonprofit organization within the Virginia Dental Association. Funding of \$50,000 each year will be use to purchase dental equipment and supplies to provide dental services for Virginia's uninsured."**

In his news release, Governor Kaine noted that one in seven Virginians lack health insurance, despite Virginia's status as "one of the wealthiest states". The budget proposal also includes funding for other health care initiatives, such as preventive care for uninsured women.



Classified advertising rates are \$60 for up to 30 words. Additional words are .25 each. It will remain in the Journal for one issue unless renewed. All advertisements must be prepaid and cannot be accepted by phone. Faxed advertisements (804-261-1660) must include credit card information. Checks should be payable to the Virginia Dental Association. The closing date for all copy will be the 1st of December, March, June, and September. After the deadline closes, the Journal cannot cancel previously ordered ads. The deadline is firm. As a membership service, ads are restricted to VDA and ADA members unless employment or continuing education related. Advertising copy must be typewritten in a Word document and either mailed (in the form of a disc) or emailed to the following address: Journal and Website Classified Department, Virginia Dental Association, 7525 Staples Mill Road, Richmond, VA 23228 or emailed to [jacobs@vadental.org](mailto:jacobs@vadental.org).

**The Virginia Dental Association reserves the right to edit copy or reject any classified ad and does not assume liability for the contents of classified advertising.**

## VIRGINIA DEPARTMENT OF HEALTH LOAN REPAYMENT PROGRAM

Are you looking for some help with your dental school loans? If you have a Virginia dental license and are within five years of graduation, you may be eligible to receive a loan repayment award. To qualify, you must practice in an underserved area or designated state facility and accept Medicaid. For further information, please contact Dr. Elizabeth Barrett at 804-864-7824 or [Elizabeth\\_barrett@vdh.virginia.gov](mailto:Elizabeth_barrett@vdh.virginia.gov).

## GENERAL DENTAL PRACTICE ASSOCIATE POSITION:

### POSITION AVAILABLE IMMEDIATELY

LOCATION: Yorktown, Va. - close proximity to Williamsburg, Newport News & Hampton.

General Dental Practice established in 1975, eight operatories, three hygienists and steady new patient numbers. Opportunity to be associated with a very nice practice environment. Professional building with orthodontist and periodontist in building. Practice does all phases of dentistry including hospital-based patients in an operating room setting. Great opportunity for practitioner who wants to be a part of a dynamic practice involved in more than the normal routine of dentistry. **Partnership opportunity available.**

Please contact: Dr. Michael W. Bowler, D.D.S  
office 757-365-4006 home

## ASSOCIATE DENTIST NEEDED IN BEDFORD, VA

Established practice in Bedford, VA is seeking a full time associate dentist to join staff. Will consider a part time associate as well. Ideal candidate would be a dentist that is comfortable performing extractions. Good chair side manner is a must. New Grads Welcome!! Right candidate can start NOW. This is an associate dentist position that could lead to practice ownership with NO personal financial investment on your part. To learn more contact Stuart Raney at 1-800-313-3863 ext. 2295 or email [stuart.raney@affordablecare.com](mailto:stuart.raney@affordablecare.com)

Associate/Partner  
Newport News, VA  
Position available in Summer 2008. Located at City Center in Newport News, the practice offers a wide range of procedures, including digital radiography, sedation treatment, CEREC restorations, implant placement and restoration, and cosmetic imaging. Office staff is friendly and compassionate. For more information, go to [www.dentalcare4u.com](http://www.dentalcare4u.com). E-mail resumes to [wgriffin14@cox.net](mailto:wgriffin14@cox.net).

PRACTICE FOR SALE: West Springfield, near Burke. Ultra modern digital. 3 ops pl for 4. Gross \$1.2 Million. High net. Restorative, cosmetic. Mostly fee for service. POLCARI ASSOCIATES, LTD (800)544-1297.

## Williamsburg, VA

Seeking caring Dentists to join our practice. Part-time or full-time. Large, well-established client-centered office looking for the right person who wants to be part of a team of true professionals. Our practice has a modern, progressive atmosphere with an outgoing multi-talented staff. Brand new state-of-the-art freestanding building/facility in a fast growing, upscale new town center. Paperless, digital, etc. Several levels of opportunities available from part-time associate to partner. Benefits can include student loan repayment plan. This is an opportunity of a lifetime in a wonderful community! Visit us at [www.newtowndentalarts.net](http://www.newtowndentalarts.net). If you are up for the challenge of a fantastic practice, contact us at [opportunities@newtowndentalarts.net](mailto:opportunities@newtowndentalarts.net) with CV and cover letter.

## JOB OPPORTUNITIES FOR ASSOCIATES

ALEXANDRIA AREA #8262  
NEWPORT NEWS #8459  
NORFOLK AND  
WILLIAMSBURG AREA #8434  
ROANOKE AREA #8073  
VIRGINIA BEACH #8460

For information on any of these associate opportunities, call Professional Practice Consultants, Ltd., Vikki Howard at 910-523-1439 or email [vikkolleman@ec.rr.com](mailto:vikkolleman@ec.rr.com).

## PRACTICES FOR SALE

DANVILLE #8400  
Gross \$567,807; 4.5 days  
3 operatories; 2200 sq. ft. office space  
assistant, office manager, receptionist  
Five additional plumbed but unequipped operatories.

FAIRFAX COUNTY PEDO DISTRESS SALE #8110  
Gross \$650,000; 6 days  
4 operatories; 1000 sq. ft. office space  
2 assistants, associate, office manager  
Office space is expandable into next suite. AR available for sale also.

PETERSBURG-FT. LEE AREA #8163  
Gross \$438,156; 4.5 days  
5 operatories; 2000 sq. ft. office space  
assistant, hygienist, office manager, receptionist  
Additional plumbed but unequipped operator.

SOUTH CENTRAL VIRGINIA #8270  
Gross \$787,081; 4.5 days  
4 operatories; 1770 sq. ft. office space  
assistant, 2 hygienists, office manager, receptionist

For information on any of these practice sales, call Professional Practice Consultants, Ltd., Dr. Jim Howard at 910-523-1430 or email [drjimhoward@ec.rr.com](mailto:drjimhoward@ec.rr.com).

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Virginia Beach, VA - Fast-paced family practice; all phases of comprehensive care. Relocating to new practice - 10 ops/4,100 sq. ft. Biolase; Air abrasion; Intraoral & digital cameras; Clinical computers; Digital X-rays. Seek associate for eventual ownership. Visit [www.transdent.com](http://www.transdent.com) or call Mercer Transitions at 1-800-588-0098.

PRACTICE FOR SALE:  
LOUDON COUNTY, most rapidly growing. Ultra modern, paperless, digital, 4 ops. Plumbed for 5, 2000 sq. ft. Shopping center. Great lease. All fee for service. Grossing \$700K. POLCARI ASSOCIATES, LTD (800)544-1297.

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