

# Bulletin



Winter 2010

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

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As the new decade has dawned, the Society's cup has runneth over with both challenges and opportunities as we move forward into the future. To address these in the best possible manner (and being mindful of our limited resources), the Board of Directors recently engaged in a strategic planning retreat using the services of an outside facilitator. By using all of the data collected from a facilitated



*Lindsey Robinson, DDS  
CSPD President*

board focus group, individual interviews with members, and an online survey of the membership, our board came to a consensus to focus on four priority areas: Operational Structure, Governance/Leadership, Advocacy, and Membership. The Society's Mission and Vision statements were also revised.

One of CSPD's most pressing issues is the

continuity and capacity of the leadership pipeline. Although it is the current charge of the Nominating Committee to compile the slate of directors and officers, it is incumbent upon our Society to develop a more effective and objective means to identify and select our leaders of the future. This conduit requires consistent nurturing to ensure that CSPD has a pool of members who are ready, willing, and trained to serve in leadership positions. The process should be institutionalized within the structure of governance. The board should reflect the composition of our members who are increasingly ethnically, demographically, and geographically diverse. Involvement in leadership requires a great commitment of time and energy. We need to be mindful not to waste the precious resources that our volunteers bring to the organization. The Annual Meeting was an important topic of discussion at our strategic planning retreat. The planning and execution of this event has become increasingly

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## Having Fun in the Sun!

**CSPD's 35th  
&  
WSPD's 8th  
Annual Meeting  
&  
Scientific Session  
Cancún, Mexico,**

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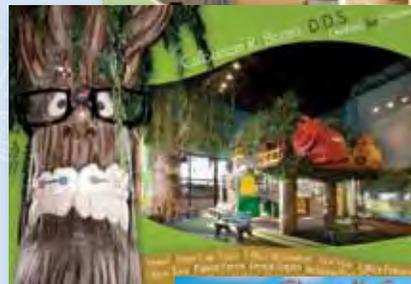
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Alex Alcaraz 2010  
Eddie So 2011

For a complete list of committee members  
visit the CSPD Website at [www.CSPD.org](http://www.CSPD.org)

California Society of Pediatric Dentistry

## BULLETIN

CSPD members are encouraged to contribute to the Bulletin. Articles, Letters to the Editor, or other items of interest are welcome. Items for publication may be submitted to Lonnie R. Lovingier, DDS by mail (26302 La Paz Rd #114, Mission Viejo, CA 92691) or Lrlov@aol.com).

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#### MISSION OF THE BULLETIN

The Bulletin of the California Society of Pediatric Dentistry shall be to examine and identify the issues that affect the specialty of Pediatric Dentistry and the oral health of teenagers and children. All of our readers should remain informed and participate in the formulation of public policy and personal leadership to advance the purposes of the Society. The Bulletin is not a political publication and does not knowingly promote the specific views at the expense of others. The views and opinions expressed in the Bulletin do not necessarily represent those of the California Society of Pediatric Dentistry.



# CSPD 35th Annual Session/WSPD 8th Annual Session



## Join Us in Cancun, Mexico, April 8-11, 2010

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Register on-line at: [www.cspd.org](http://www.cspd.org) (Look under "Calendar of Events")

**Early Registration has been extended to February 28, 2010!!!!**



**Cancun for Sea and Sun, Play and Learn, Discover, Have Fun!**

# Program At A Glance

## Speaker Highlights

### Friday, April 9, 2010

#### "The Caries Balance: Management by Risk Assessment"

**John Featherstone, PhD** is Dean of the School of Dentistry at the University of California, San Francisco (UCSF) and Professor of Preventive and Restorative Dental Sciences. His research over the past 35 years has covered several aspects of cariology including fluoride mechanisms of action, de- and remineralization of the teeth, apatite chemistry, salivary dysfunction, laser effects on dental hard tissues, caries prevention, microbiology of cariogenic bacteria, caries risk assessment and caries management. He has received numerous National and International awards, most recently the Norton Ross Award for excellence in clinical research from the American Dental Association. He has published over 200 papers.



#### "Infant and Perinatal Oral Health"

**Francisco J. Ramos-Gomez, DDS, MS, MPH** is a Full Professor in the Section of Pediatric Dentistry, at the University of California, Los Angeles; and Graduate Program Director for UCLA's Pediatric Community Health Advance Training (CHAT) program in Venice, California. He served as the Director of Pediatric Services at the Family Dental Center at San Francisco General Hospital and has pioneered protocols in early detection and prevention of Early Childhood Caries (ECC). Dr. Ramos-Gomez was awarded the specialty and an MS degree in Pediatric Dentistry from Tufts University School of Dentistry in 1988; he earned his M.P.H. in 1990 from the Harvard University School of Public Health, Department of Policy & Management. In 1992, he was certified in Dental Epidemiology and Dental Public Health from the University of California, San Francisco. Dr. Ramos-Gomez is a Diplomate of the American Board of Pediatric Dentistry and former member of the Executive Board of the American Association of Public Health Dentistry.



#### "Practice Management and Dental Technology"

**Debra Quarles:** "Creating a business is easy. creating a successful business takes effort. Creating an unforgettable business means taking advice from an unforgettable coach." Debra Quarles is just that: Unforgettable. What sets Debra apart from the crowd is her enthusiasm as well as her extensive knowledge of the dental field. She sees opportunities where others do not and embraces change while building momentum. She is a "change maker" and her innovative ideas and concepts create extraordinary results. Debra Quarles is a practice consultant who prefers to call herself a coach. She has worked with Innovative Practice Solutions, Inc. for more than twelve years and has helped hundreds of dental and medical professionals remember why they love their work.



#### New Dentists Program

This year's unique program for the new dentist highlights speakers who are in different stages of their professional careers. CSPD member dentists will speak about one of the special interests that help make them successful:

- Dr. Lisa Brennan: "Practice Transition"
- Dr. Gary Sabbadini: "How to Run an Efficient and Profitable Practice"
- Dr. Jeff Huston: "Get 'em in Early"
- Dr. David Kang: "High-Tech Dental Practice: Going Paperless"
- Dr. Neidre Banakus: "Sweat the Small Stuff: Hints and Tips for Opening a New Practice."

### Saturday, April 10, 2010

#### "From Glass Inomer to Resin Composite: Restorative" options for Children"

**Joel Berg, DDS, MS** is a Professor and the Lloyd and Kay Chapman Chair for Oral Health in the Department of Pediatric Dentistry at the University of Washington in Seattle, Washington. He is a Board Certified Pediatric Dentist, and is a Trustee of the American Academy of Pediatric Dentistry. Dr. Berg previously held positions as Vice President of Clinical Affairs at Philips Oral Healthcare from 2000-2003, head of the Scientific Department for ESPE Dental AG from 1998-2000, and Director of the Postgraduate/Residency Program in Pediatric Dentistry at the University of Texas, Houston from 1989 through 1995, where he conducted numerous clinical trials evaluating restorative materials. He is the author of a multitude of manuscripts, abstracts and book chapters regarding a variety of subjects, including restorative materials for children and other work related to biomaterials. His current research interests include the development of dental caries prevention programs using risk assessment models and early childhood oral health.



### Sunday, April 11, 2010

#### "Dental Trauma, Pulp Therapy, and MTA"

**Leif K. Bakland, DDS** is a 1963 graduate of the School of Dentistry, Loma Linda University in California. In 1971, after eight years of general practice, he entered the endodontic residency at Harvard School of Dental Medicine/Forsyth Dental Center in Boston, Massachusetts. Upon completion, he stayed on to teach before moving back to California in 1976 to join the endodontic faculty at Loma Linda. Dr. Bakland has been involved in education, research, and professional organizations for over 40 years. His research and publication interests include endodontics and dental traumatology. In 1994, he worked with Dr. Jens Andreassen in Copenhagen on a World Health Organization fellowship to investigate treatment of intrusive luxations. He is a member of the American Association of Endodontists, the American Board of Endodontics, the College of Diplomates of the American Board of Endodontics, and the International Association of Dental Traumatology. He is a co-editor of Traumatic Dental Injuries and Ingle's Endodontics and has written chapters in several textbooks on the subject of dental trauma. He has been an associate editor of the Journal of Endodontics and currently serves on the Editorial Board of Dental Traumatology and is also the Executive Director of the International Association of Dental Traumatology.



## Bills of Interest to CSPD California Legislature 2009-10 First Regular Session February 5, 2010



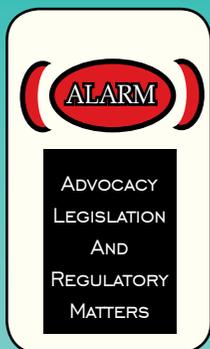
Paul Reggiardo, DDS  
Public Policy Advocate

CSPD follows a number of bills under consideration by the state legislature which may potentially impact pediatric oral health. This session began with one "carry-over" bill from the first session: AB 1524. February 19th marks the last day for bills to be introduced in either the Senate or Assembly for this session. Information on bills that CSPD will be monitoring, supporting or opposing may be found in the Advocacy, Legislation, and Regulatory Matters (ALARM) section of the CSPD website. Members having questions or wishing to comment on these or any other legislative initiatives are invited to contact CSPD's Public Policy Advocate, Dr. Paul Reggiardo, at [reggiardo@prodigy.net](mailto:reggiardo@prodigy.net).

### **AB 1524 (Hayashi) Dental Licensure By Hybrid Portfolio Pathway**

This bill would replace the clinical dental licensure examination administered by the Dental Board of California with an assessment process during enrollment at an in-state dental school. The Hybrid Portfolio Pathway (HPP) would utilize uniform standards of minimal clinical experiences and require a final assessment of the submitted portfolio at the end of the school program.

**CSPD Position: Watch**



## Dental Board of California Update

*The Dental Board of California met November 9-10, 2009, in Los Angeles. The following summarizes actions and issues coming before the Board which are pertinent to pediatric oral health*

### **Adoption of Disciplinary Guidelines**

When a licensee is found to be in violation of the Dental Practice Act or related statute or regulation, either the Attorney General's Office or the presiding administrative law judge relies upon the Board's Disciplinary Guidelines to determine appropriate penalties for enforcement actions. The current Disciplinary Guidelines were last revised in 1996 and were considered by the Board's Enforcement Division as in need of revision. Accordingly, a Disciplinary Guidelines subcommittee was formed in 2007 to assist staff with developing proposed revisions. Working with Enforcement staff, Department of Consumer Affairs Legal Counsel, and the Board's Deputy Attorney General liaison, revised Disciplinary Guidelines with recommended penalties were adopted by the committee last year and approved by the Board for public comment. At the required public hearing March 25, 2009, a large number of comments opposing certain of the proposed revisions and recommending others were submitted by the California Dental Association (CDA) and other interested parties. Board staff prepared a detailed response to each comment, which were provided to the Board at its April, 2009 meeting. The proposed revisions were then remanded to the subcommittee for reevaluation and further recommendation in April, 2009. The subcommittee in July, 2009 suggested that the full Board review the comments and responses at its November meeting.

At its November meeting, the Board reviewed the 60 page comment and staff response document

on a line by line basis, voting to adopt a number of modifications and reject others. The amended Disciplinary Guidelines (available online at [http://www.dbc.ca.gov/formspubs/1018\\_disc\\_guidelines.pdf](http://www.dbc.ca.gov/formspubs/1018_disc_guidelines.pdf)) were approved by the Board and noticed for the required 15-day public comment period.

**Comment:** *Subsequent to the meeting and required public comment period, the Board met by telephone conference call December 17, 2009, and, absent further public comment, submitted the rulemaking file to the Office of Administrative Law for final approval. Dentists and the public should be grateful for the diligence of CDA in proposing a large number of modifications to the original document, the majority of which were accepted by the Board as constructive and beneficial to the disciplinary system.*

### **Registered Dental Assistant Practical and Written Examination Statistics**

The Board was informed that for the period January 1, 2009 – October 21, 2009, the pass rate for the RDA practical examination approached 85%, while the pass rate for the written examination remained at close to 50%. Staff reported that for the first ten months of this year, 1698 applicants (49%) failed the written test. Board members in the past have expressed concern over this low pass rate. Reasons offered by the former Committee on Dental Auxiliaries (COMDA) for the low pass rate have included:

- For many candidates, English is a second

language, which may pose a particular challenge to these applicants.

- Informal candidate exit surveys indicate particular dissatisfaction and difficulty with the orthodontic questions, an area in which they usually have little clinical experience or familiarity.
- A majority of applicants qualify for licensure examination by the work experience pathway and may not have adequately studied or prepared for the written test.

**Comment:** *With the dissolution of COMDA and the assumption of responsibility for examination and licensing of Registered Dental Assistants by the Dental Board and its Dental Assistant Committee, a new written examination is being developed which may better evaluate the knowledge base of RDA candidates.*

### Licensure Examination Eligibility by Specialty Training

California statute requires that an applicant for a dental license who has been issued a diploma from a foreign dental school not approved by the Board under Section 1636.4 of the Dental Practice Act shall not be eligible for licensure examination until he or she has successfully completed a minimum of two academic years at a California dental school and been issued by that school a dental degree or its equivalent. At the November meeting, Dr. Earl Johnson, representing the California Association of Orthodontists, requested that the Examination Committee consider recommending that Board seek statutory change that would allow a candidate with a dental diploma from a foreign dental school who has successfully completed a CODA-approved post-doctoral specialty training program in the United States to be eligible for the California licensure examination.

The Examination Committee appointed a two-person subcommittee to explore the concept and report back in February.

**Comment:** *Consideration of licensure eligibility by specialty training opens the door to consideration of specialty dental licensing in California, something long-opposed by CSPD. The report of the two-person subcommittee will be carefully analyzed and response by CSPD will be conveyed to the Examination Committee as appropriate.*

### Cancelled License Description

When a dentist retires or otherwise ceases practice, she or he may request an "inactive license" which is maintained by payment of a biannual fee. An inactive license can be reactivated by payment of a renewal fee and satisfactory evidence of completion of all continuing dental education requirements accrued during the inactive period. Alternatively, the dentist may notify the Board that he or she no longer requires a dental license, in which case the license is cancelled

and no fees are required. This is sometimes referred to as "surrendering" a license. If the dentist takes neither action and simply fails to renew a license on the biannual renewal date, the license is placed by the Board in a "delinquent" status for up to five years, after which it is automatically "cancelled."

This process is the same for all dental permits and for RDA and RDAEF licenses.

Board member Dr. Luis Dominicus in September expressed concern that the public may confuse a "cancelled license" with the results of a disciplinary proceeding and requested staff to research wording for the licensure verification section of the Board's website that might eliminate this interpretation. At the suggestion of staff, the Licensing, Certifications and Permits committee voted to adopt, and the Board subsequently approved, the following language:

- **Definition used for a dental license**
  - Any license that has been delinquent for five (5) years is automatically cancelled by the Board. The license is cancelled and no longer valid for practice in California. A licensee may choose to cancel a license that is no longer required or needed. You may contact the Board to see why the license was cancelled.
- **Definition used for all dental permits:**
  - A permit is cancelled if it is delinquent for five (5) years or the Board has cause. This permit is cancelled and is no longer valid. A licensee may choose to cancel a permit; cancellation of a permit by the licensee means that the permit is no longer required or needed. A Board issued permit may be cancelled or delinquent while the dental license is current and valid for practice. You may contact the Board to see why the permit was cancelled.

**Comment:** *The change in definition of a cancelled permit is especially important in this age of consumer-based web "research" to avoid misinterpretation of a cancelled permit of a valid license holder.*

### California Dental Corps Loan Repayment Program

In 2002, the legislature created the California Dental Corps Loan Repayment Program which became operational on January 1, 2003. Designed to increase access to dental care This program administered by the Dental board of California, is designed to increase access to dental care in underserved areas, It provides grants of up to \$105,000 to offset or repay educational debt and is distributed over a three year period. In return, the dentist enters into a contract to provide care in a "dentally underserved area" as designated by the California Healthcare Workforce Policy Commission for each year the grant is renewed. The program is financed by the transfer of \$3 million from the unspent reserve account of the State Dentistry Fund to a Dentally Underserved Account within the State Dentistry Fund.

The clear statutory authority for the Board to

(Continued on page 11)





Jade Miller, DDS  
District VI Trustee

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## Happy New Year !

I attended the AAPD Board of Trustee’s Planning Session in January and left feeling that our specialty is in good hands with the many outstanding and committed volunteers and staff that represent our organization. AAPD is proactive in serving our membership and our patients and navigating the threats to both dentistry and children’s oral health that loom on the horizon. Having observed the recent Health Care Reform activities in Washington, it seems that legislators don’t often include the recommendations of healthcare professionals when developing healthcare policy and legislation. I can tell you the AAPD is the leader in organized dentistry in trying to “get the ear of Washington” because we continually repeat the mantra that “we are the experts in children’s oral health and genuinely want what is best for children.”

One issue that is gaining momentum and may prove to be a tremendous threat to the oral health of children is the role midlevel providers are taking in several states. I encourage you to familiarize yourself with this issue as it will likely expand throughout the nation. A good place to view several current models is the AAPD’s Analysis and Policy Recommendations Concerning Mid-level Dental Providers at <http://www.aapd.org/upload/news/2009/3648.pdf>

An area I expect the Academy to address is our current governance model with regard to the tripartite structure. It continues to be a challenge on how best to involve the District level with the State and AAPD governance structure. I realize there may be limited activity at the District level but I feel it plays a very beneficial role. In the following areas, the District level is indispensable: 1. Address and share regional specific issues, 2. Dissemination of information, 3. Speak as a united voice at the AAPD level thereby allowing smaller states to feel they have been heard, and 4. Cultivate leaders and select Trustee representation. The WSPD Board meetings have allowed me to understand the desires and concerns of each state in order to best represent them.

I will touch on some of the highlights of the recent AAPD Board Meeting but I would encourage you to view the minutes of the meeting in the Member Resources section of the Members Only area on the AAPD website.

- The AAPD now has the availability to bill State component and District dues. There is a fee to cover setup and staffing costs.
- There is a revision of the Affiliate Trustee

nomination and election process. Nominations originating from the Affiliate category must include 5 letters of recommendation with at least one from an Active Member and it is preferred that one be from the president of the state where the Affiliate Member practices.

- The AAPD opposes a proposed change to ADA code 01120 (Child prophylaxis) from a dental development defined age (primary and mixed dentition) to age defined (up to 15 years old) procedure.
- The American Board of Pediatric Dentistry reports that of 5,211 eligible AAPD members, 2,743 (53.6%) are Diplomates. The Oral Clinical Exam is administered once a year and renewal of Time Limited Diplomates will involve a 4 part process. See their website ([www.ABPD.org](http://www.ABPD.org)) for more information.
- The Membership Survey was just received and we had an initial discussion about the results. This is a tool that will be integral in guiding the future of our organization.

As always, I appreciate the opportunity to represent our District.

### District VI Announcement

#### Newest Developments in Restorative Materials for Children!

The Western Society of Pediatric Dentistry will sponsor expert speaker, Dr Joel Berg, at their 2010 annual meeting held in conjunction with CSPD in Cancun. Dr. Berg is Professor and Lloyd and Kay Chapman Chair for Oral Health at the University of Washington, School of Dentistry in Seattle, Washington. He will present state-of-the-art information on restorative materials for children.

distribute these funds ended in 2006. Approximately \$1.5 million in undistributed and uncommitted funds remained in the account. Language inserted into SB 599, passed by the legislature in the 2008 session and signed by the Governor, extends the program as of July 1, 2010 with authority to distribute the remaining funds until July 1, 2012.

**Comment:** *During the first three fiscal years of program existence, only 17 qualified applicants were identified and funded. The unencumbered funds remaining would support another 15 or so applicants. The wording of the original legislation left some ambiguity as to whether the program would continue until the funds were exhausted or whether the awarding of \$1 million in grant promises in each of three fiscal years set an automatic limit on program existence. SB 599 resolves this ambiguity. Pediatric dentists may reduce general dental education loans and/or pediatric dental training loans under this program.*

### Mandatory CE Course on Substance Abuse

In previous meetings, the Continuing Education Committee has considered mandating continuing education on substance abuse as a condition of dental license renewal. The committee deliberated the necessity of this course and the form it should take if adopted. At its November meeting, the Committee voted to recommend that the Board proceed by amending the California Code of Regulations to specify that the already mandated course in the California Dental Practice Act contain this instruction. The Board subsequently concurred and directed staff to develop the regulatory language for adoption at a future meeting.

**Comment:** *Historically, CSPD has opposed expansion of mandated-subject continuing education. The Board's authority to mandate subject matter of continuing education is limited to "coursework within the general areas of patient care, health and safety, and law and ethics" and may not exceed fifteen hours per renewal period for dentists and seven and one-half hours per renewal period for dental auxiliaries. If the Committee recommends, and the Board approves, integration of this subject matter into the California Law requirement, it is likely continuing education providers will petition for increasing the number of hours required for this course offering.*

### Infection Control Regulations

The California Code of Regulations requires the Dental Board to annually review and, if necessary, amend regulations to ensure that minimum standards for infection control adequately address patient safety in dental service delivery. The current regulations were last amended in 2005. As part of the annual review process, a two-person subcommittee of the

Board's Infection Control Committee was appointed in April to review the current regulations and recommend any necessary changes. In July, the subcommittee made a number of recommendations to conform to regulations to the Centers for Disease Control and Prevention (CDC) 2008 Infection Control Guidelines. These modifications were opposed to a large extent by the Dental Assisting Alliance, which requested that additional input be solicited before the amendments were considered for adoption. The Committee acceded to the request and postponed consideration until the November meeting, at which time they voted to again refer the proposed modifications back to the subcommittee for further review of consistency with CAL-EPA and CDC guidelines and to report back at the February meeting.

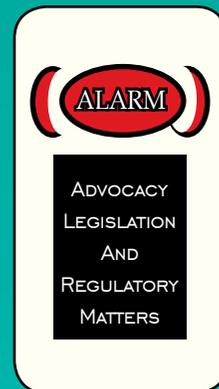
**Comment:** *A major point of contention revolves around sterilization and disinfection procedures, specifically the elimination of the requirement that instruments must be "bagged" before sterilization and remain "bagged" until use. The California Association of Orthodontists (CAO) has long held this as unnecessary and impractical for orthodontic instrumentation (such as pliers and wire cutters) treated by dry heat sterilization. The CAO contends that cleaning of critical and semi-critical instruments and subsequent sterilization by dry heat, steam under pressure (autoclaving) or chemical vapor is sufficient to ensure prevention of cross-contamination (i.e. to break the chain of microbial transmission). They further argue there is insufficient evidence to suggest that bagging after sterilization to prevent contamination by air-borne pathogens is less effective than pre-bagging in disease prevention.*

### Implementation of AB 2637

AB 2637, which becomes operational January 1, 2010, redefines the dental assisting career path. Among the provisions of this legislation is that unlicensed dental assistants must complete an eight-hour Board approved course in infection control within a year of employment. At the November meeting, the California Dental Association raised two concerns regarding this provision:

- The number of unlicensed dental assistants engaged in active practice is estimated to be in excess of 50,000. CDA believes that creating the capacity necessary for completion of an eight-hour Board-approved course, including a four-hour clinical component, is logistically unfeasible and therefore impossible to accomplish within the 12-month timeframe.
- There is some ambiguity in the legislation regarding whether the eight-hour course, consisting of four hours of didactic

(Continued on page 12)





ADVOCACY  
LEGISLATION  
AND  
REGULATORY  
MATTERS

Members are reminded that reports of the activities of the Dental Board of California pertinent to pediatric dentistry are posted in the Advocacy, Legislation and Regulatory Matters section of the CSPD Website.

instruction and four hours of pre-clinical and clinical instruction, may be in two separate components. CDA believes the intent of the legislation was to allow two separate and distinct four-hour instruction components that cumulatively result in eight hours of instruction. Specifically, AB 2637 provides that the didactic instruction can be provided "via electronic media, home study materials, or live lecture methodology." Furthermore, the statute specifies that the clinical instruction must be in a clinic setting with "at least one instructor for every six students."

- CDA contends that the solution to meeting this requirement of AB 2637 could be addressed by the Board providing one or both of the following actions:
- Supporting emergency legislation in the 2009 legislative session that would exempt currently employed and active dental assistants from the eighty-hour course requirement, either entirely or by substitution of the 2-hour biannual infection control continuing education course (i.e. a "grandfather" clause).
- Allowing dental assistants to comply with the eight-hour course requirement by taking two separate four-hour modalities. In this manner the didactic requirement could be met by an online course developed by CDA or other provider and the clinical requirement could be met in the employing dentist's office following an established and approved teaching methodology.

After consideration, the Board took no action on the first suggestion (there being no current bill or language to consider) and rejected the second as outside the Board mandate required by statute.

**Comment:** *As AB 2637 was passing through the legislature, it became clear that it would be impossible to promulgate the regulations governing dental assisting educational courses and programs to implement the new law in a timely manner. Therefore, they were included as statutes with inoperative dates of 1/1/11 so that the Board could develop replacement regulations and modification of statute by the inoperative date. If such regulations are not developed and operative by the inoperative date, there will be no laws to govern RDA, RDAEF, IC, OA and DSA programs and courses. CDA will likely insert, or move to insert, relief for the unlicensed dental assistant infection control course dilemma in a comprehensive legislative package.*

*Editor's Note: To see a complete and current list of bills affecting pediatric dentistry, visit our website at [www.cspd.org](http://www.cspd.org).*



## In a HURRY for CE's?

**Full Multimedia CE Available Online 24-7**

- **Medical Emergencies in the Pediatric Dental Office**
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Calling all New Dentists and Residents  
to CANCUN!

Fun



Fun

Please join us for CSPD's first annual **"NEW DENTIST SOCIAL HOUR!"**

If you are a new member in CSPD, current resident, recent graduate, **or PRIVATE PRACTITIONER looking for a NEW ASSOCIATE or PARTNER**, you won't want to miss this networking opportunity. **AND**, if you are interested in **TEACHING** or **LEADERSHIP** opportunities, we have also invited the members of the CSPD Board of Directors and various faculty members from the California pediatric dentistry residency programs to be present as well. Get answers to any questions you may have.



**When:** Following the New Dentist Lecture, Friday, 4/9/10

**Where:** CSPD Annual Meeting in Cancun

**Who:** New Members, Recent Graduates, Faculty Members  
Students, CSPD Board of Directors, and  
**Dentists looking for New Associates or Partners**

Fun

**BOARD OF TRUSTEES**

- Steve Gross, CDT, President
- Richard Sobel, DDS, P. President
- Richard Mungo, DDS, V. President
- Ken Szymanski, DDS, Treasurer
- Lisa Brennan, DDS, Secretary
- Mahmoud Ashrafi, DDS
- David Good, DDS
- Wayne Grossman, DDS
- Matt Hamilton, DDS
- Michael McCartney, DDS
- Lindsey Robinson, DDS
- Justin Shuffer, DDS
- Ray Stewart, DMD, Exec Director



*Steve Gross, CDT  
CSPDF President*

I hope you all had a marvelous holiday season and that your New Year is off to a great start. Winter has officially set in, and as I'm writing this rain is pouring down outside. We are finally in for a series of storms that will bring plenty of needed water to our state. However, to put it all in proper perspective, I just returned from a trip to Cleveland (Brrrrrrrr!) where I was reminded of how lucky we are to live and work in a state with exceptional weather!

**Giving Campaign**

The 2009-2010 Giving Campaign is off to a great start. Donor contributions are coming in daily. For those of you, who have not yet sent in your contributions, please remember to do so as soon as possible.

I would like to take this opportunity to thank those members who have increased their pledge to the President's Circle level. For those of you, who are reaching or have attained the end of your President's Circle pledge, please consider re-pledging to this worthy endeavor. You might also want to consider contributing "In Honor" or "In Memory of" those who are special in your lives. Remember, all donated amounts will be accrued, allowing you to move forward and be recognized as a premier donor.

It is worth noting that this year the Foundation has extended its hand to various CSPD supported public and private entities from outside our membership -- in order to grow and fulfill our mission of addressing the crises in pediatric dental education in California.

**PRESIDENT'S MESSAGE**

**Feasibility Study**

After many months of searching, I am pleased to announce that the Foundation has contracted with Netzel Grigsby Associates to conduct a feasibility study. They are one of the leading development consulting firms in the area of fundraising, planning and managing campaigns for non-profit organizations. This study will help us set goals and objectives, determine a plan of action as well as a timeline. The study will help identify prospective donors (including individuals, corporations and foundations), help determine the organizational structure and campaign budgets and focus and clarify our priorities. We will be able to better recommend ideas and actions to the leadership required to launch a successful campaign to help attract more pediatric dentists into teaching.

I would like to thank Dr. Mark Lisagor, who will spearhead this study along with Drs. Dave Good, Dick Mungo, Lisa Brennan, Matt Hamilton, Ken Szymanski. All have stepped up and volunteered to help me facilitate this study. Richard Sobel, and Mel Rowan will act as advisors. It is only through the devotion of individuals like these that our goals and aspirations can be achieved.

**Technology, the Future, and YOU**

Social media outlets such as Facebook, Twitter, and YouTube are now mainstream tools of communication around the world. Information is readily available at a touch of our fingertips. Even at home, I see my son consistently online or on his cell phone playing games, doing homework, texting, or just "surfing the web."

While these are all marvelous tools, will they be responsible for creating a new generation of socially (i.e. unable to communicate face-to-face) inept cave dwellers? I see this everyday when interviewing new employees. Put them in front of a computer and they are totally at ease and VERY proficient for the task at hand. Put them in a live, interpersonal situation,

and their communication skills lack what is needed to be successful. I realize that as a dentist you visit with people everyday, but not in a social setting. Now more than ever, it is important to attend live, personally interactive meetings where one is able to visit with old school friends, get advice from seasoned experienced colleagues, find new associates, or make new friends in a fun, relaxed social atmosphere.

Therefore, I hope to see all of you at future CSPD annual meetings.

**A Final Note**

I can't conclude without expressing my heartfelt sorrow at the losses suffered by those in Haiti. While it may seem like a tragedy of that magnitude will never happen to us, remember that it is not if, but when the "Big One" will hit California. So I urge you to put an emergency plan in place for your families and your employees. There are many resources available to help you. Please visit [www.quakekare.com](http://www.quakekare.com) for more information.

As always, I am available for your questions and comments at 800-423-3270 or [steve@appliancetherapy.com](mailto:steve@appliancetherapy.com)

Hope to see you all soon!  
Steve Gross CDT, RDT



**The Gift of Health**

The Foundation has developed an opportunity to honor a person or to donate for a memorial gift. Gifts of \$25 or more can be made using the donation form on the website ([www.CSPD.org](http://www.CSPD.org).) A letter will be sent to the person or family for whom the gift is made plus a letter to the donor for tax purposes.

There will be a one-time listing in the CSPD Bulletin of the gift. Please write out how you would the listing published on the donation form. In the Fall, we will introduce the ability to make the contribution by credit card.

# 2009-2010 ANNUAL GIVING CAMPAIGN DONORS

as of 03/31/2010 (campaign ends July 30, 2010)

## Presidents' Circle Donors

### Presidents' Circle Life

Roland and Lorraine Hansen    Mark and Teri Lisagor    Bob and Judy Oliver    Mel and Linda Rowan    Ken and Patty Szymanski

### Corporate Life

Appliance Therapy-Space Maintainers

### Life

Vernon Adams	Howard Dixon	Jeff Huston	Lynne and Tom Marian	Andrew Soderstrom
Leslie Aspis	Gila Dorostkar	Scott Jacks	Edward Matsuishi	Martin and Dea Steigner
Ann Azama	Scott Fishman	Bergen James	Michael McCartney	Ray and Penny Stewart
Stephanie Brandli	John M. Fowle	Neil Katsura	Richard P. Mungo	Karen Sue
Madeleine Brandli	David Good	Martin S. Lasky	Steven Niethamer	Scott Thompson
L. Jeffrey Brown	Steve and Ellen Gross	Daniel Launspach	Gary Okamoto	Wesley B. Wieman
Laurence A. Darrow	Wayne Grossman	Jacob Lee	David and Judy Perry	Randall Wiley
J. Patrick and Julie Davis	Matthew Hamilton	Lonnie and Jan Lovingier	Paul and Cindy Reggiardo	Philip Wolkstein
John DeLorme	Robert Harmon	Oariona Lowe	Brian J. Saunders	
Mark Dal Porto	Alan Hoffman	Larry Luke	Richard S. Sobel	

### Gold

Donald Dal Porto    Michael and Jill Lasky    Greg Rabitz    Keith Ryan

## Circle of Friends Donors

### Sustaining

Don Duperon	Thomas Larson	David Morris	David Rothman
Marc L. Grossman	Rebecca Lee Pair	Raymond Ramos	Rolf Spamer
Geoffrey Hersch	Weyland Lum	Fariborz Rodef	

### Contributing

Kimberly Lange	Maryam Pearose	Gary D. Sabbadini	Eddie So
Jonathon E. Lee	Timothy Pettit	Don and Paula Schmitt	Duane Spencer
Leticia Mendoza-Sobel	Lindsey A. Robinson	Kanoknuch Shiflett	Chris Thanos

### Member

Urmi Amin	Howard Brostoff	John and Olga Guijon	Vivian Lopez	Parvathi Pokala
Mahmoud H. Ashrafi	Steven D. Chan	Heidi Hame	Claudia Masouredis	Joseph Sigala
Jennifer Berry	Jonathan Gidan	Douglas J. Harrington	Simon Morris	Kevin Snaer
Mark Bayless	Geoffrey Groat	Kathleen S. Lim	Dennis Nutter	Richard Udin

### Other

Frank Flores    Janice Gerber    Linda Rafferty    Charles Bona

## Special Giving

### In Memory

By Dr. Don Duperon / In Memory of Dr. Tom Barber  
By Madeleine Brandli / In Memor of Dr. Warren Brandli

### In Honor

By Camarillo & Simi Valley Pediatric Dental Group / In Honor of Retirement - Dr. Mark Lisagor & Dr. Ken Szymanski



# Annual Giving Campaign

(August 1, 2009 through July 31, 2010)

## All contributors receive the following benefits:

- Recognition in the CSPD Foundation's Annual List of Contributors published in the CSPD Bulletin and Annual Meeting program.
- Recognition in the CSPD Foundation's Annual List of Contributors published in the Giving Campaign annual brochure.
- Badges showing membership level to be worn during the CSPD Annual Meeting.
- Recognition in the CSPD Foundation's Annual List of Contributors displayed prominently at the annual CSPD meeting.

## Presidents' Circle donors receive the following additional benefits:

- Special designation in Annual List of Contributors, in all CSPD Bulletins at the Annual Meeting
- Personal Annual Briefing by Foundation Trustees
- Invitation to the President's Circle reception at the CSPD Annual Meeting

## MEMBERSHIP OPPORTUNITIES

The Foundation is expanding your opportunities for continued support of its mission.  
All contributions given will be accrued allowing you to climb to the next level of recognition.

### Presidents' Circle

- Presidents' Circle Life.....\$25,000 may be payable in up to 5 annual Installments of \$5,000 each
- Life.....\$10,000 may be payable in up to 10 annual installments of \$1,000 each
- Gold.....\$5,000 may be payable in up to 5 annual installments of \$1,000 each

### Circle of Friends

- Sustaining.....\$500
- Contributing.....\$300
- Member.....\$200

### Special Giving

- ..... In Memory Of \_\_\_\_\_ Amount \_\_\_\_\_
- ..... In Honor Of \_\_\_\_\_ Amount \_\_\_\_\_
- ..... Give what you can – denote below amount enclosed

### Corporate Allies

- Recognition in the CSPD Foundation's Annual List of Contributors published in the CSPD Bulletin and Annual Meeting program.
- Recognition in the CSPD Foundation's Annual List of Contributors published in the Giving Campaign annual brochure.
- Badges showing membership level to be worn during the CSPD Annual Meeting.
- Recognition in the CSPD Foundation's Annual List of Contributors displayed prominently at the annual CSPD meeting.
- Special designation in the Annual List of Contributors, in all CSPD Bulletins and at the Annual Meeting
- Personal Annual Briefing by Foundation Trustees
- Invitation to the President's Circle reception at the CSPD annual meeting
- Mentioned by name at every social event during the CSPD annual meeting

- Corporate Life.....\$10,000 may be payable in up to 10 annual installments of \$1,000 each
- Corporate Sustaining .....\$5,000 may be payable in up to 10 annual installments of \$1,000.00 each
- Corporate Friend.....\$1,000.00

Name: \_\_\_\_\_  
(please list name above exactly as you wish to be recognized in all publications)

Amount Enclosed: \$ \_\_\_\_\_

Return to: CSPD Foundation, PO Box 221608 Carmel, CA 93922

## Aparna Aghi D.M.D. is named the Warren Brandli Leadership Intern



Dr. Aparna Aghi has been awarded the 2010-2011 Warren Brandli Leadership Internship. Dr. Aghi, a Southern California native, would like to have a career in academics along with a focus on public policy research. A longstanding interest in public service has led her to practice in two public health clinics as well as a hospital based program for underserved children. She has helped in initiating a rural mobile health program and served as a lobbyist to the New Hampshire State Dental Board for children's dental health concerns. These experiences compelled Aparna to further her pediatric knowledge base by attending a pediatric dental residency program. She is currently a senior resident at the University of California, San Francisco under the tutelage of Dr. Pamela Den Besten. She hopes that this internship will offer her an opportunity to hone her leadership skills to a level that will help her to reach her goal of making a difference in the specialty of pediatric dentistry. Dr. Aghi views CSPD as a leader in organized dentistry with influence far beyond our state borders. She is excited to learn about our governance activities, as well as experience the camaraderie and collegiality of our board of directors and members.

### *Michael McCarthy DDS – Serving his Profession and the CSPD*

It is with great regret that we announce that Mike McCarthy will be stepping down as a trustee of the CSPD Foundation. After many years of devotion and commitment to the CSPD and its Foundation, Mike will be greatly missed by everyone. He has served as a Trustee of the Foundation since 2003. It is through his hard work and dedication that the Foundation has grown into what it is today. Mike has been an active member of the CSPD since 1975 and served as its president from 1990 to 1991. We look forward to his ongoing friendship and support.



### **CSPD Foundation Thanks You**



*Lisa Brennan, DDS*

The foundation is very pleased with how well the 2009-2010 Campaign is going. Eighty-one members have donated \$49,425 since this year's campaign started in September. We would like to hear from all the remaining 485 members over the course of the year.

The CSPD Foundation continues to offer special giving categories of an honorary or memorial gift. This would be great for your colleague who you are not sure what birthday present to give them or has everything. Please download the form from the website and follow the instructions.

Many thanks from the Board of Trustees, CSPD Foundation



## Additional Notes for Fun in the Sun!

"Relax and Learn" during our after the beach Reception.

Saturday, April 10, 2010 in Cancun

4:00pm-5:30pm



**Dr. Gustavo Pardo**

**Dr. Gustavo Pardo**, Past President of the Mexican Academy of Pediatric Dentistry, and Diplomate of the ABPD will lead a discussion with Dr. Neidre Banakus on "**The Why, What, Where and How of Pediatric Dentistry.**"

This presentation will be sponsored by Novalar.

So, come join your friends and colleagues.

UNIVERSITY OF THE  
**PACIFIC**  
Arthur A. Dugoni  
School of Dentistry

25TH ANNUAL CHARLES A. SWEET, SR., MEMORIAL LECTURE

Save the Date **Saturday, March 6, 2010**

**ECC: Disease Management Using a Chronic Care Approach**

**Man Wai Ng, DDS, MPH**

*Dentist-in-Chief, Children's Hospital Boston*

*Assistant Professor of Developmental  
Biology (Pediatric Dentistry)*

*Harvard School of Dental Medicine*

For further information contact the Arthur A. Dugoni School of Dentistry, 415.929.6485

complex. Historically, these duties have been performed by a board officer with little or no experience in meeting planning and there has been a yearly turnover of the position. This is no longer the best model for two reasons: 1) it discourages potential applicants for the Executive Committee who have no interest in putting on a significant dental meeting and 2) it limits the continuity of having a meeting chair with experience in charge of the Annual Meeting. In order to ensure that the meeting maintains financial sustainability and a consistent level of quality into the future, it is paramount that site selection, planning and implementation be managed consistently by a team of volunteers, in coordination with our meeting planner, who have developed a broad knowledge base over time.

CSPD is increasingly viewed as a resource and the authority on children's oral health in the state of California primarily through the efforts of our Public Policy Advocate, Paul Reggiardo. Paul performs a stellar job advancing pediatric oral health for CSPD through attendance at dental board meetings and CDA's Policy Development Council. CSPD is becoming more politically organized as we learn to use the collective clout of pediatric dentists in CDA leadership to influence policy at the CDA House of Delegates. CSPD convened the first (to become Annual!) caucus of pediatric dentists at the CDA HOD last

November. It was well attended with a broad spectrum of CDA component presidents, delegates, and trustees represented. The group discussed the resolutions from the perspective of pediatric dentistry, and the individuals present were able to take this back to their own caucuses. All told, it was a fantastic experience to bring this group of leaders together to discuss issues, share concerns, and network with each other.

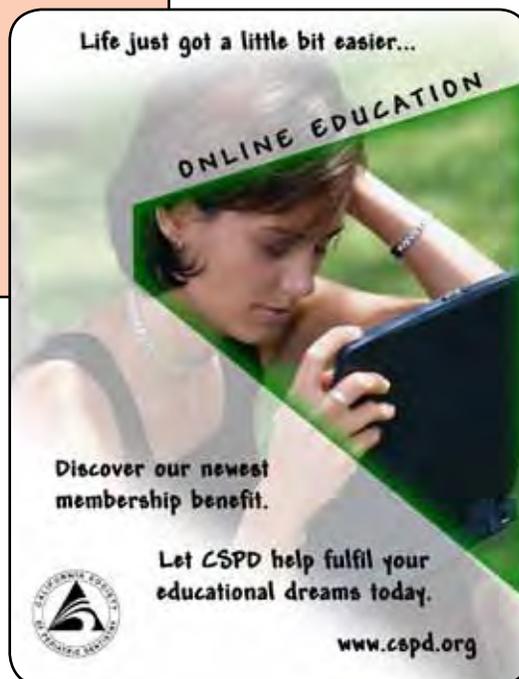
The CSPD 2010 Strategic Plan document will be available in the near future for all of our members to view. The new plan will enable our Society to adapt in an era of dynamic change and environmental challenges in order to "develop the next practices that will enable the organization to thrive in a new world, even as we continue with the best practices necessary for current success" (from the article, Leadership in a Permanent Crisis by Heifetz et al, Harvard Business Review). I believe CSPD's future is assured if we maintain and build upon our core strengths. We will thrive if challenges are adequately addressed. Finally, I'd like to express my deep appreciation for the work accomplished by the previous CSPD Strategic Planning committee which created the springboard for our current efforts. It is truly a great honor to lead our exemplary organization.

## ANOTHER CSPD ONLINE FIRST!

A New CSPD Online Course Has Admirers

CSPD announces the completion of the NuSmile online lecture that explores Early Childhood Caries (ECC) and a treatment regimen that may be employed by generalists and specialty practitioners alike. The online course, that can be accessed through [www.cspd.org/oce](http://www.cspd.org/oce), is 99 minutes in length and may be taken for two hours of continuing education (CE) credit or free of charge if CE credits are not desired.

The generous funding for this online project was provided through the courtesy of the NuSmile Corporation and the skill and dedication of a team of online specialists at VCall (vcall.com). CSPD is proud to give credit to their team of dedicated professionals who have given generously of their talent and time in the creation of this up-to-date instructional video that includes ninety-one Power Point slides, and scrolling text.



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## EXECUTIVE DIRECTOR'S REPORT



Ray Stewart  
Executive Director



### GOT E-MAIL?

The CSPD Board greatly encourages you to provide your email addresses to the CSPD headquarters office.

From time to time, there is urgent business or information we wish to provide to the members and we would appreciate feedback as well.

Please provide your email addresses and notify our executive director of any changes.

Send to:  
[DrRSTEWART@aol.com](mailto:DrRSTEWART@aol.com),



The past quarter has been an active one for the CSPD officers and Board of Directors as well as the many committees which serve this organization. My report will give a basic overview of the activities which have occurred since my last report in the Fall Bulletin.

### CSPD Annual Meeting in Cancun, Mexico

The CSPD/WSPD Annual Meeting, which will be held in Cancun, Mexico on April 8-11, 2010, is on track to be one of the most outstanding scientific sessions that CSPD has ever produced. If you have not already registered -don't delay! Join us for this great educational experience while enjoying the warm weather and the cultural experiences offered by visiting the remains of the incredible Mayan civilization which flourished there 1500 years ago. Please visit the CSPD web site to view the meeting schedule and to register online.

### Nominating Committee Report and Proposed Bylaw Amendments

By the time you read this message, you should have received in the mail the CSPD Slate of Officers and Nominees for the 2010-2011 Board of Directors as well as the proposed bylaw amendments. Both of these will be voted on during the Annual Business Meeting to be held during the CSPD/WSPD Annual Meeting on Friday, April 9th in Cancun, Mexico. The Nominating Committee has proposed a slate of officers which assures that CSPD will continue a broad based and inclusive leadership representing all segments of our membership as we enter the second decade of the 21st century.

The Constitution and Bylaws Committee, chaired by Jeff Wood, has put forth two bylaw amendments for your consideration.

**FIRST:** Chapter II, Section 3. Quorum. Two-thirds (2/3) A majority of the voting members of the Board of Directors constitutes a quorum for the transaction of business at any session of the Board.

Discussion: The CSPD Board has experienced some difficulty in meeting the current two-thirds majority quorum requirement. Air travel ( including delays), weather (fog) and cancellations can present difficulties. As a result, the Board recommends amending the bylaws by allowing a majority to constitute a quorum to conduct Society business. (The quorum requirement for the AAPD Board of Trustees is also a majority of the voting members present.)

**SECOND:** Chapter VII, Section 5. Reduction in Dues and Assessments. Full-time dental school or hospital faculty members and full-time active military members are entitled to a 50% reduction in annual dues and assessments. In the event of hardship or disability, a member may request reduction or waiver of dues and/or assessments. This must be done

annually, in writing, and requires approval by the Board of Directors.

Discussion: CSPD has had a number of membership requests by pediatric dentists who are currently serving on active duty in the armed forces and have a California military address. The Board of Directors recommends approval of an appropriate dues reduction for approved CSPD Active Members who are full-time, active members of the military.

### Strategic Plan

The CSPD Officers and Board of Directors recently spent a weekend sequestered in a hotel at the Los Angeles International airport for a triennial strategic planning session which will shape the course of CSPD activities over the next three years. We are still in the process of sifting through the mounds of data which were produced and will be finalizing the document over the next several weeks. At this juncture, we are working toward a modification of our Mission and Vision statements which will reflect a renewed and restated commitment to serve members in the form of better communication, member advocacy and leadership development as well as increased focus on legislative and regulatory oversight. Your Public Policy Advocate, Paul Reggiardo, has forged an incredibly important and invaluable presence by having a pediatric dentist "at the table" in a number of venues: The Dental Board of California, The Oral Health Access Council, and the CDA Interdisciplinary Affairs Council through which CSPD has access to the floor at the CDA House of Delegates. CSPD's active involvement in California dental politics is exemplified by the fact that two pediatric dentists (Andy Soderstrom and Lindsey Robinson) are in the leadership chain and each will become president of CDA in the next few years. In short, our revised Strategic Plan and our renewed commitment to membership services and leadership development bode well for the future of CSPD. Make no mistake, we have not forsaken our commitment to advocacy for optimum oral health for all of the children we serve, regardless of socio economic status or insurance status; we have simply refocused and renewed our commitment to you, the members of CSPD.

### AAPD Head Start Dental Home Initiative

If you have not yet heard, the much anticipated and long awaited roll out of the AAPD Dental Home Initiative is just around the corner in California. Because of the size of California, both in geography and population, we have effectively been divided into three "states" (Central, South and North) for the Head Start roll outs which will occur in stages over a three year period. The initial roll out will take place in Central California which includes 23 counties and 18 CDA/ADA component dental societies. These

statistics are both daunting (this section is larger than most other State programs throughout the nation) and challenging (can we as a state specialty organization rise to the occasion in spite of the challenges and achieve the goals of this project)

Establishing a “dental home” involves building an ongoing relationship with a dentist to ensure a child’s oral health care needs are met. Establishing a dental home plays an important role in preventing tooth decay and ensuring the oral and overall health of children from infancy through adolescence. The dental home allows for early detection and treatment of dental decay and disease and the opportunity for the pediatric dentist to provide ongoing preventive care and treatment.

The Head Start Dental Home Initiative is developing a national network of dentists to provide a dental home for children participating in Head Start to ensure a lifetime of oral and overall health.

I am confident that we can succeed and, as the State Leader for Central California, I will be calling on each and every one of you to participate in this project in some way or another. Please contact me at [drrstewart@aol.com](mailto:drrstewart@aol.com) if you would be willing to consider serving on a Mentorship Team or as a Provider for your local Head Start center. You have the opportunity to really make a difference by participating in this program and it is my hope that everyone will contribute. I am counting on you!!

### Mid-Level Providers

In my humble opinion, the largest and most provocative issue facing our profession and our specialty is the looming adoption and incorporation of “mid-level providers” into the delivery system of oral health care services in the decade ahead. The tide is running against those who would stand strong and resist any and all efforts to incorporate the services of mid-level providers. To wit, the Policy Brief prepared for the W.K.Kellogg Foundation and published in December, 2009 illustrates the nationwide trend toward the adoption of the mid-level provider concept with the following excerpt from the Executive Summary of the report.

*“Dental care is essential to overall health. Yet 48 million American children and families live in areas without enough dentists to provide routine oral health care and one in five U.S. adults reports going without needed dental care because of cost, even if there are dentists nearby. Meanwhile, public clinics are seriously overburdened.*

*Shortages of dental practitioners and affordable dental care are hurting the health of millions of Americans, many of whom live with pain, miss school or work, and, in extreme cases, face life-threatening medical emergencies that result from dental infections. The situation is particularly severe for poor children and families and in communities of color.*

*Many states have responded to access-to-care problems by significantly expanding scopes*

*of practice for dental hygienists and dental assistants and by engaging physicians to perform an increasing range of dental services. However, there is growing recognition by policymakers that new types of dental professionals are needed to augment the care provided by dentists, allowing dentists to delegate basic services and provide the most advanced care as needed to further fill the current gaps that exist across America and reduce oral health disparities. Multiple new models are being proposed or utilized, including the following:*

**Alaska Dental Health Aide Therapists** – *Already deployed by the Alaska Native Tribal Health Consortium; scope of practice includes many preventive services, basic dental repair services that are focused on children’s needs and tooth extractions; training is a two-year program following high school.*

**Minnesota Dental Therapists** – *Now in implementation; scope of practice includes many preventive services, basic dental repair services that are focused on children’s needs and tooth extractions; training options include a bachelor’s masters degree or a two-year post-bachelor’s degree program.*

**Community Dental Health Coordinator** – *Proposed by the American Dental Association and now being piloted; suggested scope of practice is limited preventive and palliative care and extensive care coordination services; pilot training program currently for high school graduates to learn both community health worker skills and preventive and palliative dental procedures in an 18 month program.*

**Advanced Dental Hygiene Practitioner** – *Proposed by the American Dental Hygienists’ Association; scope of practice would include traditional dental hygiene services, basic dental repair and tooth extractions, administration, policy, and research; suggested training is a one- or two-year post- bachelor’s masters degree program. “*

The report concludes: “Training and deploying dental therapists in coordination with dentists in the U.S. is a promising option for expanding the availability of basic dental care. While introduction of these well-tested professionals will present challenges to policymakers, thoughtful and collaborative determinations of scope of practice, supervision, deployment and training preparation can help meet the goal of safe, quality, accessible dental care for all.” (The full report and executive summary are available on the Foundation’s website, [www.wkcf.org](http://www.wkcf.org))

It is my feeling that over the next decade mid-level providers will be incorporated into the oral health care delivery system for the most vulnerable (and significantly large) populations which traditionally have had the greatest problems gaining access to both basic and specialty health care. This population is decidedly different from people who have either insurance or the personal resources to ensure a dental home which provides comprehensive oral health services.

*(Please see page 22)*

Rather than “burying our heads in the sand” and wishing that the midlevel provider controversy will “just go away,” it is time to assume leadership in adapting to the changes that are before us. . I would suggest that we embrace the opportunity and ensure that these mid-level providers, in whatever form they take, become integral members of the pediatric dental team and have the willing and enthusiastic support, supervision and mentorship of a fully trained and qualified pediatric dentist. When looked at as an opportunity,

rather than a challenge, the prospect of mid-level providers operating as key elements of the dental team with the pediatric dentist as the team leader, opens the door to enormous increases in the number of children that we can effectively treat with only the most complex and difficult cases requiring direct treatment by the pediatric dentist. The possibilities are mind boggling and are surely worthy of our close attention and participation in the discussions and debates which will surely evolve concerning this issue.

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## Regulatory Compliance

### SALES AND USE TAX

Dentists pay state sales tax on materials, supplies, dental laboratory products, and other “tangible personal property” which are used in the performance of their services. Sales tax is collected either one of two ways. The primary method is for a dentist to pay sales tax to the supplier upon purchase of product. The state regards dentists as consumers in this regard. The supplier then reports the sales tax to the state. The second method requires the dentist to collect sales tax from the patient, who ultimately uses the product, and to report sales to the state Board of Equalization.

The second method is used when a dentist does not pay sales tax to the product supplier and sells the product to patients. The dentist must obtain a seller’s permit and collect and report sales tax. If a dentist purchases and pays sales tax on a product, then sells the same product to a patient at a price higher than originally paid, then the dentist owes tax on the difference between the purchase price and the selling price. If a dentist sells a product without a markup in price, and sales tax was already paid to the original supplier, the dentist does not have to collect sales tax from the patient.

In most cases, it is the seller’s responsibility to collect sales tax on tangible personal property. Examples of tangible personal property are toothbrushes and teeth whitening kits. Services that may include an incidental transfer of property are not subject to sales tax. An example of such services is in-office teeth whitening where a tray is fabricated and given to the patient.

Sales tax does not apply to medicines furnished by a dentist to a patient in the course of treatment. Tax also does not apply to sales of medicines to licensed dentists for use in treating patients. The regulatory definition of “medicines” includes permanently implanted articles such as dental implant systems, including dental bone screws and abutments. Orthodontic appliances are specifically excluded from the definition of “medicines,” as are auditory, ophthalmic, ocular, or some prosthetic devices or appliances.

Dental laboratories are the retailers of the plates, inlays, and other products that they manufacture for dentists or other consumers. Tax applies to their entire charges for such products regardless of whether a separate charge or billing is made for materials and manufacturing services.

Use tax is similar to sales tax, except that it is the purchaser, not the seller, who pays the tax directly to the state. Use tax is applied to purchases from out-of-state vendors when the items are to be used or consumed primarily in California and the seller has not collected California sales tax. Use tax rates are the same as sales tax rates, and products and services that are exempt from state sales tax are also exempt from use tax.

A dentist with a seller’s permit pays use tax through the seller’s tax return. A dentist without a seller’s permit can pay use tax using the dental practice’s tax return form, except if the dentist has registered to pay use tax. Effective 2009, “purchasers” that generate \$100,000 in revenue annually from business operations must register with the Board of Equalization if not already holding a seller’s permit or a use tax direct payment permit, or is not otherwise registered with the board. More information about use tax, which was first implemented in the 1930s, and the registration and reporting requirements can be found on the Board of Equalization web site (*see links provided below*).

This resource is provided by the CDA Practice Support Center. Visit the Web site at [cdacompass.com](http://cdacompass.com) or call 866.232.6362.  
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**Editor’s Note:** The above article is from CDA Practice Support Center and reprinted by permission of the California Dental Association. The article can be found on the CDA Compass website ([www.cdacompass.com](http://www.cdacompass.com)) by searching “Sales and Use Tax,” after registering and logging onto the site.

## NEW CSPD MEMBERS

### Active Members

Kurt Sturz.....Bakersfield, CA

### Associate Members

Ronen Krousx.....Brookline, MA

### Graduate Student Members

Michelle Wild .....Santa Monica, CA

Keith Tam.....Brighton, MA

### Pre-Doctoral Student Members

Stephen Aranson.....UOP, CA

## CALIFORNIA PEDIATRICIANS WELCOME CSPD ASSOCIATE MEMBERS

Pediatric Oral Health issues are of primary concern for our pediatrician colleagues. With the advent of the establishment of the Dental Home and Oral Health Assessments the American Academy of Pediatrics needs our help and support. The AAP welcomes our members to join their organization as Associate members.

All interested CSPD members should contact their local California Chapters through [AAP.org/membership](http://AAP.org/membership) section or they can contact Oariona Lowe at [w.roslo@verizon.net](mailto:w.roslo@verizon.net) for membership information.

## UPCOMING MEETINGS and CONTINUING EDUCATION DATES

### CSPD

April 8-11 2010: CSPD's 35th Annual Session at Cancun, Mexico

2011: CSPD's 36th Annual Session at San Francisco

### AAPD

April 9-11, 2010: Comprehensive Review of Pediatric Dentistry, Chicago, Ill. Course

May 27-31, 2010: AAPD 63rd Annual Session, Chicago Hilton, Chicago, Ill

May 26-29, 2011: AAPD 64th Annual Session, New York, N.Y.

May 24-27, 2012: AAPD 65th Annual Session, San Diego, Ca

2013 Orlando; 2014 Boston; 2015 Seattle; 2016 San Antonio; 2017 TBD; 2018 Hawaii

See [www.CSPD.org](http://www.CSPD.org) and [www.AAPD.org](http://www.AAPD.org) for more sponsored courses.

**NOTICE:** Our Professional Opportunities Page has received enthusiastic support and participation. There are many opportunities for those seeking professional employment. Visit [www.cspd.org](http://www.cspd.org) for up to date information.



## CONGRATULATIONS BOB!

Dr. Bob Berson and his Wife, Rosie,  
Receive  
Thank-you from Residents.

UCLA's June graduation class of residents gave Bob and Rosie Berson "a gift registration" to CSPD's Annual Meeting in Cancun for the 20 years Dr. Berson has devoted to directing **UCLA Alumni events.**

## CSPD Professional Opportunities



Alex Alcaraz, DDS,  
Membership Services



Have you been thinking about hiring an associate, but just aren't sure where to look? Or are you finishing your residency soon, and aren't sure where you'd like to live and practice? The answer is right on the CSPD website. To look at these opportunities and others, go to <http://www.cspd.org>.

# WEBSITE NOTES

**Register Again Online for our Annual Meeting in Cancun** - Many CSPD and WSPD members again are taking advantage of our online registration. Yes, there was a "glitch" in the process lasting nearly a week when some could not completely register. Because of this problem, the early registration deadline is extended until February 28, 2010 to give us more time to take advantage of the lower fees. The site offers attendees many optional activities to keep the whole family busy. In fact, attendees can easily extend their stay at this beautiful resort to create a well deserved spring break.

**Thank You to NuSmile and Vcall** - The presentation, "Esthetic Restoration of Primary Anterior Teeth," is now available on CSPD's OCE Library page. The layout of the program player is completely redesigned in the latest Adobe Flash format. The video loads quickly and can play on computers running almost any operating system.

In this program, our own Drs. Ray Stewart and Bill Waggoner discuss Early Childhood Caries (ECC), its diagnosis and its treatment options, with a special emphasis on techniques specific to the preparation and placement of anterior pre-veneered stainless steel crowns.

This 99 minute program was produced and is hosted through a generous grant provided by NuSmile Crowns and is now available for a fee if 2 CE credit hours are needed or for free without CE credits. Those members who were hesitant to pay for OCE in the past can now experience what certainly will be an important option for continuing educational in the future.

Congratulations are deserved by all involved but especially to Diane Johnson Krueger, CEO/President of NuSmile Primary Crowns, and to Bob Lycett, Director of Event Production at PrecisionIR Vcall, on the completion of this Esthetic Primary Anterior Crowns presentation project! I believe that all will agree that what was produced is superb. Even of more significance is that this project could become

a template for how organized dentistry and private supporters can work together to improve pediatric dental care for children worldwide.

**Sharing OCE WORLDWIDE with Dentists** - The OCE committee is in the final stages of a project to share CSPD's OCE library with the International Association of Paediatric Dentistry (IAPD). Again, NuSmile Primary Crowns is providing a grant to create and host a special library page to be available to IAPD members. Giving dentists from remote areas of the world internet access to quality OCE like the POHAP programs was one of the goals of the original OCE movement headed by Dr. Roland Hansen. Negotiations with IAPD's Secretary General, Dr. Gerald Wright, will make this vision come true. The IAPD will be placing a link to this OCE library in their website's members only section and then promoting this service as a new membership benefit.

**On a Final Note** - This is the last CSPD Bulletin edited by my esteemed colleague and friend, Dr. Lonnie Lovingier. Our Editor since the spring of 2002, Lonnie has continued to improve on what is CSPD's primary conduit for transferring the news and political information affecting California pediatric dentistry collected and produced by our busy leadership to our members. Our Editor not only spends the countless hours needed to assemble the "B," but also must attend and participate at all of the Board and Executive Committee meetings. As a lesser known extra to CSPD, Lonnie, with the help of Lynne Marian, provided the artistic and cost saving task of creating the actual print layout for the "B," a service that has saved CSPD many thousands of dollars over the years. The result of all this work is a publication of which we can all be proud. Even though he will continue to contribute as chairman of Online Education Committee, for his work as the Editor of the CSPD Bulletin, I declare a big, "Thank you, Lonnie, you did a great job!"



*Steve Niethamer, DMD  
Website Editor*

## WHAT'S YOUR EMAIL ADDRESS?



The CSPD Board greatly encourages you to provide your email addresses to the CSPD headquarters office. From time to time, there is urgent business or information we wish to provide to the members and we would appreciate feedback as well. Please provide your email addresses and notify our executive director of any changes. Send to: [DrRSTEWART@aol.com](mailto:DrRSTEWART@aol.com), Thank you.

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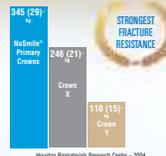


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