

# Bulletin



Summer, 2015

Vol. XLIII No. 2

## President's Message

Sharine Thenard, DDS, MS



**“When the winds of change blow, some people build walls, others build windmills.”**

This ancient Chinese proverb reminds us that the winds of change will blow, and to harness the opportunities they bring, one must be willing to work with the winds of change.

There have been many articles of late that describe how the professional landscape of pediatric dentistry is changing. Along with that change is another – how professional organizations are addressing the various models of the practice of dentistry, the changing demographics, and the desires and needs of the membership.

Last year, the California Society of Pediatric Dentistry held a strategic planning session, an event that occurs every few years, to ensure that our leadership is focused on significant issues and has tangible goals. Past President Dennis Nutter highlighted the strategic objectives in an article a few issues ago, but I will reiterate what came out of that session, and how we are currently working on implementing some of its objectives.

Our **Mission** is to help members excel in the practice of pediatric dentistry and advocate for quality oral health of infants, children and adolescents.

Our **Vision** is exemplary oral health for all infants, children and adolescents.

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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 by email to Clarice Law, DMD, MS at [claw@dentistry.ucla.edu](mailto:claw@dentistry.ucla.edu) or to Alison Jackson, DDS at [alisonjackson@hotmail.com](mailto:alisonjackson@hotmail.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.

# President's Message (continued from page 1)

Sharine Thenard, DDS, MS

The current strategic plan that we are following focuses on three areas: membership, advocacy, and governance.

## **Increased Perceived Value and Relevance of CSPD to Members**

We are working to understand CSPD members' needs and values. We want to be a data-driven organization. In order to be so, we need to collect data from the membership and evaluate trends. We also want to assess and improve communications about the policies and actions that leadership undertakes.

You may have already received a few surveys that CSPD sent out to evaluate our modes of communication with you as well as our big event of the year, the annual meeting.

An indicator of success would be membership numbers and data reflecting increased member engagement, membership growth and positive feedback from you! We also hope to be more active on social media in an effort to stay relevant with our members and to communicate in the ways that our members do.

**“A measure of success would be membership growth and increased attendance at CSPD events.”**

We also strive to support policies, programs and efforts that lead to the successful, effective practice of pediatric dentistry. A measure of success would be membership growth and increased attendance at CSPD events.

## **Effectively Influence Policy Decisions On Matters of Pediatric Oral Health and Delivery of Care**

We want to make informed board decisions based on relevant data. To help in this endeavor, we are bringing in outside sources of information and expertise. We have content experts as guests at the Board meeting to educate us on subject matters that our board members may not have depth of knowledge on. We want to increase relevant and diverse perspectives to the Board so that the board members are well informed and can thoughtfully deliberate policy decisions. We are also working to proactively communicate more clearly and frequently with the membership on policy decisions and why decisions were made. An indicator that this goal is met would be an increased awareness of CSPD members about legislative and public policy issues.

Another goal is to increase collaboration with other professional organizations, including dental organizations and oral health groups. A measurement of success would be that policymakers begin considering CSPD to be a stakeholder and a valuable partner or collaborator in policy decisions.

## **Be a Highly Functional, Transparent Organization**

We would like to effectively leverage professional partnerships in the operations of CSPD. We want to develop an efficient committee structure with clear duties and responsibilities because we hope to have happier volunteer leaders who expend fewer hours!

We also would like to implement a sustainable leadership development program that would lead to a Board that is diverse in its composition of members in practice areas, length of practice, and practice modalities, and whose members are well-informed and prepared to lead.

I have tried to describe the roadmap that we are following and the very important objectives that we are striving towards. If you have questions about the process or if you have suggestions for me or for the board on how to better serve your needs, please email me at [sharine.thenard@gmail.com](mailto:sharine.thenard@gmail.com).

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# Executive Director's Message

Andrew P. Soderstrom, DDS



For more than a month, I struggled to come up with a topic for my Executive Director's message. Not that I'm a prolific writer; it's just rare that I experience significant writer's block. Having a few brief undedicated moments last weekend, my clinical instincts took over. After careful evaluation of my symptoms, I came to the self-diagnosis that I am suffering from chronic hyper-volunteering

(CHV). In case you are not familiar with that syndrome, it is characterized by the inability to say no, periodic feelings that you have no personal time and a constant focus on details without creative thinking. So with that "aha" moment, it only makes sense for me to give you my insights regarding volunteering.

Given my background, it's not surprising I have CHV. There are both genetic and environmental factors involved in my affliction. Being a third generation dentist with numerous family members involved in organized dentistry, there must be a familial gene contributing to this affliction. The environment I was raised in as a baby boomer was one where we were taught to lead by example. Finally, as the oldest of four children (something only other "oldests" can understand), my fate was sealed.

CHV is also partially responsible for my current position with CSPD. The persistence of your current president, Dr. Sharine Thenard, and my inability to say no were significant factors leading me to apply for this position. Many years ago, I choose to proceed down the leadership pathway through CDA. I felt that I would have a greater ability to represent the interests of pediatric dentistry in that arena. During that period, many of your past leaders brought to CSPD the leadership skills and processes they had experienced during the service with CDA. The result is what we see today – by far the most significant and effective specialty association in California (and probably nationally as well). It is humbling (and challenging) to be asked to continue that tradition and bring CSPD to an even higher level.

Besides my private practice and service to CSPD, I am still active with both the CDA and ADA. For two more years, I will be the 13th District (CA) representative for the Council on Access, Prevention and Inter-professional Relations (CAPIR) for the ADA. My activities for CDA are as the Chair of the Management Committee for CDA

Cares and as a member of the CalDPAC Board. These are not random positions, but rather those in which many of the areas of focus have some relationship to children. For CAPIR, I chair the Access and Advocacy Subcommittee where we focus on Medicaid, access to care and perinatal oral health. I look forward to sharing ideas where CSPD can help promote these national initiatives in California. CDA Cares, known as Missions of Mercy in many other states, offers free dental care to all-comers at two events annually. While far from perfect, our safety net for children, Denti-Cal, offers an underutilized avenue of access for children in California. As a result, most of the care at the CDA Cares events is for adults. Though the primary activity is to provide dental care, CDA leverages the event to demonstrate to our legislative leaders the problems with the Denti-Cal system in general. CalDPAC benefits children's issues by supporting candidates who understand the issues related to access to care by supporting their campaigns with the hope they will become our champions once elected.

If you've gotten this far into my message, I'm sure many (and probably most) of you are saying, "he is crazy". And you aren't incorrect in your assessment. But remember, as a victim of CHV, this is my fate. But the good news is that you, the 99.9 percent who aren't afflicted with CHV, have an opportunity to support those of us with this affliction. For many years, the CSPD Foundation has supported two CSPD leadership development programs – the Warren Brandli Internship (WBI) and the Santos Cortez Graduate Student Legislative Advocacy (GSLA) program. These are for residents and recent graduates who have an interest in becoming the leaders of tomorrow. Participants are provided experiences attending CSPD Board meetings and/or participating in legislative advocacy events in Washington, DC and Sacramento. Funds to support these activities are generously donated annually by the CSPD Foundation. So if you are fortunate to not be affected by CHV, please consider supporting these programs and others by contributing to the CSPD Foundation. You can log on to [cspd.org](http://cspd.org) for more information regarding these excellent opportunities for our future leaders. While there, please consider financially supporting these programs by following the link to the CSPD Foundation. I, and your fellow volunteers afflicted with CHV, thank you in advance for your support.



# Report of the Meeting of the Dental Board of California

## Prepared for the California Society of Pediatric Dentistry

Paul A. Reggiardo, DDS, Public Policy Advocate



*The California Society of Pediatric Dentistry is the state's leading advocate and recognized authority on oral health issues affecting infants, children, adolescents and patients with special health care and developmental needs. The Society interacts with the state legislature, regulatory bodies, licensing bureaus, institutions of dental education, media outlets, and policy makers at all levels of public and private participation to promote and ensure optimal pediatric oral health in the state.*

### Medi-Cal / Denti-Cal Program Benefits

Late last year the California State Auditor, at the direction of the legislature, released an analysis of the Denti-Cal program which found that 56 percent of the 5.1 million enrolled children received no services the previous year. In addition, the majority of counties have insufficient numbers of Denti-Cal providers and the Department of Health Care Services (DHCS) does not provide adequate program oversight. The report went on to blame Denti-Cal reimbursement rates as the likely primary reason for low provider participation.

Partly in response to the State Auditor and partly in response to prior legislation, the DHCS has begun to increase data collection and public reporting. Under SB 857 (2014), the DHCS is required to post annually on its website certain fee-for-service program performance measures. Those measures for 2013 are posted at [http://www.denti-cal.ca.gov/provsrvcs/managed\\_care/FFS\\_perf\\_meas\\_2013.pdf](http://www.denti-cal.ca.gov/provsrvcs/managed_care/FFS_perf_meas_2013.pdf). The 2014 performance measures will be posted October 1.

Under a separate section of the Welfare and Institutions Code, the DHCS is required to annually review Denti-Cal provider reimbursement and to assess the effect of payment rates on beneficiary access to services. This review has been performed only once in the last 14 years. On July 1, the DHCS, in compliance with the law, posted the results of an internal review that compared reimbursement rates for the 25 most common Denti-Cal Fee-For-Service (FFS) procedures with that of five comparable states' Medicaid Programs and to commercial rates in the five ADA geographic regions. The report reveals that California's dental Medicaid reimbursement rates fall significantly below those in the similarly-sized states of New York, Texas and Florida and are only 31 percent of the national average for commercial insurance. In addition, the DHCS reported that while there has been a nearly 40 percent increase in childhood enrollment and a 77 percent increase in enrolled

adults since 2008, there has been a double-digit decrease in providers in that same timeframe. The report is available online at [http://www.dhcs.ca.gov/Documents/2015\\_Dental-Services-Rate-Review.pdf](http://www.dhcs.ca.gov/Documents/2015_Dental-Services-Rate-Review.pdf).

In what can be reported as positive movement, the legislature and the Governor reached agreement in the final fiscal year 2015-2016 state budget adopted in July to cease implementation of the 2008 10 percent FFS rate cut to Denti-Cal providers, which will take effect as soon as approval is obtained from the federal Centers for Medicare and Medicaid Services (CMS). There is still much work to be done, however, to address reimbursement issues for the 51 percent of all children in the state and the one-third of all adults now eligible for Medi-Cal / Denti-Cal coverage, who experience difficulty, if not downright obstacle, in accessing oral health services under the state Medicaid program.

### Dental Board of California Sunset Review

The Dental Board of California is undergoing this year the "sunset review" process, in which the legislature evaluates the need for the continued existence of a state program or an agency. The "sunset review" allows for an assessment of effectiveness and performance, focusing on the overall necessity of the agency and its cost-effectiveness, successes and failures.

One of the issues attracting the attention of the *Joint Sunset Review Committee* is the long-range financial viability of the Board and the appropriate initial licensure and biannual renewal fees. The Board has recently sustained substantial fiscal deficits due primarily to increased enforcements costs mandated by the Department of Consumer Affairs for all health related boards and bureaus. Last year the Board raised licensure fees for dentists to \$525, the maximum amount allowed under current statute. Under SB 179 (Bonilla), currently under consideration by the legislature, the cap would increase to \$650 in 2016 and to \$800 in 2018. The proposed fee caps come after an independent

audit of the Board's finances last year which found that the Board spends more on enforcement activities than all other functions combined and that without significant increase in revenue the Board would be unable to carry out its licensing and enforcement responsibilities

### State Dental Director

After years of lobbying by the dental profession and by oral health advocates across the spectrum of child and adult welfare, led by CDA, the 2014-15 fiscal year state budget included establishment and ongoing funding of a state *Office of Oral Health* within the California Department of Public Health (DPH). In June of this year, Dr. Jayanth Kumar was appointed as the new State Dental Director to head the office and manage California's oral health programs within the DPH. Dr. Kumar was previously the Dental Director for the state of New York, where he developed the state's first comprehensive oral health plan. In addition to developing a similar oral health plan for California, Dr. Kumar's responsibilities will include establishing and obtaining federal and other funding for statewide oral health education and prevention projects with an emphasis on infants and children. He will take office on August 1.

### Covered California – Patient Protection and Affordable Care Act

Last year marked the first year under the Affordable Care Act that most Americans were required to obtain health insurance, including essential pediatric oral health benefits for children, or pay a penalty. More than 4.5 million Californians obtained that coverage through Medi-Cal eligibility expansion and through the Covered California Health Benefits Exchange. In 2014 pediatric oral health benefits were sold exclusively through separate stand-alone pediatric dental plans. Disappointingly, only about one third of parents purchased such plans for their minor dependents.

To increase the number of children obtaining dental coverage, the Exchange this year is requiring all health plans to include embedded pediatric dental benefits. Medical plans have partnered with separate dental plans --- capitated and fee-for-service --- to provide this coverage. Although it was the intent of Covered California to offer for separate purchase stand-alone family dental plans this year, so that adults could obtain dental benefits through the Exchange, these products will not be available until 2016.



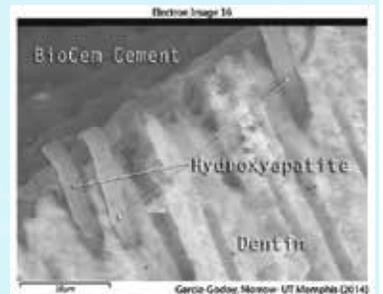
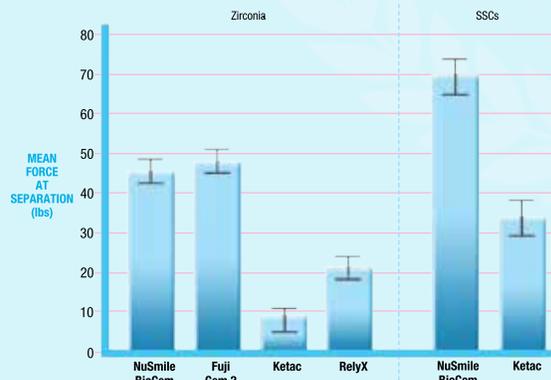
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Shetter and Webb, Medical University of South Carolina (2014)



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# Public Policy Advocate's Report

## Bills of Interest to CSPD

*Prepared for the California Society of Pediatric Dentistry July 2015*

Paul A. Reggiardo, DDS, Public Policy Advocate

CSPD follows a number of bills under consideration by the state legislature which potentially impact pediatric oral health. Updated information on the legislative progress of these initiatives 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 matters are invited to contact CSPD's Public Policy Advocate, Dr. Paul Reggiardo, at [reggiardo@prodigy.net](mailto:reggiardo@prodigy.net).

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**AB 178 (Bonilla) Dental Practice Act: RDA Clinical Examination for Licensure.** This bill would place a moratorium until July 1, 2017, on the administration of a practical examination as a requirement for RDA licensure and would require the Dental Board of California to determine by that date whether a practical examination is necessary to demonstrate the competency of registered dental assistants.

**CSPD Position: Support**

*Comment: The pass rate for the practical examination last year dropped precipitously from over 90% to barely over 20% as a likely result of greater examiner calibration and resultant attention to clinical (typodont) performance. A revised practical examination / practical examination process appears necessary. Until that examination process is defined, the immediate removal of the practical examination requirement will allow a continued licensure mechanism.*

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**AB 179 (Bonilla) Dental Board of California: Sunset Review.** This bill extends the operation of the Dental Board of California to January 1, 2020, provides statutory authority to the DBC to increase licensing and other fees for dentists and all categories of registered dental assistants, and provides a correction to the Dental Practice Act concerning unprofessional conduct.

**CSPD Position: Watch**

*Comment: As amended, the bill places a statutory cap, effective 1/1/16, on the fee for the initial and renewal of the dental license at \$650, which would increase to \$800 1/1/18. Current licensure fee is \$525. The bill also fixes the lack of exemption for dentists regarding unprofessional conduct in the treatment of spouses or equivalent relationships.*

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**AB 366 (Bonta) Medi-Cal: Annual Access Monitoring.** As amended, this bill would require an ongoing assessment by an independent entity of access to care and the adequacy of provider payments under Medi-Cal and, to the extent funding becomes available in the future, rate increases for services, provider types or geographic areas for which inadequate rates are identified.

**CSPD Position: Support**

*Comment: As introduced, the bill, which was largely symbolic, called for immediate repeal of prior year Medi-Cal rate reductions and for future reimbursement rates increases.*

---

**AB 502 (Chau) Dental Hygiene Practice.** The bill would authorize the creation of a Registered Dental Hygienist in Alternative Practice (RDHAP) corporation and provide the Dental Hygiene Committee of California with the same type of corporate regulatory and oversight authority as other boards of the California Department of Consumer Affairs.

**CSPD Position: Support**

*Comment: Earlier versions of the bill would have eliminated the requirement that for an RDHAP to continue seeing a patient after 18 months a prescription from a dentist or physician is required and would have allowed a RDHAP in a designated Dental Health Professions Shortage Area (DHPSA) to continue independent practice if that designation was removed.*

---

**AB 648 (Low) Virtual Dental Home Implementation Project.** The bill would establish a grant program using public and private funds to pilot the virtual dental home model of community-based delivery of dental care to underserved populations in community clinics and school programs. The new Office of Oral Health would develop the program under the direction of the recently-appointed state dental director.

**CSPD Position: Support**

*Comment: The bill calls for an appropriation of 4 million dollars from the general fund to be used for start-up elements like training, equipment and technical support.*

**AB 880 (Ridley-Thomas) Free-Clinic Practice by Final Year Dental Students.** The bill would permit the practice of dentistry by a final year student, without compensation or expectation of compensation, in a free clinic or health fair setting under the supervision of a licensed dentist with a dental school faculty appointment after meeting certain disclosure and supervision requirements.

**CSPD Position: Oppose Unless Amended**

*Comment: CSPD feels further amendments are necessary to provide additional safeguards regarding student supervision by clinical faculty, informed consent for treatment of a minor patient by a dental student, clarification of a qualified postdoctoral advanced education program, and increased responsibility by the student's dental school (including assurance of liability protection), and has submitted draft language to the author and to the bill's sponsor (7/13/15)*

**SB 203 (Monning) Sugar-Sweetened Beverages: Safety Warnings.** This bill would require a warning label on most sugar-sweetened beverages sold or dispensed in the state reading "Drinking beverages with added sugar(s) contributes to obesity, diabetes, and tooth decay."

**CSPD Position: Support**

**Outcome: Died in Senate Committee**

*Comment: The bill mirrors SB 1000, introduced by Senator Monning last year, which failed passage by the Assembly Health Committee after passage by the Senate.*

## District Report

John Gibbons, DDS, District VI Trustee



I am honored to be the new Western District Trustee. One of my roles is to represent the Western District on the AAPD Board and communicate the decisions the AAPD Board makes back to the membership. I want to thank our outgoing Western District Trustee, Dr. Santos Cortez, for his tireless efforts under sometimes difficult circumstances. He did an outstanding job representing our

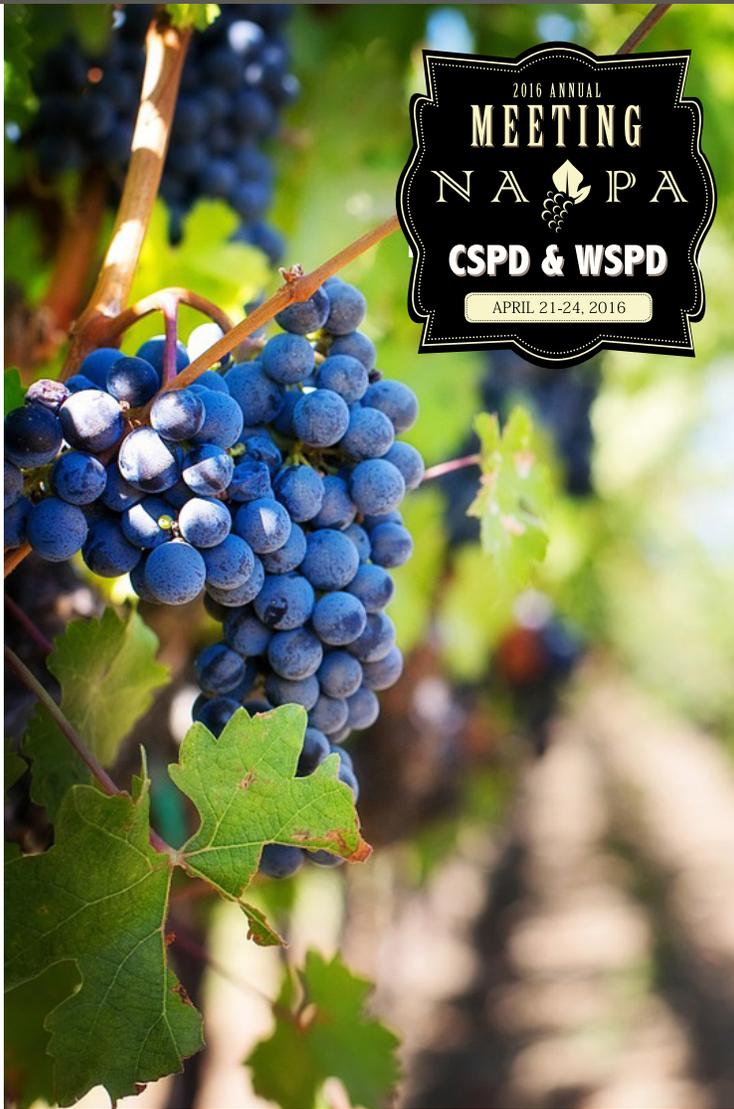
District for the last three years. I don't think anyone could have done better!

You probably already know, but the Academy had a very successful world class Annual Session in Seattle in May, with over one third of all pediatric dentists in attendance. The weather cooperated in showcasing the trifecta of Seattle (the Space Needle, the Chihuly Garden and Glass museum, and the Paul Allen Experience Music Project/Science Fiction Museum and Hall of Fame). The annual Welcome Reception is always spectacular and worth the Thursday arrival to enjoy with family and friends. This year the AAPD put on a First Timers Reception with well over 200 attendees who were able to meet the leaders who serve them. There was quite a "buzz" in the air when they found the open bar! From the standing room only of the Keynote Address by Frank Abagnale to the Presidents' Farewell Dinner on Sunday, this year's Annual Session was well worth attending. I can't wait for next years meeting in San Antonio!

Last month I was at our Academy's headquarters in Chicago for the new Trustee orientation and media training. It was my first time visiting the new location of headquarters. Let me report to you what a great job our leaders and staff have done in securing a first class location, under very favorable terms in the ADA's beautiful building. If you are ever in Chicago you should stop in for a tour.

One of the things that impressed me more than anything else in my different roles in the AAPD is the dedication and quality of those leaders who serve us at the state, district, and national levels. California leads the nation in the development of its leaders. They start the development process with the Warren Brandli Leadership Internship and the Santos Cortez Legislative Advocacy Interns. This year 17 California pediatric dental residents participated in AAPD's Advocacy Days in Washington DC. Following California's example, both Hawaii and Washington state sent residents for the first time. I know it sounds cliché but these residents are our future leaders, and also some of our current leaders. Our newest members become aware of how important advocacy is for the children we represent by participating in these programs.

Most leaders are developed through their involvement with their state and district organizations. It is usually not by accident that this happens, but through the concentrated efforts and programs like those we see in California. I would like to challenge all states in our District to create pathways for our newest colleagues to become involved in our organization, pathways that encourage the development of our future leaders and advocates.



## 2016 CSPD/WSPD Annual Meeting

A Blend of Education, Networking  
& “Grape” Expectations

### SILVERADO RESORT & SPA IN NAPA, CALIFORNIA

#### Uncork the Experience

Hitch a ride on Napa’s famous Wine Train! Enjoy the best view Napa has to offer as it travels from the Napa Valley to Calistoga while eating a three-course gourmet meal.

Visit one of the many vineyards and wineries the Napa Valley has to offer.

FORE! Play golf at two of the area’s premiere golf courses at the Silverado Resort & Spa. Redesigned by PGA Hall of Famer Johnny Miller, both courses feature dozens of water crossings, elevation changes and routing through historic oak trees.

Relax at Silverado’s Day Spa, while you get a massage or enjoy some peace and quiet by the spa pool.



### TOPICS & WORLD RENOWNED SPEAKERS

“The Behavior Symposium: Assessment, Intervention and Restraint of “Uncooperative” Child Behavior in the Invasive Context” Speakers: Dr. Gerald Wright, Dr. Man Wai Ng, Dr. Gary Walco and Dr. Dennis Nutter

“Pediatric Periodontal Disease: A Review of Cases and Dental Acid Erosion: Identification and Management” Speaker: Dr. Martha Ann Keels

“Minimally Invasive Techniques in Pediatric Dentistry” Speakers: Dr. Man Wai Ng and Dr. Francisco Ramos

“Monitored Anesthetic Care in Pediatric Dentistry” Speaker: Dr. Stephen Wei

**Resident Poster Presentations:** See the future of pediatric dentistry live in action at our poster presentation session. This session features a range of studies completed by current residents from the Western District and California programs.

### NEW OPPORTUNITIES THIS YEAR



- ✓ CSPeD Talks - hear innovative approaches in clinical practice from experts.
- ✓ WOW: Words of Wisdom - join us for lunch in tables of ten as you talk and learn from different professionals and companies that interest you.

### Earn more than 21 Continuing Education Units!



Visit [www.cspd.org](http://www.cspd.org) for more information! Registration opens mid-November.

# 2016 Annual Meeting

## Napa Valley

Oariona Lowe, DDS, CSPD Annual Meeting Chair



### Scientific Sessions

**WOW!** Plans are falling into place for the 2016 Annual Meeting, being held from April 21- 24 at the Silverado Resort and Spa located in the heart of the Napa Valley Wine Country. Speakers and topics for the Napa meeting include a “Symposium on Behavior Assessment and Management” sponsored by the CSPD Foundation, a presentation on Periodontal Disease in Children and GERDS, and Minimally Invasive Techniques in Pediatric Dentistry. **Tables for Ten** are scheduled on Saturday where selected speakers will present Words of Wisdom to attendees who sign up for lunch with table presenters. Vendors will be paired with speakers as sponsors and will have the opportunity to discuss and share their products with the luncheon participants. Speakers interested in participating in table rounds are urged to sign up early. Space is limited. The student poster presentation and competition is planned for Friday afternoon just prior to the New Dentist Reception. The scientific program on Sunday will feature CSPeD Talks, 30-minute presentations by experts who will share recent research, clinical studies, or tidbits of knowledge from their private practices. A 5-minute question and answer period will follow. The Sunday finale welcomes presentations from pediatric dentistry colleagues who will share their WOW (*words of wisdom*) moments with us.

### Napa Valley

There is never a dull moment in Napa, CA. With over 350 wineries in the local area (including Sonoma and St. Helena), the Culinary Institute of America (CIA), hot air balloon rides, good shopping and the chance to have lunch or dinner on the “**Wine Train**”, our attendees will be kept busy when not attending the scientific sessions. Golf lovers can enjoy the Silverado’s championship golf courses, which are available to resort guests. The 36-hole Silverado Golf resort features dozens of water crossings,

elevation changes and routing through historic oak trees. It was redesigned by PGA Hall of Famer Johnny Miller.

The Silverado Resort and Spa is truly a lifestyle community. Within its 1,200 acres of gently rolling hills off the famous Silverado Trail is a world-class fitness center, which boasts the award-winning Silverado Spa, where specialized treatments are offered in the Meyer Lemon Garden. An outdoor resort pool is also located here. Bocce courts are available and tennis enthusiasts can enjoy 13 plexi-pave tennis courts. Many of our events will be planned around the many amenities that the Silverado has to offer. The recently renovated Silverado offers rooms with kitchenettes and golf cart taxis are available to transport attendees to and from their rooms to the ‘mansion’ where many of the festivities will take place. Our on-site Welcome Reception will feature wine tasting from several of the wineries in the local area.

Just a short drive from the Silverado resort is the city of Napa, where one can find charming, little boutique shops, markets, vintage cafes and restaurants. Visitors should not miss the shopping and culinary experience offered in the *Marketplace*. The City Winery, which is the old Napa Opera House, is great fun for the late night and chic crowd. It features live entertainment, wine and beer tasting.

The Napa meeting is planned with you in mind for a FAST (Fun, Academics, Social events, and wine Tasting) week of relaxation and learning. Come join us!

# Be a Presenter at the Annual Meeting!

## WOW! (Words of Wisdom)

“WOW!” Tables of Ten Session: CSPD and WSPD are offering professionals, members and interested individuals an opportunity to submit an abstract to be a presenter for the WOW! Lunch and Learn Session at the 2016 Annual Meeting. **Be one of ten** presenters who will share their “Words of Wisdom” in pediatric dentistry on Saturday, April 23 from 12:30 PM to 2:00 PM during the meeting. Each presenter will be partnered with a table sponsor and eight attendees for lunch. The session will include a one hour presentation with a 15 minutes Q & A portion. Submit an abstract to discuss a topic or pedo tip that will WOW! your table by **September 25, 2015** to [admin@cspd.org](mailto:admin@cspd.org).



## CSPeD Talks Series

The CSPeD Talk series will be held from 8:00 AM to 11:00 AM on Sunday, April 24, 2016 at the Annual Meeting. Think you have a topic of interest to the pediatric dentistry profession? Submit an abstract today to present to attendees at the meeting. Presentation length is 30 minutes with a 5 minute Q & A session.

Topics could range from dental office themes to tips on pediatric esthetic dentistry to pitfalls of starting a new practice. Submit an abstract to [admin@cspd.org](mailto:admin@cspd.org). Space is limited!



## Guidelines for Submitting an Abstract

Guidelines for submitting an abstract for a CSPeD Talk or WOW! Presentation:

- Abstracts must be one page in length or less and should include the title and all contributing authors' names and affiliations. Please identify the name of the person who will be presenting and add biographical sketches of the authors as a second page. The sketches should be 50 words or less in paragraph form.
- Margins should be 1-inch top, bottom, and 1¼-inch right and left margins. The text should be single-spaced, 12-point size, Arial font, with no pagination, footers and headers. Paragraphs should be justified.
- Major headings should be 16-point bold; minor headings should be 12-point not bolded. There should be one blank line above and below all headings, except above major headings, which should have two blank lines.
- Graphics should not be used in abstracts.
- If you are submitting for the WOW! Session please include any preferred vendors and types of companies that would work best with your presentation.

By virtue of submitting an abstract, the submitter(s) grants CSPD the right to publish any accepted abstract or the right to decline any abstract. The Annual Meeting Committee will review abstracts and make final selections. If your abstract is accepted for a presentation and you agree to present, you will be expected to register and pay for the event using CSPD's online registration.

### Want to be a WOW! Table Sponsor?

Look for more information in the 2016 Sponsor & Exhibitor Prospectus released mid-November. To get on the mailing list for the prospectus and future opportunities with CSPD please contact Stacie Lewis at [slewis@cspd.org](mailto:slewis@cspd.org).

# THANK YOU TO OUR GENEROUS SPONSORS AND EXHIBITORS FOR THE 2015 CSPD/WSPD ANNUAL MEETING!

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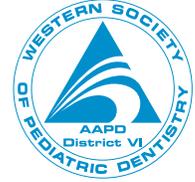
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# Surveys to Membership

## Communications Survey Report

Nancy Hsieh, DDS



### **The *Bulletin* – should it stay or should it go?**

The *Bulletin* has been the publication by which CSPD members have been able to stay connected with the organization from past, present to future. With all the changes in the way our world is communicating, we wanted to hear from you, the membership, to find out if the *Bulletin* is still worth the time, effort

and cost to our organization. So back in June we sent out a survey regarding the *Bulletin* and your communication preferences.

There were 82 respondents. Of those respondents, 48 percent indicated that they “always read the *Bulletin*” and 27 percent “usually read it”. 87 percent felt it is “just right in length” with 10% saying it is “too long.” In terms of content, 89 percent indicated a rating of “good” or better.

In terms of areas of interest, our members are most interested in scientific articles and continuing education, followed by the Public Policy Advocate’s Report and Patient Safety Report. The President’s Message and Executive Director’s Message is always looked for as well as any guest articles that may appear.

Some suggestions to improve the *Bulletin* included more info on Affordable Care Act; DSO impact on solo or group practice; Spotlight CSPD members; more CE info; more legislative efforts information and their impact on

practice; difficult parent, patient, staff encounters; practice management; and some information on retirement and finance.

Considering methods of delivery, 75 percent preferred CSPD to communicate via email and 60 percent wanted monthly communication from CSPD via internet-based methods. As for the *Bulletin*, members still want to receive an electronic and printed copy quarterly. When we broke down respondents by age, we saw some generational trends, with the group having completed training 0-15 years ago preferring electronic modes of communication and the group 15+ years after training preferring printed material.

**“In terms of areas of interest, our members are most interested in scientific articles and continuing education”**

It is clear that you, our members, enjoy the *Bulletin* and consider it to be a member benefit that keeps you in touch with each other and your organization. So the *Bulletin* is here to stay! It is evident that you want to hear from each other, so please send in your good news and updates. In addition, we always welcome guest articles. Please do not hesitate in contacting me or any other board members to contribute to our *Bulletin*!

Finally, congratulations to Dr. Howard Brostoff from Orange, CA winner of the \$100 Amazon gift card offered to individuals completing our online survey.

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## Annual Meeting Survey Report

Don Schmitt, DDS



As part of our ongoing efforts to better serve our members, CSPD Leadership recently surveyed the membership regarding the Annual Meeting (AM). Because the Annual Meeting is one of the primary membership services offered to CSPD members, we want to make sure we are providing the best meeting possible.

We received 92 responses. Fifty of the respondents (54 percent) normally attend the AM. Of the 42 respondents that

don’t attend the meeting the reasons included: “depends on speakers and location”, “really depends on what CE offered...”, and “not a convenient time...moving it to fall would be great.” Responses were similarly split on the question of moving the date of the annual meeting. Of the 82 responses to the timing question, 45 (55%) prefer the spring and 37 (45 percent) preferred moving it to the fall. Reasons included: “I’m just so used to having the meeting in the spring...”, “Both times sometimes conflict with other events”, “spring meeting too close to AAPD”, “...have no preference just would like to know way ahead of time.... who is going to speak which motivates me to go or not.”

(Continued on page 16)

# Image Gently... *in Dentistry*



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# Surveys to Membership (continued from page 14)

## Annual Meeting Survey Report

Don Schmitt, DDS

The next question asked about possible changes to the AM other than timing. Of the 83 respondents, 55 (66 percent) did not recommend any changes. Suggestions for change included: "offer courses on marketing", "improve quality of presentations", "sedation courses more often", "keep providing excellent CE."

The survey also asked for recommendations on possible future lecture topics. Forty people responded to this question. The most popular topics were practice management, behavior management (both pharmacologic and non-pharmacologic), trauma and cosmetic bonding.

The final question of the survey dealt with possible meeting locations. As one might expect this drew a wide variety of responses. Some of the most popular were Hawaii, Scottsdale, Palm Springs, San Diego and San Francisco.

One of the main takeaways from this survey is that CSPD members value the quality of continuing education courses above all other considerations. CSPD works diligently to secure high quality speakers on a variety of topics of interest to the profession. We continue to strive to provide the best possible meeting experience for our members and guests both educationally and socially.

CSPD greatly appreciates those members who took the time to offer their feedback by completing this survey. We are here to serve our members and we need your input. If you have further questions about this survey or the annual meeting please feel free to contact me or CSPD Executive Director Andy Soderstrom.

## Oral Conscious Sedation:

### Review and Updates 3.5 CEU with Dr. Stanley Malamed

October 20th, 2015 6pm-9:30pm  
Viva Restaurant. Los Gatos, CA

This course is geared towards the private practitioner using sedation. Dr. Malamed will be lecturing on current research, clinical techniques, and emergency protocol. Enjoy a three course dinner with cocktails, and catch up with your CSPD colleagues while fulfilling your yearly sedation CEU's! Registration opens mid-July. Seating is limited, and priority will be given to CSPD members.

CSPD Members \$250  
Non-Members \$325



CALIFORNIA SOCIETY  
OF PEDIATRIC DENTISTRY

Visit [www.cspd.org](http://www.cspd.org) to register online!



# Advocacy Day in Sacramento

Mark Lisagor, DDS, Chair, Leadership Development Committee



***Pictured L to R: Dr. Andy Soderstrom, Senator Bill Monning, Dr. Jessica Lee, Dr. Amita Ruehe, Dr. Ray Stewart***

A large part of the skill set needed by today's leaders in pediatric dentistry involves knowing how to effectively advocate for the issues affecting children's oral health in California. Working to develop strong future leadership for CSPD, the **Warren Brandli Interns and Santos Cortez Legislative Advocacy Interns** all participate in two important advocacy days each year – one in Washington and the other in Sacramento. This year was no exception and four interns joined four CSPD leaders for an intense day in Sacramento, focusing on two critical issues – Denti-Cal program funding and support of the CDA-Children's Partnership co-sponsored Virtual Dental Home Implementation Project (AB 648 - Low).

**Drs. Ray Stewart, Andy Soderstrom, Paul Reggiardo and Santos Cortez joined interns Drs. Amita Ruehe, Drew Colantino, Trang Pham and Angela Lee**, as they participated in morning briefings followed by afternoon

visits with eight Assembly and Senate offices. Now a joint effort with CDA, **CSPD-CDA Advocacy Day** is considered by CDA "to be a great "grassroots" effort to advance our legislative agenda."

"...An eye opener for what organized dentistry does for oral health and dentistry in California!...having the other doctors who have been to legislative day present to guide us through the process was tremendously helpful", Dr. Amita Ruehe observed.

"The residents were, once again, very articulate and passionate about the work," remarked mentor Dr. Santos Cortez.

**The CSPD Foundation** funds these two internship programs. Information and applications can be found on the CSPD website at <http://www.cspd.org/?page=Internships>. (The deadline for residents to apply is November 10, 2015.)



***Pictured L to R: Dr. Santos Cortez, Dr. Trang Pham, Senator Tony Mendoza***

## Internship Applications Now Being Accepted

The CSPD Leadership Development Committee is now accepting applications for the **Warren Brandli Internships (WBI)** and the **Santos Cortez Graduate Student Legislative Advocacy (GSLA)** programs. These two prestigious programs are designed to identify and empower future leaders for both CSPD and organized dentistry.

California pediatric dentistry residents are encouraged to learn about these programs on the CSPD website (<http://www.cspd.org/?page=Internships>).

The application deadline is **Tuesday, November 10, 2015** for both programs. Residents are encouraged to discuss their interest with their program directors or with LDC Chair, Dr. Mark Lisagor.

# CSPD Member Focus

## Interview with Dr. Mark Lisagor

Drew Colantino, DMD

On April 25, 2015, Nepal suffered its biggest earthquake in 80 years, resulting in over 9000 deaths and more than 23,000 injuries. CSPD member Dr. Mark Lisagor happened to be volunteering in Kathmandu as a project leader for Global Dental Relief (GDR), a nonprofit that provides dental care to children in six developing countries. In this interview, he recounts his experiences with one of the most devastating natural disasters in Nepal's history and recounts his involvement in aid and recovery efforts.

### **1. What took you to Nepal in the first place?**

For the past 25 years I've been part of more than 50 dental volunteer trips in developing countries. These experiences have allowed me to combine three passions: dentistry, travel and volunteerism. My first trip to Nepal was in 2000. In 2005, I began volunteering with GDR. Over time, both the organization and my involvement grew. GDR provides dental care to more than 10,000 children each year with 18 different teams. My involvement has blossomed into being a team leader for four of these teams each year, in India and Nepal.

My co-leader and I were setting up our seven-chair dental clinic, preparing the site for the 14 volunteers, including CSPD past president, Rebecca Lee, who all arrived the day before the earthquake.

### **2. Tell me about your experience with the earthquake on April 24 and the aftermath.**

Actually, when the earthquake struck, I was on the table in an acupuncture clinic! We were all in panic mode and ran outside into the street, where the likelihood of being injured from falling debris or collapsing buildings seemed less. We saw lots of collapsed brick walls everywhere and instantly heard of a couple who was killed when a wall fell on them, maybe 100 yards from us. While the epicenter was nearly 40 miles away, some buildings in Kathmandu did completely collapse, with many suffering structural damage, but still standing.

The initial earthquake was very large, around 7.8. While I am sure it only lasted seconds, it seemed to go on for minutes. Hundreds of aftershocks followed, with many reaching magnitudes of 5 or 6+ on the Richter scale.

With the damage done to many buildings and the fear from endless aftershocks, most inhabitants are still living and sleeping outside their homes under makeshift tarps and tents. All 200 children of the boarding school where our dental clinic is housed were forced to make their shelter on the playground and are still living and going to school outside, since their dormitory building and

the building we used for our clinic were both damaged, making them uninhabitable until repair is possible.

Our volunteers visited some UNESCO World Heritage sites that morning and were on their way back to the clinic for orientation when the quake hit. Very quickly, communications shut down, all power was lost and the city of more than one million people basically came to a standstill.

Our volunteers were amazing. This was the trip of a lifetime for many of them, who had to leave their practices for two weeks or more and absorb the considerable expense of travel, etc. From the moment we were all reunited, they were all focused on just one thing: "What can we do to help?" Since all the schools were closed and we had no power and no safe place to set up our clinic, it was apparent that we wouldn't be doing dentistry. We donated all of our medical supplies to a group that was organizing relief efforts to the worst hit remote areas. We also spent time with the children, many who were just finding out that they had lost family members from their home villages. Simply to be able to provide comfort for these wonderful children was healing for all of us.

The next week mostly revolved around trying not to be a burden to our local partners and to organizing our evacuation, some to Canada and the Netherlands, most back to the U.S.

### **3. After such a devastating event, where does one even begin to help?**

The worst damage and loss of life was occurring in hundreds of remote hillside villages, with virtually all homes and schools in ruins, and limited access other than by helicopters, which were in short supply. As communication began to be restored, we were able to reach out to friends and family, mostly via Facebook; donations began to pour in, including more than \$60,000 raised through Global Dental Relief's campaign to repair the damaged building that housed our clinic. Additional support of this type will always be put to good use.

### **4. What is your assessment regarding recovery and the future of Nepal?**

Recovery will take time, money and lots more foreign aid through the many non-governmental organizations (NGOs) already operating in the country, as well as from more established global organizations. This was already one of the world's most impoverished nations (think Haiti); it will be a very long and slow process to rebuild.

**5. What are the unique aspects of Nepal that excite and motivate you to return each year?**

The children. Most of the children we treat in our clinics come from remote areas, where conditions are such that many children die in childhood from the diseases that accompany severe malnutrition. To protect children from these conditions, as well as rampant human trafficking, parents will often manage to get them to Kathmandu, where they hope to place them in boarding schools or with relatives in the city, hopefully to be educated and have better lives. We see several thousand of these children each year from many schools around the city. The unique thing is that we get to train and work with some of the more senior students, who help us as assistants and interpreters. They become fast friends and stay in touch throughout the year and our volunteers find this to be a very special part of their volunteer experience. These are just some of the reasons I keep going back.

**6. What is the most memorable part of this experience?**

This was a life-changing adventure, one I will never forget. What sticks with me as most memorable, in the aftermath of the earthquake was the immediate reaction and response of the people throughout the community.

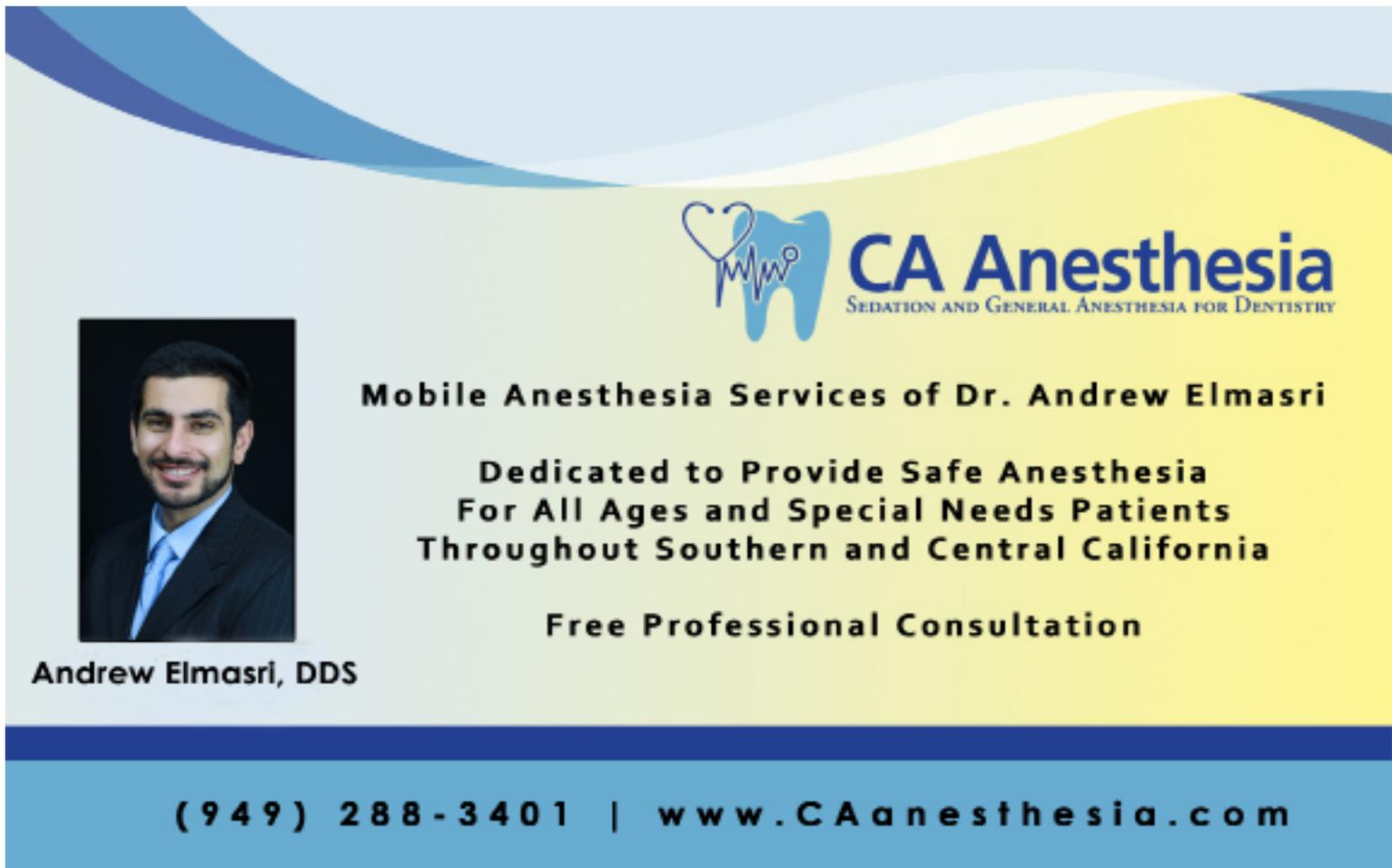
In spite of their frustration at a government that was slow to respond, the people quickly began mobilizing to help

each other. Regardless of their personal suffering, we saw people working hard to help others in even worse shape; this was especially inspiring when coming from the young.

**7. How can interested parties help from afar and how would interested parties get involved? Donations?**

At this point, the best way to help is probably through donations to organizations with expertise in disaster relief, or to organizations focused on rebuilding efforts. GDR is continuing to accept online donations to help rebuild the damaged buildings at our host school. (<http://globaldentalrelief.org>)

Dr Lisagor was a bit uncomfortable about being highlighted for this interview and stressed that pediatric dentists don't need to travel to the other side of the planet to help people in need. As a specialty, we are known for our willingness to reach out in our own communities to provide care to those without access - at free clinics, health fairs, and in our own offices. There are also many CSPD members who volunteer with several different organizations to provide care in developing nations. He just happened to be the one who found himself in Nepal on that historic day in April. Dr Lisagor and his wife Terri will be returning to Kathmandu at the beginning of August to lay some of the groundwork for the next clinics which are scheduled in the fall... and to support their Nepali friends.



The advertisement features a background with blue and yellow wavy patterns. On the left is a portrait of Dr. Andrew Elmasri, a man with a beard wearing a suit and tie. To the right of the portrait is the logo for CA Anesthesia, which includes a stylized heart and tooth icon with a pulse line. The text in the advertisement is as follows:

**CA Anesthesia**  
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**Mobile Anesthesia Services of Dr. Andrew Elmasri**

**Dedicated to Provide Safe Anesthesia  
 For All Ages and Special Needs Patients  
 Throughout Southern and Central California**

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**Andrew Elmasri, DDS**

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## Foundation President's Message

Steve Gross, CDT



The CSPD Foundation stands at a historic moment—a time of great opportunity, optimism and infinite possibility. As CSPD members we share a passion for our extraordinary organization and the great journey we are taking together.

The foundation is always exploring new ways to achieve its goals of providing support for CSPD, faculty and students in California, by adding innovative opportunities and educational

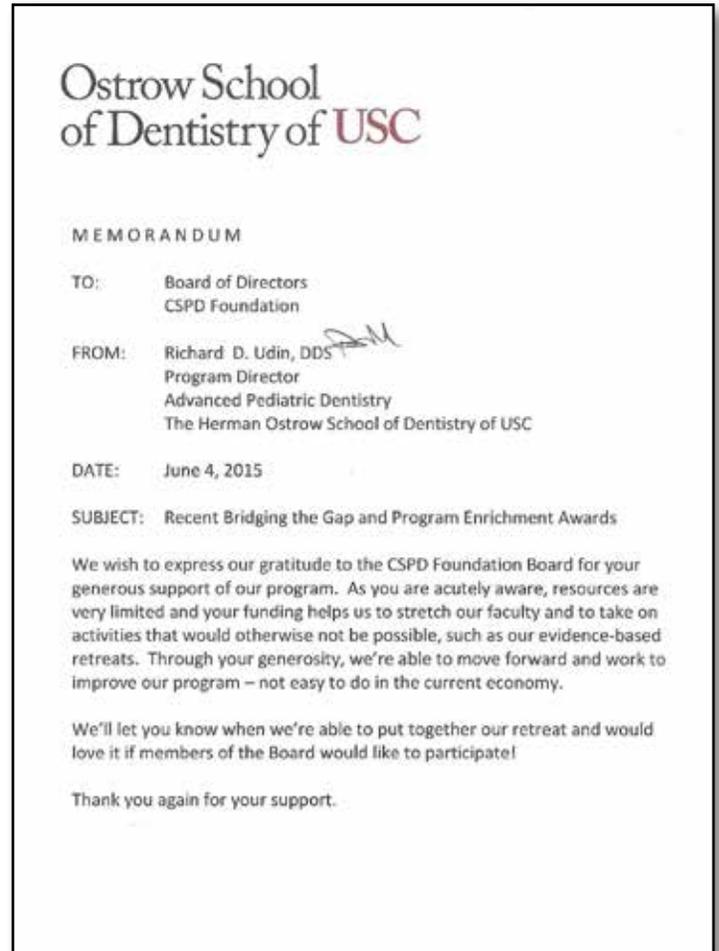
programs. This year, our goal is to raise \$150,000.

While we have achieved a great deal, there is much more that we can do as a foundation. Together, let us all move forward with purpose, mindful of why we are supporting our foundation. I invite you to join us on this journey and urge you to explore the many things the foundation does and the many things it will do.

In the CSPD foundation section of this issue of the *Bulletin*, you will find an article written by our own Amita Ruehe, DDS, 2015/2016 Brandli Intern. "CSPD Foundation Year in Review" is a wonderful update on last year's foundations accomplishments.

I hope you will consider becoming an active participant in shaping the foundation's future and think about the positive impact you can make through your ongoing support. The future is ours to create, please join us in our journey. Give generously!

### Thank You Letter from USC



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## CSPD Foundation Year in Review

Amita Ruehe, DDS, MS, Warren Brandli Intern



The CSPD Foundation has been hard at work promoting its mission of supporting pediatric dentistry education, research and service. The foundation has completed another successful year in its primary role as funders of programs and grants in California. This past year, grants and programs in excess of \$108,000 were funded that would not have been possible without the ongoing

support of the CSPD membership. The Board of Trustees thanks you for your contributions. Here are some of the year's highlights!

In its continuing effort to support pediatric dentistry education and research, the CSPD Foundation once again funded Bridge the Gap grants to help fund faculty recruitment and retention at USC and UCSF. Two new and innovative Program Enrichment grants were awarded to USC and UCLA. USC will utilize this grant to help fund a faculty retreat to update its pulpal therapy teaching protocols and UCLA will subsidize parking costs for patient families at the UCLA campus to decrease missed appointments. The foundation will maintain its funding for predoctoral pediatric dentistry interest groups at all of the dental schools in California so that the very best students will be recruited into our specialty. The foundation understands the importance of research and

has continued to offer research and travel grants to residents and recent graduates to pursue and present their research at professional meetings outside of CSPD or AAPD.

The CSPD Foundation wants to help nurture the next generation of pediatric dentists who will lead our profession. Once again, the foundation funded the entire cost of the Warren Brandli Internship program, which continues to help produce great leadership for CSPD and the profession. Additionally, it supported the Santos Cortez Graduate Student Legislative Program, which funds travel expenses for three interns being mentored as advocates for pediatric dentistry in Sacramento and Washington, D.C. The foundation also informs pediatric dentistry residents about CSPD, CSPDF and other opportunities to participate in organized dentistry, by funding "lunch and learn" events at California's pediatric dentistry programs.

None of this could have happened without ongoing support from the CSPD membership. As a thank you, the foundation once again hosted its annual "Presidents' Circle Reception" for its Life Members and current donors at the Presidents' Circle Level. This "invitation only" event at our annual meeting is a celebration for our donors and was a huge success.

These activities demonstrate that the foundation is the absolute best way for CSPD members to give back to their profession, while helping to continue strengthening and improving the quality of pediatric dentistry in California for the future.

# Student Activity Report from California Dental Schools University of California, Los Angeles

This past month, UCLA SCAAPD (Student Chapter of the AAPD) said goodbye to our graduating seniors and also had the privilege of sending some of our members to the American Academy of Pediatric Dentistry (AAPD) Annual Session in Seattle, Washington. In celebration of our seniors' graduation, our club held a banquet to honor our seniors. At this event, club members were in attendance to have fun together with lots of food, followed by gifts given to the seniors. Our graduating seniors will be greatly missed!



***Celebrating the SCAAPD members who graduated this year***



***UCLA predoctoral students at the AAPD Annual Session***

In Seattle, six of our SCAAPD members were able to attend the Annual Session, along with our faculty and residents. These students were able to interact with practicing pediatric dentists across the nation and attended lectures to stay up to date with hot topics in the specialty. SCAAPD is very grateful to AAPD for allowing our members to participate in such an educational experience!



***UCLA predoctoral students and pediatric dentistry residents at the AAPD Annual Session in Seattle, WA***

# University of California, San Francisco



The Student Society of Pediatric Dentistry (SSPD) at UCSF and its affiliated group Student United for America's Toothfairy (SUAT) had another outstanding year in service, education and outreach activities. The student group conducted dental screenings, oral health education and preventive dental care in underserved communities that benefited hundreds of children and their family. The community services extended from the local boys & girls club to the mid-day toothbrushing program in elementary school.

The pre-doctoral students and faculty also played a significant role in a city-wide initiative, the San Francisco Children's Oral Health Collaborative, led by the UCSF School of Dentistry and San Francisco Department of Public Health, to reduce dental disease in children. This year's Give Kids A Smile Day event was well attended, and many students, faculty, and pediatric dentistry alumni participated in the activity. With huge showing of volunteers, participating children and their family received undivided attention and one-on-one oral health instruction. The GKAS event is organized by dental students and led by the third-year student leader, Jean Calvo '17.

Students with interest in pediatric dentistry and community service also received recognition at individual level. Two students, Jenny Garcia '17 and Hengameh Jannati '17, received the Albert Schweitzer Fellowship award with community projects focused on underserved children, access to dental care, and those with special health care needs. Another student, Wilson Tam '18, received the UCSF Summer Fellowship award, and is conducting studies on primary teeth utilizing the optical imaging technology, such as PS-OCT and near-IR Reflectance. A pair of upper classmen, Jean Calvo '16 received the Zuckerman Fellowship to attend the public health program at Harvard Kennedy School, and Julia Ma '16 received the UCSF

Global Oral Health Fellowship award to travel to Taishan, China, for her follow-up study on the oral health knowledge and behavior of the third-grade children in a Chinese village. These students work closely with and are mentored by Dr. Brent Lin.

The newly elected leaders for the UCSF SSPD are Dien Sun '17, president, and Brian Lee '17, vice-president. With opening of the new Children's Hospital in Mission Bay, students will have the opportunity to shadow the hospital care and general anesthesia cases in the state of art facility. In addition, the new seminar course concluded its inaugural season in March that was well received by students and residents, and provided early exposure on pediatric dentistry for the first- and second-year students. Lastly, a new summer Community and Pediatric Dentistry Traineeship was planned and created by Dr. Pamela Alston and Dr. Brent Lin, added to the existing clinical elective course with the Alameda Health System, and offered practical exposure of community dental service in pediatric outpatient setting for a deserving first-year dental student. The program will start in this summer.



*(Continued on page 27)*



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# Student Activity Report from California Dental Schools (continued from page 25) Loma Linda University



**Congrats Class of 2015! LLU Pediatric Dental Residents Drs. Chung, Genish, Nasibi and Young (from left to right)**

Spring Quarter at LLU's Pediatric Dentistry Student Society was a season full of change and philanthropy. During this quarter, LLU held a Children's Health Fair and four pediatric dentistry residents brought in the CREST Mobile Clinic to share with the children. The children enjoyed exploring the mobile clinic, learning oral hygiene care and watching the movie playing on the TV outside the mobile clinic!



**LLUSD Pediatric Dental Clinic Vent Day**

area. About 20 IV sedations were provided, with the aid of a physician, and over 50 pediatric patients were seen between the two residents. It was a wonderful experience filled with grateful people and many mangoes!

The greatest change goes to the graduating Class of 2015 who earned their titles as "Pediatric Dentists." Drs. Chung, Genish, Nasibi and Pooyan will remain in Southern California but they will be greatly missed at the LLUSD Pediatric Dental Clinic! With this change, Dr. Amanda Zenthoefer will be President of the LLUSD Chapter of CSPD and a Vice President will be named shortly!



**LLU Children's Health Fair 2015**



**Roatan, Honduras Mission Trip - June 2015. Dr. Cuellar and Dr. Zenthoefer (from left to right)**

Throughout the quarter, LLUSD provided four "Vent Clinics." During these days children on ventilators came to the pediatric dental clinic for treatment. The patient's pulmonologist, nurses and respiratory therapists were also present to provide any necessary care to allow dental treatment. It was a wonderful experience to share with the patients, families, the pulmonology clinic and everybody in the LLUSD Pediatric Dental Clinic.

In June 2015, Drs. Cuellar and Zenthoefer went a mission trip to Roatan, Honduras. The residents were there for one week providing pediatric dentistry to the people in that

# Spotlight on Practice Management

## Five Communication Actions That Build Relationships and Get Results

ML Wheaton, Pride Institute

I am always impressed by the way that our pediatric doctors and their team members handle the challenge of dealing with not only their primary focus, the child patient, but also with the child's parents. The challenge becomes apparent at the very beginning of the relationship with the very first phone call. Not only must the first contact provide sufficient information about the child's treatment needs and the parents' concerns regarding those needs, this contact must also succeed in establishing the beginnings of an ongoing relationship between the parents and the practice. It is not enough that the parents have gotten your name from a referral or a Google search, they still need to confirm for themselves that they can entrust their child to the care of your practice.

The first impression of the practice is critical. The front office team are not just information gatherers, they must be viewed as the "chief marketers" of the practice. In the same way, the initial visit is also critical. The doctor and clinical team must add to the information already gathered during the initial phone call to get to know this new family and set the stage for a successful long-term relationship.

It is important to acknowledge that a parent will make decisions regarding the care of their child based more on emotion than on the clinical needs of the child. This is true of any buying decision, but more so when deciding on care for a child. So before you can focus on the clinical needs of the child, you must have an emotional connection with the parent. Okay, how do you do this?

The questions we choose to ask are the secret to getting to a deeper emotional level. Let's differentiate between Level One and Level Two questions. Level One questions are often superficial, and although important, deal with simple facts and information. They are often clinical in nature. Many of our initial phone call questions and our dental history questions are Level One, answered with quick responses, often a yes or no. "Is your child in any pain?" "Is this your child's first visit?" "Is your child fearful of the dentist?" Whereas Level Two questions are designed to evoke a more thoughtful and emotional response, often uncovering unconscious needs and wants that the parent might not even have realized are important to them. Look how they differ. "What concerns are you having regarding your child's dental health?" "What have been your child's previous experiences at the dentist?" "What goals do you have for your child's dental health?" Now to put a cherry on top of these questions, ask secondary more powerful questions to follow up to their response. A simple "why is this important to you" or a "tell me more about that", and

"how has that affected her" are open-ended questions that will propel the conversation forward and possibly uncover deep seated emotional history.

In both instances, on the phone and at the initial visit, capture these responses by taking notes. The front office team must have a Telephone Information Slip with a template to follow (cheat sheet, if you will) to assist in guiding them through the all-important first phone call. At your morning huddle this information must be shared with the team to best prepare for the visit. Sharing this information also prevents a serious faux pas in asking the same questions over again resulting in the parent having to tell their story over again: definitely a no-no in customer service!!! A clinical team member needs to be present when the Doctor is interviewing the parent so that the responses can be captured in the patient record. Imagine how powerful it would be to capture a quote from a parent who says, "I never want my child to go through what I went through as a child" or "I don't want him to ever loose teeth, like me!" These emotional responses allow us to learn what truly motivates and concerns the parent (and the child).

So what do we do with this information? We utilize it with a communication skill called a Benefit + Procedure statement. The simplest explanation of this is that it describes what's in it for the patient (based on their specific motivator or concern) and then the procedure(s) you want them to do to achieve it. This follows the logic that, if you want someone to do something, you'd best pique their interest first. More often than not we get this backwards, stating the procedure first. The parent who spoke of their own previous bad experience will be more interested when you say "in order for Susie to have the best experience possible, we'd like to schedule her appointment in the morning." The parent who doesn't want their child to lose teeth will more likely be positive to fluoride treatments if presented with "so that Susie can avoid decay and tooth loss like you experienced, we recommend that she have fluoride treatments at all of her check-up appointments".

These concepts seem so simple, yet it takes a conscious effort to put them into practice. Our verbal skills are often "in a rut", repeating the same old statements the way we've always done. So here is your action list so that you can more effectively communicate to "both" your clients: kids and parents.

- 1) Front Office Team, Clinical Team and Doctor - write down some great Level 2 questions that cannot be answered with a yes or no...at least 3.
- 2) Develop a Telephone Information Slip and include the questions the Front Office Team needs to ask.

- 3) During the initial interview with the parent, ask your questions and then follow-up with secondary questions, the “how” and “why”.
- 4) Capture this information – decide with the Team where this information should be placed consistently in the Patient Record.
- 5) Use the emotional motivators and concerns to best present treatment options in a way that resonates with the parents: Benefit + Procedure Statements.



**Mary Lynn Wheaton, RDH, MA** - Mary Lynn joined Pride Institute in 1999 with a wealth of experience in all aspects of dental practice management. She serves as the Director of Consulting at Pride

Institute and specializes in practice development, team building, group interaction and customer service.

In her sixteen years at the Pride Institute Mary Lynn has co-authored many articles on Practice Management including the very popular “The Ultimate First Call”. She is a featured speaker in many lectures and seminars throughout the United States as well as Sweden and Norway.

A former Assistant Professor in the Department of Periodontology at the University of the Pacific, she has taught many courses to dental students and presently teaches many of our education courses. She is an energetic, thought provoking, and motivational speaker for dentists and their teams. Mary Lynn holds a B.S. from West Virginia University and earned her M.A. in Education at the University of the Pacific.



**For more information on Team Communication Skills contact Pride Institute at 800-925-2600 or our visit website at [PrideInstitute.com](http://PrideInstitute.com)**

Oh yes, one more thing Practice, Practice, Practice. Practicing skills with one another really increases the likelihood of these questions being asked and the conversation flowing more easily.

## WSPD President’s Message

Oariona Lowe, DDS



The WSPD Board of Trustees currently consists of 17 Trustees and last met in May during the AAPD Annual Session in Seattle. I am proud to report the very successful year WSPD has had, with membership from all the states increasing with the introduction of AAPD e-billing. Many of the states currently using this system have increased their membership numbers – Nevada doubled its

membership and Arizona now has over 100 WSPD members, entitling the state to a second WSPD representative.

Activities during the AAPD Annual Session are always significant for the Board. The rotation of officers takes place during our WSPD meeting. This year Dr. Santos Cortez rotated off as the Western District Trustee, being replaced by John Gibbons, Immediate Past President of WSPD. Dr. Cortez represented the Western District on the AAPD Board of Trustees for the past 3 years. Other officers assuming WSPD executive positions are Dr. Oariona Lowe, President (California), Dr. Sarah Hulland, Vice President (Alberta), Dr. Christine Rolaofs Secretary (Alaska), and Dr. Bobby Yang, Treasurer (Arizona). The second AAPD Leadership Caucus

took place on Saturday during the AAPD Annual Session with a special presentation from Dr. Jessica Meeske from Nebraska, who discussed RAC audits. It was well attended, with 35 representatives from different state components. The WSPD-CSPD reception had over 250 guests and was graciously sponsored by SML (Space Maintainers Laboratory).

During this AAPD Annual Session two of our members were recognized with special awards from the AAPD. Dr. Lynn Fujimoto (Hawaii) received the 2015 AAPD Excellence in Education Award and Dr. Paul Reggiardo (California) received the 2015 AAPD Pediatric Dentist of the Year Award. Congratulations to both these high achieving individuals. We are proud that they represent the Western District and WSPD!

The WSPD-BOT has been busy. This summer the Trustees are currently reviewing the Charter-Affiliation agreement from the AAPD. WSPD has contracted with Smith Moore and Associates (SMA) to handle some administrative tasks and has developed a domain address which will enable our members to easily reach us ([olowe@wspd-district.org](mailto:olowe@wspd-district.org)).

The next scheduled WSPD meeting is on October 9, 2015 at the Cedar Brook Lodge in Seattle. Please send any questions or concerns.

## CALENDAR OF EVENTS

### CSPD

**September 19, 2015:** Board Meeting, Oakland, CA  
**January 23, 2016:** Board Meeting, Los Angeles, CA  
**April 20-24, 2016:** 2016 Annual Meeting - Silverado Resort, Napa, CA  
**March 15-19, 2017:** 2017 Annual Meeting - Green Valley Ranch, Las Vegas, NV

### AAPD CE Meetings

**May 26-29, 2016:** 69th Annual AAPD Meeting, San Antonio, TX

### CDA

**October 16-18, 2015:** House of Delegates Meeting, Sacramento, CA

## AVAILABLE CE COURSES

### Pediatric Oral Sedation Course (8 CEUs)

**Location:** Loma Linda University  
**Speaker(s):** Dr. Thomas Lenhart  
 August 30, 2015  
 8:30 a.m. to 4:30 p.m.

### Regenerative Endodontics and Pediatric Dentists Business Forum(4 CEUs)

**Location:** Cerritos, CA (Southern California)  
**Speaker(s):** Dr. Mahmoud Torabinejad & Bob Phillips  
 October 17, 2015  
 8:00 a.m. to 12:00 p.m.

### Oral Conscious Sedation Course (3.5 CEUs)

**Location:** Los Gatos, CA (Northern California)  
**Speaker:** Dr. Stanley Malamed  
 October 20, 2015  
 6:00 p.m. to 8:30 p.m.

Registration for course now open. Visit [www.cspd.org](http://www.cspd.org) to register online!

## CSPD Professional Opportunities



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

Sincerely,  
 Don Schmitt, DDS

## Significant Approved Motions From the June CSPD Board Meeting

**Motion 6.27.2015.3:** Move to support the State Fees on Hospitals, Federal Medi-Cal Matching Funds. Initiative, Statutory and Constitutional Amendment.

**Motion 6.27.2015.4:** Move to continue to support AB 178.

**Motion 6.27.2015.5:** Move to affirm watch position on AB 179.

**Motion 6.27.2015.6:** Move to support AB 336

**Motion 6.27.2015.7:** Move to support AB 502.

**Motion 6.27.2015.8:** Move to continue to support AB 648.

**Motion 6.27.2015.9:** Move to oppose AB 880 unless amended.

**Motion 6.27.2015.8:** Move to approve looking into having the 2018 Annual Meeting during the fall. *Motion carried with four oppositions.*

**Motion 6.27.2015.9:** Move to approve the 4th Quarter Financial reports.

**Motion 6.27.2015.15:** Move to approve the hiring of Andrew Soderstrom as Executive Director with the classification as an Exempt Employee.

## Warren Brandli Internships & Santos Cortez Graduate Student Legislative Advocacy Internship Applications Now Being Accepted

The CSPD Leadership Development Committee is now accepting applications for these two very prestigious programs, designed to identify and empower future leaders for both CSPD and organized dentistry. California pediatric dentistry residents are encouraged to learn about these programs on the CSPD website at <http://www.cspd.org/?page=Internships>.

The application deadline is November 10 for both programs. Residents are encouraged to discuss their interest with their program directors or with LDC Chair, Dr. Mark Lisagor.

# For Your Information

## In Memorium



### **Margie Rousek, CSPD's First Corporate Sponsor**

It is with great sadness that we announce the passing of Margie Rousek. Margie was born in Oklahoma and moved to California in 1955 with her husband Jerry. Margie and Jerry started the Rousek Toy Company in the San Fernando Valley in 1960 and was one of the first sponsors of the CSPD Annual Meeting in 1974. Her love of children always kept her true to her cause of keeping children healthy and happy. For over 55 years the Rousek Toy Company (Now known as the Giggle Time Toy Company) has supported pediatric dentistry. The family continues to serve the pediatric dental community, always with the memory of Margie and how happy she was to see a child smile. She will be missed by all.

### **James Todd Milledge, DDS**

We are all saddened by the news of Dr. Todd Milledge's passing. Dr. Milledge was a gifted clinician and a dedicated teacher. He spent a great deal of his academic career at Loma Linda University School of Dentistry and later as the local director of the University of Washington/ Lutheran Medical Center pediatric residency program location based in Yakima, Washington. He interfaced with many people in the dental world and was a great mentor and friend.

Dr. Milledge is survived by his wife, Jenny, and their two sons. A memorial fund is being established to help the family during this difficult time. Contributions can be made at <http://www.gofundme.com/v7yz7y6g> (Dr. Todd Milledge Memorial Fund)



## Honors and Awards



### **Dr. Francisco Ramos-Gomez Awarded the Bright Smiles, Bright Futures Award**

In July, the International Association of Paediatric Dentistry held its biennial Congress in Glasgow, Scotland. Among the award recipients was CSPD's own Dr. Francisco Ramos-Gomez, who received the Bright Smiles, Bright Futures Award sponsored by Colgate-Palmolive. The award recognizes the best community education program submitted to the competition.

### **Dr. Drew Colantino Selected for Institute for Diversity in Leadership**

In June, the ADA Board of Trustees selected 16 participants for the 2015-2016 Institute for Diversity in Leadership. Drew Colantino, one of our Warren Brandli Interns, was included in this diverse group of dentists who will be prepared to set new leadership paths within the dental profession and their community.



### **Do You Have a Story to Share?**

Is your practice doing something unique? Whether it's a great new program or how you managed a complex issue, we want to hear about it. The CSPD Bulletin is distributed to members statewide and pediatric dentists located throughout California. If you have news to share email [admin@cspd.org](mailto:admin@cspd.org).



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