



BULLETIN

CALIFORNIA SOCIETY OF PEDIATRIC DENTISTS

SUMMER, 1993

VOL. XIX, NO. 2

PRESIDENT'S MESSAGE

Philip Welkstein, DMD

Well, the first three months of my term in office are now complete and although there have been no earth-shattering, innovative programs begun as of yet, there also have been no earth-shattering blunders as well.

The first board meeting went well (perhaps a little long) and much discussion revolved around problems and information related to ongoing projects. All presidents hope to instigate at least one or two startling new projects during their term, as do I, but my first goal is to see that those projects that have recently begun, continue on to fruition and those that seem bogged down, either get revved up and moving again or are scrapped and don't waste time.

All too often as a member of the board I have seen projects drag on and on through several administrations where no one is willing to either take the ball and run with it or have the guts to squash them when they're not going anywhere. I hope to avoid the same trap and see to it that all previous projects are dealt with sufficiently before any new ones are begun.

One pressing issue which should be on all of our minds at this time is that of finding a suitable candidate for the office of District IV Trustee to the AAPD. The

term of the incumbent, Weyland Lum, will be ending this year and hopefully, by whatever means, we can choose an able replacement.

It is so important for our district to be represented well at the academy level and for our membership to be kept well informed about the goings on of the academy. We have previously been so well represented by two of our component members, Drs. Brandli and Lum, and hopefully we can find a suitable replacement from either our component or one of the other components that make up our district.

Please take a moment to consider whether you would like to place your name in nomination for this important position. Feel free to contact me for further information regarding the qualifications and job description for this role.

The summer has been rather quiet with C.S.P.D. business but I'm sure things will begin to pick up soon. Our membership is up to 400 with a whole new crop of graduate students signed on. Welcome all new members.

Hope everyone has a great summer and please feel free to contact me with any questions or concerns regarding anything you feel relates to C.S.P.D.

NOMINATIONS FOR DISTRICT VI TRUSTEE

The deadline for submitting names of nominees for the position of Trustee for District VI of the Nominating Committee of AAPD is November 19, 1993, the time of the Ad Interim Board Meeting.

The AAPD Headquarters Office will contact each Component requesting the names of candidates for district trustee to be submitted to the Nominations Committee. If there is an Internal Election within the district, the name of the winner of that election shall be submitted as the nominee from the district.

In either case, the Headquarters Office will mail the Nominations Committee's report with the name of one nominee for each at-large and each district trustee to be elected. This report will be mailed to the voting membership of each district eligible to elect a member to the Board of Trustees no later than 45 days following the ad interim session.

Upon notification, any member in the trustee district may submit additional nominations to the Headquarters Office along with ten signatures of Active, Fellow, or Life members in that district for each nominee. This is particularly applicable to those states who are not AAPD Components. These additional nominations must be postmarked no later than 30 days from the date of the membership mailing of the Nominations Committee report.

Within 45 days of the mailing of the Nominations Committee report to the membership of the district, a ballot with the nominee recommended by the AAPD Nominations Committee and any other eligible nominee will be forwarded to the voting membership in the trustee district.

No further nominations can be made from the floor of the General Assembly for district trustees.

Because of the time constraints, it is extremely important for those interested in becoming a nominee for Trustee of District IV to let your Component President know as soon as possible. It would be prudent for the Boards of Nominating Committees of the Components in District VI to interview likely candidates as well.

Weyland Lum

CSPD IN CALIFORNIA PEDIATRICIAN

As an ongoing project, the Public and Professional Relations Committee submits dental articles to the California Pediatrician, the quarterly publication of the California component of the American Academy of Pediatrics. As a membership benefit, CSPD members have been receiving copies of this publication since 1990.

To date, the following articles have been published:

- "Pediatric Dental Injuries," Berger & Trask; Winter, 1986.
- "Fluoride Use in Dental Caries Prevention," Berger; Fall, 1987.
- "Baby Bottle Tooth Decay," Isman; Spring, 1988.
- "A Child's First Dental Visit by 12 Months of Age," Goepferd; Spring, 1989.
- "Dental Neglect—When to Report," Blain; Fall, 1989.
- "Dental Abscess," Sobel; Spring, 1991.
- "Sedation in Pediatric Dentistry," Duperon; Spring, 1992.
- "Periodontal Disease in Children," Berger & Sobel; Winter, 1992.
- "The Mouthguard, Whatever Sport You Play—It Fits," Perry; Summer, 1993.

Please, if you are interested in authoring an article or have an idea for a topic, contact Steven Chan or Suzanne Berger for details. Copies of the previously published articles may be obtained by contacting CSPD's Executive Director.

AMERICAN ACADEMY OF PEDIATRIC DENTISTRY

47TH ANNUAL SESSION, ORLANDO, FLORIDA

Submission Deadline for Presentation of the 1994 Annual Session

Presentation	Submission Date
Miniclinics	September 30, 1993
Sessions with the Experts	November 30, 1993
Table Clinics	February 1, 1994
Graduate Student Research Award	December 1, 1993
Research Abstracts/Educational Foundation Award	December 1, 1993
Pocket Clinics	November 30, 1993
Academics Workshop	November 30, 1993
Special Interest Program	December 1, 1993

These deadlines are strictly adhered to.

If you are interested in making a presentation at the 47th Annual Session in Orlando, Florida, please complete the appropriate form in your registration packets or contact the AAPD office.

CONTENTS

FEATURES

President's Message	1
Calif. Pediatrician	1
AAPD 1994 Session	1
Nominations for District VI Trustee	1
Electronic Dental Anesthesia	2
Enamel Hypoplasia	2
Patient Financing	2
Board Member Profiles	2
Board Certification	3
OTC Mouthwash	3
Auxiliary Ed.	6

COMMITTEE REPORTS

Membership	2
Treasurer's Report	3
Board Briefs	4

ANNOUNCEMENTS

Piranhas	2
Information Request	3
CSPD Research Awards	3

CLASSIFIED	6
----------------------	---

CSPD Annual Meetings 1994

Westin Mission Hills Resort
Rancho Mirage (Palm Springs)
April 7-10, 1994

1995

Ojal Valley Inn & Country Club

1996

Ritz Carlton Pasadena (L.A.)
March 28-31, 1996

Continuing Education

European Academy of Paediatric Dentistry

June 18-21, 1994
Athens Hilton Hotel, Athens, Greece
An Update in Paediatric Dentistry and Future Trends

Aesthetic Dentistry; Occlusal Guidance; Special Patients;

Children at Risk for Dental Disease
Contact: Constantine J. Oulis, DDS
University of Athens; TEL: 30 1 6856420 1

CLINICIAN'S CORNER

EFFECTIVENESS AND ACCEPTANCE OF ELECTRONIC DENTAL ANESTHESIA BY PEDIATRIC PATIENTS

Previous studies have demonstrated the success of Electronic Dental Anesthesia (EDA) as a suitable for injectable local anesthesia. The purpose of this clinical trial was to determine the efficiency and acceptance of EDA when utilized for pediatric patients. Forty patients ranging in age from 3 to 12 years of age participated. Approximately one-half had received local anesthesia by injection at previous visits; the remainder had never experienced local anesthesia. Procedures performed were amalgams, composites, stainless steel crowns, and anterior composite crowns. Fewer than 5% of patients experienced moderate discomfort during treatment. EDA was successful with all other patients. All patients accepted EDA without hesitation. All patients who had previously experienced injectable local anesthesia by injection expressed a preference for EDA during future appointments. Patients who had experienced injectable local anesthesia used more current for anesthesia. Levels for the experienced group were three times greater and differed significantly from non-experienced children who had never experienced injectable local anesthesia. This may be explained by the fact that children who had previously experienced injectable local anesthesia may have expected more symptoms from the anesthesia itself, i.e., numbness or tingling sensations. These children may have felt more comfortable feeling the subjective sensations from higher EDA current levels as the treatment was initiated.

No other trends were demonstrated which related EDA compensation with patient apprehension, patient-dentist rapport, treatment time, or patient discomfort. While all of these patient characteristics were subjective, they were assigned by one dentist who utilized behavioral parameters for the assignment.

Few patients reported discomfort during treatment or after treatment was completed. The patients who reported or were grouped as "slight" discomfort reported "funny feelings" or a low level of discomfort which did not interfere with treatment. None of the patients who participated in this study reported severe discomfort and the two patients who reported moderate discomfort were completed with local anesthesia. Even with injectable local anesthesia, discomfort was not entirely eliminated and the same two patients also reported discomfort from the procedure after local anesthesia.

As mentioned before, all patients who had experienced local anesthesia for dental treatment preferred EDA to injectable local anesthetic solutions. Since the non-experienced group was younger and had no reference for comparison, a strong statement could not be made for EDA preference.

EDA may offer many safety and psychological advantages over injectable local anesthesia. EDA is not a drug, so the lowest possible doses for clinical efficiency is a consideration, however safety is not compromised even when utilizing maximum levels of current. Toxicity and sensitivity reactions to local anesthetic solutions are eliminated and there is no possibility of intravascular injection or reactions to local anesthetic solutions or preservatives. Since the procedure is non-invasive, injection discomfort, psychological objections, and needle phobias are eliminated. Multiple quadrants can be treated without multiple injections and there is no possibility of infection at the injection site.

One of the greatest post-anesthesia problems for pediatric patients has always been self-inflicted trauma from chewing soft tissues. EDA symptoms are eliminated as soon as the current is turned off, although circulating endorphins and serotonin may persist. Since the patient completes treatment without a numb tongue, cheek or lips, inadvertent soft tissue trauma is eliminated and the patient can eat, drink or speak without lingering local anesthesia impairment.

Another injectable local anesthesia problem which is eliminated with EDA is that with the cessation of EDA, the patient's tactile senses are not altered by numbness and occlusal adjustment of new restorations may be more accurate.

A possible benefit of EDA is the control over anesthesia the patient feels when s/he is able to adjust the level of anesthesia with the hand-held, remote unit. Allowing the patient to control a portion of the treatment may be significant psychological adjunct.

CONCLUSIONS

1. EDA was effective for 95% of patients receiving restorative care.
2. Young patients accepted EDA and preferred it to injectable local anesthesia.
3. EDA may offer many safety and psychological advantages over injectable local anesthetics.

The EDA unit used in this study was an UltraCalm available from Sion Technology, Aurora, Colorado. Many EDA/transcutaneous electronic nerve stimulation devices are available commercially. Dental Products Report carries many advertisements for these devices. Some are:

- Spectrum Max-SD, The Electrode Store, Yucca Valley, CA
- Alpha Stim 100, Electromedical Products Intl, Hawthorne, CA
- 3M Dental Electronic Anesthesia, 3M Dental Products, St Paul, MN.

Joseph R. Jedrychowski
Donald F. Duperon

STUDY OF ENAMEL HYPOPLASIA IN PRIMARY TEETH

Judith K. Grether, Ph.D.

California Birth Defects Monitoring Program
Department of Health Services
(510) 540-3164

The California Birth Defects Monitoring Program (CBDMP) has initiated the establishment of a registry of children who have severe enamel hypoplasia of the primary maxillary central incisors.

The goals of the project are to establish a registry of children with severe enamel hypoplasia, to describe the demographic and clinical characteristics of these children, and to use the demographic and clinical data to design further research projects on risk factors for cerebral palsy and other developmental disabilities which may be associated with prenatally established hypoplasia.

We are asking the dentists to discuss the project with parents of eligible children and to provide the parents with a packet of information. If the parents are interested in participating, they must sign consent forms, including consent to let us review medical records, and complete a brief questionnaire. In addition, we are asking parents to provide a close range photograph of their child's front teeth. We anticipate that the child's dentist will often be able to provide a suitable photograph. If not, we can arrange for CBDMP staff to make a home visit to photograph the child's teeth.

Participation in this project is entirely voluntary, both for the dentists and for the children and their families. To our knowledge, this is the only project of its kind ever to be conducted and we are hoping for active cooperation from dentists and parents.

Our interest in this project grew out of our California Cerebral Palsy Project (CACPP), a population-based study of children with moderate or severe congenital cerebral palsy. As a part of the CACPP, we conducted dental examinations on 126 children with CP to determine the presence of enamel hypoplasia. We are currently in the process of analyzing the dental data in conjunction with other clinical and demographic data on the children.

For our new project on enamel hypoplasia, we are interested in recruiting any children with missing enamel, whether or not they have cerebral palsy or any other disabilities.

AFFORDABLE PATIENT FINANCING A KEY TO PRACTICE GROWTH

Wouldn't it be great if every patient that needed treatment in your office paid you cash at the time of treatment? This is a pleasant thought but reality tells us that your practice growth depends on how successful you are in helping every patient pay their bill. Most offices prefer to offer patients as many options for financing dental treatment as possible. This begins with a willingness to discuss financing and making firm financial arrangements. Having a clear-cut credit policy in place that includes criteria for granting credit and payment options is a good place to start.

PAYMENT OPTIONS

You may wish to offer a 5 to 10 percent courtesy discount if you patient agrees to pay their balance at the time treatment begins. As consultant Cathy Jameson states, "The cost of carrying the account on your books will be greater than the courtesy given." (Dental Economics, February 1993).

Credit cards such as Visa or Master Card can be an alternative. However, most patients are reluctant to use them, preferring to use the credit line for "fun" things.

Extended payment plans. Before extending credit to a patient, check to see that they are credit worthy. This can be determined by reviewing their patient history form. A businesslike patient history will include specific information on the person responsible for paying the account. Review the patient's past payment record and run a credit bureau report. Each of these items are easy to obtain and evaluate for extending credit to patients.

Dental credit cards. A patient finance card is a credit card that your patients can use specifically for dental treatment. As a participating office, you receive payment up front and the patient is able to make monthly payments over an extended of time. Dental credit cards are a good option for some people, but unfortunately, most patients who qualify for this type of credit can probably afford to pay cash.

Recourse financing. This type of financing is for the larger segment of your patients who either don't qualify for a dental credit card or just don't want to pay the high rate of interest. With recourse financing, the office has the flexibility of deciding which patients qualify for credit, for how long, and if and when they wish to charge interest. Financial arrangements can be made the same day treatment is presented. There is no delay in qualifying patients and no need for them to complete additional paperwork. You receive payment on your account weekly as treatment is completed. This provides you a even cash flow and relieves you of the headaches associated with billing and collections.

Making today's dental procedure affordable for a greater number of patients will result in having more people receive valuable care and your practice will reap the rewards through growth and financial success.

Connie Howe, Regional Manager, First Pacific Corp.
Accounts Receivable Management, Salem, OR

MEMBERSHIP STATUS

June 19, 1993

Active Members	310
Faculty	10
Associate	18
Life	24
Retired	6
Honorary	1
Students	26
Dropped	-12
Total Roster	395

PIRANHAS!

Yes, there really are piranhas at the Westin Mission Hills Resort in Rancho Mirage. Plan to watch for them next year at the 1994 CSPD Annual Meeting, April 7-10. Trust me.

To help you remember: this is the weekend after Passover and Easter, and the weekend before the CDA meeting at Anaheim.

My female intuition tells me we will have a VERY enjoyable meeting. I'm looking forward to seeing you there.

Suzanne Berger
Meeting Chairperson

BOARD MEMBER PROFILES

Donald F. Duperon
Director '95 South



Dr. Duperon was born and raised in Canada. He received his D.D.S. degree from the University of Alberta in 1961. After six years of private practice in Regina, Saskatchewan, he attended the University of Manitoba where he earned a Master of Science degree and a concurrent certificate in Pediatric Dentistry from the Children's Hospital of Winnipeg.

From 1970 to 1974, Dr. Duperon served as Chairman of the section of Pediatric Dentistry at the University of Manitoba.

In 1974 he was recruited to the University of California, Los Angeles to become the Director of the Pediatric Dentistry postdoctoral program. He currently serves as the Chair of Pediatric Dentistry, the Director of the postdoctoral program and the director of the UCLA/Roybal Children's Dental Center.

Dr. Duperon is a Member of the Royal College of Dentists of Canada, a member of the Canadian Academy and a fellow of the American Academy of Pediatric Dentistry. He serves as President-elect for the local American Society of Dentistry for Children.

His other interests include: building and flying radio controlled gliders, Shotokan Karate (black belt ranked), and photography.

Stephen J. Howard
Editor



Steve is a product of the East coast educational system. He acquired his D.D.S. from New York University School of Dentistry, and his specialty training and Master's degree from Boston University School of Graduate Dentistry. He also has a Fellowship from the AAPD.

For the past fifteen years he has practiced pediatric dentistry and orthodontics in Tarzana (located in the San Fernando Valley of L.A.).

Steve and his wife Nancy (who you know as the co-chairperson of our Annual Meeting "fun runs") live in Tarzana with their children Mandy (16 1/2) and Todd (13 1/2), and their Golden Retriever, Einstein.

In his spare time you'll probably find Steve, along with Nancy, participating in any one of the numerous sports they enjoy together.

INFORMATION REQUEST

We are often exposed to services and products, and have no hands-on knowledge of the actual success record of these items.

Management consultants provide a unique service to our profession, in general. Oft-times however, not specifically enough for pediatric practices, or mixed pedo-ortho practices. If you have used a marketing and/or management consultant within the past year or two, please touch base with me. Either a phone call, 818-343-9119; fax, 818-343-3908; or note to my office (address on the last page).

The information you provide may be of great help to your colleagues.

Thanks,
Steve Howard, Editor

TREASURER'S REPORT

1992-93 FISCAL YEAR (ENDING 4/30/93)

INCOME

Dues	\$28,340.00
Interest	902.45
Surplus funds (prior years).....	3,810.93
	\$33,053.38

EXPENSES

Board Meeting Expenses	\$ 6,154.87
Secretarial Services.....	3,000.00
Executive Director.....	5,500.00
Office Expenses.....	5,814.99
Accounting Expenses.....	250.00
Editor (Bulletin).....	4,329.37
Peer Review.....	552.72
Dental Care.....	75.52
Public and Professional Relations.....	1,357.48
AAPD Liaison.....	1,259.20
Research Award.....	1,000.00
Membership Directory.....	1,102.00
Ad Hoc Membership Services.....	1,883.06
AAPD California Reception.....	408.31
Miscellaneous.....	365.86
	\$33,053.38

RECONCILIATION OF RESERVE FUNDS

1992-93 Reserve Funds Requirement (1 year dues income).....	\$28,880.00
1992-93 Actual Reserve Fund.....	\$40,505.36

Mark Lisagor, Treasurer

CSPD RESEARCH AWARDS

CSPD will support original research by active, retired, or student members in good standing. Interested applicants, which include clinical teams, schools, program chairmen, study clubs, as well as individuals, must submit a standard format research proposal, and an estimated budget and grant request (in an amount not to exceed \$1000). The appropriate forms may be obtained from Dr. Larry Like at UCLA.

It is the intent of the Professional Activities Committee to make the application procedure as easy as possible. The next deadline is April 1, 1994, with acceptance notification by May 1st.

AMERICAN BOARD OF PEDIATRIC DENTISTRY

BOARD CERTIFICATION

Easy as...

In an effort to increase the number of Board Certified pediatric dentists, the certification process has been simplified. It may be that sometime in the future the usage of the phrases "specialist" and "board certified" may become interdependent.

For those wishing to apply for the first time, or for those wishing to reinstate their eligibility, the first step is to contact Dr. James Roche, 1193 Woodgate Drive, Carmel, Indiana 40633.

He will provide you with an application. This application must be received by the ABPD central office no later than 60 days prior to the next Qualifying Exam — in this case, April 24, 1994. A fee of \$200 is required (\$100 each for the filing fee and the exam).

Successful completion of the Qualifying Exam allows the applicant to proceed to the Case History and Slide Sections. These are administered in conjunction with the annual AAPD meeting.

Part three of the examination is either a clinical simulation or a site visitation. The candidate has the choice of either exam.

There you go. Wasn't so bad, was it? Easy as ...

OTC MOUTHWASH SAFETY CAMPAIGN

Title sound familiar?

In the Spring '93 issue of our "Bulletin" you were informed of the potential toxicity of mouthwashes. CSPD and AAP were both sponsors of a resolution before the CDA House of Delegates requiring the use of child-proof caps on all mouthwash products in the marketplace.

This same issue was addressed at the AAPD Annual Meeting in Kansas City this past May.

A June L.A. Times "Consumer Affairs" article entitled "Mouthwash Makers Put a Lid on Pediatricians' Complaints" noted:

"The manufacturers said that they would use child-resistant caps and label warnings on mouthwashes containing more than 5% alcohol. The industry imposed a deadline of August 31, 1994, for the changes."

Ed.: As advocates for the well being of children, this successful endeavor is a terrific example of the mandate set forth by our organization.

BOARD BRIEFS

JUNE 19, 1993

The 74th meeting of the Board of Directors of the California Society of Pediatric Dentists was called to order by President Phillip Wolkstein, on June 19, 1993, at 9:10 a.m.

In attendance were: Drs. Wolkstein, Berger, Stewart, Lisagor, Reggiardo, Howard, Barber, Azama, Blain, Dixon, Perry, Steigner, Lum, Duperon, and Mungo. The President introduced Ms. V. Nicholas, who was present to record the minutes. A quorum was established. The President announced modifications to the agenda. The minutes from the meeting of April 1, 1993 were accepted by general consent. The officer's reports are as follows:

PRESIDENT - DR. WOLKSTEIN: Dr. Wolkstein gave his final budget and report on the 18th Annual meeting of the CSPD held at the Silverado Country Club. Because of the year to year turnover in annual meeting chairmen, there was some discussion to convert the duties of the annual meeting chairman in order to lighten the burden.

PRESIDENT-ELECT - DR. BERGER: Dr. Berger reported that the 1994 Westin Mission Hills Meeting has been moved back one week to April 7-10, 1994, because it was determined that it conflicted with the CDA meeting.

VICE PRESIDENT - DR. PEDERSEN: Dr. Reggiardo received a facsimile of Dr. Pedersen's report on liability insurance for Board members. Dr. Pedersen had contacted companies and was quoted yearly fees of approximately \$2,000. Dr. Wolkstein will contact Dr. Pedersen about researching this issue further.

SECRETARY - DR. STEWART: The secretary's calendar is under study.

TREASURER - DR. LISAGOR: Dr. Lisagor gave the 4th quarter financial report which reflected an increase in costs for the *Bulletin*. Figures for airfare were also considered as a possible explanation for being over budget. Active membership totals along with a proposal to increase dues were discussed to offset deficits which were perceived to be problematic for the future years.

Dr. Lisagor announced that the 1996 Annual Meeting hotel contract was being negotiated with the Ritz Carlton Hotel in Pasadena; however, the was discussion without resolution of who should sign the contract.

EDITOR - DR. HOWARD: Dr. Howard made comment on the success of the *Bulletin* citing its strength as a vehicle to widely disseminate information. The scope of the California component was acknowledged and utilization of a database to promote the *Bulletin* were discussed.

Actions emerging from the above discussion were 1) to instruct the Membership Committee to utilize any remainder volumes of the *Bulletin* in marketing strategies to increase membership and 2) to run a continuous announcement in the *Bulletin* to encourage associate memberships.

The Board also agreed that any staff member whose tips are printed in the *Bulletin* will be awarded \$25.00.

The *Bulletin* will also begin to publish a short biographic sketch and picture for each Board member.

EXECUTIVE DIRECTOR - DR. BARBER: Dr. Barber reviewed correspondence he had received since the last meeting, and there was selected discussion on the following:

Kid's Care Fair Update. In addition to providing immunizations for children, the potential to add dental screening at certain southern California sites was communicated by Crest Corp., a sponsor for the Kid's Care Fair. A letter was sent to CSPD members informing them there may be sites where they can contribute and that Crest will provide materials for screening if needed.

Cal Pediatrician. A letter was received from the editor of the journal stating that because of high costs for mailing the journal monies they receive from CSPD which had been set aside in a fund would not be used. The editor did not state this would be an ongoing expense; however, after discussion by the Board, a motion was made and seconded, and the vote called for.

Other topics finalized by the Executive Director included address updates for graduating students, a letter of condolence to Mrs. Harry Plett, and information from a Hewlett-Packard seminar on Aldus software and OCR hardware.

PAST PRESIDENT - DR. REGGIARDO: The 1998 AAPD Annual Meeting site selection results favored San Diego over Las Vegas. The site is still to be determined.

DISTRICT VI AAPD TRUSTEE REPORT

Dr. Weyland Lum updated the Board on securing a nominee for the next 3 year term. The discussion centered on choosing a candidate internally versus having the Academy provide a nominee. A name should be submitted by the Board by mid-November. Components favored selection of a candidate internally. Dr. Lum will send a ballot to members with his summer report soliciting their choice of the mechanism for choosing a candidate. Dr. Lum will also contact each components asking their choice.

STANDING COMMITTEE REPORTS

PUBLIC AND PROFESSIONAL RELATIONS - DR. PERRY: In the absence of Dr. Chan, Dr. Perry gave the chair's report. His report included actions for child-proof caps on mouthwash bottles; two resolutions supported by the CSPD which passed in the House; and matters on packaging safety and changes for manufacturers that went to the federal level for FDA approval.

Baby Bottle Tooth Decay. An update on the pilot educational program for health professionals on BBTd was made. The program is targeted towards general dentists, nurse practitioners, and pediatricians.

AB221/Unsupervised Hygiene. An amendment to this bill will give hygienists the right to practice unsupervised. The Board asked that individuals send letters to their senators under the auspices of the CSPD stating opposition to this bill, especially its implementation in schools.

CDA Resolution BBTd. The manufacturer of "Munchkin Soda Bottles," a baby bottle shaped like a Pepsi bottle, was discussed. The Board felt that a letter should be sent to various newspapers printed as an editorial sustaining the position of the CSPD that this company is promoting a negative image that undermines both the AAPD and CDA goals for health care. Dr. Chan will be asked to pursue this.

Professional Outreach to Pediatricians. Dr. Dixon updated the Board on the mouthguard project incorporating a special mailing to pediatricians. The President of the Board of the California Association of Pediatricians gave approval for mailing the CSPD letter with brochure; however, they expressed concern about lending their mailing lists. A mechanism for printing, stuffing, and sending the materials at the lowest cost has yet to be determined, but the CSPD has a bulk mailing permit which they would like to utilize.

The Outreach Program is generating more interest in the mouthguard project by making mouthguards accessible to athletic teams at schools. It was felt that if the CSPD continues to promote at this level, they should provide list of CSPD members to various sports medicine facilities and athletic programs.

Dr. Berger reported that an article on mouthguards is being published in the *California Pediatrician*.

Dental Care. Dr. Blain updated the Board on managed care issues. The ADA and the ASPD both support the CHAMPA plan which was submitted to the state task force researching managed care for indigent children and the Denti-Cal population. Consensus was made for the CSPD to keep a high profile in Sacramento and to closely follow the state pilot project to assess the quality of dental care and the quantity children receive from providers.

Credentials and Membership. Dr. Azama reported that the mentor program is being well utilized, especially in the USC and Loma Linda areas. She is also organizing space in the *Bulletin* to highlight new graduates.

No Peer Review report was submitted.

Professional Activities. During discussion of the revised distribution of award monies as voted upon at the April meeting, there was a discrepancy discovered between the wording of the April motion with the intent of the motion. The awarding procedure was changed so that up to \$5,000 could be cumulative from each fund except the student fund. A motion of clarification was made to 04.01.93.05 (see motion number 5 below).

Annual Meeting Site Selection (1997): Dr. Stewart has investigated accommodations in the Monterey Peninsula area for a possible 1997 site. He is to contact the Annual Planning Committee for input.

AD HOC COMMITTEE REPORTS

Patient Information Materials. Dr. Steigner's subcommittee is developing types of behavioral care information sheets for parents which serve as a type of "informed consent." This is not to take the place of Academy brochures, however. The subcommittee is looking into an additional five topics for production.

Auxiliary Continuing Education. Dr. Lisagor reported on the two auxiliary programs given. Based on the attendance and feedback, they were a success. The Board agreed that two courses given in the northern and southern locations best meet future needs. The attendees expressed that it is important to receive hand-on training specifically designed for the pediatric dental auxiliary. A videotape on the program is available. Drs. Lisagor and Azama are to discuss future programs and report their ideas to the Board.

AAPD 1998 Meeting. The Academy has committed to the Marriott Hotel in San Diego for the 1998 meeting.

CONTINUING BUSINESS

Dr. Barber and Dr. Lisagor volunteered to further investigate the need for transcription services and equipment for Board meetings.

NEW BUSINESS

Dr. Wolkstein was contacted by Dr. Wil Nation from Loma Linda and requested sponsorship by the SCPD for a course on dental trauma. The sponsor fee would approximate \$2,500. The Board decided not to participate.

Dr. Barber was contacted by the CDA with a request for the CSPD membership list. The Board asked Dr. Barber to respond affirmatively.

Dr. Stewart was contacted by Dr. Judith Grether, an epidemiologist from the Department of Health Services, for a mailing list. She is trying to correlate cases linking cerebral palsy with histories of missing enamel. The Board asked Dr. Stewart to respond affirmatively.

A motion was made to adjourn the meeting at 3:50 pm. The next meeting date and time is to be determined.

The following motions were debated and passed:

SUCCESSFUL BOARD MOTIONS

06-19-93-01: I move that an Ad Hoc committee be established to review the structure of the annual meeting and to explore a committee structure for meeting planning and execution.

P. Reggiardo, S. Berger

06-19-93-02: I move that CSPD accept the Annual Budget as proposed and modified by the Treasurer, Mark Lisagor.

P. Reggiardo, M. Lisagor

06-19-93-03: I move that the *Bulletin* be sent to Academy members in all adjacent states which do not have component chapters.

D. Duperon, S. Blain

06-19-93-04: I move that the CSPD reimburse the California Chapter of the American Academy of Pediatrics those mailing costs associated with providing the California Pediatrician to our membership, when so requested by the California Chapter of A.A.P.

P. Reggiardo, R. Stewart

06-19-93-05: I move that the intent of motion 04-01-93-05 is that the accumulated research monies will only be awarded to active and/or retired members of the association.

D. Duperon, R. Mungo

Ray Stewart, Secretary

BULLETIN

CALIFORNIA SOCIETY
OF PEDIATRIC DENTISTS

Published 4 times annually

EDITOR

Stephen J. Howard, D.D.S.

CSPD members are encouraged to contribute to the *Bulletin*. Articles, Letters to the Editor, or other items of interest are welcome. The next deadline for submission is November 21, 1993. Items for publication must be double spaced, typewritten and of reproducible quality for Xerox or Fax.

Products and informational content presented in the *Bulletin* by contributing authors are not necessarily supported by the Executive Board of CSPD.

PERMIT NO. 39
Palos Verdes, CA
PAID
U.S. POSTAGE
BULK RATE

CALIFORNIA SOCIETY OF PEDIATRIC DENTISTS
P.O. BOX 2328
PALOS VERDES PENINSULA, CA 90274



Officers and Members of the Board of Directors — 1993-1994

PRESIDENT:	Phillip Wolkstein, DMD, 275 Hospital Way, San Jose, CA 95119	(408) 578-6550
PRESIDENT-ELECT:	Suzanne P. Berger, DDS, 1222 Mission Verde Dr., Camarillo, CA 93012	(805) 388-2316
VICE PRESIDENT:	Jac W. Pedersen, II, DDS, 620 California Blvd., #M, San Luis Obispo, CA 93401	(805) 544-8111
SECRETARY:	Ray E. Stewart, DMD, 1117 Los Palos Dr., Salinas, CA 93901	(408) 424-0641
TREASURER:	Mark Lisagor, DDS, 3687 Las Posas Road, Camarillo, CA 93010	(805) 484-2705
PAST PRESIDENT:	Paul A. Reggiardo, DDS, 17742 Beach Blvd., #320, Huntington Beach, CA 92647	(714) 848-0234
EDITOR:	Stephen Howard, DDS, 18411 Clark St., #306, Tarzana, CA 91356	(818) 343-9119
EXECUTIVE DIRECTOR:	Thomas K. Barber, DDS, (home) 2 Pear Tree Lane, Rolling Hills Est., CA 90274	(310) 377-3925
	FAX for Dr. Barber	(310) 206-5539
DIRECTOR '94N:	Steven D. Chan, DDS, 1895 Mowry Avenue, #121, Fremont, CA 94538-1700	(510) 791-0971
DIRECTOR '94N:	Ann T. Azama, DDS, 384 11th Ave., San Francisco, CA 94118	(415) 668-0600
DIRECTOR '95N:	David M. Perry, DDS, 2125 Whitehall Place, Alameda, CA 94501	(510) 521-5016
DIRECTOR '95N:	Martin R. Steigner, DDS, 51 Maria Drive, #823, Petaluma, CA 94952	(707) 763-1548
DIRECTOR '94S:	Stephen M. Blain, DDS, School of Dentistry, Center for Health Sci., UCLA Rm. A3-042, Los Angeles, CA 90024	(310) 825-0691
DIRECTOR '94S:	Howard Dixon, DDS, 5627 Oberlin Dr., Ste. #100, San Diego, CA 92121	(619) 452-7272
DIRECTOR '95S:	Donald F. Duperon, DDS, School of Dentistry, Center for Health Sci., UCLA Rm 23-020, Los Angeles, CA 90024	(310) 825-0691
DIRECTOR '95S:	Richard Mungo, DDS, 17752 Beach, Suite 201, Huntington Beach, CA 92647-6838	(714) 841-4990

1993-1994 STANDING COMMITTEES

NOMINATING COMMITTEE:

Phil Wolkstein, Chairman, President, Non-Voting
Paul Reggiardo, Immediate Past-President
Richard Sobel, 2nd Past President
Roland Hansen, Member-At-Large
Joseph Renzi, Member-At-Large
Randall Wiley, Member-At-Large

PUBLIC AND PROFESSIONAL RELATIONS:

Steve Chan, Chairman
Donald Duperon, Liaison Calif. Chapter AAP
Howard Dixon, Professional Organizations Outreach Coordinator
Michael McCartney, Liaison AAPD
David Perry, Liability Insurance Advocate

EDITORIAL COMMITTEE:

Stephen Howard, Editor & Chairman
Suzanne Berger
Steve Chan

CONSTITUTION AND BYLAWS:

Paul Reggiardo, Chairman; Immediate Past President
Mel Rowan
David Good

DENTAL CARE:

Steve Blain, Chairman
Ray Stewart
Dick Mungo
Jac Pedersen
Wayne Grossman

CREDENTIALS AND MEMBERSHIP:

Ray Stewart, Chairman, Secretary
Ann Azama, Graduate Student Liaison
Steven Chan, Young Student Recruitment
Tom Barber, Ex Officio

PEER REVIEW:

Dave Taylor, Chairman
Paul Reggiardo
Phil Wolkstein

PROFESSIONAL ACTIVITIES:

Larry Luke, Chairman, UCLA
Richard Udin, USC
David Rothman, UOP
Winfred Nation, Loma Linda
Donald Duperon, Board Liaison

ANNUAL MEETING AND SITE SELECTION:

Ray Stewart, Chairman
Steve Chan
David Perry
Thomas Barber, Ex Officio
Ann Azama
Martin Steigner

AD HOC COMMITTEES

PATIENT INFORMATION MATERIALS

Martin Steigner, Chairman
Weyland Lum
Tom Buch

AUXILIARY CONTINUING EDUCATION

Mark Lisagor
Ann Azama

DISTRICT VI AAPD TRUSTEE

Weyland Lum, DDS (415) 668-0600

CONTINUING ED FOR AUXILIARIES FINALLY A REALITY

"Thank you for finally gearing a seminar towards the pedo practice. Extend the info given. Hope you continue to hold these seminars."

CSPD members have long been aware of the scarcity of continuing education courses available to pediatric dental auxiliaries. Responding to this need, two courses were held in April and May, in San Francisco and in Los Angeles, entitled "Learning More About the Children We Serve." This first of its kind effort, featuring Stephen Blain, DDS, on the Behavioral Aspects of Pediatric Dentistry, and Terri Lisagor, MS, RD, on Diet, Nutrition and Oral Hygiene for Children, played to a combined audience of over 250 auxiliaries from CSPD member offices.

Especially important to the Board of Directors were the results of course evaluations completed by most course participants. While there were many constructive criticisms and suggestions for ways to improve the format and content of future courses, the overwhelming sentiment was that this was a welcomed concept which was long overdue.

"This was an excellent seminar! I learned much new information in the area of nutrition. There have been some changes and new breakthroughs since I went to school ten years ago. The patient management was really interesting. The speaker was exciting and humorous...we had a new hygienist here today who hasn't worked in a pedo office. What a great way to gain some insight on patient management! It makes me realize this is an ongoing experience." (Comments from a hygienist in the San Diego area.)

"I'm a B.A. college grad, ten plus years of managing front office pedo. I've been waiting for a seminar such as this for a long time . . . I look forward to more of these workshops (I hope); because we're dealing with the same issues! And, it feels great to know and feel that!" (From an office manager in Covina.)

With the support of the membership (thanks to Dr. Alan Longfellow for sending fourteen staff members from Tempe!), CSPD should be encouraged to make these courses a regular, ongoing program, perhaps with locations varied throughout the state.

Special thanks to Stephen Blain (on our Board of Directors) and to Terri Lisagor (wife of member Mark) for tackling a difficult assignment and doing a great job in this uncharted territory!

CLASSIFIED ADS

California (Southern) Outstanding opportunity for first buyer or established practitioner. Long-established pedodontic practice for sale. Beautiful office with like-new equipment. Professional building. Gross revenues for 1992 over \$300,000. Seller will assist in transfer. Contact: 818-999-9595.

New Practice Opportunity—Excellent location, excellent demographics. Space available to rent/develop. High visibility. High foot traffic area. Residential, near schools. Other dentists established on site. For more information please send brief resume with current phone number and address to Successful Practice, 1048 Irvine Ave., Suite 226, Newport Beach, CA 92660.