

Bulletin

Fall-Winter 2002

www.CSPD.org

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President's Message



Dr. Richard Mungo

In many parts of Northern California the leaves have changed their color as fall sets the stage for the chilly freeze of winter. In some of the Southern regions of our State the haze has turned to a golden brown with a freshness that belies its questionable composition. Johnny Carson once said he did not trust any air he couldn't see! Nevertheless, change is in the air. Change is all around us. It dictates our moods,

our actions and even our hope for the future.

As an organization, the California Society of Pediatric Dentists has grown and changed throughout the years. We have grown from a band of brothers and sisters linked by the titles and degrees that we earned, to an agency for child advocacy that speaks as a major authority in pediatric oral healthcare. This did not just happen. Challenges and issues from outside entities stimulated our growth and maturity. The recently convened meeting of the Interdisciplinary Affairs Committee (IAC) held in Sacramento was attended by our Executive Director, Dr. Melvin Rowan and your President. The IAC is an advisory committee of the California Dental Association. It is comprised of the ADA recognized specialty organization presidents within our state and a general dentist representative selected by the CDA president. The purpose of the meeting is to offer a forum for specialists to voice their concerns regarding the issues that hold a high priority within their specific areas of expertise. It serves as a link to the CDA leadership and Staff, offering a direct line of communication that can stimulate Council discussion, legislative action and/or policy changes. Dr. Steven Chan, President of the CDA and a member of CSPD, chaired the meeting. The first issue we proposed for discussion was related to the criminalization of dentists experiencing untoward events within their offices. We are all aware of the fact that members of our specialty have been placed in a high degree of jeopardy when arrested and charged with criminal clinical activity. What starts out as a malpractice investigation soon morphs into a full-scale criminal arraignment. We have observed a definite change in how healthcare providers are prosecuted within our justice system. This foreign arena of legal enterprise brings with it an enormous number of problems and concerns that healthcare professionals are poorly equipped to intelligently address. Our goal, at the IAC, was to inform our fellow specialists how important a strong stance can be in not allowing our constituents to become excessively vulnerable to the whims of misguided criminal

justice officials. A mixture of interest and awareness was found within the room. The committee considered two possible solutions. The first action to come forth was a request that the California Dental Association seek a specific policy statement that can foster statewide legislative changes. This remedial action could better prepare and protect dental health professionals from the increasing flow of unfair and unrestrained criminal charges. The second possible solution would be to educate the public by enlisting the aid of the CDA membership, CDA Executive Committee and the CalDPac. This would lead to a grass-roots effort that could produce a positive affect upon the selection of county and statewide legal officials who are knowledgeable about the consequences of bringing indiscriminate criminal charges into the arena of patient care. There were many other issues that came before the IAC on that stimulating day including questions regarding CDA's position on amalgam, mandatory dental examinations for school entrance, clarification regarding Cal/OSHA's definition of orthodontic wires as related to sharps waste, specialty representation on the floor of the CDA House of Delegates, the composition of the Dental Board of California and efforts to redefine the scope of practice for all dental allied health personnel. This full slate of issues led to some lively debate and eventual consensus. Dr. Rowan was a welcomed leveling force and was able to clarify a number of issues due to his astute historical perspective gained at previous IAC meetings. It seems that almost all of the subjects discussed had a direct association with the practice of pediatric dentistry. I believe that CSPD was well represented at the IAC thanks to the wisdom and mandates of our highly dedicated committee chairs and our board of directors.

The formulation of a new Dental Board governing the dental affairs of California will bring about changes in priorities, changes in perspective, and changes in their approach to problem solving.

The recognition that oral health is an integral part of overall health has brought with it societal demands for change. We will no longer accept the pain and infection associated with oral maladies as part of the human experience. Realizing that children cannot grow and function while under the distraction of oral discomfort will carry with it a mandate for early detection of oral problems. This will bring with it a demand for increased access to care. School readiness is a huge issue with the current state legislature. We believe that mandated dental examinations prior to entrance into school will eventually become a reality. All of these burgeoning changes have changed our organization and our personal lives. John F. Kennedy once stated, "Change is the law of life,

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Dr. Walter McBride,
First President of ASDC
taken in c1990 when he
was over 90 years of
age. (See story page 4)

The Bulletin Interviews Drs. Lichty & Pokala

Children's Hospital and Health Center in San Diego announced plans last month to inaugurate a pediatric dental residency training program aimed at easing California's pediatric dental workforce shortage, particularly for underserved populations, for very young children and for children with special healthcare and developmental needs. This hospital-based program will accept its first two residents in July of next year. The Bulletin contacted Program Director Dr. Guy Lichty and Lead Faculty Member Dr. Parvathi Pokala to find out more about the program and its development.

Bulletin: Congratulations! When did planning begin on this project?

Dr. Lichty: Planning began in the spring of 2000. Parvathi initially conceived the idea in response to the shortage of pediatric dentists in San Diego County and the overwhelming need for pediatric dental care. It became clear to us that a pediatric dental training program in the region was a critical step in improving the oral health of San Diego's children. Lisa Haney, the program manager for the Anderson Center for Dental Care, was instrumental in promoting the residency program within Children's Hospital and realized the opportunity to integrate oral health care with other medical services.

Dr. Pokala: I keep thinking back to when all this started and remember how many people told me that we would not be able to start a program in San Diego. George Acs, Program Director at Children's National Medical Center in Washington, D.C. was my mentor. I asked him to come to San Diego and start a program and he said, Parvathi you should do this!

Bulletin: The program starts in July. What type of postdoctoral candidate do you hope to attract?

Dr. Pokala: Initial funding is provided through a HRSA Title VII Health Professions Training Grant. The grant was awarded partly to address the workforce shortage of underrepresented minorities in dentistry, particularly Hispanic, African-American and Native American dentists working in San Diego County, especially in underserved areas. Our goal, consistent with the grant parameters, is to achieve at least a 50% enrollment of qualified ethnic- minority candidates. We are seeking dentists with an outstanding record of clinical and didactic achievement, excellent communication skills and the ability to interact positively with a wide range of medical professionals and ethnic minorities. Candidates should be committed to improving the oral health of underserved populations and children with disabilities, must be licensed in the state of California and have a strong interest in continuing to work in San Diego County.

Bulletin: How much money will be available from the Title VII Health Professions Training Grant and how will it be used?

Bulletin: What was the largest hurdle in getting this program off the ground?

Dr. Lichty: There were no shortages of hurdles. The Title VII start-up grant requires program self-sufficiency after three years and before we could obtain the grant we needed curriculum and facility approval from the ADA Commission on Dental Accreditation. Obtaining that initial funding, successfully negotiating the accreditation process, developing a sound financial plan, and securing internal support and administrative approval from the Hospital to implement a new dental program during one of the most challenging financial

times in the history of healthcare all tie for first place. We now face challenges in securing and retaining faculty.

Bulletin: Faculty recruitment is a problem not only in California, but across the country. From where will you attract the instructors necessary for a successful program?

Dr. Pokala: As you know, Guy has agreed to assume the responsibilities of full time Program Director and I will serve as the lead faculty member. In addition, we have recruited a dual-trained specialist with Board Certification in both pediatric dentistry and orthodontics and others have expressed interest in becoming part of the program. We are continuing to evaluate additional applications for faculty positions resulting from the tremendous interest of the pediatric dental community in and out of San Diego County. Part-time and volunteer instructors will play a large part in supplementing core faculty.

Bulletin: What other challenges lie ahead?

Dr. Lichty: For the San Diego Pediatric Dental Residency Program, the challenges are in constructing an outstanding clinic, integrating our new residents into the hospital, and ensuring the program maintains a strong didactic component to successfully prepare residents for Board certification and for practice. For Children's Hospital and the Anderson Center, the challenges will be minimizing operating expenses and obtaining reimbursement that covers the true cost of delivering care. We will also face challenges in integrating oral health into the medical model and securing long-term funding for other Anderson Center programs.

Bulletin: Where will the residents obtain their didactic training and clinical rotations?

Dr. Lichty: The program will be based at Children's Hospital and Health Center in San Diego. Residents will receive most of their didactic training at the hospital and clinical training will occur in a new state-of-the-art onsite dental clinic. Clinical rotations will be provided through the departments of general anes-

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A new pediatric dental residency training program opens.

California Society of Pediatric Dentists 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 e-mail (rhansen@cspd.org), in computer format on a 3.5" disk or typewritten in double space format.

Product and informational content presented in the Bulletin by contributing authors is not necessarily endorsed by the Executive Board of CSPD.



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Roland Hansen, DDS, MS

MISSION OF THE BULLETIN

The Bulletin of the California Society of Pediatric Dentists 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 Dentists.

2003 Annual Meeting

Victoria, BC, Canada

The California Society of Pediatric Dentists invite you to its 28th Annual Meeting and Scientific Session, hosting the 1st Meeting of the Western Society of Pediatric Dentistry of AAPD to be held at:

The Fairmont Empress Hotel
Victoria, B.C., Canada
April 3 - 6, 2003

Scientific Session:

Dr. Barbara Sheller

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Dr. Vincent Kokich

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Other activities include: Butchart Gardens, Marine Wildlife Tour, Antique Row Shopping Tour, High Tea at The Empress, A Taste of Victoria Walking Tour, Parliament Buildings, Willow Stream Spa at The Empress

Visit www.tourismvictoria.com for more information.

CSPD members will receive registration materials in early January. For all others, please contact Dr. Melvin Rowan, Executive Director at (310) 465-1580 or melrowan@aol.com for information or to receive registration materials.

Interview from page 2

thesia, emergency medicine and pediatrics. As part of the hospital's integrated approach to oral health care delivery, residents will become part of hospital teams in oncology/hematology, cardiology and orthopedics, conducting patient diagnosis and treatment planning with other medical professionals. Off-site rotations will include Children's Dental Health Clinic in Golden Hill, the oldest non-profit dental clinic in the county, which is currently celebrating its 50th year of community service, and La Maestra Health Center in Mid-City, San Diego.

Dr. Pokala: Children's Hospital is the designated pediatric trauma center and the primary source for pediatric and neonatal critical care services in San Diego and Imperial Counties. It is affiliated with the University of California, San Diego, School of Medicine and serves as a center for graduate and post-graduate education in pediatrics and pediatric subspecialties. The hospital provides extensive, state-of-the-art outpatient and in-patient programs for a wide range of conditions including craniofacial/maxillofacial anomalies, cerebral palsy, spinal defects, and orthopedic disabilities. It provides home care services for medically fragile children and is home to the world-renowned Chadwick Center for child protection. Residents will be involved in the care of this entire range of pediatric patients. Infants and children with complex, challenging and high-risk diagnoses will receive care by the faculty and residents in the hospital and at the new Children's clinic. Underserved children with more typical, but acute, problems will be treated through community rotations.

Bulletin: Will the program be affiliated with one California's five dental schools?

Dr. Pokala: Children's Hospital San Diego Pedi-

atric Dental Residency Program has developed a cooperative agreement, through which the USC School of Dentistry will provide didactic educational experience to supplement the curriculum provided at Children's Hospital. Specifically, USC will provide a web-based course in Biostatistics and Clinical Epidemiology. The instructor will meet with San Diego students monthly for discussion and evaluation.

USC will also provide our residents access to their library resources. The potential for participation in conferences and events, teleconferencing, additional web-based distance learning and ongoing consultation between the two campuses may evolve in the future.

Dr. Lichty: The program will also have synergistic linkages with the Anderson Center for Dental Care, particularly as it relates to patient care referrals, research opportunities and efforts to improve community oral health.

Bulletin: Tell me about the Anderson Center.

Dr. Lichty: The Anderson Center was established six years ago to improve the oral health of children in San Diego and Imperial Counties, particularly those with disabilities and those needing treatment of Early Childhood Caries. The Center is named in honor of the late Albert L. Anderson, DDS, who was affiliated with Children's Hospital for more than 40 years, providing care for individuals of all ages with physical and intellectual disabilities. Created through an endowment set up by the Hospital, the Center has provided oral health programs and services to more than 75,000 healthcare professionals, agency staff, teachers, and parents during its short history. The Center provides professional and community education, improved access to dental care, advocacy and treatment for those without other financial resources.

Bulletin: Again, congratulations and best wishes for a successful program.

*Victoria, B.C. is
renown as the "The
Garden City."*

ASDC - 75 Years of Service

A Farewell

In late September of 2002 the 75th and final meeting of the American Society of Dentistry for Children was held in Tucson, Arizona. That meeting was the last step in an amalgamation of ASDC and AAPD that had been formally discussed by the leadership of both organizations for at least a dozen years.

ASDC was conceived in Boston in the fall of 1925 and founded in Detroit, Michigan in October of 1927, under the name of the American Society for the Promotion of Children's Dentistry. During that meeting Samuel D. Harris, President of the Detroit Study Club stated that "If children are to be served, general dentists would have to provide most of the dental treatment." The permanent name of the organization - the American Society of Dentistry for Children was not adopted until 1941.

In 1927 there were perhaps two dozen pediatric dentists in the country and they ordinarily combined their practice with some other phase of dentistry. At that time there was a laissez-faire attitude that was prevalent in the profession and with the general public concerning children's oral care. The interest of many dental pedagogues of that era was aptly expressed by Marcus Ward, Dean at the University of Michigan, who asserted that dentistry for children was exactly like that performed on adults, only simpler. Later, he championed dentistry for children and in 1942 included pedodontic course work in a list of required subjects.

During those early years, ASDC never wavered in their intention to gather information about the status of dentistry for children in our dental schools. The society appointed a College Committee in 1928 to persuade schools to deliver course work in pedodontics. Their efforts achieved some success and by 1932 many schools reported that they had increased lecture and clinic hours in pedodontics. At this time 34 of 43 dental schools provided instruction in dentistry for children. However, recognition for the dental needs of children evolved slowly and it was not until the late 40's that a formal recognition was promulgated by the ADA. A specialty board had been first suggested in 1938 when the ADA promoted a conference in St. Louis, MO. Two years later the American Society for the Promotion of Dentistry for Children named Frank Lamons as the temporary chairman of the specialty board. During this time period the Society championed the introduction of an improved pediatric curriculum before the ADA Council of Dental Education with notable success. ASDC President Ralph Ireland stated the in his Presidential address given in 1948, "Now that the Council on Dental Education of the ADA includes dentistry for children in the list of subjects which must be taught...it would seem that the State Boards of Dental Examiners should keep pace with dental education and examine candidates in this subject."

The organization continued to grow during this early period and the Twenty-First Annual Meeting of ASDC was held in St. Louis in 1952. The officers included Earl Lampshire - President, George Teuscher - President-elect, Hugh Keenan - Vice-President, and Henry Wilbur - Secretary-Treasurer. The Silver Anniver-

sary speaker was Walter C. McBride, First President of ASDC, who reviewed "The First Twenty-Five Years." Walter was also Past President of the Michigan Society of Dentistry for Children, Director of the Children's Dental Department of the Detroit Dental School, Editor of the Michigan State Dental Journal, member of Omicron Kappa Upsilon, Fellow of the American College of Dentists, and author of "Juvenile Dentistry."

Although few dentists were willing to appoint the very young patient, the interest of a small cadre of practitioners was evident starting mid-century. In the early 1950's there were perhaps twenty pediatric dentists in southern California and those practitioners announced that they "limited their practice to children." A specialty organization was considered in the late fifties and early sixties and subsequently many practitioners of the "pre-specialty" era were "grandfathered" into an ADA defined specialty organization.

In the early days of dentistry, as in medicine, there was the attitude that amelioration of an illness or the correction of a defect was paramount. The implication was that restorative care took precedence over the prevention of oral disease. Prevention was simply left out of the equation and the shift to prevention came slowly over the succeeding decades. Although the value of prevention was first promulgated in 1899 when the National Dental Association convened the first Oral Hygiene Committee, their initial effort was marred by a general disinterest in prevention and lack of philanthropic support. It was not until 1909 that the committee chair, Dr. Ebersole, brought new life to prevention and pressed for the cooperation of the public press, school officials, and dental manufacturers. His influence over the activities of the American Dental Association resulted in the opening of six school clinics in Cleveland, Ohio in 1910.

Four years later as a symbol of American philanthropy, the Forsyth Dental Infirmary in Boston was opened for the dental treatment of children. It is worth noting that this was the first institution of its kind the world...a noble undertaking that has provided immeasurable amounts of oral health care for children over a period of many decades.

The interest in a single clinic entity may have sparked a favorable response toward the dental needs of children, however it did not immediately improve the interest of practitioners. In the fifties and sixties it was common to observe placards in dental offices that stated "children under 12 not accepted." The notion that children must be 12 years of age before they can be cooperative has been erased largely through the efforts of organizations that are dedicated to serving our very young population. The first visit to the dentist has slowly undergone a revision that currently suggests the first dental visit at age one. Current standards of care would indicate that the age one visit is of primary importance in the prevention of oral disease.

Over the past several years the movement toward the delivery of preventive methods has gained momen-

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Drs. Kevin Donly, Past President of ASDC and David Curtis, President of AAPD.



Past President of ASDC, Dr. Ralph McDonald delivered a history of ASDC to the joint audience.



Dr. Kevin Donly presents the final ASDC Award of Excellence to Dr. Marty Davis.

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tum and the early pioneers would be proud of our achievement in this arena. Notably, over the recent past, the profession has elected to pursue with much vigor the oft stated idea that we are in a "paradigm shift" in respect to our efforts in prevention. That shift has the infectious nature of caries at its forefront...a major modification in our educational offerings.

During the seventies and likely before, the Southern California unit of ASDC was very active and enjoyed outstanding meetings at a variety of local establishments. Those meetings provided the opportunity to learn from each other and to solidify our practice techniques. To the enjoyment of everyone, the camaraderie was invigorating and the learning curve was flattened. To this day the Southern California unit of ASDC has continued to encourage the highest level of oral care for children through regularly scheduled monthly meetings.

AAPD President-elect Paul Reggiardo observes that in 1970, the Southern California unit of ASDC was the bridge to residents-in-training in the real world of pediatric dental practice. The monthly meetings were held at the Roger Young auditorium and they were "the crystal ball through which we gazed into our future. We saw the mischievous side of Kenro Nishimine and the practical side of Ernie Horany. We saw the enormous generosity of spirit in Irv Rubel and the simple decency of Lew Daniels. We saw what we hoped to become. We saw that pediatric dentistry was so much more than an occupation or a profession. It was a community of great and lasting friendships. It was a community of scholars...willing to embrace, nurture, and support its young practitioners." He and others from that era suspect that without an ASDC we would have eventually discerned the facts that surround the practice of dentistry for children, but in the days before there was a CSPD, and before the Academy learned to open its arms, it would have taken so much longer. The commentary provided by Paul Reggiardo is echoed by numerous pediatric dentists from that era who reflect with pleasure upon those days that molded the careers of so many aspiring specialty practitioners.

Arising from the aforementioned humble beginnings, we have observed a dramatic increase in the number and the quality of practitioners who have elected to deliver oral health care to an ever larger segment of the American population. Although it is with belated anguish that some ASDC members reflect on the turn of events that created a merger between ASDC and AAPD, the positive action of well-respected leaders of both organizations reflect an overriding need to solidify our mutual interests. Pediatric Dentistry and those who have worked tirelessly in our specialty should be proud of their accomplishments. We must set aside the halcyon days of ASDC and move forward with renewed dedication to our merged specialty organization.

We pay tribute to those who inspired our work and taught us that caring for children was a noble undertaking. -RWH

[Excerpted in part from a historical review written in August of 1980 attributed to Dr. George Teuscher and a lecture given by Ralph McDonald at the recently convened AAPD/ASDC conference in Tucson, AZ that concluded 75 years of service to children by the American Society of Dentistry for Children.]

LIVE! FROM CSPD



By Steve Niethamer

On September 25th, the redesigned CSPD website "went live" and after three days the site has propagated throughout the worldwide-web so that anyone searching for www.cspd.org will be directed to the new site. This professionally designed site should give our members an attractive and easy to navigate resource, full of high quality graphics and a layout similar in feel to the AAPD website. By making news, announcements, and membership information much easier to update, the new site promises to stay fresh and interesting.

Included in the new site are sections on About Us, Our Leadership, the Benefits of Membership, the Foundation, News/Announcements, a Calendar of Events, and Links to interesting locations such as the address of office web sites for members.

In addition, the site is enhanced with a Directory of all CSPD members and a Membership Only area. It presently contains a number of the CSPD generated materials, such as the Informed Consent Booklet along with the complete CSPD Office Materials CD packed full of office forms and promotional ideas. Our newer members or others who have misplaced the originals can browse through this collection of ideas at their leisure.

Access to our new Members Only section is controlled by a password. This information should already be sent CSPD members with known email addresses. Other members will receive password information in the next CSPD mailing or can obtain it by contacting Mel Rowan. The current User Name is "cspd" and the Password is "pedo." Note that the letters are case sensitive.

CSPD's original website was the result of a project started in 1996 by our editor, Roland Hansen. He had the foresight to set-up one of the first web sites dedicated to the field of Pediatric Dentistry in California. Those wanting to recall memories of some of these original sites he created can go to, <http://www.archive.org/> and then place www.cspd.org into the "WayBackMachine." The result of this search will allow you to follow the progression of our website through the years. Reviewing them makes you think about how much time the original creator must have spent providing the content of the site and learning the technology that controls how this content is viewed.

Keeping our website fresh and interesting for our members and other visitors is a challenge today, just like it was in the past. Your help is needed. If you have any comments on our redesigned website, content that should be included, links of interest, or forms to be added to the members only section, please take some of your valuable time to send them to CSPD's Web Page Subcommittee in-care-of SNIethamer@compuserve.com.

*The members only
section is password
protected.*

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The CSPD Foundation Enrolls New Supporters

Our new Foundation has seen excellent support from the CSPD membership as evidenced by the success of its inaugural fundraising campaign. We've made a great start at accumulating the funds that will support the work of the Foundation in the years to come. As we begin our 2002-2003 Foundation campaign, the Trustees are aware that we need to increase the core assets of the Foundation to be increasingly effective and to attract corporate donors.

The Foundation Trustees have instituted a program that will address the critical teaching crisis in pediatric dentistry in California using the findings of the Inaugural Consensus Conference that was held last spring. That conference was convened at our Annual Session and will be used as a basis for formulating strategy and implementing our early planning efforts. Projects are being developed that will support educational programs across the state with an emphasis on faculty development.

The first and most wide ranging of these plans is a Faculty Development Program that will increase the support for and the quality of part-time academicians at our schools. It will also help provide guidance, structure, and mentoring to both new and experienced faculty members. This project will be directed by Jacob Lee, assisted by a committee composed of Tom Barber, Marty Rayman, and Dick Mungo. The shape of this project will in large part be the result of a survey of department chairs and CSPD membership that will be conducted by the committee in the near future. I urge all CSPD members to give this survey special consideration and attention.

Support for students who are considering pediatric dental specialty training and/or academics is very important to all of us. We will begin to actively support the undergraduate pediatric dentistry student groups at each school early in 2003 and will encourage and foster the consideration of academics as a career goal. We will also begin development of a

faculty grant program to encourage and aid participation in mentoring programs to help attract students into these professional pathways. By facilitating one-on-one relationships between students who have the potential and interest in pedagogy, we hope to nurture a fruitful mutual relationship. In addition, the Foundation is now the funding agency of the CSPD Postdoctoral Research Awards presented each year at our Annual Meeting. We intend to expand and enhance this program, again encouraging a more active role in the educational process, both for students and our members.

The Trustees join with me in expressing our appreciation to those members who have made a contribution to the Foundation in its inaugural year. This year and in the years to come, we will continue to look for support from every pediatric dentist in California as we move forward with the projects that are so important to the future of our specialty. Please consider volunteering to serve on a Foundation committee. We are actively interested in your continued involvement.

Please feel free to contact me at any time to discuss your involvement in the Foundation or to provide input to our programs and strategic plan.

David Good, President



Dr. David Good

Inaugural Annual Giving Campaign 2001-2002

All contributors receive the following benefits:

Recognition in the CSPD Foundation's Annual List of Contributors published in special inserts in the CSPD Bulletin and the Annual Meeting program; Badges showing membership level to be worn during the CSPD Annual Meeting

MEMBERSHIP OPPORTUNITIES

Presidents' Circle

Presidents' Circle donors receive the following additional benefits:
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Name: _____
 (Please list name above as you wish to be recognized)

Send to: CSPD Foundation, PO Box 4977, Palos Verdes, CA 90274 Amount Enclosed: \$ _

News Briefs

Mark the Calendar - Give Kids a Smile Day

Give Kids a Smile is a national umbrella for the dental access activities set to take place across the country February 21, 2003, with dentists and staff providing educational outreach, screenings, preventive care and treatment to underserved children.

The ADA created this program as an annual vehicle to focus national attention on what the U.S. Surgeon General has called a "silent epidemic" of oral disease affecting children from low-income families, and to build support for public and private solutions that will help these children get regular oral care.

For more information see: www.ada.org/prof/accessinfo.html. To volunteer: go to www.ada.org/goto/kidssmile

Residency Positions Increase

For the July 2002 entering class, there were exactly

200 Match positions, as compared to 142 positions just five years ago. It is estimated that 42-45 non-match residency positions were filled. It is interesting to note that the training numbers are up to 242+ residency slots a year! This number compares to a low of 160 positions about 10 years ago and 180 positions when the Academy launched its efforts to increase the pediatric dental workforce a little over five years ago. The goal remains at 280 positions by 2007-08.

Harley Fans - A Raffle

One of our long-term sponsors, Laclede Health Care Products has generously donated an Anniversary Edition Harley Davidson Fat Boy as a raffle prize. All proceeds of the raffle will be donated to Special Care Dentistry.

Request tickets from:

Kathy Olson

Special Care Dentistry

scdonline@aol.com

211 East Chicago Avenue

Chicago, IL 60611

815-484-8678

Or call Laclede at 310-605-4280

Tickets are \$10 dollars each.

Drawing to be held on March 29, 2003.



President's Message from page 1

and those who look only to the past or the present are certain to miss the future."

In an attempt to meet the future head-on, we were apprised by our Immediate Past President David Perry, that the availability of Proposition 10 funding to State counties and healthcare collaboratives will indeed produce a golden opportunity for CSPD to help shape the changes that lie ahead in pediatric oral healthcare. The California Children and Families Commission (CCFC) made an unprecedented investment in children from the prenatal period to age five by depositing \$362 million from Proposition 10 tobacco tax revenues into local community trust funds to support local education, health and child care programs. The CCFC has also identified oral health as a main focus area. The Commission invited California parents, families and community groups to participate in local efforts to

determine how the funds will be spent. The broad consensus of our CSPD board of directors is that we need to be well versed in this area and take a very active role in offering counsel to any agencies that oversee the creation of oral health programs. Board members Dr. Ray Stewart and Dr. Richard Udin have substantial experience working with the CCFC.

They suggested that we invite a Commission member to the September meeting our Board. Ms. Barbara Marquez accepted our invitation and presented a stimulating overview of the present and future activities of the CCFC. There were three areas of concern that the Commission believes to be important in regard to oral healthcare. The first area of concern delineated the problems associated with access to care as it relates to the manpower short-

age. The second area of interest clarified the need for improved public understanding of the importance of the oral healthcare of young children. The third area needing attention was the broadening of the scope of the practice of allied health professionals and the medical community. All of these areas deserve and indeed demand our attention and input. We accomplished two major goals during her visit. Our leadership enhanced its knowledge on the make-up and the goals of the Commission and the Commission was introduced to our strong desire to become an active participant in the process of creating positive changes in pediatric oral health.

It is easy to see that change is an ever-present constant within our organization. We continue to project a positive approach to future change while evolving into a force for child advocacy. The Academy of Pediatric Dentistry and the Western Society of Pediatric Dentistry bolster our statewide presence with enhanced importance and strength. Because our mission is to promote the oral health and general welfare of infants, children, adolescents and persons with disabilities, your CSPD Board of Directors has proposed a name change to be voted upon at our annual business meeting to be held in Victoria, Canada. A name change to "The California Society of Pediatric Dentistry" may better reflect our transformation into an agency for child advocacy. A name change may not substantially change our organization but it could change the way people perceive our organization. We represent pediatric dentistry and all that it encompasses which more clearly describes CSPD...our mission and our purpose.

How we look at things is reminiscent of the parents that were very concerned that their son was at the bottom of his class. The little boy attempted to quell his parent's fears by reminding them that they teach the same stuff at both ends. Clearly the boy was looking at things from a different perspective. Maybe it is time that others see us from a different perspective.

The changes brought on by the fall season and the winter gray, might bring a somber note to some, but, knowing that spring will soon follow helps us look to the future with greater hope and resolve. Happy Holidays...

The 2004 Annual Meeting of AAPD will be held at the San Francisco Marriott.



Dr. Paul Reggiardo, President elect of AAPD, Scott Litch AAPD Counsel, Dr. Paul Kennedy, Immediate Past President of AAPD and Dr. John Rutkauskas, Executive Director of AAPD pictured at the ASDC - AAPD meeting in Tucson.

OBITUARY

Warren E. Brandli, DDS, MS

September 6, 1941 - October 9, 2002

Dr. Warren E. Brandli, a nationally recognized pediatric dentist and instructor in graduate dentistry, died October 9, 2002, at his vacation home in Poipu Beach, Kauai, Hawaii. Dr. Brandli, 61, was a resident of Irvine, California. He was recognized as a pioneer in pediatric dentistry, being one of the first dentists in the United States to introduce robotic technology (Dr. B.E.A.P.) for teaching dental health to children.



Dr. Warren E. Brandli

Dr. Brandli served on the faculty of the UCLA School of Dentistry, Department of Pediatric Dentistry, from 1969 to 2001, where he taught courses in graduate dental practice management and mentored hundreds of young dentists, inspiring them to reach their full potential. He was a charter member of the California Society of Pediatric Dentists and served as president from 1986 to 1987. Dr. Brandli joined the American Academy of Pediatric Dentistry in 1968 and was a member of its Board of Trustees from 1988 to 1991. He practiced pediatric dentistry in Tustin and Irvine, California with his long-time partner Dr. Michael McCartney for more than 25 years. Dr. Brandli received his degrees in dentistry and graduate pediatric dentistry from Marquette University, Milwaukee, Wisconsin. Dr. Brandli is survived by his wife Madeleine D. Brandli, Irvine, California, his two daughters, Christina Brandli, Houston, Texas and Dr. Stephanie Brandli, Newport Beach, California (who has joined Dr. McCartney in the continuation of Dr. Brandli's practice in Tustin, California), his mother, Carmel Brandli, Newport Beach, California and brother, Albert Brandli III, Irvine, California. The Brandli family has conducted private memorial services and has requested that, in lieu of floral or other tributes, any contributions in Dr. Brandli's memory be given to the California Society of Pediatric Dentistry Foundation of which he was a founding member. Gifts to the Foundation may be sent to: California Society of Pediatric Dentistry Foundation, Attention: Dr. Mel Rowan, Executive Director, P.O. Box 4977, Palos Verdes, California, 90274-4977 (Telephone: 310-465-1580).

Pediatric Dental Residency Announcement

Children's Hospital and Health Center, San Diego, is seeking qualified applicants for a Pediatric Dental Residency program that will begin July 1, 2003. Dental school graduates with a current California dental license are encouraged to apply.

Children's San Diego received provisional approval (category for new programs) earlier this year from the American Dental Association Commission on Dental Accreditation (CODA) for an Advanced Specialty Education Program. The hospital-based program will provide clinical and didactic education, clinical rotations through the hospital and community-based clinics, and emphasize treatment for young children and children with special needs. Residents will have a unique opportunity to interact positively with a wide range of medical professionals and medical residents who until this program begins may have had only limited training in oral health and the impact of dental disease on pediatric health. Two pediatric dental residents will be accepted the first year. Applicants must have demonstrated outstanding performance in academics, clinical work, and communication skills, and be committed to improving the oral health of underserved children.

The residency program will lead to a Certificate in Pediatric Dentistry and will render the graduate eligible to pursue Board Certification in the specialty of Pediatric Dentistry. Funding for the program was provided through a grant from the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA). The grant was established to address the workforce shortage of underrepresented minorities in dentistry working in underserved communities, particularly Hispanic, African-American and Native American dentists. A significant aim of Children's Hospital is to increase the number of qualified pediatric dentists working in San Diego County, especially in underserved areas.

Please see page 11

The grant was established to address the workforce shortage of underrepresented minorities.

Professional Opportunities Registry

Looking for an Associate or Partner? Complete this form and return it to:

South Chair:

Dr. Joseph Jedrychowski
UCLA/Dent/CHS 23-020/Box 951668
Los Angeles, CA 90095-1668
Email: jjedro@dent.ucla.edu

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Dr. Arthur Rabitz
100 O'Connor Drive #11
San Jose, CA 95128

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E-mail Address (please!) _____

Board Briefs



Barbara Marquez, MPH and Dr. Richard Mungo pictured at the San Francisco meeting of the CSPD Board of Directors.

The 114th meeting of the Board of Directors of the California Society of Pediatric Dentists was called to order by Dr. Richard Mungo on Saturday, September 21, 2002.

In attendance were: Drs. Mungo, Rowan, Reggiardo, Brennan, Gross, Jackson, Hansen, Cortez, Pedersen, Steigner, Wood, Udin, Azama, Stewart, Christensen, Dorostkar, Perry, Lovingier and Lynne Marian (secretarial assistant). Barbara Marquez, MPH was also present as an invited guest.

Correspondence

AAPD Foundation / Boys & Girls Clubs - Dr. Mungo reported that he received an E-mail request from David Curtis and Joel Berg from AAPD. It was reported that the AAPD Foundation recently launched a three-year public education campaign on children's oral health called "Good Health Starts Here." In conjunction with Procter & Gamble (Crest Healthy Smiles, 2010) they are partnering with the Boys & Girls clubs of America to provide educational and clinic services. They would like to link dentists on a local basis to work with the children attending these clubs.

Officers' Reports

PRESIDENT - DR. MUNGO

Dr. Mungo expressed appreciation to Dr. Cortez for the testimony he presented as a member of the HFP Advisory Panel. His testimony was invaluable and made a tremendous impact.

The Board agreed to participate as an exhibitor/sponsor at their "Healthy Schools - Healthy People IX" conference to be held January 15-17, 2003 at the Doubletree Hotel in Sacramento, California.

Dr. Mungo reported on the Interdisciplinary Affairs Committee (IAC) Meeting held July 30, 2002. He distributed his written unofficial summary from the meeting as well as supplied Dr. Steve Chan's executive summary item in the board packet.

President Elect - Dr. Lovingier

Dr. Lovingier reported on the status of the strategic plan and asked the Board to review and update specific sections of the document. The next strategic planning session is in the planning stage and a facilitator will be named in the near future.

Constitution & Bylaws - Dr. Perry

At the direction of the president, the committee was asked to review the functions of the Executive Committee as stated in our Bylaws and in the Constitution. The Board voted to use the CDA model and the proposed changes will be voted upon at the Annual Business Meeting.

Treasurer - Dr. Steigner

Dr. Steigner stated that reserves are within the guidelines as described in the policy and procedures manual. Assets are distributed in money market funds with Smith Barney, Washington Mutual, and in a checking account with Washington Mutual.

Executive Director - Dr. Rowan

The merger of AAPD and ASDC were reviewed by Dr. Rowan in respect to the Southern California Unit. The Board directed Dr. Mungo to appoint an Ad Hoc Committee to investigate the matter of affiliate membership in CSPD for members of ASDC.

District VI AAPD Trustee Report - Dr. Ray Stewart

Dr. Stewart was thanked by the Board for his service as District VI Trustee over the preceding three years.

Please see page 11

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The support our sponsors contributes to the success of the annual meeting and helps to underwrite the projects of our society throughout the year. Please let our sponsor know we appreciate their continued support.

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Dr. Nancy K. Kwon
Dr. David S. Neil
Dr. Sunil K. Ilapogu
Dr. Eddie C. Lopez
Dr. Jared N. Nation
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Dr. Eric M. Soper
Dr. Shahrzad
Sami Dowlatshahi

Call for Table Clinics

CSPD and District VI members, pre and postdoctoral students are invited to submit an application for a Table Clinic presentation to be given at our Annual Meeting in Victoria, B.C. April 3 - 6, 2003.

Submit a title, a brief description, and your table setup requests to Dr. Jeffrey Wood, UOP Dental School. 2155 Webster Street. Room 522-I, San Francisco CA 94115 or email to jwood@uop.edu

Space is limited - An early application is requested and electronic submission is preferred.



Dr. A.
Jeffrey Wood

Board Briefs from page 10

The Board named Dr. Mungo as their candidate to occupy the position of District VI Trustee for the ensuing three-year term.

Child Advocacy - Dr. Udin

Dr. Udin reported on the recent activities of the California Children and Families Commission (Prop 10). At their July 18th meeting the commissioners discussed an agenda item that proposes to fund a broad reaching oral health initiative in the amount of approximately \$25 million dollars. At their meeting held in Long Beach on October 17th, a new proposal was presented. Further consideration of this revised proposal was postponed until their next monthly meeting to be held in Sacramento on the 21st of November.

Respectfully submitted,
Dr. Santos Cortez, Secretary

Residency from page 9

Interested candidates are invited to submit an application to the program. Those who have filled out a PASS or MATCH application may submit that and a resume. Those who have not, may contact our office at (858) 576-1700 ext. 4806, to identify application requirements. Interviews may be scheduled following review of the submitted materials. Please submit applications to us at the following address:

Program Manager
Pediatric Dental Residency Program
Children's Hospital and Health Center
3020 Children's Way, MC 5073
San Diego, CA. 92123

Web Notes

RECENT POSTING ON THE CSPD WEBSITE

WWW.CSPD.ORG

In "Latest News" see:

Reprints from the Fall Bulletin

- President's Message Fall-Winter 2002
- Board Briefs -September, 2002
- News Briefs - Fall-Winter 2002
- Sponsors 2002-2003
- Foundation Report - Fall-Winter
- Interview with Drs. Lichty and Pokala
- Residency Application for San Diego Children's Hospital



Password for Members Only section of the CSPD website. User name = **cspd** and Password = **pedo**. Note case sensitivity.

Links

California Child Population 0 to 5 by County, Race/Ethnicity, and Age see: www.cfc.ca.gov/PDF/EthnicityData/California.pdf

School Readiness www.ca.gov/SchoolReady.htm

Web Site Archives - The Way Back Machine <http://web.archive.org/web>

Review our old sites from 1997. This site contains 10 billion archived sites from 1996 to the present. Check out the first CSPD site.

Atraumatic Restorative Care

See Section D. Community Oral Health Care on the website of the World Health Organization - Oral Health - One copy free of charge. www.who.int./ncd/orh/orh_publications.htm

Pediatric Dentistry Clinical Photos http://cudental.creighton.edu/html_ped_pics.htm

Oral Health Resources <http://www.cdc.gov/OralHealth/index.htm>





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 Larry Luke
 Randall Wiley 03
 Suzanne Berger 04
 Roger Sanger 05

Child Advocacy Committee

Chair: Richard Udin
 Tra Le
 Afsanah Matin
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 David Rothman
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