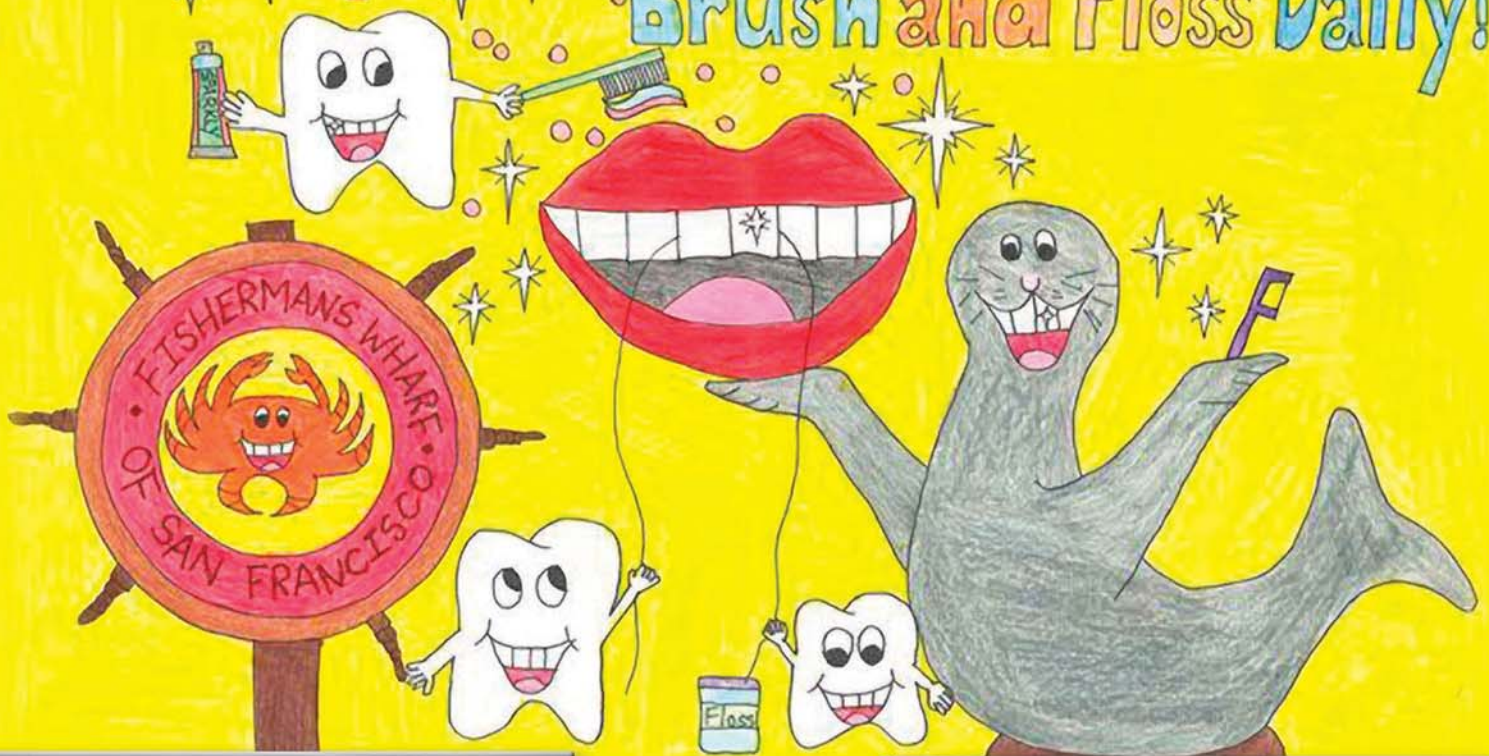


The Bridge

Volume 63 • Number 4 • August 2010 • San Francisco Dental Society

Organized 1869

For a Sparkly San Francisco Smile, Brush and Floss Daily!



MISSION STATEMENT

The mission of the San Francisco Dental Society is to be the recognized resource for the needs of its members, and to promote the oral health of the community.

**SAN FRANCISCO DENTAL SOCIETY
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spouse and staff for drug and alcohol abuse,
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THE RESEARCH BRIEF – UCSF

The Future in Enamel & Dentin Mineralization

What is the title of the research activity?

Protein-guided mineralization in enamel and dentin

Who are the investigators?

Stefan Habelitz, Grayson Marshall, both in the Department of Preventive and Restorative Dental Sciences, UCSF

What are you trying to find out?

How extracellular matrix (the part of tissue that provides structural support to cells) proteins control enamel and dentinal mineralization in-vitro

How to mimic enamel and dentinal mineralization in-vitro

How to generate synthetic enamel and dentinal tissues

How to remineralize damaged tissues.

Why is this research important?

This research is relevant to our understanding of the molecular processes that control mineralization in dentin and enamel and is investigating different approaches on how to generate or regenerate dental tissues.

How are you doing this research?

This is basic laboratory bench research. For the enamel synthesis project, we use recombinant proteins (derived from recombinant DNA) and study their capacity to self-assemble under numer-

ous physical chemical conditions and investigate the capacity of such self-assembled structures to control apatite crystal growth. This involves high-resolution imaging using atomic force and electron microscopy. The dentin project mainly involves different approaches to remineralize artificial and natural carious lesion. Emphasis lies on the recovery of the mechanical properties (of dentin) through the remineralization process, which we evaluate by nanindentation and atomic force microscopy.

When will this research be finished?

Both projects are currently funded by the NIH/NIDCR and are ongoing.

How will the results of this research eventually translate into clinical dental practice?

Understanding the molecular process of remineralization is relevant for the practical application of minimally invasive dentistry. Understanding and applying suitable methods to remineralize a dentin lesion can restore and save dental tissue sometimes critical for a successful restorative outcome.

Synthetic enamel can be as useful as a restorative dental material itself and also could be used for tissue engineering approaches to generate a whole tooth. ❖

EDITORIAL

Irene Hilton, DDS MPH



Respecting Diversity of Opinion

One of the duties of an Editor is to write editorials. Sometimes this is easy as a current event or relevant topic is literally in front of you. Other times it is harder as you struggle to find content. Several weeks ago, as I started to think about my editorial for this issue, we received an e-mail at the SFDS office which was addressed to the Editorial Committee, and my submission for this issue was once again right in front of me.

We received a note from Dr. Lionel Traubman, a retired pediatric dentist who served several terms on the SFDS Board and is known to many of you readers. He forwarded a link to an interview with him that was printed in the February 1996 edition of *The Mercury*, the previous name of this newsletter, now called *The Bridge*.

The article was titled "A Dentist Views Diversity". To directly quote Dr. Traubman's e-mail: "It occurred to me that the ideas in the article might still be relevant to the SFDS. I am forwarding it to you in case it serves you in some way." The interview discussed the issue of diversity in the dental profession and called on the SFDS as an organization to embrace the strength of diversity of its members.

As a Hispanic woman with plenty of experience with discrimination and harassment, my first thought was that Dr. Traubman's article probably had much relevance in 1996 and certainly still has relevance on a national level, while at the same time celebrating the progress that has been made on a local level, although more work always needs to be done and we must remain ever vigilant.

However, my next thought was that the things Dr. Traubman was saying actually could be applied to the current situation regarding access to care and workforce issues!

MERCURY: What is your definition of diversity, and why do you feel it is important?

**"If we listen to
understand ...
people will feel
included ..."**

DR. TRAUBMAN: Right away, let me say that diversity is not a handicap, not a problem. It is a tremendous strength and asset, and purposely part of our living system. In nature, the species, seasons, tides, and forces—even night and day—balance and need one another for stability, and for life to flourish and survive. In human activity, our diverse personalities, skills, approaches, perceptions, and cultures—races, nations, philosophies—add intelligence, beauty, and interest to the well-being of our existence. Working together, we can have the most interesting life with the best chance to see whole and succeed.

Working and living together in diversity means valuing and maintaining one's unique identity, while adding it to the whole of society. Out of fear of differences, and limited clannish identification, we humans just haven't yet acted

that way in history. But now we must, for the sake of survival, even of our dental society. And time is short.

MERCURY: How does having a global perspective help you in the practice of dentistry?

When we value and celebrate our patient's, staff member's, or dental colleague's uniqueness, she or he feels included and appreciated. If we listen to understand, even though words, pronunciations, and idioms may be unclear at first, people will feel included, even loved. In this way, we can build fine dental practices and professional societies.

MERCURY: What do you conclude and recommend?

We must build a culture of belonging. Our dental profession, nation, and world depend on it. We need youth and elders. The elders keep us from needless mistakes and recklessness; the youth help us enter the future with new approaches and protect us from unnecessary conservatism.

Isn't this what we need in the discussion about solutions to access to care and workforce? Respecting the diversity...of opinion? You don't have to agree, but listen to learn with respect. Together a better decision may be discovered. ♦

For more on the MP subject, read Dr. Hilton's article in The Bridge, April, 2009, and Dr. Shue's August 2009 CDA Journal editorial, "Coming to California?"

THAT'S A WRAP... CONGRATULATIONS TO OUR SFDS STARS



Dr. Newton Gordon, recipient of the American College of Dentists (ACD) Northern California Section, Dr. Willard C. Fleming Meritorious Service Award. This award is to recognize an ACD Fellow whose outstanding activities have contributed to the advancement of the dental profession and its public appreciation. A past president of the SFDS, Dr. Gordon, is Clinical Professor and Chief of OMFS at San Francisco General Hospital.



Dr. David Nielsen, recipient of the American College of Dentists Northern California Section Distinguished Faculty Award, is currently on faculty at University of the Pacific Arthur A. Dugoni School of Dentistry and serves as the Executive Director to the Alumni Association.



Two student leaders received the American College of Dentists (ACD) Northern California Section Outstanding Student Leader Awards, presented to the student(s) who best exemplifies professionalism, with the potential of enhancing the art and science of dentistry and the purposes of the ACD. Daniel Hardy, a third year UCSF student active in SFDS and CDA, and Jennifer Fountain, from Pacific's Arthur A. Dugoni School of Dentistry, were this year's recipients.



Dr. Arthur A. Dugoni, SFDS Honorary Member, received the American College of Dentists Northern California Section Lifetime Achievement Award from Dr. Steven Chan and Dr. Alan Budenz, 2010 Chair of the Northern California Section of the American College of Dentists.



Deborah Elam, CAE, the Executive Director of the San Francisco Dental Society, was the recipient of the American College of Dentists, Northern California Section, prestigious Joseph J. Krajewski Award of Merit. The Award is named after a prominent San Francisco periodontist and Past President of San Francisco Dental Society, created to honor a non-dentist whose outstanding activities have contributed to the advancement of the dental profession and enhanced the image of dentistry.

Currently, Ms. Elam is the Chair of Professional Development for the California Society of Association Executives (CalSAE) and is the President of the American Society of Component Executives of the American Dental Association. She serves on many committees and is a guest to the CDA Leadership Development Committee.



A Mid-Year Progress Report

What a year it's been so far! The first half of 2010 has been a busy and productive one for the leadership of the San Francisco Dental Society. Our committees are as active as ever and they are being led by very talented members.

Our Legislative Committee has been strategizing their support for local and state-wide candidates. Meanwhile, the Nominating Committee has successfully put together the slate of SFDS officers for 2011 and the Program Committee has been busy planning a dynamic list of continuing education meetings for 2011.

That brings me to the Membership Committee which has worked tirelessly to create value for our members. Its subcommittees have been equally as active: the Social Committee has created informal opportunities for our younger members to get together and share their professional experiences as well as to meet some of our veteran members, while our New Dentist Committee has held a number of informative seminars to help our new members transition from dental school to professional life,

The Community Dental Health Committee participated in the second Project Homeless Connect for the year. My sincere gratitude goes to those who

participated. The need continues to be great and the funding minimal or non-existent. Anything we can do to help out our community counts. The Poster Contest Committee, a CDHC Subcommittee, has helped to promote dentistry and oral health amongst San

**“...to preserve this
valuable asset and
honor the vision of
those who had the
foresight to purchase the SFDS
Building.”**

Francisco public school children. This year, just as in years past, the candidates for our poster contest were incredibly talented. Their works of art are on display in the San Francisco Public Library and in February at the San Francisco International Airport. If you find yourself passing through SFO in February 2011, be sure to take notice of these youngsters' colorful creations.

And last but not least, Board of Directors has deliberated such issues as: a clear retainer system company imposing minimum case requirements for use of their product; an online review company soliciting advertising from our members while engaging in questionable business practices; the validity of holistic dentistry and ozone treatment; possible extension of meter parking enforcement to generate more revenues for our cash strapped city; just to name a few!

Most recently, the SFDS Board assembled a task force to direct our building remodeling project. I am please to report that this project has gotten off to a great start. The SFDS has not invested in the building since it was originally purchased and designed 15 years ago. It is time for a face lift, and improved functionality, to preserve this valuable asset and honor the vision of those who had the foresight to purchase the SFDS Building. So far, the sweat equity, as our executive director Deborah Elam puts it, has really started to pay off.

The year is by no means over. We have many more exciting events, programs, and projects for the remainder of the year. If any of the above mentioned activities appeals to you, feel free to contact us at 415.928.7337 and get involved. We always welcome a fresh perspective. ♦

VOLUNTEER SPOTLIGHT

By Dr. Ivy Chan



Dr. Ivy Chan graduated from University of Hong Kong in 1985. She has been in private practice in the Russian Hill area of San Francisco since 2006. For the last three years, she has been working with SafeHouse providing dental service for their residents.

What is SafeHouse and what does it do? SafeHouse is a non-profit organization that provides an eighteen-month live-in program for women who are former prostitutes with drug problems. It provides therapy, training and in turn, opportunity for the women, to help them regain their confidence to start a new life. (SafeHouse is a program of San Francisco Network Ministries, in collaboration with the Sisters of the Presentation, and was opened in January 1998. No religious requirement is imposed and there is no effort to proselytize to clients. SafeHouse is one of five such programs in the entire country that seeks to provide women leaving prostitution with intensive social support, therapeutic treatment, linkages to medical and mental health services and housing).

How did you get involved with SafeHouse? I discovered SafeHouse from the “community corner” of the SFDS Bridge newsletter when I was trying to look for an opportunity for volunteering.

There are many worthy organizations.

Why did you select SafeHouse for your volunteer time? Being a Christian woman myself, and learning from the Bible how sympathetic Jesus was to prostitutes, I naturally selected SafeHouse.

What does your volunteer activity involve? When SafeHouse sends their residents with dental needs to me, I treat them as regular patients and provide them comprehensive treatment. SafeHouse currently has a “tooth-fairy” fund that has subsidized about 20% of the total treatment cost. Most of the women have extensive dental needs. Half of the cases involve removable prosthesis, namely full dentures. One lady came in with all her upper teeth missing and numerous root stumps in the lower arch, which she had for the past 15 years. Another lady never took off her upper full denture which was missing all the front teeth. Another patient came with severe denture hyperplasia that needed sections of pre-prosthetic treatments. Afterwards their appearance has been improved. I take portraits for them and burn them a CD to keep. I made the ladies promise themselves and me that they will take good care of themselves and never go back to their old lives.

How to you feel about volunteerism? What would you tell other SFDS dentists about volunteering with SafeHouse? This is a very gratifying experience. Seeing how the clients literal-

ly jump with joy as their appearance and dental function are restored and knowing that they have regained their self-esteem and feel comfortable and confident for a new job is my greatest reward. Being invited to their “graduation ceremony” from the program is an honor. I would say that instead of giving to them, I have been out-given by their smiles and gratitude and the good feeling that I have made a difference in their lives.

At first, I was concerned about bringing SafeHouse clients into my office. I did not know what to expect and planned to see them at the end of a particular workday. After meeting them, I found that SafeHouse clients are just regular people like you and me, so I just treat them as regular patients.

I found integrating volunteerism into my regular daily work involves very little effort.

There are countless people out there who would benefit from a little help to regain their dental health and confidence as they integrate themselves back to the society. Would you like to lend a helping hand?

Please call Carola Shepard at (415) 643-7861 if you are interested in volunteering in SafeHouse. It would be especially helpful if specialists can join the team. ❖

EXECUTIVE PERSPECTIVE

Deborah Elam, MS, CAE
Executive Director



In the March issue I highlighted the crisis in access to oral health care for adults in San Francisco, sharing our SFDS experience of increased calls for very low-cost or pro-bono dentistry. In the four months since then, the situation is worsening. As I mentioned in March, the clinics we've been referring patients to are limiting or not accepting "new" patients and, in fact, are referring patients back to us. With cuts to adult Denti-Cal, only the most egregious of situations finds an appointment at a safety-net clinic, and then, in some cases, only after an emergency room visit. Additionally, we are losing some of our safety-net dental clinics, such as CARA-CEN which ceased providing dental services earlier this year and the Native American Health Center which is not accepting any new non-Native American adult patients until the fall.

Those SFDS members who once accepted Denti-Cal patients into their practices have found they cannot afford providing free services to growing numbers. Moreover, we are seeing an increase in calls from patients outside of San Francisco, patients who cannot be seen within their own county's clinics.

Even the Donated Dental Services Program (DDS), which matches elderly, disabled and medically compromised individuals with volunteer dentists, is finding it cannot meet increasing

demand. CDA reports that the Southern California program has a lengthy wait list and they have suspended taking any new case applications. The Northern California program, on the other hand, has received increased funding and has re-opened the patient application process in select counties. However, there is a need for dentists to participate in the program.

**"The need
is great, the
resources few."**

DDS volunteers choose how many cases they will accept per year, treat pre-screened patients in their own practices, are linked with volunteer specialists and/or dental labs if needed, and throughout the process, receive assistance from a DDS Program administrator. For more information on being a DDS volunteer, please go to the National Foundation of Dentistry for the Handicapped (NFDH), Donated Dental Services, website at: http://nfdh.org/joomla_nfdh/content/view/16/37/. To speak with the DDS Program administration, contact Sue Lear, Northern California, 877-357-8660,

or email slear@nfdh.org. Please, let the SFDS office know, as well, if you are a DDS program dentist.

The need is great, the resources few. In this issue, **Dr. Ivy Chan** shares her experiences with SafeHouse, one of several organizations seeking dental care for their clients. In the short term, our members continue to give their time and we want to make sure they receive the recognition they deserve. If you know of someone who provides services to a population in need, please let us know so that 1) we can thank them and 2) we can demonstrate how giving our members truly are in meeting the access to care issues in our community. Thank you Dr. Chan for your work.

Meeting the health needs of San Francisco's impoverished and insurance-deficit adults is a challenge that Project Homeless Connect/Family Connect endeavors to address. Thank you to and the plethora of UOP, UCSF, SFDPH dentists and personnel for providing services at the recent Project Family Connect held June 11, 2010 at the SFDPH Southeast Health Center clinic. If you are wondering how you can give back to your community, be sure to contact one of the agencies listed in our Community Corner in this issue. ♦

A STANDING OVATION... TO WELCOME OUR NEWEST SFDS MEMBERS:



Juin-Yeh Chou, DDS; UOP Arthur A. Dugoni School of Dentistry, 2010; PGM, UOP, 2011

Maria C. de los Reyes, DDS; General Practice; DC-Georgetown University, 1989; 170 King St, Ste 105, San Francisco, CA 94107

Sofia Fontecilla, DDS; UOP Arthur A. Dugoni School of Dentistry, 2010; PGM, UCSF, 2010

Kiri K. Herchold, DDS; UOP Arthur A. Dugoni School of Dentistry, 2010; Specialty Orthodontics, UOP, 2012

Oswaldo R. Hernandez, DDS; General Practice; UCSF School of Dentistry, 2009; Office Address Pending

Nancy C. Hsu, DDS; UOP Arthur A. Dugoni School of Dentistry, 2010;

PGM, VA Medical Long Beach, 2011

Nhi X. Huynh, DDS; UCSF School of Dentistry, 2009; PGM, Lutheran Medical Center, 2010

Jacqueline M. Kotula, DDS; General Practice; UCSF School of Dentistry, 2009; 1648 Union St, San Francisco, CA 94123

Wenli Loo, DDS; General Practice; New York University, 2002; 450 Sutter St, Rm 2609, San Francisco, CA 94108

Singe Morimoto, DDS; General Practice; UCSF School of Dentistry, 2009; Office Address Pending

Scott Ngai, DDS; UOP Arthur A. Dugoni School of Dentistry, 2010; Pediatric Dentistry, UCLA, 2010

Anthony Nguyen, DDS; UOP Arthur A. Dugoni School of Dentistry, 2010; PGM, Rancho Los Amigos, 2011

Nazak Noorian, DDS; UOP Arthur A. Dugoni School of Dentistry, 2010; PGM, UOP, 2011

Jorge-Peter Rabanus, DDS; General Practice; Humboldt University Berlin, 1987; 121 Spear St, Ste B16, San Francisco, CA 94105

Amirali Tahbaz, DDS; UOP Arthur A. Dugoni School of Dentistry, 2010; Orthodontics, Herman Ostrow School of Dentistry, 2013

Alwyn S. Yeoh, DDS; UOP Arthur A. Dugoni School of Dentistry, 2010; PGM, VA Medical-Bronx, 2011

Evening CE Meeting on Thursday, October 14, 2010

Multi-Disciplinary Restorative Care

Featuring Warden Noble, DDS, MS



About the Program:

Treatment decisions must be made to either extract or retain teeth and to manage care with endodontics, implants or fixed and removable partial dentures. Using evidence-based criteria and actual clinical examples, a multi-disciplinary approach to case planning will be presented.

Learn To:

- Develop an understanding of various treatment possibilities
- Learn criteria to make evidence-based treatment decisions

Dr. Noble served on the faculty of the UCSF Department of Restorative Dentistry from 1970 -2005, as a Clinical Professor and co-director of Graduate Prosthodontics from 1985-1988. He is currently a Clinical Professor at Pacific's Arthur A Dugoni School of Dentistry in the Department of Restorative Dentistry.

Location: Sir Francis Drake
450 Powell St

To Pre-Register:
Call the SFDS at (415) 928-7337

Cocktails, Dinner and Speaker
6:00 PM – 7:00 PM Cocktails

7:00 PM – Dinner/Speaker

\$69 Members Pre-Registration

2 CE Units, Meets DBC Core
Requirements (Former Cat I)

Gold Supporters



Silver Supporters

Burbank Dental Laboratory
BioHorizons
California Dental Arts
Patterson Dental
Union Bank
US Bank
Zimmer Dental

ON YOUR BEHALF – ONE FAMILY'S EXPERIENCE

Claudia Masouredis, DDS, MPH, Legislative Committee Member



Our dental society includes a diversity of members from many nations and others who have had personal experiences, both positive and negative, with healthcare systems in other countries. We present one member's experience and invite other viewpoints based on personal experience.

I was raised in a family that epitomized the American dream. Both sets of my grandparents were poor immigrants – one set from the Ukraine and one set from Greece. In spite of coming from poor backgrounds both my parents went to medical school.

I have had a privileged experience with medical care in this country that I understood to be the best in the world. I would have continued to assume this had I not recently experienced first hand medical care under the Canadian health care system. In the U.S. we are bombarded by reports of long wait times, inaccessibility and shoddy medical care as characterizing the Canadian system, but my experience has been different.

In 2005 our family purchased an old farm on Vancouver Island, which we visit frequently. I also became licensed in Canada and work in a practice on Vancouver Island for several weeks a year treating First Nation children. Because of this I established contact with several local physicians that could provide our family with medical care if we needed it when we were in Canada. As I am not a Canadian citizen the medical fees I pay are as a non-resident without a 'CareCard'. In spite of that, medical fees are a fraction of what they cost here. If I were a permanent resident they would cost nothing.

Southern Vancouver Island, apart from the city of Victoria, is not an urban location but the technology and efficiency of the medical systems rivals that of San Francisco. When my daughter who attended a local private boarding school in the area had bronchitis her physician was viewing digital chest x-rays in his office 10 minutes after they had been taken. I have taken many pediatric patients to the OR at the local hospital and it is just as up-to-date and has the same technology that Children's Hospital or California Pacific OR's have.

Last fall I called several pediatricians in San Francisco to see if my 16-year old daughter could have the H1N1 vaccine. At the time there was none available. When I took her to Canada, she received the vaccine by a nurse practitioner within the week without charge. This same daughter had an allergic reaction with facial swelling one evening when we were in Canada. I took her to the local emergency room where she was seen immediately and stayed about 2 hours for monitoring. The cost – out of pocket as I am not on the Canadian health plan – was \$400 total.

In spite of all the tales of Canadians coming to the U.S. in droves because non-urgent procedures like hip replacements can take several months, I have never met a Canadian who would switch their medical system for ours – virtually all Canadians recognize how lucky they are to not have to worry about paying high medical bills or high medical insurance premiums.

One of the things Canadians do complain about is how much tax they pay,

although the manner in which the Canadian system is funded is very egalitarian. Health insurance premiums are calculated based on total income from the previous year; those individuals making less, pay less than those in higher income brackets. For example, my neighbors, carpenters making less than \$40,000 per year pay about \$20 per month, while the dentist I work with pays about \$40 monthly.

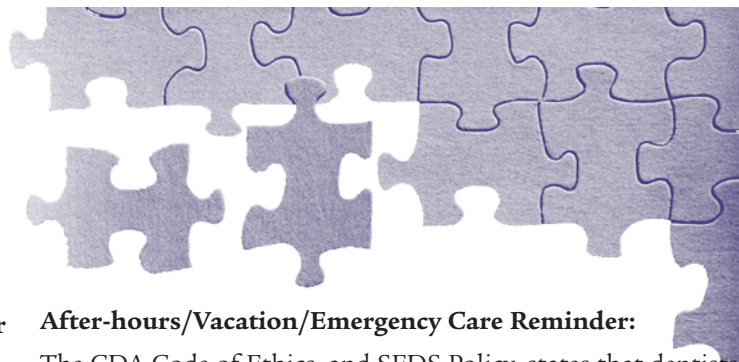
This year, while the U.S. was having heated discussions over health care reform, I received a newsletter from my Canadian malpractice insurance company urging all Canadians to take out a supplemental "Travel Edge Insurance" plan if they were planning to travel to the U.S. to cover the gap in coverage between U.S. & Canadian plans! The newsletter stated that "even if you are only driving across the U.S. border for a day trip...a CAT scan (after a car accident) could cost \$8,500 ... or treatment for a heart attack could set you back \$35,000 U.S. or more."

If not for my family's experience, I would have continued to believe, as do most Americans, that our system was superior to Canada's and that their universal health care had too many drawbacks to be a viable alternative. I believe differently now. ❖

Claudia Masouredis is a pediatric dentist in private practice in San Francisco and Vancouver Island, Canada. She is a Past-President of the SFDS.

BITS & PIECES...

...Know Your Association



This Month's Top Ten Reasons for Being an ADA Member

- Highest level of participation among health care associations
- Patient education materials with credible content & cutting edge graphics
- Resources to make your practice more efficient
- Success Dental Student Programs to enrich the dental education experience
- Positive relationships with state and local dental societies
- Going Green initiative with recommendations for "greening" your dental practice
- Collaboration with the American Dental Society of Anesthesiology Research Foundation
- Research on Fluoride content of infant formulas
- Support to exempt dental practices from the FTC Red Flags Rule
- Tools and tips to help your practice thrive at www.dental-practicehub.ada.org

Going Digital

Original paper records can be replaced by electronic records, so long as the electronic, scanned, copies are of 'good' quality. A good rule of thumb would be to make sure that any further reproductions made from the electronic record be of equal (or near-equal) quality as the original paper records.

A second copy of the electronic records also needs to be kept in a secure off-site location and backed-up nightly. Both on-site and off-site electronic records have to be secured in a manner to prevent unauthorized access. Once electronic records (and off-site back-ups) of original paper records are made, the original paper records can be securely destroyed. For more detailed information, visit the CDA Compass website at www.cdacompass.com.

ADA Evidence Based Dentistry Course

An intensive, five-day training course in evidence-based principles and tools is being offered by The ADA Center for Evidence-Based Dentistry (EBD) and The Forsyth Institute. Participants learn the skills to efficiently understand, appraise, and implement new dental treatment and diagnostic options into their practice, curriculum or research. The course will take place November 1-5, 2010 at The Forsyth Institute in Boston, Mass. The application deadline is September 1, 2010. Class size is limited to 30 students. For more information or to apply for the course, visit <http://www.ada.org/forsyth-course.aspx>

After-hours/Vacation/Emergency Care Reminder:

The CDA Code of Ethics, and SFDS Policy, states that dentists have a responsibility to make reasonable arrangements for the emergency care of their patients of record. This includes either a way to reach you or an on-call dental colleague who has agreed to see your patients. A message on your answering machine or with your answering service referring patients to a dentist covering your emergencies should be provided. The treating dentist may charge a reasonable fee for after hours' visits, in addition to the treatment provided and must return the patient to the dentist of record. **Providing the SFDS after-hours referral number does not meet this obligation to your patients of record.** *This referral number is for patients without a current dental home.*

SFDS Peer Review Committee Seeks New Members

The SFDS Peer Review Panel is seeking **younger, general practitioners** to serve on the committee. Peer Review is responsible for reviewing disputes that arise in the delivery of dental services to the public by SFDS/CDA member dentists, in particular, disputes regarding quality of dental treatment and appropriateness of dental treatment.

What are the benefits and joys of serving on Peer Review? According to current committee members:

- The camaraderie
- The opportunity to share clinical expertise
- Reviewing cases and learning the "how" of other practitioners
- The opportunity to discuss, and sometimes debate, cases
- Increasing one's scope of understanding/knowledge of dentistry, charting, operations...
- Great pizza and salad!

Those willing to serve must:

- Be an SFDS/CDA member for at least five years,
- Have practiced clinical dentistry for a minimum of five years
- Attend **mandated CDA training sessions**
- Be prepared for a long-term commitment of service and a great deal of reading.
- Have the ability to maintain objectivity, confidentiality, discretion and understanding

If you are interested and meet these minimum qualifications please contact SFDS Executive Director Deborah Elam, at exec@sfds.org, for more information. ❖

CAMPUS NOTES

ARTHUR A. DUGONI SCHOOL OF DENTISTRY (UOP)

UOP Alumni Banquet Honors Graduating Students

UOP graduating student, Chad Coombs, was the recipient of the SFDS 2010 Student Ethics and Professionalism Award, pictured with Dean Patrick J. Ferrillo and SFDS President, Dr. Sima Salimi, at UOP Alumni/Graduate Banquet held at the Ritz-Carlton on June 11, 2010.



UOP Honors Faculty

Two faculty members at University of the Pacific, Arthur A. Dugoni School of Dentistry were recently acknowledged by their peers for excellence in innovation, teaching and service during the school's Faculty Development Day in June.

This year, the dental school launched the Pacific Dental Helix Curriculum Innovation Award. Based on accomplishments during the 2009-2010 academic year, SFDS member Dr. Gurminder Sidhu, director of Radiology, took first place for her creation of online learning modules in two radiology courses. She was awarded a trophy and a \$1,000 prize, to be used within her department toward further learning enhancements.

Dr. Leigh Anderson, chair of the Physiological Sciences Department, received the 2010 Distinguished Faculty Award. Dr. Anderson has led the effort to integrate the foundation courses of anatomy, biochemistry and physiology,



Dr. Dr. Gurminder Sidhu and Dr. Leigh Anderson

and is a leader in web technology in the classroom. This is the first step in the development of the integrated medical sciences strand of the Pacific Helix Curriculum.

UNIVERSITY OF CALIFORNIA SAN FRANCISCO (UCSF)

Re-Modeling of First Floor Facilities at Parnassus UCSF Dental Center

A reception was held on the evening of June 8, 2010 to celebrate the first floor remodel of the UCSF Dental Center. This extension to the Pediatric Dentistry Division, adding two new clinical

research suites, was largely funded by Douglas, Stephanie, and Maylynne Tilden, for whom the new Pediatric Dental Care and Research Center has been named.

The central reception area for the Dental Center has been completely remodeled, allowing patients greater privacy and also enabling online registration and registration from remote terminals. Large screen LCD displays direct patients to appropriate clinical facilities.

The UCSF Dental Implant Center has also been remodeled with funding being largely provided by 3i Biomet and the Khosla Family Foundation (Ved Khosla was the former Chief of Dentistry at San Francisco General Hospital). It provides one-stop shopping for dental implant patients with its four consultation suites and three surgical suites which are accredited by the Accreditation Association for Ambulatory Health Care. The restorative phase of implant treatment is offered via the Hospital Dentistry and General Practice Residency Programs and associated Faculty Practice to provide a fully integrated multidisciplinary program which includes input from endodontics, prosthodontics and dental hygiene. ♦



Pamela Den Besten, D.D.S., Chair, Pediatric Dentistry; M. Anthony Pogrel, D.D.S., M.D., Chair, Oral and Maxillofacial Surgery; Sima Salimi, D.D.S., President, San Francisco Dental Society; John F. Featherstone, Ph.D., Dean, UCSF School of Dentistry



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BOARD HIGHLIGHTS

May 2010

- Approved Executive Committee Recommendation of a free advertising exchange with Dental Free Trader for a six-month period with reassessment after six months.
- Declined the Pure Water Technology Proposal of reduced service fees to the SFDS for each month that a member enrolls to use their water filtration system.
- Declined to further consider Nollenberger Capital Partners Employer Retirement Plan Proposal (MEP).
- Approved new SFDS Mission/Vision Statements and updated Bylaws, Chapter I, Section 20 accordingly:
 - ♦ Vision: To be the voice of dentistry and advocate for the oral health of the community.
 - ♦ The mission of the San Francisco Dental Society is to be the recognized resource for the needs of its members and to promote the oral health of the community.
- Nominating Committee Chair Gabany presented 2010 candidates for 2011 positions, which was accepted by the Board.
- Approved re-appointment of Dr. Irene Hilton as 2011 Editor
- Board Nominated Dr. Joe Gabany as its candidate, eligible to for second 3-year term, to the Nominating Committee
- Approved CDHC's recommendation that the SFDS Board of Directors recognize the contributions, with the presentation of a plaque, to retiring CCSF Dental Assisting Program Director Anna Nelson at the August 12, 2010 Evening CE Meeting
- Approved encouraging SFDS Members to express their concerns about the proposed parking meter changes via emails to the SF Board of Supervisors, Mayor Gavin Newsom, and the MTA Board, and the SFDS board of directors will email concerns.
- Treasurer Matt Young, DDS, reported that for the period ending May 15, 2010 the SFDS is at 77.5% of budgeted income (\$313,101 income to a \$403,988 income budget) and at 28.39% of budgeted expenses (\$121,761 in expenditures to a \$428,855 expense budget). Note that the SFDS receives the bulk of its income within the first six months of the calendar year, with the bulk of disbursements during the last six months of the calendar year. For period ending May 15, 2010, the unadjusted income YTD is up .28% over 2009 and YTD Expenses are down 11.4% for the same comparison period. Net YTD Income/Revenue is up 9.4% from 2009. The unadjusted SFDS Statement of Financial Position (Balance Sheet) prepared May 15, 2010, shows that the SFDS is up 1.46% compared to the SFDS 2009 Balance Sheet for the same time period.

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September 2, 2010

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Cosmetic Study Club: The SF Study Club of the California Center for Advanced Dental Studies aims to provide a forum for dentists in the Bay Area who continually strive toward excellence in the art and science of clinical dental care. Our emphasis is on cosmetic dentistry. We seek to integrate esthetic and multidisciplinary treatment into our cases by studying and providing a format for diagnosis and case management. Our goal is to elevate the level of esthetic dentistry in the local community for the good of our patients and the profession. Our next meeting will take place on September 28. For further information call Dr. Albert Kadosh (415) 398-8555

CDA Board of Trustees Report

Natasha Lee, DDS & Curtis Raff, DDS

The Board of Trustees of the California Dental Association met on June 18-19, 2010. Actions/Reports/Presentations covered:

- Accepted and filed a financial audit report from the independent firm of Perry-Smith, LLP. Consolidated financial statements conformed to standard accounting principles and fairly represented the financial position of the CDA and subsidiaries.
- Californians Allied for Patient Protection (CAPP) presentation, a coalition that is dedicated to protecting the California Medical Injury Compensation Reform Act (MICRA). By controlling the cost of liability coverage and by limiting runaway damages awards, MICRA helps control the cost of healthcare to the public and helps ensure that practicing in California is not prohibitive due to liability costs. For more information, visit www.micra.org

- Informed of national activity on access to care and dental workforce. Dr. Dan Davidson discussed these issues in a forum held recently at CDA Presents in Anaheim where he spoke about acknowledging the access problem, removing barriers to care, recognizing that the workforce issue as only a small part of the puzzle, and the importance of assuring that the CDA is the recognized expert on oral healthcare when discussions with legislators ensue and various solutions are proposed. To view Dr. Davidson's presentation and learn more about CDA's role in the ongoing discussions about access, visit www.cdapresents.com/AccessToCare.aspx
- Dr. Jack Dillenberg, the inaugural dean of the Arizona School of Dentistry & Oral Health, gave a presentation on his proposal to build a new A.T. Still University dental school in San Diego; an additional dental school in San

Diego would be the 7th dental school in the state.

- Reviewed a draft of the new CDA strategic plan; recommendations were transmitted to the Strategic Planning Committee for further revision prior to presentation of the final version to the board and the House of Delegates.
- In closed session with attorneys, the board continued discussion and heard legal analysis of issues and current activity related to negative online patient reviews of dentists and other businesses.
- Other action items that were passed included adoption of the Perinatal Oral Health Consensus Statement and Guidelines, CDA endorsement of an electronic claims submission program, and updates to the policy on usage of the CDA logo. ❖

MARK YOUR CALENDARS - UPCOMING MEETINGS AND EVENTS

Month	Date	Meeting/Event	Location	Time	CE
August	3	New Dentist Committee	SFDS, 2143 Lombard	6:30 PM	N/A
	5	Membership Committee	SFDS, 2143 Lombard	6:30 PM	N/A
	12	General Membership Meeting w/Dr. Martin Chin	Hotel Kabuki, 1625 Post	6 :00 PM	2 CE
	20	Infection Control/BBP	SFDS, 2143 Lombard	8 AM – Noon	4 CE
	20	CA Dental Practice Act	SFDS, 2143 Lombard	1:00 PM – 3 PM	2 CE
	26	Executive Committee	SFDS, 2143 Lombard	6:30 PM	N/A
	28	CPR Basic Life Saving	SFDS, 2143 Lombard	8:30 AM – 3:30 PM	4 CE
	31	Community Dental Health Committee Meeting	SFDS, 2143 Lombard	6:30 PM	N/A
September 6 Holiday – Office Closed					
September	9-11	CDA Presents	Moscone Convention Center	Multi-day	Varies
	23	Board of Directors	SFDS, 2143 Lombard	6:30 PM	N/A
	29	CPR Renewal	SFDS, 2143 Lombard	6 – 9:30 PM	4 CE
	30	Legislative Committee	64 Princeton St	6:30 PM	N/A
October 9-12 ADA Annual Session					
October	11	Holiday - Office Closed	N/A	N/A	N/A
	14	General Membership Meeting w/Dr. Warden Noble	Sir Francis Drake Hotel 450 Powell	6 :00 PM	2 CE
	15	Social Hour Park Chalet	1000 Great Highway	6:00 PM	N/A
	21	Executive Committee	SFDS, 2143 Lombard	6:30 PM	N/A
	26	New Dentist Seminar	SFDS, 2143 Lombard	6:00 PM Food 6:30 PM Program	N/A
	27	CPR Renewal	SFDS, 2143 Lombard	6:00 PM – 9:30 PM	4 CE
	28	Membership Committee	SFDS, 2143 Lombard	6:30 PM	N/A

The Hidden SFDS Committees

Ethics—A Little Education Goes a Long Way

By Mark Wiesen, DDS

With this issue we inaugurate occasional articles about SFDS Committees that may not be so well known, that is members may not be completely clear on what the Committee's duties and activities are. We hope to provide clarification and sometimes a behind-the-scenes look at the work involved.

It is a great pleasure to serve as Chair of the SFDS Ethics Committee and to share some insights from this year's Component Ethics Seminar, held this past April in Sacramento. The CDA Judicial Counsel conducted this informative annual training to help local component ethics committee chairs and committee members, and executive directors gain a better understanding of the importance of the CDA Code of Ethics and how to respond to public and member queries when questions arise. One of our most important functions is to serve as a resource for our members, should any specific questions arise.

The specific purpose of the SFDS Ethics Committee is to:

1. Educate our members and the public about the CDA Code of Ethics.
2. Provide interpretations of the Code of Ethics
3. Investigate alleged violations of the Code of Ethics

It is my goal to focus the SFDS Ethics Committee's efforts on education since knowledge is the most powerful tool we can share that will allow you, the indi-

vidual member, to practice within the parameters of the CDA Code of Ethics. First, I encourage members to read the CDA Code of Ethics, available on-line at http://www.cda.org/about_cda/cda_code_of_ethics and to either purchase a copy of the California Dental Practice Act from LexisNexis at <http://www.lexisnexis.com/store> or go online at www.dbc.ca.gov. These are valuable guides to go to when questions about patient management, licensure, advertising, scope of practice, referral services, and confidentiality come up. Of course, both publications offer so much more and are quick references that you should have in your office to assist you in making important decisions.

Of particular concern at this year's meeting was advertising and marketing. Recently, there has been some attention drawn to the content of "tongue-in-cheek" on-line marketing campaigns that are prepared and distributed by a third party. These following real-life examples could mislead patients and violate the California Business and Professions Code, Section 651 of the Dental Practice Act:

"The Dr. will take time to talk with you, unlike most dentists who prefer to scream at you from hidden speaker systems." "Digital x-rays minimize radiation exposure, decreasing the chance that repeated dental visits will result in a baby arm growing out of your neck..."

Dentists who utilize such firms may be unaware of the content of the advertisement and its potential violation of CDA Code of Ethics. Members may not realize that they are ultimately responsible for all their advertising content and maintaining compliance with CDA Code of Ethics standards. For this reason, we suggest that our members take a moment to review their individual marketing campaigns and to always evaluate and approve any future advertisement before it is marketed to the public. Finally, please remember, that it is your responsibility to ensure that any marketing campaign provides the public with the accurate, ethical, and professional information essential to maintain the high respect dentists have within our communities.

I believe we are fortunate to practice in one of the best professions and to serve our community with an outstanding reputation for compassion. For this reason, I again want to remind each member of the resources available through CDA and SFDS. Both organizations are here for you to turn to when any questions about the Code of Ethics or Dental Practice Act arise. I also want to thank our membership for their consistent dedication to exceeding the Code of Ethics requirements in all aspects of practice. ♦



MEMBERSHIP MOMENT

How Organized Dentistry Has Helped a San Francisco New Dentist

By Courtney Fitzpatrick, Chair Membership Committee



Dr. Stanley Siu graduated from Baylor College of Dentistry (Dallas) in 2004 and completed an AEGD residency in 2005. After his residency Dr. Siu practiced as an associate dentist in Texas for 3 years, and then moved to California and practiced as an associate dentist. After just a few months in California Dr. Siu purchased a practice from a retiring dentist, and since 2008 has been the owner of a solo private practice in San Francisco.

We asked Dr. Siu how the San Francisco Dental Society (SFDS) has helped him with his new practice, and he shared, “Primarily through the New Dentist Seminars, networking with other general practitioners and specialists, learning more about organized dentistry, knowing that I’m not the only one going through the trials and tribulations of being a new practice owner. Not to mention the socializing!” Dr. Siu recently attended the ADA New Dentist Conference in San Diego. He wanted to hear Gordon Christensen speak and also attended some of the leadership workshops. “It was a great opportunity to network with other dentists going through similar phases of our early careers. There were plenty of opportunities to interact with people from all over the country, too.” When asked more about his experience, Dr.

Siu replied, “It was great. I learned a lot and it was refreshing to know that the ADA really wants us to succeed. One of the things that I hear from other dentists is the lack of business training that’s taught in dental school. I think the majority of people who graduate from dental school will be in private

“Having other dental practice owners to talk with is crucial.”

practice, but surprisingly, there is a ton of stuff that we don’t have any earthly idea about, that we are expected to know as small business owners. As an owner of a dental practice, I am essentially a small business owner. Having other dental practice owners to talk with is crucial. It’s also nice to know that there are others that have gone through or are going through the same things that I’m going through. It’s great to have that as an invaluable resource.”

Dr. Siu attended his first ADA New Dentist Conference only after he purchased his own practice, but he felt that he could have benefited by attending

earlier on in his career as opposed to waiting. It is never too early to start thinking about how you might want to run your own practice, and Dr. Siu is happy that he gained a lot of useful information that he will be able to apply immediately to his practice.

Getting involved and taking advantage of these great resources is something Dr. Siu highly recommends to his colleagues. He has enjoyed the many great people he has met at SFDS events and enjoys the camaraderie that comes with it all. Additionally, he was pleased to have had the opportunity to get to know better some of the SFDS members who also attended the New Dentist Conference. They were able to exchange ideas about what was going on with their careers, how to handle particular situations and share stories with one another about what works and doesn’t work in their respective practices.

Dr. Siu’s comments echo a sentiment shared by many, that for new dentists, participating in organized dentistry provides networking opportunities for a trusted community of people whose background, experience and judgment can help one navigate through the overwhelming number of decisions that can affect our number one priority, patient care. ♦

35th Annual Children's Dental Poster Contest

Katherine Vo, DDS, Member Community Dental Health Committee

It was yet another successful year showcasing San Francisco elementary school students demonstrating their dental health knowledge through wonderful works of art.

"For a Sparkly San Francisco Smile, Brush and Floss Daily!" was the theme of this year's poster contest, which is open to all San Francisco public and private kindergarten through 5th grade students. Among an estimated 1500 entries, 60 winners were chosen and presented with awards at a ceremony held on Friday, May 21st at the Arthur A. Dugoni School of Dentistry.

After opening remarks from Poster Contest Chair, Dr. Shinbori, students, parents and their teachers received a warm welcome from Dr. Patrick Ferrillo, Dean of UOP School of Dentistry, and Dr. Sima Salimi, President of San Francisco Dental Society. With a crowd of almost 300 in attendance, California State Senator, the Honorable Leland Yee, presented the first-prize winner, her teacher and principal with Proclamations from the State Senate. All winning students, SFDS Poster Contest judges, presenters, and co-chairs received Certificates from the State of California Senate.



This year's grand prize winner, Tammi Yuen, a fifth grader from St. Thomas the Apostle School, was presented with one-night weekend accommodations at the Hilton Santa Clara, passes for 2 to Great America theme park, \$50 cash, and a Sunstar/Butler power brush dental kit. Tammi's third grade sister Tiffany Yuen, also from St. Thomas Apostle, claimed the second prize win. You can view these winning posters, and many more, at the San Francisco Main Public Library throughout the summer and the San Francisco International Airport Children's Museum in February 2011.

The winning artists were presented with award prizes by Dr. Salimi, SFDS President, Ms. Deborah Elam, SFDS Executive Director, Ms. Paula Baum and Ms. Cathi Fuller, SFUSD Nurses, and our constant volunteer support, Mrs. Wendy Shinbori, with assistance from Poster Contest co-chair Dr. Stafford Duhn. The evening ended with encouragement from UOP's Executive Associate Dean, Dr. Craig Yarborough, urging children to

explore careers in dentistry.

The Poster Contest, held every February during National Children's Dental Health Month, raises awareness about the importance of oral health through artistic means of expression. The San Francisco Dental Society promotes dental health and education through numerous programs and volunteer efforts, including those of the SFDS Community Dental Health Committee. If you are interested in serving your community and working on one of the Committee's many programs, please give us a call.

Most important, we would like to acknowledge the following donors, with-



out whose generous donations this contest would not be possible:

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COMMUNITY CORNER

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Delancey Street continues to look for dentists to provide dental services to participants. This would include cleanings, general prophylaxis, restorative and prosthetic services. The gift of self-confidence to men and women who are looking to enhance their lives would be the springboard for their success in life. Please contact the Delancey Street Foundation at (415) 512-5118 if you are interested in contributing to this endeavor. For more information please visit the website at www.delanceystreet-foundation.org.

SafeHouse, a clean and sober living community for formerly homeless women, seeks the services of general practitioners who will each provide service to one of their clients. Please contact SafeHouse, Carola Shepard at (415) 643-7861.

Students Rising Above is dedicated to providing educational resources to high school students who are overcoming staggering obstacles to pursue their education and their dreams for a better life. Many of the students in this pro-

gram do not have a dentist. The organization is building a database of dentists who are willing to provide services to these students on a pro bono or reduced fee basis. If you would like to assist these students please contact Lynne Martin or Barb Hendricks at (415) 333-4222. For more information please visit the website at www.stu-dentsrisingabove.org.

Project Homeless Connect — Project Homeless Connect's™ (PHC) objective is to connect San Francisco's homeless with the system of care that will help them move off the streets and into housing. The need for PHC became clear after 278 volunteers surveyed the homeless in downtown San Francisco in October 2004. Under the direction of Mayor Gavin Newsom, volunteers covered a 60-square-block area in the Tenderloin district, where 85% of the city's social services are located. Corporations, nonprofits, and government agencies provide PHC and its clients with services such as **dental care**, eyeglasses, family support, food, HIV testing, housing, hygiene products, medical care, mental health services, substance abuse treatment, and more.

In response to the changing needs of the homeless and low-income population, PHC continues to reshape its out-

reach strategy and improve available services. Recent modifications have included events specifically designed for veterans, families, and children. As of February 2010, 20,292 volunteers have provided services to more than 30,844 homeless and poor San Franciscans. To volunteer for one of the upcoming PHC events, contact SFDS Community Dental Health Chair, Dr. Jeff Jang at (415) 564-1552.

Future 2010 PHC events:

PHC 35 - Golden Gate Park
Wednesday, September 29
Location: Lawn Bowling parking lot and Sharon Meadows

PHC 36 - Veterans Connect
Wednesday, November 10
Location: TBD

PHC 37
Wednesday, December 8
Location: TBD

If you know of or participate in an organization that has needs, and focuses on oral health for the underserved, developmentally or physically challenged, please contact the SFDS and we can include the request in our next newsletter.

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JUNE 22, 2010 – NEW DENTIST SEMINAR

Employment Law 101: Avoiding Common Pitfalls in 2010

California attorney, Ali Oromchian, covered various federal and state employment laws and regulations governing employees, informing members on how to avoid potential problems that can lead to litigation.



APRIL 20, 2010 – NEW DENTIST SEMINAR

I've Never Been in Charge Before! Leadership for the Young Practitioner

Bruce Peltier, Ph.D., Professor of Psychology and Ethics at the University of the Pacific Arthur A. Dugoni School of Dentistry in San Francisco, engaged attendees with a discussion on leadership theory geared towards dentists. Along with some anecdotes and tips, he also interacted with the audience, creating opportunities for peer discussion about how dentists can work to be leaders within their own practices.

