

ACP MESSENGER

THE NEWS SOURCE FOR MEMBERS OF THE AMERICAN COLLEGE OF PROSTHODONTISTS

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Growing the specialty: connecting with dental students



The ACP and ACP Education Foundation continued efforts to promote prosthodontics to dental students by engaging the students who are members of the American Student Dental Association at regional and annual conferences throughout the year.

ACP members including prosthodontic residents and ACP officers volunteered to speak with dental students who visited the ACP Booths in the Exhibit Hall during the ASDA meetings. Dr. Anthony LaVacca, of Naperville Dental Specialists in Naperville, Ill., participated during an ASDA Regional Meeting in Chicago and enjoyed speaking with

I became a prosthodontist because the advanced education that I received in three years has allowed me to accept challenging dental cases from the beginning of my career — DR. ANTHONY LAVACCA.

students about his own path through dental school and his decision to specialize in prosthodontics.

"I became a prosthodontist because the advanced education that I received in three years has allowed me to accept challenging dental cases from the beginning of my career," said Dr. Anthony LaVacca. "I have a better understanding of diagnosis and treatment planning and the advanced skills to treat a wider variety of patients." Dr. LaVacca opened a multi-specialty practice with his wife Dr. Manal Ibrahim, who is a prosthodontist and an orthodontist, which allows both to serve a larger patient population.

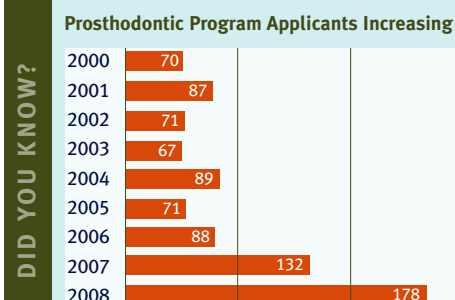
ACP President Dr. David L. Pfeifer addressed dental students during the Exhibit Fair at ASDA's Western Regional Meeting in Chicago and encouraged students to consider specializing in prosthodontics.

"Prosthodontics is poised for great opportunities to serve a growing patient population in the next several years," Dr. Pfeifer said. "If you are interested in cutting-edge technology and have the desire to be a leader in dentistry, then prosthodontics needs you."

The ACP, thanks to the support of the ACP Education Foundation, also sponsored a breakout workshop about prosthodontics during the ASDA Annual Session in Scottsdale, which featured a presentation by ACP President-Elect Dr. Charles J. Goodacre, dean of Loma Linda University School of Dentistry.



Top photo (L-R): ACP members Dr. Rosemarie Tan, prosthodontic resident at UIC College of Dentistry, and Dr. Anthony LaVacca present ASDA member Dr. Thomas Leonard, Nova Southeastern 2011, with an iPod Nano raffle prize during ASDA's Central Regional Meeting in Chicago. Bottom photo: ACP President Dr. David L. Pfeifer (center) presents an iPod Nano to an ASDA student member during ASDA's Western Regional Meeting in Chicago.



College connects in Nashville

The 38th Annual Session of the American College of Prosthodontists in Nashville, Tenn. will educate, inform and connect prosthodontists, dental technicians, graduate students and other dental professionals for four days in October. The General Session program – *Perspective on Translating the Science and Practice of Prosthodontics for the 21st Century* – promises to be exceptional.

The meeting is made possible thanks to the generosity of Nobel Biocare as the lead meeting sponsor, as well as these supportive 38th Annual Session meeting sponsors: GlaxoSmithKline, 3M ESPE, Biomet 3i, Ivoclar Vivadent, Straumann, Astra Tech, Procter & Gamble Professional Oral Health, Dentsply Tulsa, Scientific Metals and Treloar & Heisel.

A meeting highlight will be the 2008 Technology Forum, which is a tremendous opportunity to explore what's new in the specialty. Companies on the leading edge of innovative technologies will host demonstrations and mini-lectures on key topics in prosthodontics. Featured presentations will include offerings from: 3M ESPE, Astra Tech, Biomet 3i, Ivoclar Vivadent, Nobel Biocare, Sirona Dental Systems and Straumann.

From educational sessions and cutting-edge exhibitors to a variety of special events, including the 2008 President's Dinner honoring ACP President Dr. David L. Pfeifer, opportunities to network with colleagues will abound at the Gaylord Opryland Resort® & Convention Center.

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College momentum surges: Aiming for the future



DAVID L. PFEIFER,
D.D.S., M.S., M.ED.

The summer has been a flurry of activity for all of those engaged with the various activities of the College. From committee members, chairs and our division and regional directors on the Board to our officers and Central Office staff, the College has been immersed in one of the busiest times of the year... and this year is moving along at a rapid pace, with monumental success.

One of our greatest focuses was on the growth of our College and the value of membership – for all members regardless of their practice environment. Our Board of Directors has been engrossed in these issues since the February Board of Directors meeting, and the opportunity to develop and support the new governance structure and instill a rejuvenated membership is unfolding on a well designed path. All but a few Sections are registered with the Central Office and their leadership has been identified. We are working to engage members at the local level so the perceived value of ACP membership is actually received and appreciated. Undoubtedly, this is evolving. ACP Section Presidents enthusiastically contributed ideas during their leadership conference calls to help develop meaningful experiences at the grassroots level. Concepts were discussed that

THE COLLEGE HAS ADVOCATED FOR MUTUAL CONCERNS OF THE MORE THAN 35,000 MEMBERS OF THE PROSTHODONTIC FORUM ORGANIZATIONS WHEN WORKING WITH THE ADA AND OTHER DENTAL SPECIALTY GROUPS.

would not only satisfy our membership but serve as an attractive enticements to new members. For me, this has been extremely rewarding to witness and as the year progresses, everyone will sense the positive change. Dr. Jonathan Wiens, your College Treasurer, has diligently served as Chair of the Governance Task Force and working together with our terrific Central Office Staff, we have come a very long way thanks to their guidance. This includes the excitement of the new election process, one in which the membership holds a vital and important role in electing new leadership.

Our advocacy in prosthodontic education continues at a fast pace. After the ACP Education Foundation sponsored the highly touted Digital Prosthodontics Technology Conference, orchestrated by ACP Vice President Dr. Lyndon Cooper, we

have moved forward advocating for both the discipline and specialty at the recent American Dental Education Association Annual Session. Participating in updates to ADEA's prosthodontic leadership, ACP President-Elect Dr. Charles Goodacre and I addressed many of the educational issues we face today in our specialty. The ACP has also had representation at the American Dental Association's Council on Dental Accreditation and interaction on several occasions with other dental specialty leaders. The ACP also hosted a Prosthodontic Educators Meeting in Chicago to address current challenges and to discuss the future of postdoctoral prosthodontic education. A joint meeting of predoctoral and postdoctoral educators is planned for October in Nashville during the ACP's 38th Annual Session.

We are advancing in so many directions beyond the activities of our major Growth, Education and Science and Technology Task Forces. The College has advocated for mutual concerns of the more than 35,000 members of the Prosthodontic Forum organizations when working with the ADA and other dental specialty groups. Closer to home, the College has several newer task forces at work: Oral Cancer Screening; Denturism; and the

Diagnostic Codes, Prosthodontic Diagnostic Index, Parameters of Care and Educational Standards Informatics Integration Task Force (the DPPSI Task Force). Meanwhile, our Web site continues to grow and change, and a new ACP Web Service includes an opportunity for Prosthodontic Forum Organizations to host a Web site through the ACP. With much appreciation to the Greater New York Academy of Prosthodontics, the first Forum Organization to support this endeavor, the new Forum Organization Web Template is being developed.

At this point, it is obvious that we all look forward to a phenomenal remainder of the year. Please be sure to attend the 38th Annual Session in Nashville, which is featured in this issue of the Messenger... it's so, so important. In closing, it is a sincere pleasure to serve you and our College.

Prosthodontic program directors convene in Chicago

The ACP and ACP Education Foundation hosted meeting for postgraduate educators in late May in Chicago in order to promote excellence in prosthodontic education. The two-day conference provided an overview of the College's education initiatives and allowed for networking among attendees.

Immediate Past President Dr. Stephen Campbell organized the meeting that gathered more than 40 prosthodontic program directors, along with Dr. Kent Knoernschild, prosthodontic program director at the University of Illinois, Chicago, College of Dentistry. Topics of discussion included: an update of predoctoral and postdoctoral education standards; how to develop model content and curriculum; a preview of the ACP's new Prosthopedia™, the online digital resource library; an update on the American Dental Association's Commission

on Dental Accreditation; an overview of the ACP's Clinical Evaluators Network; and a presentation on applying evidence based decision making to educational programs.

Attendees expressed positive feedback about the conference's agenda, and enjoyed learning from colleagues across the country.

"I would like to thank the Foundation for its support of the spring educators meeting," said Dr. J. L. Hochstedler, program director of the Louisiana State University School of Dentistry's prosthodontics department. "I found this meeting very enlightening and I have placed a must priority on attending future meetings. The opportunity to meet with fellow program directors is 'priceless.' The ability to discuss common problems and solutions with peers is very important to me."

ABP Task Force survey results revealed

BY SUSAN E. BRACKETT, D.D.S., M.S.
CHAIR, ACP AMERICAN BOARD OF PROSTHODONTICS
TASK FORCE

In January 2007, the ACP Board of Directors appointed a Task Force to examine the selection process of examiners for the American Board of Prosthodontics. The ABP Task Force created a survey and issued the survey to Diplomates of the ABP to collect feedback about the examiner selection process.

Approximately five years ago the current system utilizing the ACP Council to the American Board of Prosthodontics was initiated. The Council considers both internal and external nominations, reviews the nominees' qualifications, meets to discuss the candidates and determines the candidates to interview. Following the interviews, the Council develops a ballot that is distributed to all current Diplomates of the American Board of Prosthodontics, and the next examiner of the ABP is elected by general election.

In addition to the Diplomate survey, the ABP Task Force interviewed of current key members of both groups, investigated the selection process of board examiners by the other dental specialties, and developed and distributed of a questionnaire directed to the previous nominees and candidates involved in the selection process. A letter was sent to all current Diplomates with known e-mail address (approximately 700); hard copies were mailed to the current Diplomates with no known e-mail address. Results for both the electronic responses and the hard copy responses were compiled by SurveyMonkey.

Results of the Diplomate Survey

The Diplomate survey consisted of 15 questions, primarily multiple choice, and was distributed to 744 Diplomates. Approximately 321 Diplomates responded, which yielded a 43 percent response rate. Significant findings are summarized in the graphic below.

Have been Diplomates for more than 10 years	68.2%
Have been Board Certified for more than six years	82.2%
List private practice as his/her primary activity	48.9%
List education as his/her primary activity	37.5%
List Federal Services as his/her primary activity	13.6%
Familiar with the current process to nominate ABP Examiners	83.4%
Agree or strongly agree that the ACP Council to the ABP should nominate potential examiners	70%
Rated the current process as satisfactory or adequate	72.6%
Thought the current process produced well-qualified examiners	83.1%
Strongly agreed or agreed that Board examiners should be elected	85.8%
Strongly agreed or agreed that the elections should be open to all educationally-qualified prosthodontists	11.5%

Results of the Nominee/Candidate Survey

The Candidate survey was designed as an open-ended questionnaire and consisted of 11 questions, primarily Yes/No with room for comments. This questionnaire was distributed to 15 individuals who have been nominated as Board examiners and included individuals who

were not included on the ballot, those who were placed on the ballot but did not win and those who were elected to the position of examiner. All 15 individuals responded. The subjective nature of this questionnaire makes it difficult to quantify the answers by percentages, but trends were easily recognized.

The vast majority of nominees agreed on the following:

- The Council provided adequate information (12)
- The nominee was treated in a professional manner (14)
- The nominee was able to present his/her qualifications (11)
- The recruitment process was appropriate (12)

Many of the comments, especially regarding the selection process, the experience of participating in the process, potential improvements, etc. were wide-ranging and seemed to reflect the individual outcomes of the nominees. The overall feeling was positive, but also some concern was expressed about the "politics" in the system.

Conclusions

The ACP Council to the American Board of Prosthodontics and the American Board of Prosthodontics should be commended for the communication they have developed. This cooperative effort appears apparent to the Diplomates, and the two groups have built not only a successful working relationship, but have inspired trust in the Board Certified Prosthodontists responding to the current survey. The most significant finding from this Task Force is the solid support from the Diplomates for the current process with the ACP Council to the ABP screening candidates and preparing a ballot for a vote by the Diplomates. Obviously, it is essential that the Council and the ABP continue an ongoing discussion as to the needs of the Board and the role the individual examiners must play.

I appreciate the cooperative effort, enthusiasm and objectivity of each of the Diplomates who served as members of the task force: Dr. Lars O. Bouma, Dr. Kenneth S. Kurtz, Dr. Radi M. Masri, Dr. Michael S. McCracken and Dr. Bruce G. Valauri, advisor. Thanks to all who participated in the task force's review and surveys.

College conducts 2008 Survey of Prosthodontists

BY KENT D. NASH, PH.D.

The data collection phase of the ACP's 2008 Survey of Prosthodontists will soon be completed. This mail survey was first conducted in 2002 and repeated again in 2005. The results of the survey have been an important source of information for our efforts to enhance and encourage dentists to consider the specialty profession of prosthodontics. The responses to the survey from practicing prosthodontists helps the College more accurately identify benefits that will encourage more dentists to become members of our profession.

In addition, the survey results allow for evaluation of the characteristics of prosthodontics practice. The survey data help to identify practice norms, explore future trends, and better understand the distinct characteristics of practicing as a prosthodontist. One of the specific uses of these data is to prepare and publish articles in our *Journal of Prosthodontics*. In 2007, two articles were published using results from the 2005 Survey of Prosthodontists. One article examined conditions and characteristics of prosthodontists in private practice and compared some results with similar information from the 2002 Survey of Prosthodontists.¹ A second article used data from the 2005 survey to examine the issue of whether the future supply of prosthodontists was in sync with the dynamics of the U.S. population and patient population.²

The final phase of the 2008 Survey will begin in a few weeks. Numerous prosthodontists (members and non-members of the College) were sent a survey in the mail and have already participated by completing and returning the survey. But we still need assistance from the currently practicing prosthodontists who received a survey in the mail but were unable to participate.

The last stage of the data collection phase will be conducted using an Internet survey. Those prosthodontists who were unable to participate in the mail survey will be contacted with an e-mail describing the survey and instructions about how to complete the survey. E-mails will be sent to prosthodontists from the College and will have specific instructions on how to link up with the survey via the Internet. One of the unique characteristics of this Internet survey is that, like a mail survey, the respondent prosthodontist can begin the survey, stop and then return to complete the survey at a later time. In fact, even after the survey is completed, the prosthodontist can return to their survey and make changes if they desire.

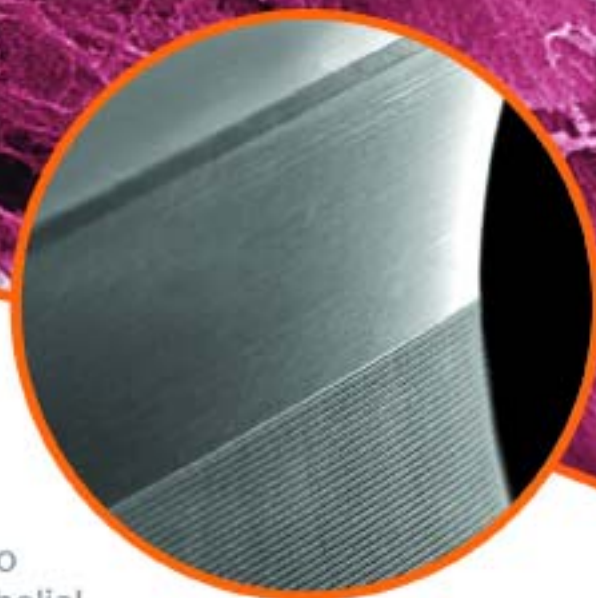
We are looking forward to the use of this Internet survey as it will help enhance the response to our current survey. But it will also provide the College with information about the use of an Internet survey to collect data about private practice. We believe this year's Internet survey will be easy to complete and much less time consuming compared to the mail survey. We are looking forward to prosthodontists' comments about the specific questions included in the survey and about their impressions of the overall Internet survey.

¹ Nash, KD and Pfeifer, DL. Prosthodontists in Private Practice: Current and Future Conditions of Practice in the United States (Part I). *Journal of Prosthodontics*, Volume 16, No. 4 (July-August), 2007: pp. 288-301.

² Nash, KD and Pfeifer, DL. Prosthodontists in Private Practice: Current and Future Conditions of Practice in the United States (Part II). *Journal of Prosthodontics*, Volume 16, No. 5 (September-October), 2007: pp. 383-393.

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Prosthodontics faces two-headed monster



BY SREENIVAS KOKA, D.D.S., M.S.
ACP SCIENCE AND TECHNOLOGY TASK FORCE

In his 1995 book *Emotional Intelligence*, Daniel Goleman interrelates neuroanatomy, neurophysiology and psychology with behavior that leads to meaningful friendships and contentment in adulthood. At one point, Goleman states that the human mind has been unable to evolve with sufficient rapidity to compensate for advances in technology and he uses anger management as a prime example. Four hundred years ago is perhaps comparable to eight western civilization generations. In 1608, then, if you or I were raging mad at another person we would be hard pressed to use much more than our fists, feet, a lance or a bow and arrow to vent our anger since pistols were not available to the common person. Goleman's point is that technology has advanced so quickly in the last 400 years, that a mere eight generations is a woefully inadequate window of opportunity for the necessary genetic changes to realise humans with sufficient acuity to manage the fact that pistols, shotguns, semi-automatic weapons, etc are now, and quite legally, within relatively easy reach. Today, when someone becomes livid and loses self-restraint, weapons of significant destruction are remarkably accessible. It is not the presence of the weapons that creates the quandary; it is the regulation of accessibility. Humans seem willing to lay the burden of responsibility at the feet of those who may be so angry that rationality escapes them.

Embracing technology is an absolute requirement for the discipline of prosthodontics to evolve and to provide the highest level of care. For that care to be patient-centered, however, technology must be applied to serve the outcomes that matter most to patients.

This may indeed be an extreme way to introduce a short article on technological advances and the practice of prosthodontics. However, it serves as an example of how failure to consider the consequences of technological advances in the *light of how human behavior is likely to apply them* can have less than desirable effects. Prosthodontics is being fundamentally challenged by a two-headed monster: one head is represented by the wonderful and potentially revolutionary advances in technology; the other is represented by the principles of evidence-based practice.

Nowhere is this dichotomy more evident than in computer tomography (CT)-guided implant surgery and prosthodontic rehabilitation. The meld of digital imaging with new software capabilities to design full arch fixed prostheses to be inserted immediately post-implant placement using a surgical guide developed from a CT image has already made wide inroads into clinical practice. Indeed, it seems that CT-guided implant surgery is routinely promoted by some dentists as superior with the inference that “traditional” pre-surgery imaging is passe and constitutes lower quality treatment. However, the clinician who wishes to introduce new therapies after evaluations of outcomes, benefits, side effects and risks are published and available for scrutiny would, in good conscience, be completely unable to justify that CT-guided implant surgery has been shown to significantly improve a single long-term patient-centered treatment outcome.

Perhaps, to practice “state-of-the-art” is sufficient impetus (although many “state-of-the-art” technological advancements have succumbed to early funerals.) Or perhaps CT-guided implant surgery would be of benefit to the inexperienced surgeon who needs all the help he or she can muster before engaging in implant placement, flapless or flapped. Perhaps there are fewer short-term post-operative complications. Then again, there is a mountain of evidence that the combination of an experienced surgeon and a panoramic film portends excellent long-term clinical outcomes. In addition, one must consider the financial cost of the extras: the procedures, the laboratory expenses, the radiation exposure, etc that ultimately are passed along to the patient, and often not at cost. Prosthodontics remains

reluctant to answer the question that some may never want to answer: Regardless of profit, what services that we provide to our patients stand the cost-utility test of time?

Embracing technology is an absolute requirement for the discipline of prosthodontics to evolve and to provide the highest level of care. For that care to be patient-centered, however, technology must be applied to serve the outcomes that matter most to patients. The concept of “prudent enthusiasm” for new technology may be a notable hallmark of the ideal practitioner.

Understanding the true cost of long-term care

BY KENNETH C. THOMALLA, C.P.A., C.L.U., C.F.P.
COO, TRELOAR AND HEISEL, INC.

Many individuals believe they will be able to fund their need for long-term care without fully understanding the true cost of these services. People often forget factors such as inflation; the age care begins, as well as expenses for a spouse who remains at home. These factors alone warrant analyzing the true cost of care and determining how this will affect their families overall financial well being.

With the assistance of the *The MetLife Market Survey of Nursing Home and Assisted Living Cost*, October 2007, this article will examine two examples of future long-term care costs. The examples will utilize the MetLife study's national average daily nursing home rate of \$213. Additionally, it will be assumed that the cost of care will increase by 5 percent each year.

In the first example, let us assume Bob is currently age 60. At age 90, Bob requires care for a period of three years. The current daily nursing home rate of \$213 will inflate to a daily rate of \$921 in 30 years. During the three years, Bob's nursing home cost will total **\$1,111,540**.

In the next example, it is assumed that Jill is currently age 55. At age 60, Jill suffers a stroke and requires care for 10 years. Five years from the present, the

daily nursing home rate has increased to \$272. The care for Jill over the next 10 years is **\$1,311,169**.

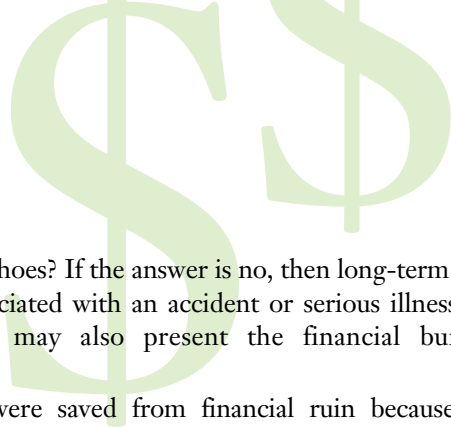
The above example with Jill is complicated by the fact she is married to Mark. Mark remains healthy, while Jill is in the nursing home, and resides in the family residence. The current fixed costs related to remain in the family home are \$5,000 per month. Inflated at 3 percent, Mark will spend **\$901,943** during the 10 years that Jill is confined to the nursing home.

As a family unit, Jill and Mark will spend a total of \$2,213,112 over the 10 year period that Jill requires care! Will their savings be able to sustain this substantial figure?

These two examples highlight the potential overwhelming cost associated with the need for long-term care services. For most, the solution is to rationalize that care will not be needed until a long time from now so let's not think about it. However, without proper planning, a need for long-term care may be disastrous.

For most professionals, long-term care services will be funded by either personal savings or insurance. Medicaid is usually the third option for the general public, but not for a professional with some assets. Neither health insurance nor Medicare will provide sufficient coverage for a long-term care need.

See Long-term care on page 7



Long-term care *continued from page 6*

Are your savings enough if you were in Jill and Mark's shoes? If the answer is no, then long-term care insurance may be the best option to cover the risk associated with an accident or serious illness. As medical technology is keeping us alive longer, it may also present the financial burden associated with the true cost of long-term care.

How about one more assumption? Jill and Mark were saved from financial ruin because Jill purchased a long-term care policy at age 55. For the annual premium of \$3,690 (MassMutual policy series 500*), \$210 daily benefit amount, 90 day elimination period, 10 year benefit period, cost-of-living rider, 10% group discount), Jill was able to insure most of her care. The decision to purchase long-term care insurance was a tough one, but saved the family financially at a very stressful time.

Long-term care insurance is a great way to insure against the cost associated with long-term care services. The current generation of policies allow for a flexible design and rich policy features. Starting a long-term care plan sooner than later will may help avoid the risk of becoming uninsurable and provide protection against the current risk factors we face everyday.

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Ivoclar Vivadent continued its exceptional support of the ACP Education Foundation's mission by pledging \$500,000 in support of the *Vision 2012: Brilliant Futures* campaign. As a major contributor to the Foundation's initial fundraising campaign, Ivoclar Vivadent was among the very first companies approached to help lead the way during *Vision 2012*.

The company got its start manufacturing artificial ceramic teeth in Zurich more than 80 years ago. Now headquartered in Schaan, Liechtenstein, Ivoclar Vivadent has grown into a global industry leader, with its own subsidiaries in 22 countries. Products offered span a wide range including but not limited to: composites, cements, adhesives, ceramics, operatory equipment, lab equipment, whiteners, impression materials and teeth. Committed to ongoing innovation, the company operates one of the largest research and development centers in the dental industry. Ivoclar Vivadent also invests heavily in continuing dental education. A primary example of this investment is the International Center for Dental Education. Opened in 2000, the ICDE includes classrooms, labs, surgeries and a lecture hall located in a 2,000 square meter area. Educational offerings are further supported by many regional training centers located around the globe.

Dr. George Tysowsky, vice president, technology, for Ivoclar Vivadent, serves as a member of both the ACPEF Board of Directors and the *Vision 2012* National Steering Committee. "We are excited about helping the ACP advance the prosthodontic specialty and discipline through *Vision 2012*," said Tysowsky. "We are entering a very unique time in the history of prosthodontic care. Nowhere is this more evident than in the rapid expansion of prosthodontic treatment options. New tools, materials and techniques are redefining dental patient care. These advancements further emphasize the need for quality educational programming and resources. The campaign will provide necessary financial support to address these needs for both students and practicing clinicians alike."



Dr. George Tysowsky speaks with ACP Education Foundation Chair Dr. Thomas J. McGarry during the ACPEF Board of Directors Meeting in Scottsdale, Arizona in October, 2007.



(Above, from L-R) *Vision 2012* Campaign Chair Dr. Lyndon Cooper, *Vision 2012* Honorary Chairs Dr. Jonathan Ferenz, and Dr. Thomas McGarry (far right) accept an Ivoclar Vivadent check from Dr. George Tysowsky at the ACP's 2007 Annual Session in Scottsdale, Arizona. (Left) Dr. George Tysowsky



Tysowsky sees prosthodontists as uniquely positioned to address emerging education needs within the dental community. "Prosthodontists are regularly tasked with finding solutions for complex patient cases," Tysowsky said. "They are also instrumental in disseminating information about advanced diagnostic and treatment techniques to the wider dental community. As recognized contributors inside our nation's dental schools and within the continuing dental education community, prosthodontists play a vital role. We are excited about the impact campaign funds will have on expanding access to quality dental instruction. Connecting students and practitioners with opinion leaders at the forefront of the specialty will enhance care by building awareness and promoting the adoption of breakthrough materials, tools and techniques."

"Positioning the prosthodontic specialty for the future is a natural fit with Ivoclar Vivadent's culture," said Tysowsky. "Vision is one of our company's three guiding success factors. Anticipating the future needs of the patient community is paramount to improving patient care. We like the proactive stance the College and its Foundation have taken through the *Vision 2012: Brilliant Futures* campaign. We are looking forward to working closely with the ACP and ACPEF in their ongoing efforts to advance the specialty."

ACP Members in the Media

ACP Fellow featured on TODAY

ACP Fellow Dr. Thomas J. Balshi appeared on the May 15, 2008 episode of the TODAY Show in the segment entitled, "New Advances in Dentistry." Dr. Balshi performed implant surgery showcasing the Teeth in an Hour™ technology created by Nobel Biocare. The surgery was performed on Troy, a 38-year-old man who at the age of two was diagnosed with Bilateral Retino-blastoma.

The week prior to the filming of the piece, Dr. Balshi's practice, Prosthodontics Intermedica Dental Center at the Institute For Facial Esthetics, received a phone call from the producers of the TODAY show, asking if they would be interested in demonstrating new dental technologies for the segment, particularly computer guided surgery and prosthetic reconstruction. The Center accepted, thrilled with the media placement opportunity featuring their staff and techniques.

Performing the surgery with a television film crew in the operating room proved to be a challenge. "When external cameras and booms are brought into the operating room it decreases the mobility of the staff and constricts and slows the treatment protocols," Dr. Balshi said. "In addition in an effort to obtain the correct views and the 'perfect shots' multiple versions of the same procedure are shot over and over again from different angles." The procedure, which normally takes around 60 minutes to complete, took nearly twice the amount of time because of changing camera angles and extra shooting.

Dr. Balshi's offers some advice to his fellow ACP colleagues for successful media placement. "Successful media placement particularly for television depends upon the ability to produce high quality visuals," he said. "Highly skilled and experienced production crews need to produce sample videos for the media as an invitation."

To view the TODAY show segment on dentistry advancements and Dr. Balshi's surgery, go to the TODAY Show website at <http://today.msnbc.msn.com>.

ACP Charter Member profiled in community news

BY DANIEL O'DONNELL, FOR THE MESSENGER

Dr. Mohammad Mazaheri, a Charter Member of the American College of Prosthodontists, has been in practice for more than 50 years at the Cleft Palate Clinic of Lancaster General Hospital. In the article "Doctors Meet Urgent Need in Iran" written by Jon Rutter, staff writer for the *Lancaster Sunday News*, the readership of Lancaster, PA was given insights into the humanitarian efforts of Dr. Mazaheri, and were able to become acquainted with a prosthodontist in their very own community.

The article provides an account of Dr. Mazaheri's work as an international dental professional and subtly makes a connection, builds a relationship between the doctor and community. For example, when Dr. Mazaheri said, "You have to forget about the politics and look at the people," the readership can understand the doctor as a person – an individual with whom you will trust your dental health – trusting in the idea of universal human dignity and rights by helping the Iranian medical system upgrade their facilities and faculties.



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ACP Regional Review

Regional Directors Section Presidents

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The College engages its members at the grassroots level through the ACP Regions and Sections. Currently the College has seven regions each with a Regional Director. Five regions are geographically arranged across the United States; one region consists of Federal Service members; and one region is for International members. The ACP has 34 Sections across the United States, and one International Section in Japan.

Section membership is open to all Active Fellows, Members of the College, as well as to Alliance, Forum and Student Members. Sections provide a close-knit connection for individuals with the common dedication to the highest standards of care in the restoration and replacement of teeth. They also offer a forum for idea exchange, networking and partnership among private practitioners, academics, Federal Service prosthodontists and laboratory professionals. Sections provide a medium through which established prosthodontists can share their thoughts and experiences with young prosthodontists, who are just starting in the profession.

It is through the College's Sections that Members at the local level are able to cooperate with other professionals, industry and state government agencies that are concerned with dental healthcare. If you are interested in participating in a Section please contact the Section Officers in your area or your Regional Director.

REGIONS OF THE AMERICAN COLLEGE OF PROSTHODONTISTS





REGION 1: NORTHEAST

Massachusetts In conjunction with the Yankee Dental Congress 33 in late January, 2008 the Massachusetts Section conducted the First Annual Stefan Neeser Memorial Lecture. Dr. Steven M. Morgano, professor and director of postdoctoral prosthodontics, Boston University School of Dental Medicine presented a lecture entitled "Biomechanics of Implant-supported Artificial Occlusion." The lecture was sponsored by Zimmer Dental and Cusp Dental Laboratory and was well attended and well received.

The Mass Section also conducted the annual Remo Sinibaldi Poster Competition for the prosthodontic postdoctoral fellows in the spring. This year the event was held in Boston in June, 2008 and in addition to the competition, featured a presentation by the Chief Scientist at Nobel Biocare, Steve Hurson.

Another annual event held by our section is the Steven R. Gordon Memorial Essay Contest and lecture, which is held each fall. The Massachusetts Section events are open to ACP members and prosthodontic postdoctoral residents. For additional information please contact Massachusetts Section Secretary, George Kay at drkay@georgewkaydmd.com.

Pictured above: Dr. Joe Milavec, Treasurer; Dr. Hideo Yamamoto, President; Dr. Steven Morgano, Speaker; Dr. George Kay, Secretary; Dr. Jeffrey R. Dornbush, Editor

REGION 3: CENTRAL

Michigan The Michigan Section met in April in conjunction with the Michigan Dental Association annual conference in Grand Rapids, MI. Attendance was lower than usual at this meeting, possibly because of the West Michigan location and because of conflicts with the Diamond Anniversary celebration for the University of Detroit-Mercy School of Dentistry and the dedication of its new Corktown Campus. The Section did post a congratulatory message to the UDM dedication program, with special recognition of its programs in the discipline of prosthodontics. There has been a steady flow of information to Section members regarding the Council of Michigan Dental Specialties and progress of the Section. Upcoming Section elections will allow the addition of two or three new board members with academic liaisons to the University of Michigan and the University of Detroit-Mercy, and will also name a new President-Elect, and Vice President. The Section's primary objective remains the development of membership, in order to foster communication and collegiality. We hope the Michigan Section will be well represented at the ACP Annual Session in Nashville.



Oklahoma The Oklahoma Section of the ACP, represented by Dr. Luis J. Blanco, presented a \$300 award to Michael Saumur, a fourth-year dental student at the University of Oklahoma College of Dentistry, for his poster presentation titled "Dental Implant Guides, a Comparison of Designs for the Dental Student."

The award was presented in April, 2008 at the Oklahoma College of Dentistry's 27th Annual Scientific Day sponsored by the University of Oklahoma College of Dentistry.

REGION 4: ROCKIES/PLAINS

- April 4 Arizona Section Meeting
- April 15 Texas Section Meeting (Federal Service Pros presenting)

Arizona Section of the American College of Prosthodontists Annual Meeting
 October 24, 2008, Gainey Ranch Country Club, Scottsdale,
 AZemail: drbenting@hotmail.com

This meeting is open to all dentists and specialists. The topics include: What to do with the ailing and failing implant, biomechanics & treatment planning, situation specific dental materials, dental implant supported restorations for the edentulous and provisional restorations for restorative treatment. 6 CE credits may be earned; and breakfast and lunch are included.

REGION 2: EASTERN

- August 22-24 Florida Prosthodontic Association Annual Meeting
- August 23 ACP Florida Section Meeting – Sarasota, FL
- September 17 Maryland Section ACP Academic Meeting



Pennsylvania (Left) ACP Pennsylvania Section President Dr. Christian Silvaggio (right) presents a donation check to the ACP Education Foundation ACP President-Elect Dr. Charles J. Goodacre. (Below) The ACP Pennsylvania Section meeting attendees gather for a group photo.



REGION 5: PACIFIC

- April 15 Oregon Section Meeting
- May 7 Northern California Prosthodontic Conference and California Section, San Francisco Chapter ACP

REGION 6: FEDERAL SERVICES

2008 is a great year for Federal Service prosthodontics. This year's ACP meeting in Nashville will offer government hotel rates to Federal Services members and the ACP leadership will continue to lobby for Tier 1 MYRB and ISP pay for Armed Forces prosthodontists, and Level 2 payments for VA prosthodontists.

High quality training programs are integral to VA and military prosthodontics. The Federal Services have eight prosthodontic specialty programs: one each from the Air Force, Navy, Army and five from the Veteran's Administration. The Air Force program is directed by Colonel Tom Schneid at Wilford Hall, San Antonio, Texas and trains four residents per year; the Navy Program is directed by Captain Craig Neitzke at Bethesda, Maryland, with three residents per year; the Army program is directed by Colonel Richard Windhorn at Fort Gordon, Augusta, Georgia, and trains four residents per year. Veteran's Administration programs are located in NYC, directed by Dr. Robert Schulman with six resident positions; Los Angeles, directed by Dr. Stephen Ancowitz with five resident positions; Detroit, directed by Dr. Rami Jandali with three resident positions; Houston, directed by Dr. Christopher Minke with three resident positions; and a new residency in Washington D.C., directed by Dr. Richard Leupold with three resident positions. Federal Service programs have some of the highest reputations in the specialty, and together they train more than 20 prosthodontists per year. Federal Service prosthodontists are very likely to pursue board certification, and often spend years teaching.

REGION 7: INTERNATIONAL

- June 6-8 The 117th Scientific Meeting of the Japan Prosthodontic Society, Nagoya, Japan
- June 19-21 Academy of Australian and New Zealand Prosthodontists Biennial Conference, Werribee, Australia
- September 4-6 European Prosthodontic Association 32nd Annual Conference, Pecs, Hungary

HEARD HERE

ACP Fellow elected to new role with ADEA

Dr. Lily T. Garcia, D.D.S., M.S., F.A.C.P., ACP Secretary, was elected Vice President of Sections for the American Dental Education Association at the 85th ADEA Annual Session and Exhibition in Dallas, Texas this past spring. Dr. Garcia will serve a three-year term. She is Professor and Chair of the Department of Prosthodontics at the University of Texas Health Science Center at San Antonio Dental School.

Dr. Garcia is also an accomplished author, having published numerous articles and abstracts. She has edited several dental textbooks, served as a reviewer and editorial board member for several scientific journals, and co-authored the text *Osseointegration and Occlusal Rehabilitation*. She was named the 2004 ACP Educator of the Year, received the 1999 University of Colorado President's Excellence in Teaching Award, and the Rocky Mountain Study Club Professor of the Year which is awarded by the private practice community. Dr. Garcia is a Diplomate of the American Board of Prosthodontics and Fellow of the American College of Prosthodontists. She was also selected as a Fellow in the 2005-06 *Hedwig van Ameringen* Executive Leadership in Academic Medicine (ELAM) Program. Dr. Garcia maintains a practice limited to Prosthodontics in San Antonio, Texas.

ABP releases seal for diplomate use

The American Board of Prosthodontics has decided to permit the use of its seal by Diplomates on stationery and business cards. Either form of the seal may be used. Digital images of the seal may be requested from the Executive Director of the ABP.

Additional questions regarding Board eligibility, processes, etc. should be directed to ABP Executive Director Dr. Tom Taylor by e-mail at ttaylor@nso.uchc.edu. Visit the ABP Web site at www.prosthodontics.org/abp.

With gratitude to our sponsors

The 2008 President's Dinner in Nashville is set to be a smashing success thanks to the generous gifts to the ACP Education Foundation from the following companies: 3M ESPE, Astra Tech, Ivoclar Vivadent, Nobel Biocare, Procter & Gamble and Straumann.

Attendees will enjoy an evening with colleagues and tour the Country Music Hall of Fame® and Museum, which showcases priceless memorabilia including Elvis's one of a kind custom made Cadillac. A cocktail reception will be held in the Hall of Fame Rotunda, where the award inductee bronze plaques are displayed for future generations to honor and enjoy, followed by dinner in the conservatory.

The highlight of the evening will be Dr. David L. Pfeifer's presentation of the ACP's 2008 President's Award.

Table Clinics to standout in Nashville

The ACP's 2008 Table Clinics competition in Nashville will showcase work from dental students, prosthodontic residents and recent graduates who are now clinicians, including: research results, clinical outcomes, laboratory techniques and other topics of interest in prosthodontics. The 2008 Table Clinics competition is made possible thanks to the generous support of Brasseler U.S.A.

ACP Secretary presented at Jordanian Dental Congress



ACP Secretary and Fellow Dr. Lily T. Garcia participated in the 21st Jordanian Dental Congress held March, 2008. Dr. Garcia was invited to present three seminars in Fixed Prosthodontics and a theoretical course. She chose to focus on treatment planning challenges.

"The general dentists showed a keen interest and were very attentive; I found it a rewarding opportunity," Dr. Garcia said about her experience working with the Congress' membership. Dr. Gerald Glickman, the President-Elect of the American Association of Endodontists, presented as well, and Dr. Garcia believes

he was an instrumental part in the inclusion of a prosthodontist from the United States in the program.

The Congress was sponsored by the Jordanian Dental Association, the central forum for dentists in the Middle East. The association's membership encompasses dentists from all over the Middle East including Lebanon, Iraq, United Arab Emirates, Egypt, Syria, Turkey, Qatar and Saudi Arabia. Dr. Garcia said conference was "an incredible opportunity to meet colleagues and learn more about the Middle Eastern dental culture."



Left to Right: Regional Director Lawrence E. Brecht, D.D.S., Secretary/Treasurer Debra H. Cohn, D.D.S., Speaker John L. Ricci, Ph.D., President Marion S. Brown, D.M.D.

The New York Section of the American College of Prosthodontists convened on April 29 for its semi-annual dinner at the Union League Club in Manhattan. Section President Dr. Marion Brown welcomed all members and guests and introduced the evening's keynote speaker, Dr. John L. Ricci. Dr. Brown proceeded to thank fellow Section Board members for their help in planning this meeting, in particular, Past President Dr. Kenneth Kurtz; Vice President Dr. Carlos Alfonso and Secretary/Treasurer Dr. Debra H. Cohn.

Newly elected ACP Region 1 Director Dr. Lawrence E. Brecht spoke about the liaison between the Northeast Sections and the College and the ACP Central Office. At the Section level, the College is working diligently to support and communicate with each Section. The ACP Central Office is working closely with the sections to ultimately incorporate each one in the State of Illinois, which will enable the Sections to function much more fluidly in conjunction with the College. The NY Section has been updating and compiling information including current and accurate member lists, streamlining processes and implementing change. One example of change is that as of 2008, Section dues are collected along with annual dues directly through the ACP Central Office. The College then reimburses the Section for all dues collected. This has resulted in an unprecedented number of Section dues collected with about 93 percent participation, compared with past years, and directly helps the Section to continue to host events and meetings throughout the year.

Among the attendees at the semi-annual dinner were several tri-state Resident Program Directors and their residents. The NY Section always welcomes their attendance and appreciates their cooperation at the meeting registration desk! Prior to Dr. Ricci's presentation, the NY Section expressed gratitude to the evening's sponsors: BioHorizons, Confi Dental Laboratory and Kuwata Pan Dent Corporation, for supporting the event and the company's representatives were welcomed, as well.

Dr. Ricci gave an interesting and stimulating lecture on how implant surface microstructure may be used to control hard and soft tissue interfaces. He incorporated his background in orthopedics, biomechanics and biomaterials into demonstrating the development of bone repair around implant surfaces. This was followed by a Q&A session and the announcement by President Brown of the next NY Section meeting on Oct. 14, 2008.

– Submitted by Debra H. Cohn, D.D.S., Secretary/Treasurer New York Section, American College of Prosthodontists

MEMBER NEWS



ACP officers represent College at ADEA Prosthodontic Section Meeting. ACP President Dr. David L. Pfeifer and President-Elect Dr. Charles J. Goodacre spoke about the future of prosthodontic education during the American Dental Education Association's spring Prosthodontic Section meeting. *Pictured above: ACP President Dr. David L. Pfeifer (left) and President-Elect Dr. Charles J. Goodacre address the ADEA Prosthodontic Section during a meeting this past spring. Inset: The new ADEA Section Officers (left to right): Dr. Nachum Samet, chair-elect; Dr. Sharon Siegel, chair; Dr. Andrea Jackson, secretary; and Dr. Lisa Lang, councilor.*

Welcome New Members

(Approved by the Board of Directors during the March and May conference calls)

Members

Dr. Nargiz Schmidt

Fellows

Dr. Jon Curtis Dailey

Student Members

Dr. Khaled Al-Abdullah

Dr. Inna Amirian

Dr. Hanna Ashkar

Dr. Ghadeer Basunbul

Dr. Claire Chang

Dr. Polykarpos Papangiotou

Dental Technician Alliance

Mr. Christopher D. Pendry

Academic Alliance

Dr. Michael B. Ferguson

Global Alliance

Dr. Jose Bandala

Dr. Carlo Marinello

Membership Status Changes

Members to Active Life Members

Dr. Janine Bethea

Dr. Richard R. Cavanaugh

Dr. Erik D. Cragg

Dr. James A. Commette

Dr. Gerald M. Galvin

Dr. Richard E. Jones

Dr. Jerome Kaufman

Dr. William Lefler

Dr. Richard D. Miller

Dr. Edward A. Monaco

Dr. Paul A. Schnitman

Members to Retired Life Members

Dr. Sam R. Adkisson

Dr. Jerry L. Finelli

Dr. Robert L. Hochstetter

Dr. Edward J. Kuch

Dr. Francis Panno

Dr. John Ross

Dr. Philip Ruben

Dr. Clifford Selinger

Dr. Conrad Albert Schwalm

Dr. Jeffrey Sotack

Dr. Kenneth Turner

Reinstated Members

Dr. Guillermo Bernal

Dr. Rowan H. Buskin

Dr. Jorge Gonzalez

Dr. Denise Pieczynski

Dr. Preeda Pungpapong

Reinstated International Members

Dr. Cheryl Cable

Reinstated Active Life Members

Dr. Peter Manickas

Reinstated Student Members

Dr. Monica Fernandez

Dr. Donald R. Schmitt Jr.

Reinstated Dental Technician Alliance

Mr. Paul D. Holodnak

Mr. Larry P. Mercadel Sr.

Mr. Vincent Verderosa

In Memorial: Dr. Philip M. Jones

A charter member of the American College of Prosthodontists, Philip M. Jones A.B., D.D.S., M.S.D. died November 29, 2007 at age 90. Funeral services were held in Sheldon, Mo.

Dr. Jones received his A.B. degree of Sociology in 1939 from William Jewell College, his D.D.S. in 1943 from the University of Kansas City, and his M.S.D. degree in Prosthodontics in 1954 from Northwestern University working with Eugene Skinner.

He was in the U. S. Army Dental Corps from November 1943 to June 1946 serving as Captain in the 221st General Hospital in the European Theater of Operations where he met Dorothy Hjelm a nurse from Springfield, Ma. Shortly after the war they were married. They had two sons Philip E. Jones and John D. Jones, a member of the ACP.

He started his private practice in Argentine, Kansas working part time at the University of Missouri at Kansas City, School of Dentistry. Approximately five years later he returned to the school full-time as chair of the prosthodontics department. He was pleased to have mentors such as Chastain Porter and Dayton Dunbar Campbell, still on the faculty. He served as Professor and Chair of the Department of Complete Prosthodontics and Director of Graduate Removable Prosthodontics at the UMKC School of Dentistry for many years. Dr. Jones was a consultant for the Veteran's Administration, as well as a member of many dental organizations and Past President of the American Prosthodontic Society.

As a founding member of the American College of Prosthodontists, Dr. Jones served on the Executive Council with some of the all-time greats in the specialty. The College's officers in its first two years included:

First Year Officers

President: Raymond J. Loiselle

President-Elect: Louis J. Boucher

Vice President: Alex Koper

Secretary: Kenneth D. Rudd

Treasurer: Stephen O. Bartlett

Delegates-at Large: Ira Klein (1 year), Philip M. Jones (2 years), John J. Sharry (3 years)

Second Year Officers

President: Louis J. Boucher

President-Elect: Alex Koper

Vice-president: Keith Marcroft

Secretary: Kenneth D. Rudd

Treasurer: Stephen O. Bartlett

Executive Council: Philip M. Jones (1 year), John J. Sharry (2 years), Robert Kaplan (3 years)

In Memorial

The College and the Board of Directors remember the following colleagues who are deceased:

Dr. Frank Celenza

Dr. Robert S. Staffanou

Expanded memorials for Dr. Celenza and Dr. Staffanou will appear in a future issue of the Messenger.



NANCY "DEAL" CHANDLER,
MA, RHIA, CAE

Executive Director's Corner

New ACP Regions create lifeline for members, opportunity to learn

We have just completed a multi-year governance change that we believe will make our College stronger. At the same time, we have enjoyed several years of success on other fronts – such as the launch of our new Web site and Find a Prosthodontist online directory for the public, robust membership growth, increased Annual Session participation, new and rekindled strategic corporate partnerships, increased sponsorship of our events, more involvement of our members, and an increasingly stronger financial position. Although the ACP is a relatively small organization, we are also well positioned to continue to increase the influence and impact of the discipline and specialty of Prosthodontics. Your membership in the College helps us to serve as the anchor for our entire community of stakeholders and advocate for the discipline and those who need your care.

Will Rogers said: "Even if you're on the right track, you'll get run over if you just sit there."

But with all these successes comes a responsibility to recognize that sometimes the most difficult aspect of change is knowing *what* not to change – and here's where we are going to need your help. The Governance Task Force Committee and the ACP's Board of Directors spent many long hours determining how to move the College forward while valuing the past and addressing the current needs of our membership. The House of Delegates voted to support the work of your leadership, but members are watching to see if the new governance structure meets their expectations. Are we now more capable of being nimble and strategic than in the past? Is the new nominations and elections mechanism working to identify and bring forth the most qualified Board of Directors leaders for the future?

We sent members a series of short questionnaires electronically during the summer asking how you how feel we are doing and for your guidance and recommendations for the future. Our new governance framework also means that now every member has a lifeline to the ACP's leadership through your Regional Directors and Section Officers. These individuals will also be reaching out to you for your input. All of the feedback we receive will be synthesized for a report that the Board of Directors will consider at it fall meeting in Nashville before the Annual Session.

We know that change is a constant, and at the ACP we embrace change as an opportunity to learn. 2008 is a spectacular year for learning! We hope you will join us on this journey.

Decoding board eligibility

BY THOMAS D. TAYLOR, D.D.S., M.S.D., EXECUTIVE DIRECTOR AMERICAN BOARD OF PROSTHODONTICS

The question of who is a board eligible prosthodontist and who is not is a frequent topic of discussion. Some assume that one becomes board eligible by completing an American Dental Association accredited training program in prosthodontics. This is not the case.

Completion of a qualifying training program makes one educationally qualified, not board eligible. To become board eligible requires that one submit an application for certification (available from the American Board of Prosthodontics Executive Director's Office) and have his/her credentials approved by the Board. Board eligibility is for a finite period of six years during which time the entire certification process should be completed. Extension of the six-year period may be awarded upon request but the request must be made before the current period of eligibility expires. If a candidate allows his/her period of eligibility to expire s/he must then complete a new application for certification and submit it to the Board to obtain a new period of eligibility.

Currently, most prosthodontic residents/graduate students take the written Section A examination during the final year of their training program. This can be done without becoming board eligible. A letter from the residency/graduate program director stating that the candidate is in the final year of prosthodontic training is all that is needed to qualify to take the written examination. Many graduate students/residents elect to take one of the oral patient presentation examinations during the February examination session in their final year of training. Should a resident/student in the final year of training wish to take one of the oral examinations in February of their final year they then need to become board eligible by application and their six-year window of eligibility begins at that time.

At a recent meeting of the ABP the decision was made to eliminate the requirement that the successful completion of the written (previously Part I, now Section A) examination was time dependent. The successful completion of the written examination no longer expires but is permanent. So candidates for whom the timeframe for completion of the certification process has expired now need only to reapply for eligibility and complete only the oral examinations to become Board Certified.

Questions?

For more information about board eligibility, timelines and the examination process, please contact ABP Executive Director Dr. Tom Taylor by e-mail at ttaylor@nso.uchc.edu or visit www.prosthodontics.org/abp.

ACP Staff Grows



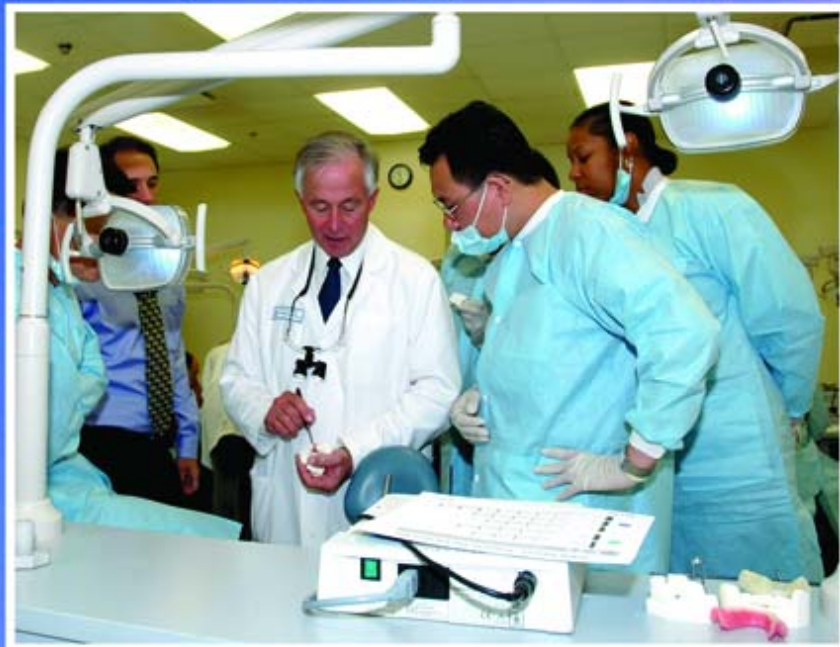
Caroline Kinczyk joined the ACP staff in April as the new Communications and Marketing Coordinator. Her most recent position was as a Marketing Specialist at Foley & Lardner LLP, an international law firm, where she worked in the Intellectual Property Department as well as with the Life Sciences, Nanotechnology and Entertainment & Media Industry Teams. In addition, Caroline has also completed several internships in the Communications and Marketing

Departments of Joint Commission Resources, CNA Insurance and with the City of Chicago.

Caroline earned her Bachelor's degree in English from Purdue University and is currently working towards Masters of Science in Integrated Marketing Communications at Roosevelt University in Chicago. Caroline is excited to have the opportunity to work with the dedicated members and staff of the College.

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AMERICAN COLLEGE OF PROSTHODONTISTS®



facing the
FUTURE OF EDENTULISM

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Made possible by an educational grant from GlaxoSmithKline.



Jonathan L. Ferencz
DDS, FACP
MODERATOR

Edentulism is a worldwide problem facing millions of individuals. The variation in anatomy, physiology and the co-morbidities associated with this condition create many diagnostic, planning and treatment challenges for the patient and clinician alike. Constraints in dental undergraduate curriculum compromise the acquisition of knowledge and development of competencies to successfully manage edentulism through fabrication of removable dentures. Changing demographics of both developed and developing populations suggest significant and increasing needs for removable dentures. Individuals who suffer edentulism encounter many emotional and physical disturbances which compromise their quality of life.

Symposium Objectives

Speakers representing the American College of Prosthodontists and their peers will:

- review patient-centered assessment of the features of edentulism and denture use from a public health and an individual perspective
- examine the role of business, technology and education models in improvement in treatment of edentulism worldwide



David A. Felton
DDS, MS, FACP
Epidemiology of Edentulism and Co-Morbid Conditions



Thomas J. Salinas
DDS
Patient-based Outcomes of Treatment of Edentulism



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PRACTICE FOR SALE

Canada (Vancouver, BC) – Quality oriented three-operator, prosthodontic practice located in the heart of Vancouver seeks an experienced practitioner for practice transition. Contact Manfred Purtzki, CA at 888-668-0629 or Manfred@purtzki.com.

Maryland (Salisbury) – High profit margin prosthodontic specialty practice for sale. Retiring dentist with 35 yr. old practice. Large patient backlog and low competition in the area. Corner the market. High volume implants, dentures, crown and bridge. Call for information 410-742-4048 (evenings).

South Carolina – excellent location, low overhead, well trained staff. Dallas/Ft. Worth, TX – 50% partner, practice grossing \$1.5 million, 100% FFS. Southern New Hampshire – Grossing \$1 million, free standing building, high visibility. Contact AFTCO at 800-232-3826 or www.AFTCO.net.

Texas (Dallas/Fort Worth) – Fee for Service prosthodontic dental practice available Summer 2008. Purchaser should have post graduate Prosthodontics degree or comprehensive private practice experience. Attractive office in professional building. Highly desirable demographics and location. Digital radiography. Excellent staff. Large lab. Practice is a blend of general dentistry and restorative referral cases. Contact Dan Lewis at Lewis Health Profession Services, Inc. for additional information. All inquiries are confidential. (972) 437-1180 or Dan@lewishealth.com.

EMPLOYMENT OPPORTUNITY

California (Bakersfield) – Central valley of California, \$1.5 mil on 4 days/week, opening second office, needs one or two associates. Must be able to restore implants and learn implant placement. Presently only office doing Teeth in an Hour. Has own Forte Scanner, full laboratory, etc. Fax resume with cover letter to (661) 616-0214.

Indiana (Indianapolis) – The department of restorative dentistry at Indiana University School of Dentistry invites applications for full-time, tenure-track or clinical-track positions in Prosthodontics at the assistant/associate professor level. The positions will include didactic and laboratory teaching undergraduate students in the clinical and preclinical settings, service, and may include research responsibilities depending upon the academic track chosen.

Applicants must have a D.D.S./D.M.D. degree from an ADA accredited dental school. Dental licensure in Indiana or the eligibility is required for this position. Postgraduate training in Prosthodontics is preferred. Candidates with a strong commitment and/or experience in clinical and laboratory teaching in Prosthodontics are encouraged to apply.

These positions are available immediately and applications will be accepted until the positions are filled. Salary and rank will be commensurate with experience and qualifications.

Interested individuals should e-mail an electronic application that includes: electronic curriculum vitae and three electronic reference letters to Dr. Jeffrey Dean, Associate Dean for Academic Affairs, jadean1@iupui.edu. Indiana University School of Dentistry 1121 W. Michigan Street Indianapolis, IN 46202. Indiana University is an Equal Opportunity/Affirmative Action Employer.

Missouri (St. Louis) – Premier Dental Partners, a multi-disciplinary group practice with 8 offices and 22 general and specialty dentists in the greater St. Louis and St. Charles metropolitan areas, is looking for a Prosthodontist to join their team. This is a lucrative, fee for service practice with a well established patient base in South St. Louis County.

We offer excellent compensation and a full benefit package including medical, malpractice, disability and life insurances, and a flexible spending account. We also offer a 401K retirement plan with an employer match as well as ownership



potential. Please contact Debbie Trent at 314-367-1142 or email at dtrent@amdpi.com.

New Jersey (Cherry Hill) – Well established thriving prosthodontic practice in Southern New Jersey, close to Philadelphia, is seeking an associate with future buy out possibilities. Educationally qualified or Board certification required. The principle office is located in its own free standing building with an in house lab and excellent referral base. There is also a satellite office that is located in a three office medical/dental building. Both locations can be purchased with the practice. Contact via e-mail: sjprosto@yahoo.com; or telephone: (856) 424-7177.

Ohio (Cleveland) – The Section of Dentistry, a multi-specialty group practice at **Cleveland Clinic** is seeking a **Maxillofacial Prosthodontist** for a position on its main campus. The Section of Dentistry combines patient care, education and research. Demonstrated skills in teaching, scholarship and dental practice are essential. The candidate must have profound interest in maxillofacial prosthodontics.

Cleveland Clinic offers a competitive salary enhanced with an attractive benefits package. We offer a pleasant, stable and collegial work environment with an unmatched quality of life. The same vitality that charges Cleveland Clinic extends to almost every aspect of life in Greater Cleveland. The melting-pot culture that has helped establish Cleveland as a vibrant and versatile metropolitan area adds a unique flair to the lifestyle here. The Cleveland Area is a comfortable and affordable place to live with a variety of available activities, good school systems, and a great place to raise a family.

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and members of minority groups, as well as others who would bring additional dimensions to its research, teaching, and clinical missions. Cleveland Clinic is a smoke/drug free work environment. For further information please contact: Joe Vitale, Senior Director of Physician Recruitment, Office of Professional Staff Affairs; vitalej@ccf.org



Massachusetts (Boston) – FT Prosthodontist multi-specialty group practice. Team player with strong comprehensive treatment planning / prosthetic background with ability to treat complex fixed / implant cases and inspire confidence in patients and staff. Patients are well established over 30 years with heavy prosthetic needs. Long-term commitment is prerequisite to taking over this part of the practice. Please contact: (781) 721-0313 – evenings; comprehensivedentistry@gmail.com

Virginia (Charlottesville) – Seeking enthusiastic, caring, Prosthodontic associate with opportunity to buy in. Private, fee for service Prosthodontic practice. Enjoy living and working in a growing community with an established referral base. Nice combination of dental implants, esthetic dentistry, fixed/removable Prosthodontics. Send resume with references to gregwall1@embarqmail.com.

Washington (Seattle) Seattle – America's most livable city. Turn-key dream practice near downtown for surgically trained implant Prosthodontist who has or can develop the correct marketing/sales beliefs. 100% Fee for Service. 100% NON-GP dependent implant-prosth. Marketing and management systems deliver 24+ full mouth reconstructions yearly. \$1 M+ on a 2.25 day/week schedule. Room to expand hours/income. E-mail inquiries ONLY. james@bigcasemarketing.com

At Your Service...

For questions regarding your membership, ACP programs and events or general inquiries, please contact the ACP headquarters at 800-378-1260; fax: 312-573-1257 or visit our Web site at www.prosthodontics.org.

Nancy "Deal" Chandler, MA, RHIA, CAE, Executive Director – ext. 230 or dchandler@prosthodontics.org

Management of overall College and Foundation operations.

Carla Baker, MBA, Associate Executive Director, Membership Services and Outreach – ext. 222 or cbaker@prosthodontics.org
Membership benefits, database administration, membership dues processing and any membership-related inquiries.

Rachel Brunswick, Membership Coordinator – ext. 224 or rbrunswick@prosthodontics.org

Assists with member services including membership applications and renewals, saleable product orders and updating member contact information.

Lauren Dethloff, Director, Communications and Marketing – ext. 223 or ldethloff@prosthodontics.org

ACP marketing materials and products, media and public relations, Messenger newsletter, Web site, and other College communications.

Jennifer Jackson, Administrative Coordinator – ext. 221 or jjackson@prosthodontics.org

Receptionist and administrative support for all College departments and staff.

Melissa Kabadian, MA, Director, Education and Meeting Services – ext. 227 or mkabadian@prosthodontics.org

Information on continuing education programs and the ACP Annual Session.

Jack Kanich, Manager, Finance and Administration – ext. 228 or jkanich@prosthodontics.org

Financial and account payable/receivable.

Caroline Kinczyk, Communications and Marketing Coordinator – ext. 235 or ckinczyk@prosthodontics.org

Assists with ACP Web site, communications and marketing including the Messenger newsletter.

Nathalie Williams, Sections Manager – ext. 229 or nwilliams@prosthodontics.org

Supports Sections including Regional Director Elections and online resources.

Calendar of Events

DECEMBER 2008

Greater New York Academy of Prosthodontics 54th Annual Fall Scientific Meeting
New York, NY
Dec. 5-6, 2008
www.gnyap.org

FEBRUARY 2009

American Equilibration Society 54th Annual Meeting
Chicago, IL
Feb. 25-26, 2009
www.aes-tmj.org

Academy of Osseointegration 2009 Annual Meeting
San Diego, CA
Feb. 26-28, 2009
www.osseo.org

The American Prosthodontic Society 81st Annual Scientific Meeting
Chicago, IL
Feb. 26-27, 2009
www.prostho.org

American Academy of Fixed Prosthodontics Scientific Session
Chicago, IL
Feb. 27-28, 2009
www.fixedprosthodontics.org

MARCH 2009

American College of Prosthodontists 2009 Prosthodontics Review Course
Chicago, IL
Mar. 27-28, 2009
www.prosthodontics.org

APRIL 2009

Southeastern Academy of Prosthodontics Annual Meeting
Amelia Island, FL
Apr. 22-26, 2009
www.seaop.com

American Academy of Cosmetic Dentistry Excellence in Cosmetic Dentistry
Honolulu, HI
Apr. 27- May 1, 2009
www.aacd.com

Academy of Prosthodontics 91st Annual Meeting
Chicago, IL
Apr. 29-May 3, 2009
www.academyofprosthodontics.org

MAY 2009

American College of Prosthodontists Treatment of the Partially Edentulous Patient With Removable Partial Dentures
Chicago, IL
May 8-9, 2009
www.prosthodontics.org

JUNE 2009

Pacific Coast Society of Prosthodontics 74th Annual Meeting
Sun River Resort, OR
Jun. 24-27, 2009
www.pesp.org

AUGUST 2009

American Academy of Esthetic Dentistry 34th Annual Meeting & IFED 6th World Congress
Las Vegas, NV
Aug. 2-5, 2009
www.estheticacademy.org

SEPTEMBER 2009

International Academy of Gnathology Congress XXIV
Tucson, AZ
Sept. 23-26, 2009
www.gnathologyusa.org

NOVEMBER 2009

American Academy of Maxillofacial Prosthodontics 57th Annual Meeting
San Diego, CA
Nov. 1-3, 2009
www.maxillofacialprostho.org
American Academy of Implant Dentistry 58th Annual Meeting
New Orleans, LA
Nov. 11-15, 2009
www.aaid.com

Esthetics and Implants: The ethical challenge of needs, desires and focus



BY CHARLES J. GOODACRE, D.D.S., M.S., M.S.D., EDITOR-IN-CHIEF

In preparation for this editorial, I reviewed the dental literature to see what had been written on the ethical issue of patient “needs” versus “desires.” A recent dental ethics article asked the following penetrating question: Are esthetic considerations ranked as high as oral and general health considerations? I suggest we ponder this question with some intensity and that dental implants be added to the thought process since esthetics and dental implants are considered to be important components of a contemporary prosthodontic practice.

Prosthodontists have always been involved with the esthetic replacement of teeth and associated structures. We have also maintained a healthy focus on the preservation and restoration of oral and general health. With the increased emphasis on esthetics and implants within the profession and within the general public, it is important that we sustain a primary focus on health and maintain a balanced perspective between the needs and desires of our patients. Appropriate balance must also be maintained between our own needs and desires and the needs and desires of our patients.

The principal focus of health care professionals must be our patients; in fact, we should mentally seat ourselves in the dental chair as we contemplate what is best and what should be recommended. We have a moral/ethical/professional obligation to provide our patients with the most cost-effective, longest lasting treatment that meets or exceeds the expectations of our patients. A tall order, indeed!

“True professionals” recognize they are meeting a need in another human being, a need that may not be accurately assessable by the patient. It is easy to become so enamored with products or treatment modalities that we like to use or that provide certain rewards. These treatments can become overused, even abused. It is also easy to place such a high emphasis on marketing, production, and income that judgment becomes cloudy. While good financial management is essential to all prosthodontic practices, it must not supplant the obligations of professional patient service. I propose contemplating the following questions as we determine the best treatment for our patients: 1) What is the most conservative, cost-effective treatment that will meet the needs and desires of the patient?; 2) What treatment would I select for myself?; and 3) If the treatments being considered provided equal remuneration, which one would we propose to the patient? Contemplating these three questions helps maintain ethical health.

As we provide esthetic and implant treatments, we need to preserve our integrity and the integrity of the profession as viewed through the eyes of the public we serve. These treatments should be recognized by the public as professional services requiring special education and expertise as opposed to commercial products being distributed through a prosthodontist’s office. Many of the advertisements and flyers that have infiltrated general dental offices place a strong emphasis on products, even promoting commercial names. Some even imply that superior quality dentistry will be provided by the individual paying for the promotional material.

I regularly see magazine ads showing before and after pictures of dental treatment. Some of them cause me to think about the long-term consequences of using irreversible treatments such as veneers rather than tooth whitening and/or orthodontic treatment. I also see tooth extraction and implant placement assuming an overly prominent position in some circles compared with retention of natural teeth through traditional treatment modalities. While veneers and implants can be excellent and appropriate treatments, I encourage thoughtful consideration.

Esthetic dentistry and dental implants should not be perceived by patients as commercial products but rather as professional services being provided by health care providers who have special education and expertise and have carefully evaluated available treatment options, including no treatment or minimally invasive treatments. Prosthodontists must always have a primary focus on health and provide care that is in the best interest of the patients we serve. We should be “true health care professionals” held in high esteem by the public we serve and not sellers of commercial products. The future of the prosthodontist-patient relationship is in our hands. May we choose wisely!

The ACP Messenger

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The advertiser agrees to assume all liability for content of ads printed and must be fully authorized for use of the ad’s content, including but not limited to: people’s names and pictures, testimonials and any copyrighted or trademarked material. In consideration of the publication of advertisements, the advertiser will indemnify and hold the publisher harmless from any loss or expense arising out of an advertisement.

To ensure consistent style, ads will be subject to editing. The ACP reserves the right to decline or withdraw ads at its discretion.

Place An Ad

To place an ad, download a classified ad insertion form by visiting www.prosthodontics.org and clicking on ACP Products and Publications. E-mail or fax the completed form to Caroline Kinczyk, communications and marketing coordinator, at CKinczyk@prosthodontics.org or (312) 573-1257.

Classified ads are \$55 for the first 60 words and \$1 for each additional word, for ACP members. The non-member rate is \$110 for the first 60 words and \$1 for each additional word. The minimum charge is \$55. Photos are an additional \$50. Photos must be e-mailed as a high resolution (300 dpi or more) .jpg or .tiff file. Photos will be reduced to approximately 2 x 3". Photos are limited to one per ad and are subject to approval.

Payment by check, American Express, Visa or MasterCard is required prior to placement. Contact Caroline Kinczyk at the ACP Central Office with questions at (800) 378-1260, ext. 235.

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