College Names New Director

The ACP Officers and Board of Directors are pleased to announce the selection of Mr. Stephen D. Hines as the new Executive Director of the American College of Prosthodontists. Mr. Hines began his tenure with the College on March 6, 1996.

Mr. Hines has spent the last two years as an independent public affairs consultant serving numerous major clients including the United Way/Crusade of Mercy, the American Academy of Orthopedic Surgeons, and the American Health Care Association. He received his BA degree in Political Science from the University of Miami and brings to the College 25 years of progressive management experience in sales, marketing, and public affairs. According to ACP President Dr. Ken Turner, "Steve's broad experience in corporate management and his strong background in marketing and communications make him an ideal fit for the needs of the College."

Prior to embarking on his consulting activities, Mr. Hines spent 25 years with Ameritech/Illinois Bell, serving in numerous positions including Director, External Affairs, Director, Marketing Communications, and most recently as Director of Government Relations. In addition to his corporate career, he has been very involved in the non-profit arena and currently is serving as the Secretary/Treasurer of the Executive Committee of the American Diabetes Association.

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The duties of the Interim Speaker will be:
1. To ensure that all Sections are contacted and that a list of official delegates is compiled.
2. To develop an agenda for the House of Delegates meeting.
3. To work with staff and supervise the details prior to the meeting. To ensure that all mailings are conducted in a timely manner and all other meeting arrangements are made appropriately.
4. To attend meetings of the Board of Directors as an ex-officio member.

Continued on page 4
President's Report

I hope you all read and enjoyed the January Messenger as much as I did! This is our very best way to communicate to the membership and Editor-in-Chief David Burns and Managing Editor, Joanne Constantine, are to be congratulated on a first class publication which, beginning in 1996 (now) is coming to you every two months with pertinent information about the College, its people and its activities.

One of the real highlights of the Messenger is the Open Forum section which gives everyone the opportunity to express their views on different issues. The January Open Forum included many thoughtful letters from Dr. Nancy Chaffee of the Nebraska Section and Dr. Kenneth Kent of the New Jersey section. This is the way it is supposed to work. Members speak, Officers, Board of Directors and staff listen! Sometimes what the leadership and the membership of any organization perceive are far from the same. I applaud people like Drs. Chaffee and Kent who are willing to speak out and I want to respond to their comments.

Dr. Chaffee expressed a concern with the "progress and direction of our organization." The direction is straight forward. We are totally committed at this time to represent and promote you, the membership of prosthodontists, the specialty and discipline of prosthodontics, and all prosthodontic issues to the public, the dental profession, the health care professions, government agencies, educational institutions, third-party payers, etc. Our stated mission is to improve the quality and accessibility of prosthodontic care for the public. I can assure you that no one on the Board of Directors has any question as to the present direction of the ACP.

Progress is never as fast as we would like, but as we grow in strength and members work together as I outlined in my January column, we do make progress. Three years ago there was no House of Delegates, no Chicago office, no committees for Denturism, Parameters of Care, Coding, Implant Related Public Relations, Sleep Disordered Breathing, etc. Sometimes progress is more actual than apparent because of its gradual nature. We need to constantly move forward and good things are bound to happen!...the best way for the membership to be informed is to read every issue of the Messenger and actively participate in your sections!

Both Drs. Chaffee and Kent mentioned communication. Communication between College leadership, sections, membership, and staff has long been identified as a definite weakness in our organization and we must address this problem from all angles. I confer with our staff in Chicago and San Antonio by telephone on an almost daily basis, and I have met personally with the staff in the Chicago office several times since January 1. We have initiated monthly conference calls between our officers to ensure mutual awareness of current issues. We have three meetings of our Board of Directors each year and between meetings, memos are sent regularly to the Board, House of Delegates, Sections, and Past Presidents as appropriate in an effort to keep everyone as well informed as possible.

I will repeat that the best way for the membership to be informed is to read every issue of the Messenger and actively participate in your sections! If you have a question, ask your section president. If he or she doesn’t know the answer, ask him or her to talk to our Executive Director or call me. We must communicate on all levels. The more we communicate the better! We can beat this communication problem together.

I urge each of you to make plans to attend the 1996 Annual Session in Kansas City, October 2-5. Not only will you have a great time and glean the latest information on prosthodontics, you will also learn a great deal more about your College, its goals, and its 2600+ outstanding members!

College Works on Member Communication

Feeling out of the loop? Hopefully, the recent efforts of the ACP Board and staff will help to keep you connected.

President Kenneth Turner has emphasized the importance of improving communication throughout the various channels reaching College members. One of those efforts has been the increase from four annual issues to six of the ACP Messenger.

But no matter how much information goes out to the membership, it needs to reach the right place. ACP's Director of Membership Marsha Holub says, "Keeping members informed is a high priority. In the last year, we have made great strides in keeping our membership database up-to-date." Among her efforts to achieve this goal have been the following activities.

Helping members to communicate with each other, the ACP office recently mailed all College members a copy of the 1996 Membership Roster. Not updated since 1993, the Roster has been eagerly awaited by many. The 1996 Roster's size alone is an illustration of just how much the College has grown in the past three years. The information listed in the Roster represents all the data available for each member in the ACP Member Database and is current through January 1, 1996. ACP headquarters staff have made every effort to promptly update membership information in the database. Any members wishing to update the information listed in the roster for themselves should fill out the "Directory Update Form" found on the last page of the roster and send it to the ACP headquarters office.

Because the efforts of every ACP Section are an important link in the chain of College communication, the headquarters office recently sent each Section President the most current list of ACP members in their state. Section delegates suggested this idea during the 1995 House of Delegates meeting and staff has responded. Section Presidents will be able to use this data to communicate with those prosthodontists in their area who are members as well as identify and possibly recruit those who are not members. Again, members should be sure to inform the ACP office of any changes in their addresses and phone numbers in order to continue receiving all College communications.

Because prosthodontic students are an important and ever-changing facet of the College's membership, Dr. Ronald Woody, Dr. Arthur Nimmer, Dr. Robert Stafanou, Dr. Thomas Taylor, and Ms. Holub recently collaborated to produce a complete and updated list of Prosthodontic Program Directors. Dr. Woody remarked, "Our list is more current than even the ADA's information." Using this list, the College can be assured it will be able to accurately disseminate information to all prosthodontic programs and students in a timely manner.

If you have any questions about the information listed in the ACP membership database, please feel free to call the ACP office at (312) 373-1260.
Reinventing the Prosthodontic Dental Practice

Editor's note: The following monograph on practice management is designed to respond to member requests for more education on this subject and was produced by Dr. Roger Levin who recently presented the Private Practice Seminar at the ACP Annual Session in Washington, D.C. last October. It's presentation will occur in a series of articles over the next few issues of The ACP Messenger. The statements and opinions expressed in this series are solely those of Dr. Levin. His statements and opinions do not reflect any endorsement by the American College of Prosthodontists.

The health care system is going through a series of radical and important changes. What we have experienced thus far in regard to managed care in dentistry is minor in comparison to what will be coming. This article does not focus on whether or not we prefer these changes, but rather what can be done about these changes to create new opportunities for the prosthodontic dental practice. The reality is that managed care dentistry is not good for any professional when measured in terms of gross practice revenues and net incomes. It creates a situation whereby fees are reduced and your practice is no longer available to new patients. This is unfortunate that our basic freedom of choice is under threat of elimination. A changing strategy by the prosthodontic dental practice is needed in order to grow and prosper.

What Business Are You In?

For many years, the measure of success for a prosthodontist has been providing quality clinical care to patients. While this precept of high quality care has not changed, the main focus of the practice has been altered. Any prosthodontic dental practice of today that relies solely on high quality clinical care for patients will find it more challenging to be successful in the future.

High quality clinical care for patients is still an essential element of practice success. However, it is no longer the most important element for practice success.

The prosthodontic dental practice of today will have to literally re-invent itself in order to effectively compete based on the changes in dentistry. Re-invention means re-examining the foundation for growth of the prosthodontic dental practice, and nothing short of complete reinvention will suffice to offer the necessary competitive edge. These words are not meant to be depressing, instead they signify the major opportunities available for the prosthodontic dental practice that recognizes the word practice no longer applies. The fact is that you are running a business and that business must follow certain principles in order to enjoy success.

The first principle is to be able to answer the question of what business you are in. The answer is not clinical dentistry. Instead, you must realize that you are in the business of education. Please take this comment very seriously. The future success of any prosthodontic dental practice will depend on your ability to educate patients in the community as to why they should come to your practice. The concept that you are running a business implies that there will be no guarantee of success, that overhead will always tend to rise, the competition will try to take away your market share, and that you will have to compete in order to remain successful. Fortunately, that competition can be handled by enhancing your education program without compromising the ethics or quality of care that has always been inherent in prosthodontic dentistry.

Why Education?

What does it mean to be in the business of education? It means that you recognize that all patients coming to your practice are elective. No patient has to go to a prosthodontist and the proof is that most general dentists do not refer patients in large volumes to the local prosthodontic dental practice. With the onset of managed care (whether prosthodontic dentistry is included as a primary provider or not) you will note two key issues:

1. Fees will be significantly reduced. Managed care plans will more than likely pay the prosthodontist based on discounts offered to general dentists rather than treating prosthodontists differently. I had a long conversation with one of the big managed care companies and their view is that the prosthodontists participate as a primary care provider and their view is that the prosthodontist who participates as a primary care provider will be treated as a general dentist in regard to fees. I am not happy about this, but is noteworthy.

2. Fewer patients will be available to your prosthodontic dental practice as they are assigned to other doctors participating in a managed care plan for which that patient is a member. Even if the prosthodontic dental practice is seen as a primary care provider many patients will be in plans that do not include your office. This means that they are unable to make the elective decision to become a patient in your practice. They have to go to doctors who are already in the plan. As you can see, everything is changing rapidly. This is why I believe you are now in the business of education and not in the business of dentistry. It will be patient and community education that attracts enough patients to your prosthodontic dental practice to keep the practice growing.

Look for Part II of this series in the May issue of the Messenger.
New Guidelines for Use of “FACP”

The title “Fellow of the American College of Prosthodontists” is conferred on members of the College at the Annual Official Session following their successful completion of the examination and attainment of Diplomate Status by the American Board of Prosthodontics or, if a Diplomate of the Board at the time of application for membership in the College, Fellowship is conferred upon election to membership.

Since Fellowship in the ACP is awarded in recognition of academic and professional achievement as evidenced by conferring of Diplomate Status by the American Board of Prosthodontics, it is an earned Fellowship, not an honorary Fellowship.

In accordance with ADA Principles of Ethics & Code of Professional Conduct, Section 5A, Advisory Opinion 4, and to conform with good taste, accepted procedures, and the College Code of Ethics, the letters FACP may be used following one’s professional degree in specific circumstances.

The following guidelines are promulgated for use of the letters FACP:

1. They may be used in academic registers where faculty are listed, together with all other degrees and titles.
2. They may or may not be used following your name as author of an article published in a Journal. This decision will be at the discretion of the group which makes policy for the Journal concerned.
3. They may be used on the title page of a textbook of which you are the author.
4. They may be used on your curriculum vitae.
5. They may be used on office doors, office buildings, official nameplates, telephone directories, stationery, or in any public announcement attesting to the achievement obtained. Although attainment of Diplomate status through rigorous testing is a significant professional achievement, that in itself does not imply superior skills not possessed by other specialists, nor should it be used to specifically imply superior skill.
6. In foreign countries, the use of all degrees, titles, and letters is the custom when signing a professional register or guest book. In these cases, follow the example of those who have signed before you.

The above guidelines apply where the law does not prohibit such use.

Dental Assisting Education in Top Ten

Dental assisting programs were among the ten most popular certificate programs for women in 1991-92, according to an article in The Dental Assistant.

Figures from the U.S. Department of Education, National Center for Education Statistics, revealed that dental assisting certificates accounted for about 2.6 percent of the 70,911 certificates awarded to women in 1991-92.

Licensed practical nurse topped the list, accounting for almost 20 percent of certificates earned. Dental assisting programs have experienced increased first-year enrollments since 1989.

The Department of Labor’s Bureau of Labor Statistics (BLS) projects that between 1992 and 2005, growth in the occupational category into which dental assisting falls will be 32 percent - one of the highest rates of growth of any of the categories analyzed by the BLS.

Call for Table Clinic Presentations

The American College of Prosthodontists 1996 Annual Session
October 3-5, 1996

Table Clinics Session:
Thursday, October 3 from 12:30 - 2:00 p.m.
Poster or Display Presentations of Research, Clinical, and/or Laboratory Techniques
No Slide Projectors Allowed

Please submit applications to:
Dr. Nancy S. Arbree
Chair, Table Clinics Subcommittee
Tufts University School or Dental Medicine
One Kneeland Street, DHS-4
Boston, MA 02111
Tel: (617) 636-0866
Fax: (617) 636-6583

Submission Deadline: June 1, 1996

Board Approves Resolution for Interim Speaker of the House

Continued from page 1

5. To appoint a House of Delegates Nominating Committee from the active body of delegates. This committee will be charged with soliciting nominations from the Sections for the first elected Speaker who will take office at the close of the 1996 House of Delegates and preside over the 1997 House. Each Section may nominate one individual if it so chooses. Nominations must be received in writing by the date determined by the House Nominating Committee. The Nominating Committee will submit no more than three candidates from among the nominees, and the delegates will elect a Speaker from these candidates. The Speaker shall serve a two-year term and shall be eligible for re-election to one additional term.

6. To preside at all meetings of the House of Delegates and determine the order of business for all meetings subject to the approval of the House of Delegates. To appoint tellers to assist in determining the result of any action taken by vote and perform such other duties as custom and parliamentary usage require.
Cronin Elected as Examiner

The American Board of Prosthodontics has elected Dr. Robert J. Cronin, Jr. as an examiner. Dr. Cronin is currently an Associate Professor and Director of Graduate Prosthodontics in the Department of Prosthodontics at the University of Texas Health Science Center Dental School in San Antonio. He received his MS degree from the UT Health Science Center in Houston after completing a prosthodontics residency at Wilford Hall USAF Medical Center at Lackland Air Force Base in Texas. Dr. Cronin received a Legion of Merit in 1992, the highest non-combative military decoration.

Dr. Cronin is a graduate of the Georgetown University School of Dentistry. He has been a Fellow of ACP since 1977 and served in 1985 as the Special Consultant in Prosthodontics to the Surgeon General.

Dr. Cronin lives in Texas with his wife, Suzanne.

Board Makes Changes to Exam and Certificate Processes

Effective with the 1997 mailing, annual certificates will no longer be sent out to diplomates. Eight year certificates will be mailed out to diplomates. Annual requests for continuing education activity as part of the recertification process will be mailed out with the annual dues statement. REPORTING ANNUAL RECERTIFICATION ACTIVITY AT THE SAME TIME AS PAYMENT OF THE DUES SHOULD MAKE THE ENTIRE PROCESS EASIER.

As a result of the changes in program duration, structure, and emphasis mandated by the new ADA accreditation standards beginning this July, the ABP determined that a number of revisions were necessary to make the examination process more reflective of the new standards. At the same time, consideration was given to facilitating the examination process, to make it more consistent in some ways with other medical and dental specialty certification boards, and to encourage increased participation in the examination itself. These revisions are far reaching and will have both immediate and long term impact on the certification process. The revisions are as follows:

1. Effective in February, 1997 and thereafter, residents or graduate students in the third year of their full-time prosthodontic training program are allowed to take the Part I written examination during the February examination period.

2. Effective in February, 1997 and thereafter, any board eligible candidate may take any or all of Parts II, III, and IV in any order at either the February or the June examination.

3. Effective immediately, the Part V written examination is combined with the Part I examination given in February thus eliminating a separate Part V in June. The length of the combined examination is 175 questions and the time for completion is four and a half hours.

4. Effective immediately, any one of the patient treatment reports (Part II, III, or IV) may be completed during the period of the training program. The substance, requirements and specific descriptions of those presentations has not changed.

5. Effective February 1998, one of the three patient treatment presentations (Part II, III, or IV) must include an implant prosthodontic component.

On February 19, 1996, thirty-five people took the Part I examination and eight people took the Part II patient presentation exam.

Report Predicts Crisis in Medical Profession

"Market driven realities" will put up to 150,000 physicians, 300,000 nurses and 40,000 pharmacists out of work unless 20 percent of the nation’s medical schools are closed by 2005, and physician, nurse and pharmacist training slots are cut up to 25 percent, according to a report released in November 1995 from the prestigious Pew Health Professions Commission.

While the Commission did not say which schools should be closed, it indicates those producing many specialists and little research are prime targets. Additionally the report predicts closure of as many as half of the nation's hospitals and loss of perhaps 60 percent of hospital beds. To offset this reduction, there would be a massive expansion of primary care in ambulatory and community settings.

The American Medical Association, American Nurses Association and the Association of American Medical Colleges dispute the Commission's findings.

Within the same report, the Commission also addresses Dentistry and recommends that entering class size be maintained at its 1993 level (4001 students) and the creation of the opportunity for a postgraduate year of training for all graduating general dentists. Said the report, "dentistry alone among the health professions will actually experience a decline in the ratio of professionals to population over the next two decades if current trends continue."

The Commission emphasizes that during the last two years, dental care and the practice of dentistry (it represents about 7 percent of health care expenditures) have been left out of the debate for health care reform and the movement to create integrated systems of care. By and large, the organized dental profession has wanted to be outside discussions and reforms and has argued that dentistry has maintained an outstanding record in cost containment, prevention, specialist/generalist ratios and active involvement in the community.

The report continues by pointing out that while medicine has moved dramatically into managed care arrangements, often involving the creation of integrated networks, group practices and the formal employment of physicians, the vast majority of dental care is still delivered by single dentists in ambulatory settings.

"From one perspective dentistry may appear to be in an enviable position relative to the other professions. Left alone and with a declining number of professionals, they may be able to control the manner in which care is delivered more effectively than will medicine or nursing," the report envisions.

The Council recommends, however, that because of the potential for a decline in dental professionals in the next century, dentistry might do best to anticipate the inevitable pressure that it be delivered more effectively and efficiently by using dental hygienists and assistants more expansively, by linking more directly with the rest of the health care system, and by creating more efficient practices.

The report concludes that it seems unlikely that dental practitioners will come to these changes without the pressure of being
Announcements

GNYAP Elects New Slate of Officers

The newly elected Officers and Council Members of the Greater New York Academy of Prosthodontics are pictured left to right: Dennis P. Tarnow, Member of Council; Gary R. Goldstein, Member of Council; Stanley M. Weinstock, Treasurer; Clifford D. Kopp, Secretary; Eugene P. LaSota, Vice President; Paul J. Hoffman, President-Elect; Jonathan L. Ference, President.

Two Foundations Offer Research Grants

The Implant Dentistry Reseal'eh and Education Foundation has announced the availability of grants up to $20,000 to encourage new investigators by providing seed and start-up funding for promising research projects in implant dentistry. The principal investigator or co-principal investigator must hold an appropriate terminal degree. A dental resident or Ph.D candidate may apply if the department or division chair provides a letter confirming he/she is coming on staff the year a project is funded. Applications are accepted all year, however, are reviewed twice a year. Deadline for applications are January 1 and July 1 of each year. For an application please contact: The Implant Dentistry Research and Education Foundation, Department of Biomedical Engineering, University of Alabama at Birmingham, 1150 10th Avenue South, Birmingham, AL 35294. Telephone (205) 975-8153, Fax (205) 975-5653.

The American Academy of Implant Dentistry Research Foundation has announced the availability of the 1996 Small Grant Program. The grant program is designed to provide limited support for meritorious research involving dental implants. Grants of up to $10,000 are available to investigators interested in advancing the art and science of implant dentistry. Investigators from any scientific discipline and at any stage of their career may apply for a Small Grant. A special review committee with representation from academic, clinical and research oral implantology will determine the overall quality and scientific merit of each Small Grant application.

Application forms are available through the American Academy of Implant Dentistry’s Headquarters Office, 211 E. Chicago Avenue, Suite 750, Chicago, IL 60611 or call (312) 335-1550. The application deadline is August 1, 1996.

Boucher Prosthodontic Conference

Dr. Robert A. Strohaver, President of The Carl O. Boucher Prosthodontic Conference, has announced the 31st Annual Meeting to be held at the Holiday Inn on the Lane in Columbus, Ohio on April 12 and 13, 1996. The conference is dedicated to providing continuing education in the art, science, and practice of fixed, removable and implant prosthodontics. Prominent speakers will address current issues in these areas. Highlights of this year’s meeting include the dedication of the Carl O. Boucher Conference Room at The Ohio State University College of Dentistry. Construction of this facility was made possible by contributions of about $25,000 from the membership of the Conference. The meeting will also feature a reunion of Dr. Boucher’s prosthodontic graduate students, a group that comes from 8 countries and includes 17 department chairmen and 3 deans.

Guests are welcome and registration information may be obtained by contacting Dr. Ernest D. Svensson, OSU College of Dentistry, Columbus, OH 43210.

Geriatric Awards Available

The American Dental Association, through the Council on Access, Prevention and Interprofessional Relations, announces that entries are now being accepted for the annual Geriatric Oral Health Care Award.

The award, sponsored through a generous grant from the Warner-Lambert Company, Consumer Health Products Group, recognizes those individuals and organizations who have improved the oral health of older adults through innovative research and community health delivery projects. A $2,500 award will be presented to the top winner. An award of $500 may be granted for one meritorious entry.

For a brochure and application, contact the Council on Access, Prevention and Interprofessional Relations, American Dental Association, 211 E. Chicago Avenue, Chicago, IL 60611-2678. Phone inquiries may be made by calling the Council at 312-440-2673. All entries must be postmarked by May 17, 1996.

Mark your Calendars for Future ACP Meetings

1996 Annual Session
October 2-5
Hyatt Regency Crown Center
Kansas City, MO

1997 Annual Session
November 3-8
Stouffer Hotel
Orlando, FL

1998 Annual Session
September 15-19
Sheraton Harbor Island Resort
San Diego, CA
Meetings and Conferences Calendar

May 1-5, 1996
American Academy of Cosmetic Dentistry, San Diego, CA
Contact: AACD
270 Corporate Drive
Madison, WI 53714

May 3-8, 1996
Academy of Prosthodontics, Newport Beach, CA
Contact: Dr. Edward J. Plekavich
4830 V St., N.W.
Washington, D.C. 20007

May 16-18, 1996
Second International Congress on Maxillofacial Prosthetics, Seoul, Korea
Contact: RES Seminars
P.O. Box 99119
San Diego, CA 92169

June 13-16, 1996
American Anaplastology Association, Portland Oregon
Contact: Eben Yancy
(619) 272-1018; FAX (619) 272-7687

June 27-29, 1996
Pacific Coast Society of Prosthodontists
Contact: Joseph P. Cooney
UCLA School of Dentistry
Room 33-041A
Center of Health Sciences
Los Angeles, CA 90095-1668

September 18-19, 1996
European Prosthodontic Association and German Prosthodontic Organization, University of Tubingen, Germany
Contact: Congress Partner
Emmabrunnen 220
28213 Bremen, Germany
Fax: 0049421216419

June 5-7, 1997
Seventh International Congress on Reconstructive Preprosthetic Surgery, Copenhagen
Contact: E. Hjorting-Hansen
Department of Oral and Maxillofacial Surgery
University of Copenhagen
20 Norre Alle
DK-2200 Copenhagen N Denmark

Report Predicts Crisis in Medical Profession

Continued from page 5

Oversupplied or a strong push from managed care organizations. "Without such a change however, the profession may find itself losing control of the responsibility for oral health to other professions that are willing to make such accommodations."

In a related story, physician’s median income may have fallen for the first time, according to a Nov. 17 report in the New York Times that cited American Medical Association statistics. In 1994, the average physician earned $150,000, 3.8% less than the 1993 average of $156,000, the report said. AMA sources say the report is preliminary. Included in tabulations were resident and federally-employed physician pay which would lower the average. The AMA said information in the final report will be in separate tables allowing direct comparison with prior year numbers.
Two Videotapes Now Available to Order

As a result of two College public relations projects, two informative videotapes and other educational materials are now available to College members from the ACP office.

In an effort to meet the needs of the College’s membership in private practice, the Implant subcommittee of the ACP Public and Professional Relations Committee developed a video brochure and accompanying pamphlet promoting the benefits of implant restorations. At the end of February, all ACP members received complimentary copies of “The Story of A Smile” videos and brochures.

Both items are now available for purchase. These items are an ACP member benefit and have been priced to cover only the costs of production and shipping. This offers members the opportunity to purchase large quantities to hand out to patients considering implant-supported restorations.

The eight-minute videotape is $6 per copy. The eight-page color brochures cost $30 for a set of 100 brochures. To order, simply fill out the order form below and send it to the ACP office with payment. Orders will take two to three weeks for delivery.

ACP Video and Brochure
“The Story of a Smile”

Videotape Order:
I would like to order ___ copies of “The Story of a Smile” videotape at $6 per video

Brochure Order:
I would like to order ___ sets of 100 brochures at $30 per set

Total Cost: __________

I am paying by □ check □ MasterCard □ VISA

Please send this form with payment to:
ACP, 211 E. Chicago Ave., Suite 1000, Chicago, IL 60611 or Fax (312) 573-1257

NOCAP Oral Cancer Video

I would like ___ copies of “The Health Care Professional’s Guide to Oral Cancer” at $18 per video.

I am paying by □ check □ MasterCard □ VISA

Please send this form with payment to:
ACP, 211 E. Chicago Ave., Suite 1000, Chicago, IL 60611 or Fax (312) 573-1257

ADVERTISING POLICY

For more information or to place a classified ad for the ACP Messenger, please contact:
Joanne Constantine
ACP
211 E. Chicago Ave.
Suite 1000
Chicago, IL 60611
Phone (312) 573-1260
Fax (312) 573-1257

Ads will be charged at a rate of $35 for the first 60 words and $1 for each additional word. The minimum charge is $35. Payment by check, VISA, or MasterCard must be received with the advertisement.

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