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CHICAGO
DENTAL
SOCIETY

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REVIEW

DECEMBER 2006



UNDERSTANDING DENTAL BENEFITS

CDS BOARD ESTABLISHES CHARITABLE FOUNDATION

The CDS Board of Directors recently voted to establish a philanthropic and charitable foundation. Though months of work lies ahead, the Board hopes to build a lasting dental endowment.

Funding will be devoted to improving the oral health of the public by providing a permanent and stable source of income for dental education and access to care programs.

Watch for news updates about the CDS Foundation online at www.cds.org and in the *CDS Review*.

AMERICAN COLLEGE OF DENTISTS HONORS RANDY GROVE

CDS Executive Director Randy Grove received an Honorary Fellowship in the American College of Dentists during its annual meeting in Las Vegas in October.

Honorary Fellowships are awarded to individuals who are not dentists but have demonstrated leadership and achievement in dentistry. Honorary Fellows have all the rights and privileges of Fellowship except they can not vote or hold office.

Mr. Grove has been with CDS since 1989. Prior to that, he was the Director of the Bureau of Health Education at the American Dental Association, and Executive Director of the United Cancer Council. He is active in several professional organizations.

Also receiving Honorary Fellowships in the American College of Dentists were George R. Rhodes, vice president for professional relations and corporate communications at Dentsply International, and Pamela Zarkowski, executive associate dean at the University of Detroit Mercy School of Dentistry.



Photo courtesy ADA News © 2006 American Dental Association

ADA President Robert Brandjord presented CDS Director of Membership Joanne Girardi with the Golden Apple Award at a ceremony Oct. 5. They are joined by CDS President Thomas Machnowski, CDS Executive Director Randy Grove and 8th District ADA Trustee Perry Tuneberg.

CDS MEMBERS ARE THE APPLE OF OUR EYE

The Chicago Dental Society was awarded the ADA's 2006 Golden Apple Award for excellence in membership recruitment and retention. Golden Apples are bestowed annually on constituent and component societies that deliver top-notch programs and reach ambitious goals.

CDS was recognized for its promotion of the expanded member benefit. Established in 2001, this benefit allows members who pay their dues by January 1 to attend the Midwinter Meeting without paying a registration fee.

The retention of members is of critical importance to organized dentistry, and this expanded benefit has resulted in more dentists joining CDS, fewer non-renewals and prompter payment of dues.

CDS staff members who spearheaded this effort are Joanne Girardi and Lisa Hosley in the Member Services Department and Joanna Brown in Editorial/Communications.

CDS HELPS ALL MEMBERS THROUGHOUT THEIR CAREERS



As you prepare to pay your 2007 dues for membership in the Chicago Dental Society, the Illinois State Dental Society and the American Dental Association, remember that there are programs in place to aid dentists in every stage of their careers:

- **Considering retirement?** Those retiring before April 1 are eligible for reduced dues in 2007.

- **Just starting your career?** Dental school graduates, post-graduate students and doctors participating in residency programs pay reduced rates for the tripartite membership for four years immediately following graduation.

We also have programs in place to help dentists facing medical or financial hardship. The programs are strictly confidential and can reduce your dues by up to 100 percent without reducing the membership benefits you receive under normal circumstances.

Call CDS Member Services at (312) 836-7321 to request an application or waiver.

SEPTEMBER 20 REGIONAL MEETING MINUTES

The Regional Meeting of the Chicago Dental Society convened September 20 at the Drury Lane, Oakbrook Terrace, with CDS President Thomas J. Machnowski presiding. Dr. Machnowski called the meeting to order at 9:05 a.m.

Attention was directed to the minutes of the Regional Meeting of Wednesday, April 19. Inasmuch as the official minutes of the meeting of Wednesday, April 19 were published in the May/June 2006 issue of the *CDS Review*, a motion was entertained to dispense with reading them. Moved by Jeffrey Socher, DDS, seconded by Thomas Salmon, DDS, and carried to dispense with reading the April 19 Regional Meeting minutes. Moved by Barbara Mousel, DDS, seconded by Terri Tiersky, DDS, and carried to accept the April 19 Regional Meeting minutes.

As there were no reports of the Board or Standing Committees or the Special Committees, and with no new or unfinished business, Dr. Machnowski called on James Maragos, DDS, to introduce Martin Nager, DMD, who presented a program entitled: The Periodontally-oriented Restorative Practice. The meeting was adjourned at 1:35 p.m.

NOVEMBER 8 REGIONAL MEETING MINUTES

The Regional Meeting of the Chicago Dental Society, convened at the Drury Lane, Oakbrook Terrace, CDS President Thomas J. Machnowski presiding. Dr. Machnowski called the meeting to order at 9:05 a.m.

Attention was directed to the minutes of the meeting of Wednesday, Sept. 20. Inasmuch as the official minutes of the meeting had not yet been published, a motion was entertained to dispense with reading and approving them until everyone had the opportunity to review them.

MOVED by Richard S. Holba, DDS, seconded by James L. Discipio, DDS, and carried to dispense with reading the Sept. 20 minutes at this time.

There were no reports of the Board or Standing Committees, nor any reports of Special Committees.

Dr. Machnowski directed attention to the proposed Bylaws change involving Branch Redistricting, as had been duly published. He announced that although this proposal was scheduled for vote at the Nov. 8 Regional Meeting, he was going to defer the vote until 2007 to obtain further input from the members on this issue. No one objected to the postponement of action.

Dr. Machnowski reported that the nominating petitions for the 2007 officers had been duly filed in the CDS central office, and the candidates' names duly published in the July/August, September/October, and November issues of the *CDS Review*, in accordance with the bylaws.

He further reported that since not more than one candidate had been nominated for each elective office, in accordance with CDS Bylaws, the secretary would cast a single unanimous ballot on behalf of all the respective candidates for office.

MOVED by James M. Maragos, DDS, seconded by Alan J. Shapiro, DDS, and carried, that a single unanimous ballot be cast on behalf of all the respective candidates for office.

Dr. Machnowski then congratulated Treasurer-elect Ian Elliott, Vice President-elect Michael J. Stablein, Secretary-elect David P. Kumamoto, and H. Todd Cubbon, who will become president-elect.

Dr. Machnowski noted that these officers would be installed Nov. 9 along with John F. Fredricksen, who will assume the office of president. These officers will assume their respective duties Jan. 1, 2007, and will continue through Dec. 31, 2007, in accordance with the fiscal year. Dr. Machnowski noted the CDS's 50-year graduates would also be recognized Nov. 9.

Dr. Machnowski extended an open invitation to all CDS members, their families and friends to join him on this occasion in the Ballroom of the Peninsula Hotel, Chicago, to personally congratulate the officers and wish them well while enjoying refreshments.

With no further business, Dr. Machnowski called upon James Maragos, DDS, to introduce John Molinari, PhD, who presented a program entitled "Infection Control Update and Issues 2006."

The meeting adjourned at 1:35 p.m. ■

THE 142ND CHICAGO DENTAL SOCIETY MIDWINTER MEETING

SCIENTIFIC SESSIONS: Thursday-Sunday, February 22-25, 2007

EXHIBITS: Friday-Sunday, February 23-25, 2007

PRE-REGISTRATION: Open now through January 31, 2007

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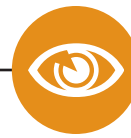
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WHY LESS IS MORE:

EXPLORING TRULY CONSERVATIVE DENTISTRY AS AN EXERCISE IN GREATER CLINICAL SKILL AND PROFESSIONAL SATISFACTION



THOMAS TRINKNER, DDS

WEDNESDAY, JANUARY 10

9 a.m. to 2:30 p.m.

Drury Lane, 100 Drury Lane, Oakbrook Terrace

CE CREDITS: 5 CE hours

TARGET AUDIENCE: Doctors, hygienists, assistants and office staff

ABOUT OUR PROGRAM:

To achieve esthetic success and functional longevity while realizing greater clinical skill and professional satisfaction, dentists must maintain a working knowledge and plan for occlusal stability, conservative tooth reduction and state-of-the-art direct and ceramic materials. Dr. Trinkner will provide suggestions for tools for communicating with ceramists and other components necessary to develop a more conservative approach to solving esthetic dilemmas in the least invasive, but creatively more challenging manner possible.

ABOUT OUR SPEAKER:

Dr. Trinkner teaches as an associate at the L.D. Pankey Institute and is a clinical instructor for the General Residency Program at Palmetti Richland Memorial Hospital in Columbia, SC. A former editor of the *American Academy of Cosmetic Dentistry Journal*, he serves on the editorial board of *Practice Procedures in Aesthetic Dentistry*, *Signature Magazine*. To learn more about Dr. Trinkner, visit www.trinkner.com.

ABOUT CDS MEETINGS:

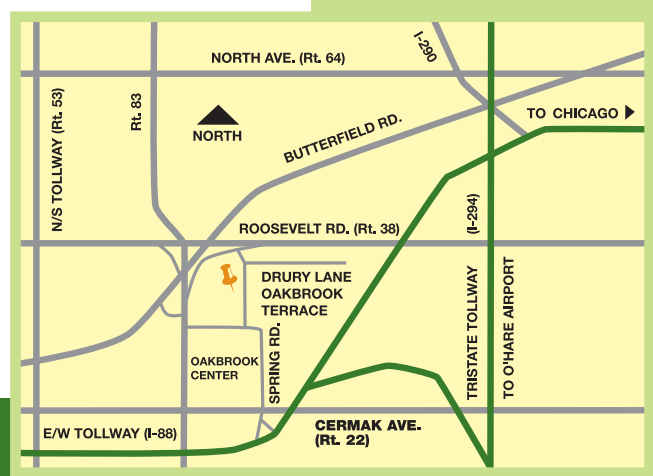
Regional meetings are **FREE** to all CDS members and their auxiliaries, as well as dental hygienist members of the Illinois State Dental Society.

A fee of \$250 is charged to dentists who are not CDS members, which may be applied to membership for the current year.

Advance registration is not required for any regional program.

DIRECTIONS:

For directions to Drury Lane, call (630)530-8300.





PROFESSIONALISM

To practice a profession, one must have acquired mastery of an academic discipline, as well as a technique for applying this special knowledge to the problems of every life. A profession is, therefore, intellectual in content, practical in application. Professional conduct—professional behavior—is based on two rules.

First is the obligation to reject lay direction in the performance of professional work. That is the duty to maintain professional independence. Service ceases to be professional if it has in any way been dictated by the client or employer. Professional independence is not a special privilege, but rather an inner necessity for the true professional man and a safeguard for his employers and the general public. Without it, one negates everything that makes a him a professional person and becomes at best a routine technician or hired hand, at worst, a hack.

The second such rule is the obligation to use professional knowledge and techniques solely for the benefit of clients.

—Adm. Hyman G. Rickover,
U.S. Navy, 1900-1986
"Father of the nuclear navy"

An erosion of trust?

I want you to read and re-read what Adm. Rickover had to say about professionalism. You might want to cut it out and place it in your treatment rooms or private office. Adm. Rickover's comments are as applicable today as they were when he wrote his observations.

I believe that modern dentistry has failed in our obligation to reject lay direction in the performance of our professional work. Maybe you've made decisions based on financial concerns. Maybe your patients are making decisions based on their financial concerns. Maybe you weren't successful in your case presentation. In any event, someone, something, some outside influence has crept into the doctor/patient relationship.

Your second obligation, to use your knowledge and techniques solely for the benefit of patients, appears to be an easy one with which to comply. But there is more than what meets the eye. Remember, we treat patients and improve their oral health. We can not and should not tailor our treatment recommendations to only those who are fully or partially covered by a dental benefit plan.

It is up to us to promote innovation and excellence. We should determine the standard of care and not promote mediocrity. It is up to us to create value for our services.

Right now, we are in a bind in Alaska; there, there is no value for dentistry or our profession. The tribal leaders do not trust the ADA's solution for their dental dilemma. Rather, they believe that technicians who successfully complete a nine-month training course are prepared to meet their dental needs. Maybe we should send a nine-month-trained heart surgeon up there to do all the coronary bypass procedures!

In dentistry, the main thing is to keep the main thing the main thing. Otherwise, your practice and profession suffer. The main thing is different for all of us. You have to determine what it is and follow it to completion, and then move on to the next main thing. As one business guru says: "If it's to be, it's up to me." You have to be your own motivation to do what is right and proper—no one will do it for you.

There is no one who wants to help you. Very few will inspire you. And even fewer will care about you. People care about themselves, just like you do.

Adm. Rickover states that a profession is intellectual in content and practical in application. The intellectual transfer—from ourselves to our patients—of value for the human dentition is perhaps where we are stumbling. When something of value is lost, people will find a mechanism to replace it. Remember, the origins of our current implant systems have their roots in a country that had the highest rates of decayed, missing, and filled teeth in all of Europe.

Stop thinking of dentistry as a commodity. It is all about the relationships and perceived values. Act professionally and treat your patients in a friendly and warm manner. Everything you do and say, and the way in which you deliver dentistry's message, determine how you are received as a professional. If you believe you are the best, you will attract the patient base you seek, and trust will be present from the moment the patient enters your office. ■

Contact Dr. Machnowski at tommachnowski@msn.com.

OPENING SESSION GALA

SECOND CITY KEEPS THEM LAUGHING

Thursday, February 22, 2007, McCormick Place Vista Ballroom and Foyer (S406)

Reception: 4:30 – 5:30 p.m.

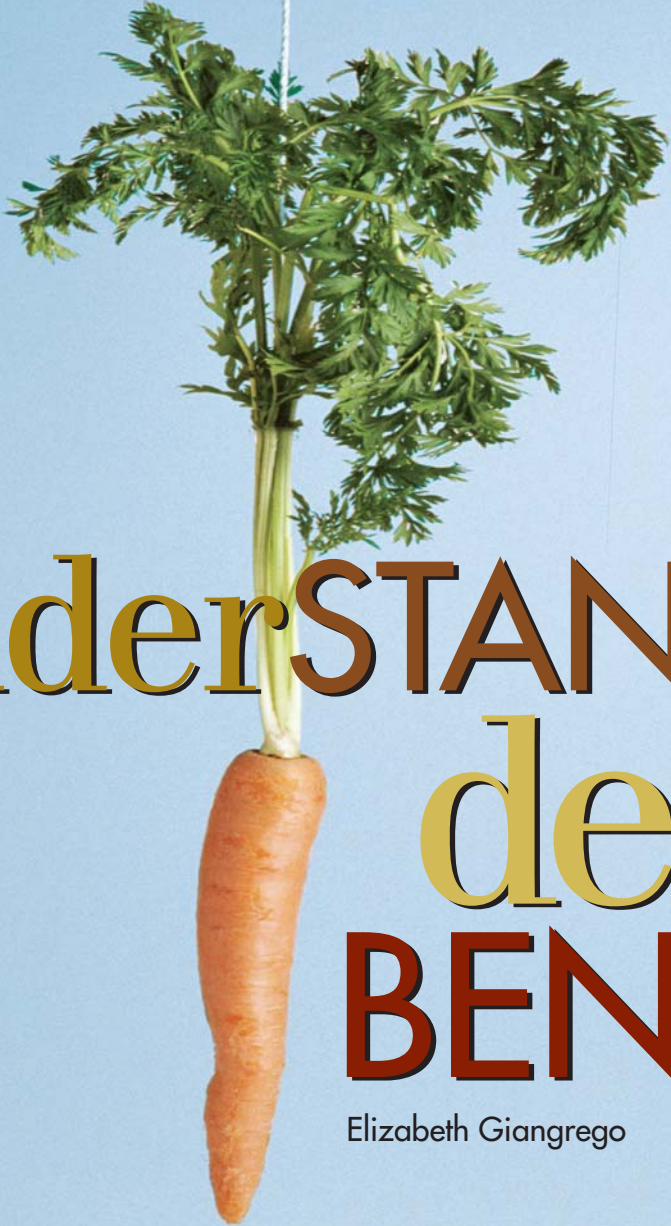
Program: 5:30 – 7 p.m.: Opening remarks, award presentations, Entertainment, closing remarks

\$10 PER TICKET, 1 ticket per registrant (required for entry). Event number: SE1

Improvisation theater started right here in Chicago in 1955 when Paul Sills recruited University of Chicago students such as Mike Nichols and Barbara Harris and campus hangers on such as Elaine May to form what became Second City. Later it provided a stage for Bill Murray, Mike Myers, Chris Farley, Stephen Colbert and other future stars. Audience suggested scenarios were used as a basis for comedic skits. The venture was instantly successful and Chicago became the birthplace of a new art form: improvisational theater. Although the format remains consistent, the style of comedy changes with the times. However, Second City keeps them laughing. And you can laugh with them at the Opening Session when Second City performs for you.

You can order Opening Session tickets online at www.cds.org or by completing the pre-registration form in this booklet. Subject to availability, tickets may also be purchased onsite Thursday morning at McCormick Place at the Special Events ticket counter in the Registration Area, Hall E1. Ticket must be presented for entry. Shuttle busses to CDS Room Block hotels will be available until 7:30 p.m.

This event is supported in part by the ADA Foundation.

A photograph of a fresh carrot with its green leafy top, hanging from a thin white string that is attached to a dark, curved branch or wire at the top of the frame. The background is a clear, light blue sky.

PATIENTS SEE THEM AS AN INCENTIVE TO SEEK DENTAL CARE. SOME DENTISTS VIEW THEM AS AN INTRUSION INTO THE DOCTOR-PATIENT RELATIONSHIP.

underSTANDING dental BENEFITS

Elizabeth Giangreggo

The benefits package is one way an employer keeps great employees. And of all the benefits offered employees, healthcare is primary.

Basic benefits include payment of state and federal unemployment taxes, contribution to the state's short-term disability program, and compliance with the Federal Family and Medical Leave Act.

Employers are not required to provide retirement plans; health plans (except in Hawaii); dental or vision

plans; life insurance; or paid vacation, holidays or sick leave. They do so as a way to recruit and retain quality employees. But as the cost of healthcare premiums increase, employers are choosing to share the cost of premiums or to eliminate latecomers to the benefit menu: dental and vision care plans.

For those dentists who believe that dental benefit plans damage the doctor-patient relationship, the demise of dental benefit plans cannot come fast enough. But for the public—an increasing portion of which relies on employee benefits—the loss or reduction of such coverage is catastrophic.

Dentists and patients need not be on either side of the dental benefit fence. There is a way in which good dental care and dental benefit plans can coexist, and communication is the linchpin that holds the entire relationship in place.

Some dentists have chosen to practice without accepting dental benefit plans, others will complete the patient's claim but require full payment from the patient, and still others will file the claim for the patient and wait for the reimbursement check. However you choose to do business, it's important that you communicate clearly with your patient.

Although you are not the plan's administrator, you should be familiar with the services covered. It's much easier if you explain upfront that the procedure you recommend may not be covered by the patient's dental benefit plan, but that it doesn't mean the service is unwarranted or unnecessary. It's better that the patient hears it from you, rather than from the plan administrator, because you can discuss why the procedure is important to the patient's overall health. Remember, the plan administrator is not a dentist and may not be knowledgeable about treatment plans. You are the dentist and your recommendations come from a sound clinical basis.

Obviously, some treatment plans are more expensive than others. You can help your patients pay for their treatment by accepting credit cards or by offering some structured payment program. If you're going to offer the latter, be prepared to monitor it closely so that patients don't get the idea that missing one month's payment is acceptable or has no consequences. The onus of creating and implementing a payment program might be beyond the capabilities of smaller practices. Accepting one or more major credit cards might be the simplest solution. You want patients to believe that you have their best interest at heart rather than your bottom line, but you don't want them to take advantage of your good nature. Working out the best solution for your office may require a meeting with your accountant, attorney and clerical staff. However, there is a way to make it possible for even patients on fixed incomes to afford expensive restorative care.

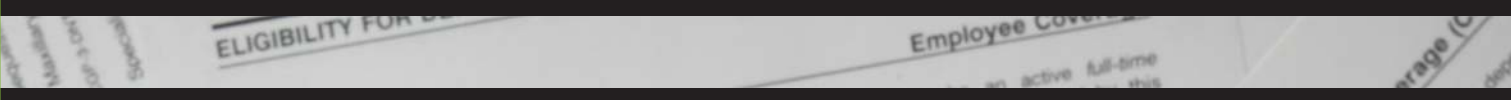
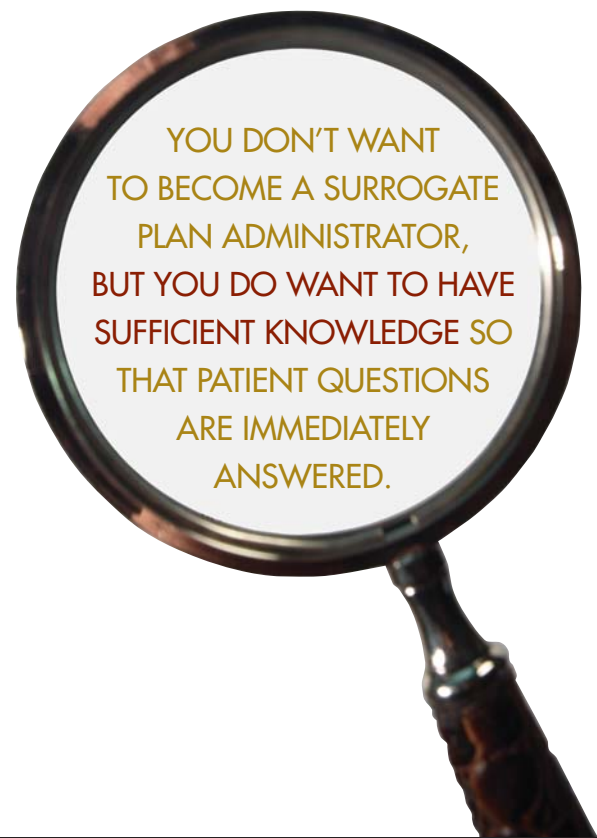
Although most plans have jettisoned the troublesome "usually and customary fee" from their lexicon, they still use a formula to determine their reimbursement for cer-

tain procedures. A patient brochure that explains your fees and that most dental benefit plans have some limitations will help you avoid unpleasant confrontations and the sticker shock some patients exhibit when shown the bill.

Don't assume that your patients understand what their plans cover. Most people don't read their benefit books and those who do are usually concerned with one specific area of interest. When presenting your recommendations, you might note what the patient's plan covers and how much the patient will pay out of pocket. Make that estimate realistic.

Patients should have a good idea how much treatment will cost before the work begins.

Your estimate doesn't have to be exact but it should be close. Those dentists who are hesitant to talk money with their patients should hire a financial coordinator who is responsible for all billing and collection matters. That person should have the authority to approve financial agreements on the spot, rather than have the patient wait until the doctor decides the issue. If the doctor is the one making the decision, maybe the doctor is the one with whom the patient should meet. Making the financial discussion painless with an understanding and competent financial manager goes a long way to assuage patient con-



cerns about your fees.

All patients should receive written estimates that include how much the insurance company will pay to cover the treatment and how much you expect to receive from the patient. It may take a little extra time, but be certain that the patient's benefit plan will cover the procedure and how much you will be reimbursed before you begin treatment.

When you bill the patient be sure to use the proper treatment code; improper coding is the main reason claims are kicked back to the dentist. Make certain that your staff is familiar with current codes. These codes should be part of the patient record. Legally, you may bill only for services rendered. Don't be tempted to use a code for a service you do not provide just because you know the plan will pay for it.

Make it clear in the estimate, during the consultation and on the bill that the patient is responsible for payment in full with or without insurance coverage.

Money may not be the root of all evil, but it certainly is at the bottom of a great deal of litigation. An argument that begins over a bill sometimes escalates and you find yourself explaining your treatment before the dental board, or worse, in a courtroom. So, be clear up front, put it in writing and have the patient sign an agreement along with the informed consent. Patients are less likely to dispute a bill when they know what you expect from them.

Again, you don't want to become a surrogate plan administrator, but you do want to have sufficient knowledge so that patient questions are immediately answered.

Most patients choose a healthcare provider for a variety of reasons that have nothing to do with benefit coverage. Even patients in a closed network have choices and, like all patients, choose a dentist by reputation, convenience, friendly staff and their rapport with the dentist. Patients who trust you do not automatically assume that your fees are any higher than they should be, but taking the time to discuss the cost of treatment—even with patients of record—increases their sense that you are an honest businessperson.

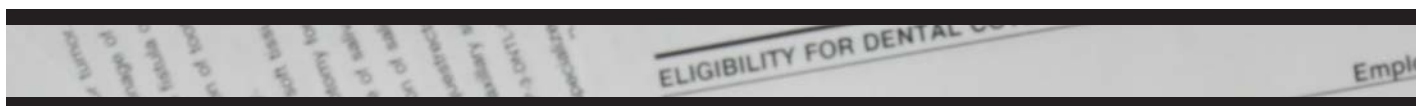
New patients sometimes present different challenges. But basic information to all patients about any treatment plan should include the benefits and risks of the proposed procedure, alternatives and costs. Sometimes this means dissuading a patient who asks for a procedure that he does not need or for which a less expensive alternative exists. Your patients will thank you for your honesty and will trust your recommendations and opinions in the future.

Dentists who believe that patients refuse treatment which is not covered by benefit plans may not be using simple communication skills when discussing recommendations with patients. In the end, the benefit plan administrator doesn't determine what treatment the dentist will provide. Rather, the patient makes these decisions, and well-informed patients who are comfortable with and trust their practitioners rarely refuse needed treatment simply because of cost. Remember, the patient may be as shy about discussing treatment cost as you are, but neither of you expects gratis treatment. Being open and honest about cost and possible reimbursement will move the discussion to a happy conclusion for both.

For the moment, dental benefit plans are used by many millions of people in the United States. Like it or not, statistics show that people who would not normally visit a dentist for regular prophylactic care do so because such treatment is paid for by their benefit plan. Some dentists deal with insurance programs by not dealing with them and making the patient responsible for the reimbursement process. Others are more willing to wait for reimbursement. But until such plans become too cost prohibitive to offer, dental plans are here to stay.

Ultimately, your patients want to believe that their best interest and welfare is uppermost in your mind. If you dwell on the shortcomings of their dental benefit plan and complain about the poor rate of reimbursement, you are telling your patients that the bottom line is more important than their health. If this happens, don't be surprised when patients balk at paying for treatment not fully covered by their plans. Patients who trust you will trust that your recommendations are in their best interest. In the end, patients who trust their dentists will trust treatment recommendations regardless of what a dental benefit plan will cover. ■

Ms. Giangregio is managing editor for the *CDS Review*.





CHICAGO DENTAL SOCIETY'S
**Fashion Show
& Luncheon**

FRIDAY, FEBRUARY 23, 2007

Fairmont Hotel International Ballroom
200 N. Columbus Dr., Chicago

11:30 a.m.-2:30 p.m.

11:30 a.m. cash bar reception. Doors open at noon.
\$50 per ticket, tables of 10 available

Event Number: SE2

Inclusive of entertainment, lunch

ZZAZZ Productions will present beautiful fashions from a variety of Chicago's outstanding stores, following lunch at the elegant International Ballroom of the Fairmont Hotel. You will be entertained by the creative presentation of selections from an eclectic sample of designers. Pre-register online at www.cds.org or use the registration form in this booklet. Tickets will also be available on-site Thursday morning at McCormick Place at the Special Events ticket counter in the Registration Area, Hall E1.

Spooky Zoo

WITH A MOUTH FULL OF CANDY, NO ONE CAN HEAR YOU SCREAM



Photography by
Andrew Campbell





Students from the University of Illinois at Chicago College of Dentistry and local hygiene programs spent a windy Saturday distributing toothbrushes and toothpaste at Lincoln Park Zoo's Spooky Zoo Spectacular October 28. This is the 10th year that the Chicago Dental Society has teamed up with Crest to sponsor a booth at the Halloween-themed event.

Lincoln Park Zoo invites thousands of Chicago's children to trick-or-treat among the animals. Mascots representing the zoo and the event's sponsors paraded through the park, offering warm greetings to eager trick-or-treaters. Our very own Flossie the Beaver marched with Crest's mascot, Sparkle.

With support from Crest and our volunteers, 3,000 children received oral hygiene products that day. Many thanks to the volunteers who made the day a success. ■



What happened in Vegas

HOUSE PRETTY MUCH UNITED AT 147th ADA ANNUAL SESSION

Will Conkis

Not too surprisingly, politics inside the 2006 House of Delegates and outside of it dominated the four sessions in Las Vegas during the American Dental Association's Annual Session.

Health and Housing Secretary Michael Leavitt addressed the delegates, stressing healthcare costs and the need to involve health professionals in developing the National Health Information Infrastructure. A representative of the Alaska tribal leadership told the delegates there is a willingness to work with ADA on oral health care in the remote areas.

"The issue that caused the most frustration for our membership, leadership and staff was access to oral health care in remote Alaskan villages. It is fair to say that no other issue has received as much time and attention from the ADA over the past three years," outgoing ADA President Bob Brandjord said in a speech to the House.

ADA leadership characterized the sessions of the House as important, and praised House delegates for making strides in many areas with significant resolutions that affect ADA policy. Certainly the number of issues fac-



(L-R) ADA Executive Director James Bramson stands with incoming ADA President Kathleen Roth and ADA President-elect Mark Feldman at the ADA installation. Dr. Roth is only the second woman elected president to the ADA.

Photo by Lagutiappe Studio, courtesy ADA News. © 2006 American Dental Association

ing the profession is many and important, and so are the resolutions passed by the House to address them.

Yet, despite the number of resolutions presented, the issues did not, for the most part, create a House divided. In fact, the House was remarkably light on vigorous debate. Issues such as dues increases, access to oral health

care for the tribes in remote parts of Alaska, and problems of under-service in other states did not trigger the confrontations and counter resolutions that they precipitated in previous Houses.

Was it a House united? Certainly, it was a House with a majority of delegates obviously on the same page regarding what might be called “hot button” issues.

While the ADA and the House remains steadfastly against non-dentists performing irreversible procedures and will continue to advocate for the profession, the House rejected Resolution 46RC that would have continued the Alaska Task Force. In an electronic vote, 54 percent of the delegates said no to continuing the Task Force, which ADA Executive Director James Bramson at one point characterized as finishing its work. Reports of various Reference Committees supported what Bramson said, noting that a number of initiatives have come forth from the ADA to address the issue.

Shortly after that, the House majority slammed the door on Resolution 47, calling for an independent review of the Alaska Dental Health Aide Therapist (DHAT) issue. The Legal and Legislative Matters Reference Committee agreed with the Board of Trustees that the resolution from the 14th District would be “counter-productive” because of the ADA initiatives regarding Alaska. Other observers said the proposed “review” could end up a finger-pointing device for disenchanted members that feel the ADA could have done more to stop DHATs. Another 14th District resolution calling for the ADA to continue to devote legal and lobbying resources to oppose non-dentists doing irreversible procedures was ruled out of order by the House Speaker, as it is already ADA policy to do what the resolution called for. Debate on each resolution was brief and mild.

Dr. Manning installed as ADA trustee

Dennis E. Manning, DDS, a general dentist who practices in Libertyville, was installed as a trustee of the American Dental Association during the Annual Session in Las Vegas in October. His installation took place during a meeting of the ADA House of Delegates.

Dr. Manning will represent the 8th District (Illinois) on the ADA Board. Trustees support the ADA’s overall objective of protecting and improving the public’s oral health and promoting advances in dentistry. The ADA Board formulates and reviews policies and programs and makes recommendations to the 464 members of the ADA’s governing body, the House of Delegates.

Dr. Manning’s previous responsibilities with the ADA include serving on the Board as first vice president. He was also the Board liaison to the Commission on Relief Fund Activities and the Endowment Fund.

He has served as a member of the Executive Council of the Illinois State Dental Society and is a past president of the Chicago Dental Society and the Odontographic Society of Chicago. In addition, he is a fellow of the American and International Colleges of Dentists and the Pierre Fauchard Academy, an international honorary organization for dentists. He received his dental degree from the Loyola University School of Dentistry.

Dr. Manning served on active duty for four years in the United States Navy Dental Corps, followed by a distinguished Naval Reserve career. He is a past president of the Lake County (Illinois) Board of Health and a member of the Lake County Board of Health Dental Advisory Committee.

Dr. Manning lives in Ivanhoe with his wife, Linda. They have seven children.

OTHER ADA ELECTIONS

During the session, Mark J. Feldman, of New York, was elected president-elect for the ADA. No other names were put in nomination for the post. Dr. Feldman has served as ADA treasurer since being elected to the office in 2000. He is a past president of the New York State Dental Association.

Dr. Feldman’s replacement as treasurer is Edward Leone Jr., a general dentist from Colorado. He won the office in a three-way race after the first vote lead to a run-off election. The ADA does not make vote totals public. Dr. Leone is a registered financial consultant and served the ADA as a trustee from the 14th District. He is also a past treasurer and past president of the Colorado Dental Association.

In a second contested election, Jane Grover, of Michigan, was elected second vice president of the ADA. She served 13 years in the House of Delegates. Dr. Grover also served as a trustee of the Michigan Dental Association.



Photo by John McNulty

THE HOUSE APPROVED
A RESOLUTION
CALLING FOR THE ADA
TO USE RESOURCES TO
ENCOURAGE RECENT
GRADUATES AND RETIRED
DENTISTS TO VOLUNTEER
TO WORK IN REMOTE
AMERICAN
INDIAN/ALASKA NATIVE
COMMUNITIES AND
PROVIDE INCENTIVES
FOR VOLUNTEERS.

Apparently preferring to be proactive regarding Alaska and other underserved areas, the House approved a resolution calling for the ADA to use resources to encourage recent graduates and retired dentists to volunteer to work in remote American Indian/Alaska native communities and provide incentives for volunteers. It also approved without debate the ADA providing up to

\$200,000 annually to cover travel expenses of the volunteers. The House also supported without debate that the ADA determine the feasibility of a demonstration project in remote tribal areas to investigate the effects of preventive oral health interventions among populations at high risk for oral diseases. Despite the end of the Alaska Task Force and the proactive actions of the House regarding Alaska, it is more than likely future Houses will be discussing Alaska and access to care again.

Continuing to be proactive, the House adopted a resolution based on the report of the Workforce Models Task Force. Reso-

lution 3RC, influenced by an 8th District substitute resolution, calls for expanded duties for allied dental team personnel and pilot projects in selected states to test the concept of an addition to the private practice team. The Oral Preventive Assistant, as envisioned by the Task Force, would take on routine oral health services for

patients not requiring more intensive attention, thus expanding access to care through delegation. A five-member work group will develop the pilot projects. This is not a national mandate from ADA. Eventually each state would decide if the model is applicable to them.

The dental team was involved in another resolution, again shaped in part by an 8th District substitution, which had the potential for heated debate. The Council on Membership presented a resolution that would have expanded membership to non-dentist members of the dental team. The non-dentists would have enjoyed benefits but without representation in the House or on Councils. But the debate that was shaping up to be one about the ADA becoming a trade association—as opposed to a professional association—was deferred for at least one year; the issue was referred back to the appropriate councils for more study.

In addition to affecting other resolutions, the 8th District was reflective of the proactive mood of the House by sponsoring two resolutions that received wide support. One resolution clarified bylaw language to clearly define two-thirds majority for resolutions requiring more than a simple majority to be adopted, such as due increases. It was adopted without debate. The other resolution, easily adopted, creates a formal liaison relationship between the councils and the Council on Communications through 2008 to “pilot the enhanced exchange of information on external image and brand implications of their decisions.” And yes, it passed without debate. ■

Will Conkis is the CDS director of publications.

ADA dues increases pass with barely a whimper

What usually produces some of the more vociferous debates in the ADA House of Delegates brought a whimper of protest.

After rejecting dues increases for four years, the House granted the Board of Trustees its request for an increase. Dues will jump in 2007 from \$435 to \$489, a \$54 increase, which president-elect and outgoing treasurer Mark Feldman described as necessary for “dues stability” and to maintain target reserves of at least 40 percent of the 2007 Operating Budget. That budget, 4 percent higher than last year, came in at more than \$106 million.

The board also moved \$2 million from cash reserves into the budget to balance it, as is required by the ADA bylaws.

Only one effort was made to keep the dues rate lower. A resolution proposing dues at the level of \$465—the current level with a \$30 special assessment that ends this year—failed to garner the two-thirds majority vote required for passage. The \$54 increase passed by a vote of 70 percent to 30 percent.

Dues for the Chicago Dental Society have been reduced twice in the last two years. Current CDS dues are \$125.

THE President's Dinner Dance

HONORING
Dr. and Mrs. John F. Fredricksen

FEATURING THE STEVE EDWARDS ORCHESTRA

Saturday, February 24, 2007
Fairmont Hotel Imperial Ballroom

Reception: 6:30- 7:30 p.m.
Dinner Seating: 7:30 p.m.

Black Tie Optional

Tickets: \$75 per person. Tables of 10 available.
Event Number: SE4

Purchase tickets online at www.cds.org or use the registration form in this issue. Tickets may also be purchased on-site Thursday morning at McCormick Place at the Special Events ticket counter in the Registration Area, Hall E1.



Downstate business

HOUSE INCREASES DUES, INSTALLS NEW OFFICERS AT ISDS ANNUAL SESSION

Walter F. Lamacki, DDS

A \$10 dues increase and the installation of officers highlighted the Illinois State Dental Society's 142nd annual meeting, this year held Sept. 15-17 in Bloomington.

The ISDS House of Delegates passed the \$140,220 deficit budget, adopting a \$10 dues increase instead of the \$20 recommended by the Board of Trustees.

In other action, the house adopted a resolution allowing a one-third vote to call for the written ballot rather than a simple majority, and added five delegates to the Chicago delegation.

The keynote speaker, Mary Kay Slowikowski, offered strategies to manage Murphy's Law. Chief among them was "redefine perfect performance."

ISDS honored Chauncey Cross, of Springfield, for 35 years of service as Legislative Chairman by naming him the honorary president. Dr. Cross is only the second member to receive this well-deserved award.

CDS member George Lingen Jr., of Oak Lawn, was honored for his 10 years as ISDS speaker of the House. He presided over many contentious debates that were resolved amicably due to his leadership.

New officers installed by the house included Dean Nicholas, Woodridge, president; Keith Dickey, Edwardsville, president-elect; Joseph Unger, Downers Grove, vice president; Larry Osborne, Decatur, secretary; Darryll Beard, Waterloo, treasurer; Paul Kattner, Waukegan, speaker of the House; and Edward Segal, Buffalo Grove, vice speaker.

Dr. Nicholas expounded upon his theme, "A Field of



Photo courtesy of the Illinois State Dental Society

Newly inaugurated ISDS President Dean Nicholas (center) announced his theme for the year—Field of Dreams: A Dental Legacy. He is pictured (L-R) with Vice President Joseph Unger, President-elect Keith Dickey, Secretary Larry Osborne and newly-elected Treasurer Darryll Beard.

Dreams: A Dental Legacy," in his humorous yet poignant presidential acceptance speech. During the speech, Dr. Nicholas skillfully intertwined personal reminiscences of baseball, parents, family and friends, and the role of unity in his life.

Outgoing ISDS President Joseph Hagenbruch addressed the House and asked ISDS members to care for the needy in keeping with his theme, "Dentistry—A Ministry."

Among the delightful social events was the buffet under the stars, co-hosted by ISDS and the Alliance of the Illinois State Dental Society. Dinner in the beautiful gardens of Ewing Manor was followed by entertainment provided by actor and comedian Philip Earl Johnson as MooNIE. He has appeared on stage, in film and on Comedy Central and FOX TV's *30 Seconds to Fame*.

Finally, ISDS members provided the entertainment for the President's Reception and Dinner Dance. Rex Moore thrilled the reception crowd with his beautiful harp music, and Class Act, led by Richard June, provided the post-dinner dance music. ■

Dr. Lamacki is editor of the *CDS Review*.

MWM EXCLUSIVE **NOT TO BE MISSED!**



A VERY SPECIAL FRIDAY NIGHT WITH THE

BoDeans

PARK WEST, 322 W. Armitage, Chicago

Friday, February 23, 2007

Doors open at 8 p.m. Performance starts at 9 p.m.

\$35 per registrant; ticket required for entry | Event: SE3

Sammy Llanas and Kurt Neumann played together in high school before forming The BoDeans in Waukesha, Wis. Not long after band formed, it released its first album, the critically recognized, *Love & Hope & Sex & Dreams* in 1986. One year later, they released *Outside Looking In*, which broke into the Top 100 sellers as the band toured with U2; that year they were named "Best New Band" by Rolling Stone Magazine that same year. Now you can see the BoDeans perform live at the Park West exclusively for MWM registrants.

Pre-register online at www.cds.org or use the registration form in this booklet. Subject to availability, a limited number of tickets may be available on-site Thursday morning at McCormick Place at Special Events ticket counter in the Registration Area, Hall E1.



Read Mary Byers' online column, The Front Desk, in the Members Only section of the CDS Web site—www.cds.org.

Are dental services coming to a franchise near you?

Is it possible that Chicagoans could be purchasing their dental services from a franchise some day?

If Vital Dent, a dental franchiser based in Las Rozas de Madrid, Spain, has its way, it's entirely possible. The company is now accepting franchisee applications in New York, Florida, Massachusetts and New Jersey. Though only three Vital Dent offices are currently operating in the United States (two in New York City and one in Queens), another seven are under construction in Florida and Massachusetts; the company hopes to expand the U.S. franchise base to 40 offices by the end of this year.

According to *www.franchise-times.com*, Vital Dent offers franchisees a fully constructed office with state-of-the-art equipment; turn-key projects; fully trained staff; franchisee training; and marketing strategy assistance and advertising.

Franchisees do not have to be dentists, however, they do have to contract with a dentist or dental group to provide services. The initial investment is listed at \$600,000.

How would your practice change if a franchised dental office opened across the street from you? It's a fair question to ask. According to an article in *Time*, "Vital Dent plans to draw traffic by offering new patients free cleaning, X-rays and dental exams. Then, it hopes they will return for higher-margin procedures such as dental implants and orthodontics. The stores have longer hours than traditional dentists' offices and are open even on the weekend. They also offer patient financing and payment plans."

The article also stated that, "Vital Dent's founder, Ernesto Colman Mena, believes he will get people in the door by emphasizing convenience, reasonable prices and new technology, including the latest in dental implants. 'That's what works in Spain,' Colman says. . . ."

Years ago I watched a local video store slowly fold when a Family Video moved in across the street. The local store had nearly a year's notice—but didn't change

one operating policy during that time. The local store could have initiated a "Frequent Renter" program to encourage loyalty. They could have started a video delivery service, increased the number of new releases in its inventory, or begun accepting reservations for movies. By doing nothing, however, the store sealed its fate.

Though it's not likely to happen any time soon—or maybe not at all—the possibility of a Vital Dent clinic (or a dental spa or any other type of competitor) moving in across the street from your practice presents an opportunity for you and your staff to be proactive in reviewing your current operations now. Specifically, take time to consider:

- **Your pricing.** You need to make a sufficient profit, but you don't want to price yourself out of the market.
- **Current financing options, if you offer them.** And if you don't, consider doing so.
- **Hours of operation.** Do you currently offer enough weekend and evening hours to accommodate patients or do you need to adjust your hours?
- **Waiting time.** Are you tracking how long patients have to wait, on average, once they arrive at your office? Patients are becoming less tolerant of overbooking and practices that regularly run behind schedule.
- **Appointment lead time.** If I call to make an appointment with you today, how many weeks, or months, will I have to wait to get in? Once patients call, they are impatient when it comes to how long they have to wait to see you. If your lead time is currently too long, don't accept any additional patients in your practice until you can get your lead time under control.)

As you consider the above list, there may be other issues you need to rethink in your practice. The important thing is to be proactive about keeping your business viable. That way, if Vital Dent does move into your neighborhood, you won't have to react because you've already acted—well before it's even necessary. ■

Mary M. Byers, CAE, is a professional speaker and freelance writer.

Send suggestions for topics to be covered, or any comments on this column to review@cds.org. Ms. Byers may also be reached directly at mbyers@marybyers.com or www.marybyers.com.

THE IMPORTANT THING IS TO BE PROACTIVE ABOUT KEEPING YOUR BUSINESS VIABLE.



Using a good financial advisor is good business

If a dentist wants to be successful, working with a good financial advisor is an absolute requirement. Success needs to be both qualitative and quantitative. A good financial planner can help a dentist get what he needs, not just what he wants. All facets of finance and financial planning—not only for the practice, but personal, as well—should be in the realm of the financial advisor. The major areas the planner should cover are:

- Practice organization and management
- Practice transition: associates, partnerships and purchases/sales
- Retirement planning
- Estate planning
- Home, auto, vacation home and all major investments
- Insurance evaluation: maximize benefit and coverage for the lowest cost and cash flow
- Encouragement-permission-provocation
- Saying yes or no

A good financial counselor needs to be process oriented rather than product oriented. The product oriented include people who sell the dentist equipment and supplies. Most CPAs—who produce monthly accounting statements and annual tax returns—as well as insurance agents and investment brokers, are product oriented. Some lawyers and CPAs can provide both a product and a service. However, their expertise is not based entirely on the doctor's financial needs. The CPA and lawyer are often called after the fact. A good financial advisor typically gets a much broader view of the whole picture.

Finding the right financial planner for the specific dentist is of paramount importance. Some financial advisors are qualified, sincere, objective advisers. Some are not. Some services have real value, some are self-serving and a few can actually be harmful to your financial health.

One needs to first look at the planning package and then at the advisor. For example, if there is no package (the planner works from a scratch pad), forget that planner. A good package often (but not always) indicates a conscientious planner and creates a framework to help one make a better financial choices. However, be careful. It is quite possible to have a good package exploited by an unscrupulous or incompetent planner. Any financial advisor seriously interested in doing a professional job will use a comprehensive diagnostic pack-

age. This must be a diagnostic package, not a sales package. One usually can tell the difference by using four basic criteria:

- It should be fee oriented, not commission oriented.
- It should be straightforward, understandable and conservative.
- It should be logical, flexible and make good sense.
- It should analyze and explain your needs, and suggest the integration of format and structure, but avoid a sales orientation.

The following is a list of considerations to keep in mind when shopping for a planner:

- Be particularly alert for any attempt to shortcut the diagnostic step and get you to commit to a course of action before you get the complete package.
- A professional planner will help you understand your own situation and lead you to your own conclusions. If you feel that you are being pushed, have trouble making sense out of the plan, or that the planner spends all his time selling himself, you are probably dealing with a product salesman using financial planning as a marketing device.
- Basic financial planning is a client-oriented, low-overhead operation. Plush offices and surroundings, large administrative staffs and slick marketing brochures are impressive but probably unnecessary.
- A clear statement of what must be done to complete your plan should be provided.
- Ask for three or four long-term relationship references, and ask for a reference from a relationship which did not work out well. It is of great value to know how a potential advisor handles failure, not to mention how he or she handles the request.

Once you have determined that a comprehensive, formal diagnostic package is being used solely for your interest and not the planner's, and you are comfortable with the planner, then you are ready to proceed. If you have the slightest trepidation, a new planner and package are required.

A good financial advisor is a dream catcher. The right advisor can help the dentist catch his or her dreams and make them a reality. ■

Dr. Greene is a board-certified oral and maxillofacial surgeon. He may be reached at (773)327-2400 and www.lpinstitute.com

ABSTRACTS

A SUMMARY OF CLINICAL ARTICLES FROM OTHER JOURNALS

PHYSICAL LIMITATIONS LINKED TO INCOME

Low-income Americans ages 55-84 are far more likely than their wealthier peers to feel limited in doing basic physical activities such as climbing stairs and lifting objects, according to a new study.

The research, published in the August 17 issue of *The New England Journal of Medicine* shows, for example, that people ages 55-64 who are living below the poverty line are six times more likely than the wealthiest group to say they have functional limitations.

The study was conducted by the National Institute on Aging (NIA), part of the National Institutes of Health, in collaboration with the University of California, Berkeley, and the University of Toronto.

The researchers report that those living below the poverty line are the most likely to say they have functional limitations; up to age 84, the odds of having such limitations drop with each incremental increase in income. They also note that older people are less likely to report functional limitations with each increase in educational level, a measure that is closely tied to income.

"We found that a 'gradient of disability' exists across the full socioeconomic spectrum, as functional limitations proved inversely related to household income," says senior author Jack M. Guralnik, MD, PhD, chief of the NIA's Laboratory of Epidemiology, Demography and Biometry.



Improved understanding of the relationship between socioeconomic status and disability is critical as the American population ages, Dr. Guralnik notes. The rate of disability decreased 1-2 percent annually during the 1980s and 1990s, when trends were last reported; the rate of decline was smaller among those in the poorest socioeconomic groups.

Dr. Guralnik and co-authors Meredith Minkler, DPH, University of California, Berkeley, and Esme Fuller-Thomson, PhD, University of

Toronto, analyzed data for more than 335,000 community-dwelling people 55 and older who participated in the Census 2000 Supplementary Survey.

Nearly one in four respondents reported having a functional limitation, defined as a long-lasting condition that substantially limits one or more basic physical activities, such as walking, climbing stairs, reaching, lifting or carrying.

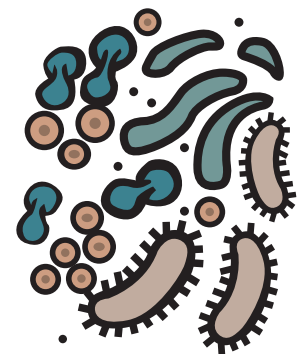
Functional limitation differences by income level were evident among those 55-64 years, 65-74 years, and 75-84

years, but differed more dramatically in the younger age groups. All respondents younger than 85, even those whose incomes were at six times the poverty threshold, had significantly higher odds of reporting functional limitations compared with the wealthiest group.

The poverty threshold in 2000, the year the data were collected, was \$8,259 for a person 65 or older who lived alone and \$17,761 for a four-person household. The highest income category used in the analysis—700 percent or more of the poverty line—began at \$57,813 for an older adult living alone and \$124,327 for a four-person household.

REGULATOR OF FUNGAL BIOFILM IDENTIFIED

Like all biomaterials, the plastic tubes, or catheters, that are inserted into those who are sick or frail can become colonized over time by microbes. When the colonizers are single celled fungi of the genus *Candida*, healthcare workers waste no time in replacing the catheter. And with good reason. *Candida* biofilms, the tightly packed fun-



gal communities that adhere to the tubes, are extremely resistant to antifungal agents and can lead to infections that are expensive to treat and potentially deadly.

Replacing a tainted catheter, however, may not be easy for all people, especially those with blood clotting problems or a limited number of accessible veins. Thus, there is a great need for approaches that eliminate *Candida* while the catheter remains attached to the body.

In the July issue of *Infection and Immunity*, National Institute of Dental and Craniofacial Research grantees and colleagues report an enzyme produced by the species *Candida albicans*, one of the main fungal pathogens in people, might be the answer to controlling its biofilm.

The scientists demonstrated that the enzyme, called alcohol dehydrogenase, naturally restricts the ability of *C. albicans* to form thick, mature biofilms.

Because the enzyme is known biologically to catalyze the production of ethanol, the group followed up in animal studies and showed that ethanol greatly inhibited *C. albicans* biofilm formation on indwelling catheters. Interestingly, ethanol had no inhibitory effect on the biofilms of two commonly studied bacteria.

According to the authors, their data marks the first report of a specific regulator of a fungal biofilm and may point to novel treatment strategies for fungal infections.



CANCER DRUG MAY CAUSE JAWBONE TO DIE

Breast cancer patients, individuals at risk for osteoporosis, and individuals undergoing certain types of bone cancer therapies often take drugs that contain bisphosphonates. Bisphosphonates may place patients at risk for developing osteonecrosis of the jaws (a rotting of the jaw bones), according to a case report and literature review that appeared in the May/June issue of *General Dentistry*, the Academy of General Dentistry's clinical, peer-reviewed journal.

Bisphosphonates are a family of drugs used to prevent and treat osteoporosis, multiple myeloma, Paget's disease (bone cancers) and bone metastasis from other cancers. These drugs can bond to bone surfaces and prevent osteoclasts (cells that breakdown bone) from doing their job.

"Healthy bones constantly rebuild themselves," explains co-author of the report Sally-Jo Placa, DMD, MPA. "However, since the jawbones have rapid cell turnover, they can fail to heal properly in patients taking any of the bisphosphonate drugs. Patients need to be aware of the possibility of complications from dental surgery or extractions." Since these drugs linger in the bone indefi-

nitely, they may upset the cell balance in how the jaws regenerate and remove unhealthy bone.

In their report, the authors refer to the case of a woman who received bisphosphonate therapy intravenously to treat metastatic breast cancer. She then developed osteonecrosis in her upper and lower jaws following tooth removal.

"This type of osteonecrosis has been occurring since the advent of these drugs," explains co-author Wellington S. Tsai, DMD. "At this time osteonecrosis as a result of bisphosphonate therapy has no treatment."

Patients who are taking bisphosphonates should inform their dentists to prevent complications from dental surgical procedures. "By informing your dentist that you are taking a bisphosphonate, different avenues for treatment can be explored," says the report's third co-author Kayvon Haghghi, DDS, MD.

"It is strongly recommended that patients scheduled to receive bisphosphonate therapy should visit a dentist or an oral surgeon so problematic teeth can be treated prior to the start of therapy," the authors state.

"Widespread use of bisphosphonates to prevent or treat

early osteoporosis in relatively young women and the likelihood of long-term use is a cause for concern," says Dr. Placa. "How bisphosphonates interfere with healing after dental surgery is still unclear and further research will be needed. It is imperative that the public understands there is no present treatment or cure for this problem." ■

YOUR HEALTH

A SUMMARY OF NEW HEALTH-RELATED INFORMATION

The winter diet dilemma

IS WHAT YOU DRINK RUINING YOUR DIET?

Think you have your diet under control? You may be gulping down hundreds of unwanted calories without even knowing it. More than 20 percent of our daily calories typically come from the beverages we drink. That number should be closer to 10 percent.

If you're trying to lose weight, the solution may not be in what you eat, but what you drink, according to Susan Aaronson, MS, RD, wellness coordinator for the M-Fit Health Promotion Division at the University of Michigan Health System.

Drink too much soda and you could face a higher risk of a certain kind of cancer that is usually fatal.

"Soda is full of sugar and empty calories, making it a major contributor to the obesity problem in the United States," says Ms. Aaronson. "If you chose to eliminate one can of soda each day, which contains about nine teaspoons of sugar, you can lose about a pound in one month, and over the course of a year, you can lose up to 15 pounds." Since it has no nutritional value, filling up on soda also prevents you from getting calories from sources that do contain essential vitamin and minerals. If you must drink it, choose diet soda.

Are you drinking fruit juice or some beverage labeled "fruit drink"? The difference can mean extra calories and fewer

nutrients. Read the label. "If a juice label says that it's 'made with real fruit juice', it may actually contain less than 10 percent of 'real' juice and about seven teaspoons of sugar," says Aaronson. Look for labels that say "100 percent fruit juice."

Even kids shouldn't get unlimited juice boxes. Each one contains 100 calories. More than anything else, this one thing makes us the fattest.

Choosing low-fat milk can save hundreds of calories each day. Milk also contains vital nutrients like calcium, protein, vitamin D and vitamin A that you won't find in other beverages. Plus, it is recommended that you get three servings of dairy every day. To get the most from your milk, choose 1 percent, 1/2 percent or skim milk. With these options, you will still get all the nutrients your body needs but without the extra calories and fat.

Although sports drinks replenish your body with electrolytes that help you retain water and stay hydrated, they still contain a lot of calories—one-half to one-third the amount of sugar you'll find in soda. "Sports drinks were actually developed for endurance athletes," explains Aaronson. "So if you plan to exercise for more than one continuous hour, then sports drinks are for you." And you won't find a lot of nutritional value in energy drinks, either.

"Energy drinks are not only loaded with calories, but they'll

give you a quick high, followed by an extremely-low low afterward," explains Ms. Aaronson.

Find out the best way to consume sports drinks and energy drinks—or you may risk damaging your teeth.

If you are planning an evening of dinner and drinks, remember that you could have the calorie-equivalent to a whole meal in drinks only, before you've eaten a bite. The average glass of wine has about 100 calories; a 12-ounce beer contains approximately 150 calories. It's not uncommon for a mixed drink to have about 300 calories and the decadent frozen drinks like daiquiris to have 500 or more calories each. Limiting the number and types of drinks you have before eating will make a major difference for your waistline.

Water is the single most important beverage that we can consume. "A person could drink only water and be just fine, as long as he supplements his diet with food sources that contain calcium and other nutrients that one may find in other beverages, such as milk and juice." In general, 80 percent of a person's liquid consumption should come from water, depending on their height, weight and where they live. That means the average adult should drink between four and six cups of water a day, which should be supplemented with milk and 100 percent fruit juice to meet total daily liquid requirements.

DISPEL DIET MYTHS

MYTH: *Cutting carbohydrates helps you lose weight.*

TRUTH: Doing it the wrong way can also make you feel rotten and unhealthy.

Carbs are to this decade what fats were to the last: food demons. Truth is, though, you need them for energy. As with fats, some are better than others. Experts suggest a minimum of 130 grams of carbs a day—a far cry from low-carb diets that start with 20 grams or less. Short-term effects of such diets include fatigue, constipation and irritability; long term, you could be putting yourself at risk for heart disease and colon cancer.

Fad diets aside, what may matter most is how refined the carbohydrates are. The best idea is to cut back on refined carbs such as soda and foods made with white flour, while loading up on healthier carbs like whole grains, fruits and vegetables.

MYTH: *Diet foods help you drop pounds.*

TRUTH: They can actually do the opposite. You may be doing yourself more harm than good by scanning labels for the lowest calorie and fat counts. Prepackaged diet foods can have a lot of sugar and trans fats.

As with carbs, it's the quality of the fat, not the amount, that makes the difference. Monounsaturated fats (found in nuts, olive oil and avocados) and the polyunsaturated variety (in corn,

soybean and safflower oils) help your cardiovascular system, improve weight loss, and are crucial for absorbing beta carotene from vegetables like carrots. Trans fats and saturated fats, on the other hand, have been linked with heart disease and even cancer.

A recent study found that replacing just 30 calories of carbs a day with the same amount of trans fats nearly doubled the risk of heart disease. Replacing the same ratio of carbs with monounsaturated or polyunsaturated fats, on the other hand, lowered the risk of heart disease by 30-40 percent. Consider boosting your good fats by adding nuts to your morning cereal or avocado to your salad. Just watch your daily calories to keep them in check.

MYTH: *The more you cut calories, the more weight you'll lose.*

TRUTH: That can actually hurt you. Cut your calories too far—below 1,200 a day—and you'll end up with a double whammy that quickly decreases your metabolism and muscle mass.

To get the most out of the calories you do eat, choose whole foods such as produce, fresh meat and fish, and whole grains that are as close to their natural state as possible. They have a higher "nutrient density" than refined foods, because they pack more vitamins and minerals into fewer calories.

MYTH: *Dairy makes you fat.*

TRUTH: Cutting dairy just shoots you in the foot (and fat cells). Combined with calorie control, a dairy-rich diet can nearly double body-fat reduction and weight loss and help prevent weight gain. Part of the reason is the hormone calcitriol, which helps conserve calci-

um for stronger bones while telling fat cells to convert less sugar to fat and burn more body fat. The result is leaner fat cells and a leaner you. Stick to the government's latest dietary guidelines, which recommend three servings of low- or nonfat dairy a day.

MYTH: *Brown equals whole-grain.*

TRUTH: There are lots of whole-grain poseurs out there.

Look for labels where "whole-wheat" or "whole-grain" top the list. It's worth the extra effort: More and more research is finding that whole grains reduce your risk of many chronic ailments, from obesity and diabetes to cardiovascular disease. The extra fiber in whole grains is key: It

makes you feel full, which means you eat less. It also helps level out the peaks and valleys of insulin that a meal produces. An added boost, whole-grain foods tend to be higher in vitamins B and E than refined grains. ■

SOURCE: Huber, L. Five diet myths debunked. *Health Magazine*, June 2006

TOP 10 UNUSUAL REASONS WE'RE SO FAT

Comfortable indoor temperatures—icy cool air conditioning in the summer and toasty warm heat in the winter—are making us fat. So is inadequate sleep, prescription medication and not smoking.

Face it, we're fat because we eat too much and exercise too little. But in an attempt to hide the hard truth, an international team of 20 doctors led by a University of Alabama biostatistician has devised a top 10 list of reasons why so many people are obese. Some seem silly, but these researchers insist it's more than supersized french fries that are weighing us down.

By examining more than 100 studies on what is making us all so fat—besides the obvious diet and exercise—they came up with the following top 10 list:



- 1. Inadequate sleep.** Much previous research has shown that sleep deprivation causes us to gain weight.
- 2. Endocrine disruptors.** These are substances in some foods that may alter fats in our bodies.
- 3. Nice temperatures.** The air conditioner and furnace mean we don't burn calories sweating and shivering.
- 4. Fewer people smoke.** While no one is saying you should smoke to lose weight, smoking does suppress the appetite.
- 5. Medicine.** Some prescription medicines may lead to weight gain. Who doesn't have a prescription medication these days?
- 6. Population changes.** In addition to the aging baby boomers, the nation has seen an influx of immigrants, especially Hispanics, who have higher obesity rates.
- 7. Older birth moms.** When older mothers give birth, they tend to have heavier children.
- 8. Genetic influences.** Genetic influences during pregnancy mean fatter babies.
- 9. It's Darwinian!** Fat people survive longer and better than skinny people.
- 10. Assortative mating, or "like mating with like."** This is rude, but it means that fat people marry and procreate with other fat people. Eventually, this skews the population toward being heavier.

Is this list legitimate? At least one expert doubts it. Marion Nestle, a nutrition professor at New York University and frequent food industry critic, called it "calorie distracters." She told AP reporter Marilyn Marchione, "Let's just do anything to get people to stop worrying about having to eat less and move more. And let's not say a word to food companies about misleading and manipulative marketing practices, especially those directed toward children." Ouch. The study findings were published in the *International Journal of Obesity*.

Ted Siegel is a dentist with heart

Joanna Brown

Hard to believe, but the line was longer at Big Smile Dental than at the nearest florist last Valentine's Day.

That's because Ted Siegel, DDS, had assembled a slew of volunteer dentists, hygienists, assistants, dental and hygiene students, and others to provide free care to anyone who came in Feb. 14. By the end of the hectic 16-hour day, Dentists with Heart had provided \$100,000 worth of X-rays, exams, cleanings, fillings, extractions and pain control to 250 patients.

Of course they were exhausted, but everyone agreed before they went home at midnight that they would repeat the program in 2007. Participating dentists included Anu Garg, David Hanson, Gary Hosters, Henry Lotsof and Adri Moyano.

"This is something different," Dr. Siegel said. "This is your hands touching people that need it the most. The hugs and the thank-yous come right from the patients, and it is such a nirvana.

"Once you do it and feel the love, you're in."

The concept of providing dental care as a community service had struck Dr. Siegel long ago, and the plans for such an event were a frequent topic of conversation in the office.

"Other dentists have done similar programs all over the country," Dr. Siegel said. "Writing checks to charity was not gratifying to me. My associates and I had been talking about doing something like this for five years, but there was always something going on that made it the wrong time."



Ted Siegel (center, left) spread the love last Valentine's Day by assembling a team of dentists and staff to treat 250 neighborhood patients for free at his Northwest Side office. Dr. Siegel is pictured with another Dentists with Heart volunteer, Dr. Henry Lotsof, and some of the patients the team treated.

He was inspired to finally take action, however, by a friend who organizes major events for the Special Kids Network. Dr. Siegel knew that if his friend could assemble all-star casts for golf tournaments, he could certainly open the doors of his Northwest Side office.

Dr. Siegel and his staff posted flyers in their neighborhood, advertised through the neighborhood association, and hung signs in their windows on Milwaukee Avenue. And when they arrived at work that cold February morning, Dr. Siegel found a line of people wrapped around the block waiting for him. The first patients had arrived at 3:30 a.m.

Patients had mouths full of teeth rotten to the gumline, painful infections, and roots in need of scaling and planing. Many were fearful because they had never seen a dentist before.

“We put on a show in the back, with rock music blasting and lots of joking around to put the patients at ease,” Dr. Siegel said. Patients received the care they needed, and doctors enjoyed providing it.

Within months, however, Dr. Siegel started thinking about the children he excluded from the Valentine’s Day event. Statistics on the number of children who have never seen a dentist, he said, were both staggering and inspiring.

“The feelings we had (from the Valentine’s Day program) were so good, and we loved what we did so much, we didn’t want to wait a full year to do it again,” he said. “Through the process that we had in place, we had an opportunity to affect hundreds of kids who have never seen a dentist.”

Using high-energy staff and delicate hands, Dr. Siegel said one painless experience can have a significant impact.

“We hoped to affect the way these kids see themselves, improve their self esteem, reduce the number of missed school days, and change the way these kids care for themselves.”

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A similar team of volunteers provided exams, X-rays cleanings and fluoride treatments to children July 31. More than 100 young patients received \$25,000 worth of care.

Dr. Siegel said he will continue the Dentists with Heart program as long as he is able to work; he is also eager to “franchise” the event. He has prepared a free kit for other dentists who want to replicate the Valentine’s Day program in their own offices, including letters soliciting donations; digital logos for use on t-shirts, flyers and other materials; and a timeline for putting the event together.

“Once you decide to do it, just get the word out and do it,” Dr. Siegel said.

“There are so many good dentists and good people in dentistry, and so often we don’t get to hear about them. This is a chance to put a good light on dentists in Chicago. ■

For more information or to volunteer, contact Dr. Ted Siegel at (773)772-8400 or bigsmiledental@aol.com.

Ms. Brown is a staff writer for CDS.

LOOKING BACK

THE PATH TO THE FUTURE BEGINS IN THE PAST

Tee for you

Elizabeth Giangreggo

Before the development of the tee, golf balls were placed on little heaps of sand that were provided in boxes (the word tee itself is derived from the Gaelic word 'tigh' meaning house and is related to the 'house' in curling).

Scotsmen William Bloxson and Arthur Douglas in 1889 patented the first tee that raised the ball off the ground. Englishman Percy Ellis patented the first tee to pierce the ground in 1892. But it was George F. Grant, DMD, who created a wooden cone with a rubber sleeve to support the ball.

The son of freed slaves, Dr. Grant was the second African-American to graduate from a recognized dental school when he received his dental degree from Harvard University Dental School in 1870. He became the school's first African-American instructor in 1871 when he was appointed to a position in the department of Mechanical Dentistry.

Dr. Grant's early interest centered on the treatment of patients with cleft palates. He advocated early surgical intervention for children born with harelips, generally associated with cleft palates. Dr. Grant became a member of the Harvard dental school faculty in 1874 and by 1884 he specialized as an instructor in the treatment of patients with cleft palates. By 1889, he had developed numerous devices for the correction and treatment of cleft palates.

Inevitably, Dr. Grant gained international renown for his innovative work with patients who had cleft palates. He invented the oblate palate and promoted the importance of prosthetic dentistry into the dental curriculum. He was a pioneer in the field of speech therapy.



**DR. GRANT, WHO DIED
IN 1910, WOULD NOT
BE RECOGNIZED AS
THE ORIGINAL INVENTOR
OF THE WOODEN TEE
UNTIL 1991.**

Dr. Grant loved to golf, although reportedly he was something of a duffer. Fascinated by the physics of the game, Dr. Grant looked for some alternative to pinching damp sand into a launching pad, which was both inconsistent and, in inclement weather, messy.

Dr. Grant's tee was a wooden peg with a rubber top that pushed into the ground. His design is very close to the modern tee, but it did not have the concave head of previous tee designs.

Although he patented his invention in 1899, Dr. Grant never brought it to market. His tee was manufactured in a small Arlington Heights, MA, shop and he gave them away to his friends and golf partners.

Still teeing off in messy, wet soil in 1909, another dentist, William Lowell, DDS, of Maplewood, NJ, created a

golf tee using gutta-percha. Replacing the brittle gutta-percha with the more durable white birch, Dr. Lowell manufactured 5,000 tees. They became known as "Reddy Tees" because of their red hue. Eventually, Dr. Lowell patented his tee and took it to market, changing the color to green and cutting a deal with the Spalding Company in 1925.

By the following year, the market was flooded with tees made by other companies and Dr. Lowell spent most of his remaining fortune on his losing battle over copyright infringement. Dr. Grant, who died in 1910, would not be recognized as the original inventor of the wooden tee until 1991. ■

Ms. Giangreggo is managing editor of the *CDS Review*.

DENTAL DATELINE

What to do when baby won't brush

Jhe terrible twos—a time that strikes fear in the hearts of many parents. During this stage, most children are testing boundaries and trying to express their independence. Child development experts call this behavior “oppositional,” meaning that parents can expect to hear their tot say “No!” a lot during this time.

If your child is rebelling by clenching his mouth or even biting during toothbrush time, take heart. Here are tips from dentists and parents who have triumphed over this difficult developmental stage.

Remember

If you're having difficulty getting your child to brush, don't give up “just because they're baby teeth.” Baby teeth are the placeholders for your child's permanent teeth. What's more, extensive decay in the baby teeth can cause speech and eating problems for your child. Pain from tooth decay may even interfere with your child's ability to play and pay attention in preschool.

Always use a soft-bristled toothbrush that is developed for young children. Fluoridated toothpaste should not be used until the child is old enough to spit the toothpaste out. There are some companies that make non-fluoridated toothpaste for children. Otherwise, dentists recommend using just water, usually until age 3.

If you have any concerns, always talk with your child's dentist. Children should visit the dentist when their first tooth appears or by their first birthday at the latest, according to the American Academy of Pediatric Dentistry.

Tried-and-true tips

Games. Some suggestions from parents include pretending that you're the dentist and your bathroom is the office, or that you see “sugar bugs” in his mouth that you've got to brush away.

Telling jokes or asking your child to giggle as loud as they can are other techniques parents have used to get their child in the mood to brush.

Choices. Let your child pick out her own toothbrush. Some of the toothbrushes on the market today flash light, sparkle with glitter or feature favorite characters. Letting your child pick out their own toothbrush may get them interested in brushing again.

Have several flavors of toothpaste available and let your child pick the one they want for that day.

Cooperation. Let your child help brush, either by brushing his teeth while he brushes yours or letting him brush his top teeth while you brush the bottom.

Holding your child in your lap while you brush can also help foster a more cooperative spirit.

Diversion. When all else fails, try a diversion! Running the water in the sink or brushing in the bathtub are just two possibilities. ■



MEETING PLACE

A GUIDE TO DENTAL MEETINGS AND CE COURSES

UPCOMING MEETINGS

DECEMBER

12: North Suburban

Brad Johnson, DDS: New Concepts in Endodontics. Westmoreland Country Club, 2061 Old Glenview Rd., Wilmette. Cocktails: 6 p.m.; Dinner: 7 p.m.; Meeting: 8 p.m. Contact Marty Rogers, (847)729-8400.

12: West Side

Henry Fung, DDS: Management of Minor Oral Surgery Complications and Update. Philanders at The Carleton of Oak Park, 1110 Pleasant St., Oak Park. Cocktails: 6:15 p.m.; Dinner: 7 p.m.; Meeting: 7:30 p.m. Contact Gary Clemens, (708)795-1255.

JANUARY

9: Englewood

David Reisberg, DDS: Osseointegrated Implants in Craniofacial Rehabilitation. Nikos' Restaurant, 7600 S. Harlem Ave., Bridgeview. Cocktails: 6:30 p.m.; Dinner: 7:15 p.m.; Meeting: 8 p.m. Contact Jack Burke, (773)779-1774.

9: North Suburban

Howard Joen, DDS: From Builds to Implant Restoration: A Prosthodontic Review. Westmoreland Country Club, 2061 Old Glenview Rd., Wilmette. Cocktails:

6 p.m.; Dinner: 7 p.m.; Meeting: 8 p.m. Contact Marty Rogers, (847)729-8400.

9: South Suburban

TBA. Idlewild Country Club, 19201 Dixie Hwy., Flossmoor. Cocktails: 6 p.m.; Dinner: 7 p.m.; Meeting: 8 p.m. Contact Joseph Noetzel, (708)755-1333.

9: West Side

Joel Schwartz, DMD, DMSc: Screening for Oral Cancer. Philanders at The Carleton of Oak Park, 1110 Pleasant St., Oak Park. Cocktails: 6:15 p.m.; Dinner: 7 p.m.; Meeting: 7:30 p.m. Contact Gary Clemens, (708)795-1255.

9: West Suburban

Periodontal Panel Discussion: Q&A on the Latest Trends in Periodontics. Maggiano's Little Italy, 240 Oak Brook Center, Oak Brook. Cocktails: 6 p.m.; Dinner: 6:45 p.m.; Meeting: 7:30 p.m. Contact Paul Kempf, (630)515-1414.

16: Northwest Suburban

Dan Pesavento, MBA, EA: Current Tax Laws and the Health of Your Practice. The Wellington, 2121 S. Arlington Heights Rd., Arlington Heights. Cocktails: 6 p.m.; Dinner:

7 p.m.; Meeting: 8 p.m. Contact Tina Smith-Arpino, (847)392-4341.

23: North Side

Matt Gauthier, DDS (Chicago Bulls team dentist): Smile with the Chicago Bulls. United Center, 1901 W. Madison St., Chicago. For information or to reserve your spot, please contact Isaac Yue at yuesmiles@gmail.com, or Mary Hayes at mjhayes@msn.com.

FEBRUARY

5: Odontographic Society of Chicago

Christine Palumbo: Nutrition. The Clubhouse, 298 Oakbrook Center, Oak Brook.

22-25: Chicago Dental Society

142nd Annual Midwinter Meeting. Register online today at www.cds.org.

24: NUDS Alumni Association

Northwestern University Dental School Alumni Reception and Reunion. 4:30-7 p.m., Hard Rock Hotel, Gibson Ballroom, 230 N. Michigan Ave. \$10 advance/\$15 door. Contact: Adrian Codel, DDS, (312)217-9630 or nudsalumni@comcast.net.

REGIONAL MEETING

JANUARY 10

Thomas Trinkner, DDS:

Why Less is More—Exploring Truly Conservative Dentistry

CDS Regional Meetings are 9 a.m.-2:30 p.m. Drury Lane, 100 Drury Lane, Oakbrook Terrace. 5 CE hours. Educational meetings are free to all CDS members and their auxiliaries, as well as dental hygienist members of the Illinois State Dental Society. A \$250 fee is charged to dentists who are not ADA members, which may be applied to membership for the current year. Registration is not required for any regional program.

STUDY CLUBS

MONDAYS

Greater Evanston Dentists Association

Meets first Monday of every month, noon-1 p.m., Gio Restaurant, 1631 Chicago Ave., Evanston. Contact Roger Nouneh, (847)475-7754.

TUESDAYS

Central Lake County Dental Study Club

Meets third Tuesday of every month at noon, January-November, Grandma V's Pancakes, 10 E. Maple Ave., Mundelein. Contact Paul Showers, (847)816-3636.

FRIDAYS

Uptown Dental Forum

Weekly lunch/lectures, Sauganash Restaurant, 4732 W. Peterson Ave., Chicago; 12:30-2 p.m. Academy of General Dentistry sponsorship approved. Contact Marshall Dornick, (773)588-3880.

Waukegan Dental Study Group

Semi-monthly meeting for lunch, noon to 2 p.m., Waukegan Ramada, 200 Green Bay Rd. Contact Rob Bard, (847)244-0155, or Rod Morrow, (847)689-1213.

PLANNING A MEETING?

Fax your meeting information to: (312)836-7337
or e-mail: review@cds.org.

When submitting information, be sure to include the subject, date, time, location, speaker name and degree, as well as the name and phone number or e-mail of the contact person.

The *CDS Review* publishes meeting listings for free as space permits. Only meetings open to all CDS members may be listed. Be sure to send your meeting listing information to the Chicago Dental Society at least 60 days prior to your meeting.

View current meeting listings online at www.cds.org/for_your_practice/continuing_education/courses.wu4

BRANCH NEWS

NEWS FROM THE HOME FRONT

ENGLEWOOD

Thomas Salmon Sr., DDS
Noreen Salmon, DDS

Englewood held its annual golf outing at beautiful Cog Hill in Lamont. **Larry Lenz** ran the outing. **Ken Szafranski** purchased the prizes. Our president, **John Green**, won the Tom Castline Memorial trophy for the lowest gross.

Congratulations to Sue and **Bob Matthews** on the birth of their first grandchild,

Matthew Robert. Also, Sue earned tenure as a professor at Joliet Junior College.

Members on the mend: **Zeke Krol** is doing well after a hospital stay. **Lew Weil** is recovering from surgery.

A Lilac Mass will be held April 22 at Holy Name Cathedral at 9:30 a.m., with Father



KENWOOD/HYDE PARK

Sherece Thompson, DDS

Christopher K. Howard and Norrisa Johnson were married July 22 at the Marriott Frenchman's Reef Resort in St. Thomas, VI. The happy couple honeymooned in the British Virgin Islands at the Peter Island Resort and Spa. When asked about his most memorable moment of the wedding day, Chris shared: "Seeing my beautiful bride in the Caribbean sunlight." Chris specializes in oral and maxillofacial surgery.

ENGLEWOOD

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BRANCH NEWS

Gerry Meyer officiating. Fr. Meyer is a 1956 graduate of the Loyola University School of Dentistry. For more information about the mass, contact **Walter Lamacki** at (312)787-0872.

Congratulations to **George Lingen**, who retired in September from his position as the Illinois State Dental Society Speaker of the House. George served us well for 10 years.

NORTH SIDE

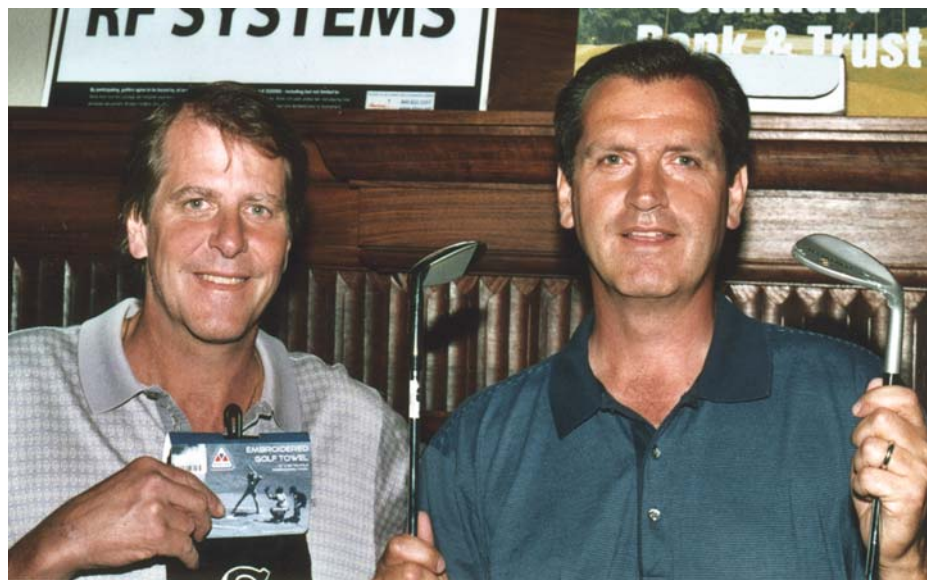
Genaro Romo Jr., DDS

Congratulations to the University of Illinois at Chicago (UIC) Dental Alumni Association on its annual golf outing this September at Cog Hill. It was very well attended by many North Side Branch members, including **Jeffrey Arnold, Eliot Becker, Trucia Drummond, Cissy Furusho, Gene Romo** and **Milton Salzer**.

Alvin Atlas was recently elected as the newest member of the UIC dental alumni board.

Congratulations to **Gabriela Aluas**, her husband and 2 1/2-year-old son on welcoming the newest addition to their family, Sofia.

Veronica DiMario volunteered her whole office to participate in State Sen. Miguel del Valle's (D-Chicago) 13th annual Back to School Health Fair Friday, August 4. This is the third year she has participated as the only dentist providing mandatory screenings for nearly 200 children. Her office also provided dental screenings and education for the Uptown Christopher House Health Fair for a second year. After volunteering her time to all those children, Veronica looks forward to spending as much time as she can with her



ENGLEWOOD: (Top) The Englewood Branch is grateful to Larry Lenz and Ken Szafranski for their hard work in making the annual golf outing a success.

(Left) Lew Weil is recovering from surgery.

(Right) Bob and Sue Matthews welcomed the birth of their first grandchild, Matthew Robert.



own 10-month old daughter, Noelia.

Mark Sawyer and his wife, Marilyn, attended the Academy of General Dentistry (AGD) convention in Denver, where he received a fellowship from the AGD. His son Danny was captain of the Glenbrook North High School boys tennis state championship team last spring, and he is attending Indiana University this year. Mark's daughter Sara is a junior at Glenbrook North and his son Josh is in eighth grade. They also have a dog

named Desi. Mark has a new associate, **John Pontikes**, who works with him in his Glenview office.

Gene Romo and his wife, Sandy, recently welcomed their second baby, Nicholas. Big sister, Alyssa, is 2 1/2 years old. Gene also awarded \$700 scholarships to three UIC hygiene students: Olivia Lares, Amy Rodriguez and Jennifer del Toro. The scholarship is awarded to dental or hygiene students who are both enrolled at UIC and members of the



The Glen. Best wishes to both in their new location.

Michael Nolan ascended 14,410 feet to the top of Mt. Rainier. When asked about future climbing plans, he said he's just "thinking of other ranges to scale" (no pun intended).

Dave Fulton Sr. and Ron Fabrick attended the American Dental Society of Europe (ADSE) meeting held in Dubrovnik in June. ADA Executive Director **James Bramson**, ADA President **Bob Brandjord** and ADSE President **Clive Debenham** were seen at a reception at the Excelsior Hotel.

Scott Arne has been busy. He's a consultant for 3M Corp. and is currently involved in developing dental materials. He has lectured in Traverse City, MI; Florence, KY; and Roanoke, VA. He also presented at the ADA Annual Session in Las Vegas—and he's planning to run in the upcoming Twin Cities Marathon. Needless to say, sleep is a luxury these days for Scott.



NORTH SIDE: (Top) Eliot Becker, Jeffrey Arnold, Milton Salzer and Cissy Furusho spent a beautiful day at the annual golf outing sponsored by the UIC Dental Alumni Association.

(Left) Trucia Drummond and Rachel Cuadros also enjoyed a beautiful day of golf.

NORTH SUBURBAN

Richard F. Egan, DDS

The Jimmy Burns Foundation annual tailgate fundraiser held at Loyola Academy was a huge success. It raised more than \$20,000, which will help families touched by leukemia. Jimmy Burns, the son of **William J. Burns** and brother of **Mike** and **Bill Burns**, died three years ago of leukemia at age 33. For more information, visit the Web site at www.jimmyburns33.org.

Ali Nematollahi and Katayoun Atari have been working overtime lately. They recently opened a stunning new high-tech office in Glenview at

Die-hard White Sox fan **Ray Fiocchi Jr.** took daughters Colleen and Stephanie to watch the White Sox squeak out a late-season victory in the rain against the Seattle Mariners, while daughter Christine and wife Kelly took care of their new puppy, Luke. They came home wet but happy. Don't stop believing, Ray!

Fabian LaTocha added Antonia Kolokythas to his practice. She received her dental degree from the University of Thessalonica in Greece. Antonia also studied oral and maxillofacial surgery at the University of Illinois at Chicago College of Dentistry, completed a fellowship in head and neck surgery at the University of Maryland and most recently was an assistant clinical professor

Hispanic Dental Association.

Don't forget to attend our next branch meeting to be held at the United Center Jan. 23. For information or to reserve your spot, please contact **Isaac Yue** at yuesmiles@gmail.com, or **Mary Hayes** at mjhayes@msn.com.

If you have any news or photos you would like to share, please contact me at drgeneromo@aol.com.

BRANCH NEWS

in oral and maxillofacial surgery and oncology at the University of San Francisco. She plans to maintain her position as a clinical professor in head and neck surgery at the University of Chicago. Welcome and congratulations, Antonia.

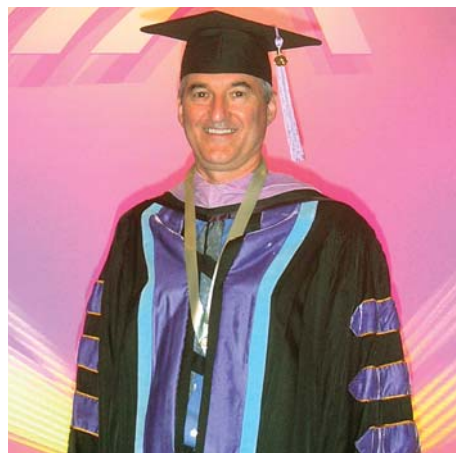
NORTHWEST SIDE

Kenneth Hauser, DDS

Russell Cecala, his wife, Shaun, and their three children, Rosario, Christa and Dante, returned to Italy this year after 12 years of being away. Russ' oldest son, Rosario (Russell Jr.), was born in Vincenzia, Italy, while Russell Sr. was serving there with the U.S. Army during Operation Desert Storm. Russell Jr. was very excited to see his first home and visit some old friends. In addition, the Cecala family traveled to Cacammo, Sicily, to see the birthplace of Dr. Cecala's grandparents and father. They also visited relatives that still live in the town of Caccamo. The Cecala family intends to return to Italy every year from now on. Buon Italia!

Tim Tishler and **Tom Schneider** and their families vacationed in Door County, WI, in July. In addition to boating, swimming and waterskiing, Tim fished everyday. The weather was fabulous the entire time. One day they took out two boats and three wave runners and went all the way around the peninsula. It was 106 miles according to the GPS.

Tim and his son, Michael, had a NASCAR experience in August at the Milwaukee Mile. It was a blast; they were both on the track at the same time and were allowed to pass. Michael is now a freshman at Illinois Institute of Technology, where he is studying mechanical engineering. Someday he will probably be making racecars.



A huge congratulations goes out to one of our past presidents, **Vickie Grandinetti**, who married Ken Park June 3 at St. Mary of the Woods Church, in Edgebrook. Some of the siblings who participated in the Mass

NORTHWEST SIDE: (Top): Ken Hauser threw a wonderful BBQ for his staff at Gilson Beach. Everyone enjoyed lots of food and the kids got to fly kites and play football.

(Left) George Frayn distinguished himself recently by receiving the Academy of General Dentistry Fellowship award at the annual AGD meeting in Denver in August. The ceremony was held with full academic regalia. To qualify, George completed 500 hours of continuing education and passed a rigorous seven-hour examination.

were: **Sam Grandinetti**, **Victor Grandinetti**, **Elise Adley** and **April Eve Hocking**. A reception followed at Gibson's. It was a beautiful, perfect day! The couple honeymooned in Europe for two weeks.

Sam Grandinetti, our secretary,

plays a dual role, since he is also the president of the “New Dentists Group.” Sam spoke at the Sept. 14 meeting about financial planning and how to invest for retirement. Also present was a representative from Washington Mutual, Mark Behrens.

Ken Hauser drove to the east coast with his wife and two daughters to visit his wife’s family in August. They spent two weeks visiting relatives, relaxing and enjoying the beautiful weather that the Carolinas had to offer. They also had the chance to visit Washington, D.C., and see the White House and Capitol Building. Also in August, Ken threw a wonderful BBQ for his staff at Gilson Beach. Everyone enjoyed lots of food and the kids got to fly kites and play some football.

NORTHWEST SUBURBAN

Russell Spinazze, DDS

Neil Weintraub and **Anthony Eltink** sponsored more than 50 participants in the Buffalo Grove Stampede 5K/10K over Labor Day weekend. Participants included patients, parents and staff. Weintraub and Eltink Orthodontics in Buffalo Grove has made this an annual event.



NORTHWEST SUBURBAN: More than 50 patients, parents and staff from Weintraub & Eltink Orthodontics in Buffalo Grove recently participated in the Buffalo Grove Stampede 5k/10k.

This past July, **Mike Unti** and his hygienist traveled on a mission trip to Honduras. The trip was through World Gospel Outreach. Mike saw 140 patients, providing cleanings, extractions and anterior fillings. This was truly a life changing experience for Mike, who encourages others to participate in similar trips. If anyone is interested in more information, contact Mike at any time at (847)359-7520

Anthony Spina has been appointed to the American Medical Association CPT (Current Procedural Terminology) Advisory Committee to represent the dental profession. His appointment is via the ADA.

SOUTH SUBURBAN

Dominik Dubravec, DDS

Congrats to Lydia and **Spencer Pope** on the birth of their son, Ethan Spencer. Spencer is already trying to predict if Ethan will have a Class I occlusion!

After 50 years in dentistry, are there any more mountains to conquer? **Patrick Flannery** wants to conquer them all. He successfully passed the amateur radio license exam and can be reached through *Echolink* on his call sign *KC9FRQ*.

Mike Mintz was inducted into the

BRANCH NEWS

International College of Dentistry at the ADA Annual Session in Las Vegas in October. He also had a hole-in-one while golfing at the ISDS Annual Session in September.

Since retiring from the Prairie State College dental hygiene program, **Ingrid Shults** is enjoying her time with her new grandchildren, Michael and Isabella, as well as practicing in her Tinley Park practice.

John Marinucci vacationed in the "land down under" with his wife. They took time out from their busy vacation to New Zealand and Australia to snorkel the Great Barrier Reef.

Arvy Dailide will ride his Harley Davidson Ultra Classic in the Chicagoland Toys for Tots motorcycle parade in December. Arvy has participated in the ride in the past and looks forward to spreading more holiday cheer.

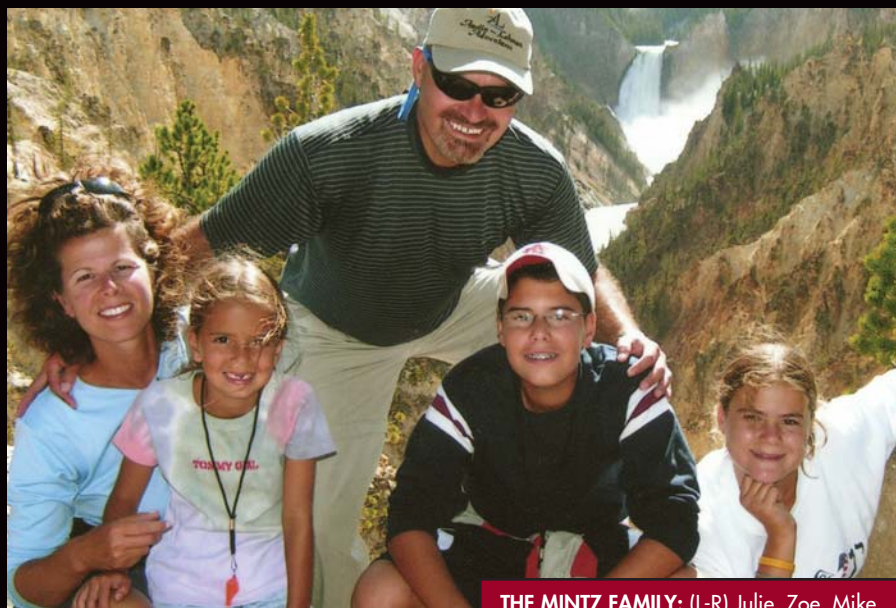
It's football season again and **Kevin Patterson** is very busy with his two sons. His older son, Scott, is a freshman linebacker for Nazareth Academy. Kevin is also coaching his younger son, Mark, who is a running back for St. Cletus and is in sixth grade.

WEST SIDE

Carol Everett, DDS
Sue Zelazo-Smith, DDS
Don Tuck, DDS

It was wonderful to see everyone at the September branch meeting, especially our hard working, dedicated CDS officers. It seems many people had an exciting summer, but special mention must be made of our own adventuring **Kamal Vibhakar**. Some of you may remember Kamal's presentation describing his

President Profile



THE MINTZ FAMILY: (L-R) Julie, Zoe, Mike, Garrett and Caley.

MICHAEL J. MINTZ, DDS SOUTH SUBURBAN

Dr. Mintz received a dental degree in 1986 from the Indiana University School of Dentistry and a certificate in endodontics from the University of Illinois at Chicago College of Dentistry in 1988.

In his spare time, Dr. Mintz enjoys golf, tennis, basketball, softball and reading.

In my presidential year. . .

I want to increase member awareness about the benefits of organized dentistry. I hope to increase participation at branch meetings and other branch functions. Meetings, membership and retention goals are my top priorities.

ascend of Mt. Kilimanjaro. Well, this time he took on the Himalayas. He didn't scale Mt. Everest's peak, but he did make it to the first base camp. Kamal and 12 friends did some seri-

ous trekking, which required acclimatization and strenuous exercise. They were rewarded with some wondrous experiences including a visit to a monastery where they met



WEST SIDE: Kamal Vibhakar and a friend in Nepal. Mt. Thamserku is pictured in the background.

a Lama, not to mention seeing the tallest mountain in the world.

Monica Reyna-Vukotich had a good summer. She enjoyed some of the CDS events (including the CDS Family Picnic at Great America and the Majestic Cruise) and got to see the Shanghai Circus.

Mary and **Russ Umbricht** recently returned from a two-week trip to Italy.

Maria and **George Zehak** were also in Italy this summer, spending time with family. George was installed as president of the Academy of General Dentistry just before the ISDS Annual Session in Bloomington. Congratulations, George! He's always working for the West Side Branch.

Dick Perry is a NERB (North East Regional Board) examiner and has taken several trips in that capacity.

Becky Egolf is proud of daughter Eva, who is acquiring her PhD at New York University while teaching in Manhattan. Becky attended the orthodontic alumni meeting for the University of Illinois at Chicago College of Dentistry at the ADA headquarters building. She reports that the lectures were great, as was dinner on the 95th floor of the John Hancock building.

Jim Bryniarski also has reason to be proud. Two of his children graduated this past spring: Jeff received a degree in civil engineering from Purdue University, and Amelia graduated from Brookfield-Riverside High School. Amelia is enrolled in the veterinary technician program at Joliet Junior College

We're looking forward to a good year with lots of interesting continuing education at the branch meetings. Hope to see you there.

WEST SUBURBAN

Jiten Patel, DDS

The ISDS House of Delegates meeting was held Sept. 14 in Bloomington. Our past president, **Dean Nicholas**, gave a touching speech during his installation as the new ISDS president. Dino expressed how the relationships he has made during his many years of involvement in organized dentistry have been of great significance in both his professional and personal life.

Zivile Chirban, of Hinsdale, traveled to San Francisco to participate in the Christ Church of Oakbrook's outreach program. Through the program, local high school students visited San Francisco to volunteer their time at soup kitchens.

BRANCH NEWS

Vincent Versaci, of Western Springs, attended the ISDS seminar on “Oral Health Products for Home Use: What Should I Recommend?” Sept. 22, in Champaign. Vince not only found the presentation informative and entertaining, but he was also able to attend

the ISDS tailgate party with his son, Vince Jr., who is currently a sophomore at the University of Illinois.

Our WSDS board members **Andy Browar** and **Mark Plaskonka**, along with **Joe Unger** of the Englewood

Branch, represented the ISDS at State Sen. Kirk W. Dillard’s (R-Westmont) golf outing at Seven Bridges Golf Club in Woodridge Sept. 25.

Branch President **Mark Sloan** kicked off this year with a productive, and rather lengthy, first board meeting. Mark is not only busy as the WSDS president and with his private practice, but he is also putting together his own rock band. We all look forward to a live gig in the near future.

WSDS wants to know your news! Please take a few moments to inform us of any news you want highlighted in the next issue. Forward all correspondence to jitenbp@yahoo.com.

Milestones

APPLICANTS

Avery, Cheska D.

Marquette University, 2006
4830 N. Cumberland, Norridge
Northwest Side

Bigras, Brigitte R.

McGill University-Canada, 2003
1775 Glenview Rd., Glenview
North Suburban

Calderon, Erla A.

University of Illinois, 2006
2806 W. Devon Ave., Chicago
North Side

Krishna, Divya R.

Boston University, 2006
1250 State Route 12, Fox Lake
North Suburban

Mandel-Tatch, Diana

Baylor College of Dentistry, 2002
200 Milwaukee Ave., Buffalo Grove
North Suburban

Nanjapa, Samir

University of Illinois, 2003
2 Oakbrook Center, Oakbrook
West Suburban

Paradowski, James D.

Loyola University, 1976
290 S. Springfield Dr., Bloomingdale
West Suburban

Patel, Jigisha C.

KMC Dental School—International, 1984
1608 W. 69th St., Chicago
Kenwood/Hyde Park

Sheth, Nehaben

University of Illinois, 2004
120 E. Lake St., Addison
West Suburban

Sud, Amit

New York University, 2005
25441 Grotto Ct., Plainfield
South Suburban

Wang, Kingsley L.

University of California, 2000
105 E. First St., Hinsdale
Englewood

DECEASED MEMBERS

Adams, Bruce D.

Loyola University, 1971
135 Addison Ave., Elmhurst
West Suburban
Date of passing unknown.

Akal, Calvin

Northwestern University, 1950
386 E. Crescent St., Elmhurst
West Suburban
Passed away Nov. 6.

Lidge Jr., Ernest F.

Loyola University, 1952
2311 N. Douglas., Arlington Heights
Northwest Suburban
Passed away August 2006.

Sagerman, Arthur H.

Northwestern University, 1958
1865 Aberdeen Dr., Glenview
South Suburban
Passed away September 2006.

Schroeder, Edward W.

Loyola University, 1944
350 W. Schaumburg Rd., Apt. A330,
Schaumburg
North Suburban
Passed away Aug. 5.

Wright, Warren F.

Chicago College of Dental Surgery, 1944
2056 S.W. Danforth Circle, Palm City, FL
West Suburban
Passed away September 2006.

ACDS

Eleanor Bruni Perry

Greetings valuable ACDS members! The season is colder now, but the activities of ACDS abound with warmth.

If you were in Las Vegas for ADA and AADA events, hopefully you were able to attend the Opening Session of AADA and—a highlight for dentists and spouses this year—the luncheon at the Liberace Museum.

Looking ahead. . .

Dec. 1: The ACDS Holiday Party, Tuscany Restaurant in Oak Brook, beginning at 10:30 a.m.; grab bag and White Elephant sale, followed by lunch. This event is open to all.

Jan. 24: General Meeting, The Club House, Oak Brook Mall, 10:30 a.m.; Jacque Neurauter will speak on feng shui; lunch follows.

Feb. 22-25: CDS Midwinter Meeting. Always a compilation of fun activi-

ties, pertinent seminars and the joy of meeting people.

Smiles for Seniors is an ongoing AADA project that one can participate in as an individual or as part of a constituent or component organization. For more information, contact Carol O'Brien, AADA executive director, (800)621-8099, ext. 2865; or by e-mail: allianceada@allianceada.org

Finally, and very importantly, if your spouse has not joined the Alliance or has forgotten to renew membership, please do so now. We need your support, be it from a monetary stance and/or active participation. Thank you!

May you all savor your holiday activities. Stay well and happy. Give wherever and whenever possible. ■

Can YOUR office afford OSHA's stiff penalties?

OSHA requires annual training for all healthcare workers with potential exposure to bloodborne pathogens.

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This 2-hour workshop addresses the process and importance of maintaining an exposure control plan and also provides a handy workbook you can reference throughout the year.



THE CHICAGO MEDICAL SOCIETY
in collaboration with the Chicago Dental Society

Chicago Dental Society members and their staffs can register for the discounted rate of \$69 per person.

For OSHA training workshop dates, locations and registration information, call the CMS offices at (312)329-7338, or visit our website at: **WWW.CMSDOCS.ORG**.

NEWSWORTHY

LOCAL AND NATIONAL NEWS ABOUT DENTISTRY

UPDATE: ADA HOPEFUL CHANGES IN INDIAN HEALTH CARE IMPROVEMENT BILL WILL IMPROVE STRAINED RELATIONS



Recent revisions of a bill pending in Congress would bar dental health aide therapists (DHATs) in Alaska from performing extractions and pulpal therapy on adult teeth unless they've consulted with a licensed dentist—and then only in cases of medical emergencies that can't be resolved with palliative treatment.

But new language in the proposed Indian Health Care Improvement Act, H.R. 5312/S. 1057 (IHCA), would not prohibit other procedures currently performed by DHATs, including pulpotomies and extractions on deciduous teeth, and caries treatments for both deciduous and permanent teeth.

The revised act would restrict the DHAT program to Alaska. It also calls for a study of new types of dental auxiliaries, including the ADA's newly proposed community dental health coordinator. The Association would help design the study.

Cautious ADA officials expressed some limited hope that the IHCA revision could improve strained relations with Alaskan tribal health leaders.

"We still believe," said ADA President Bob Brandjord, "that dentists are the best providers of surgical and preventive services because of the depth of knowledge, skills and ability that their education provides, and that allowing non-dentists to perform surgical procedures, such as extracting teeth, is too risky."

"We will continue working to bring enough dentists to provide care for natives so that it is unnecessary for therapists to perform those procedures," Dr. Brandjord added. "At the same time, we cannot lose sight of the ultimate goal—getting proper dental care to

needy Alaska natives in remote areas. To do that, we must work with the tribal representatives. Otherwise, we accomplish nothing."

The bill's sponsor, Rep. Don Young (R-AK), submitted the revision at the last minute, having earlier supported an ADA-backed provision that would have barred DHATs from performing any irreversible dental procedures.

"This was the best language we could obtain under the circumstances," said Dr. Brandjord. "It's important to remember that DHATs are working right now in Alaska without any of the restrictions in the revised bill."

The IHCA still must clear two House committees (Ways and Means and Energy and Commerce) and the full House of Representatives, and be reconciled with a Senate version of the bill.

In a July 18 ADA eGram on Alaska, Dr. Brandjord noted that the ADA's opposition to the DHAT program has generated a lot of media coverage over the past two years, some of it balanced, much of it "harshly critical" of the ADA's stance.

"Our efforts to convince Alaskans of our sincere patient safety concerns do not appear to resonate with them, while the false choice that some care is better than no care has," he wrote.

He noted, too, that during the heat of the congressional battle, the ADA learned that the University of Washington had scrapped plans for a program to train DHATs. Instead, the university supports a proposal to offer didactic training for one year as dental health aides, with no training in irreversible procedures.

On the legal front, the ADA has prevailed in a bid to have its Alaska lawsuit heard in the state, rather than federal, court. The association filed suit in January to prohibit non-dentists from performing irreversible dental procedures.

Said Dr. Brandjord, "Although our discussions with the tribes continue, it is still important to support the state's rights to regulate the health professions within their borders."

MEDICAL CONDITIONS CAN AFFECT DENTAL TREATMENT DECISIONS

Since Americans are living longer and keeping their teeth, dentists are seeing more and more patients with age-related chronic medical problems that affect the oral cavity, writes Dr. Nelson Rhodus in the July-August issue of *Northwest Dentistry*.

Dr. Rhodus, director of Oral Medicine at the University of Minnesota School of Dentistry,

adds that because more and more patients are showing up at the dental office with medically compromising conditions, dentists are facing a significant challenge in managing them. When treating such patients, he says, several concerns must be addressed, including:

- The effect of patients' medical condition and therapy on their oral health
- Specific oral and dental manifestations that arise from

or are exacerbated by medical conditions or therapies

- Possible adverse interactions between patients' oral health and general systemic health.

Dentists should know the health condition of their patients because virtually every medical condition may affect dental treatment, and vice versa. Cardiovascular disease, hematologic disorders, endocrine diseases, neural and sensory problems all offer

potential complications. Other conditions like pregnancy also need special consideration.

The growing understanding we have about the connection between systemic and oral health makes it imperative that dentists obtain from their patients complete medical histories—including current drug use—as well as pre-visit vital signs. Abnormal or questionable results might indicate a referral to the patient's physician.

DIGITAL PHOTOGRAPHY HELPS DENTISTS, LABS COMMUNICATE BETTER

Good communications between the dental office and dental labs has always been important. Now digital photography makes it simple for lab technicians to get the "full picture" from dentists, according to Ross Nash, DDS, writing in the July issue of *Oral Health*.

Whether you use the Internet to transmit digital photos or put them on disks, Dr. Nash recommends including a full frontal face shot of the patient. "Things like facial character, skin tone, face shape and age can be seen clearly in a portrait and can help determine some of the desired characteristics of the final restoration."

Also helpful are close-up photographs of the patient's smile, which help the technicians see how much gingival tissue shows and where the lip drapes over the tooth surface. The curve of the lower lip seen in a smile close-up can help determine incisal edge shape and position, he adds.

When digital photography has helped a dentist and a lab technician communicate well, Dr. Nash says, "the likelihood of functional and esthetic excellence is enhanced. Restorations with the desired shading, contours, occlusal scheme and texture may be achieved at the first try."

AGING POPULATION STIMULATES DEMAND FOR DEFIBRILLATORS IN THE DENTAL OFFICE

The aging of America means that all medical professionals are seeing more elderly patients. Dentists and their staffs are increasingly likely to be called upon to respond to medical emergencies in their offices. A possible scenario for which dental offices should be prepared is cardiac arrest, according to Drs. Barry Boyd, Joseph Fantuzzo and Timothy Votta.

Writing in the June/July issue of the *New York State Dental Journal*, they note that because the American Heart Association has assigned high



priority to defibrillation for cardiac arrest victims, it is imperative that dental settings have access to automated external defibrillators (AEDs) as well as staff trained to use them.

"With the increasing med-

ical complexity and aging of dental patient populations, the likelihood of sudden cardiac arrest in the dental practice setting is of major concern," they write. "Given the overall risk of sudden cardiac arrest in the general population, the potential for an event in the operatory, waiting room or common areas surrounding dental practices is significant, especially in large public clinics."

The authors conclude by stating that dental health professionals have an obligation to "become part of the chain of survival," train in the use of AEDs, and ensure that properly working devices are available in their offices.

DR. ZHOU JOINS UIC COLLEGE OF DENTISTRY TO HELP DEVELOP STATE-OF-THE-ART HEAD AND NECK/ORAL CANCER RESEARCH PROGRAM

The University of Illinois at Chicago College of Dentistry in recent years has made huge strides in becoming a national center for oral cancer care and research. It received a \$2 million U24 grant from the National Institute of Dental and Craniofacial Research to study oral cancer, and has reoriented its Department of Oral Medicine and Diagnostic Sciences toward dealing with the disease.

Now, the college has added an internationally known oral cancer researcher in Dr. Xiaofeng "Charlie" Zhou, assistant professor, Center for Molecular Biology of Oral Diseases.

"I am looking forward to joining the UIC College of Dentistry to build a solid research portfolio on oral cancer research," Dr. Zhou said. "My primary research interest is to utilize molecular genetics and bioinformatics technologies to develop novel diagnostic tools and to gain a better understanding of human diseases such as head and neck/oral cancer."

Dr. Zhou most recently had been an assistant professor of Oral Biology at the University of

California at Los Angeles (UCLA) School of Dentistry, and was a member of UCLA's Jonsson Comprehensive Cancer Center and the university's Dental Research Institute. He holds a BS in biochemistry and microbiology from Hangzhou University in China; a PhD in biochemistry and post doctorate training in human genetics from Boston University; and an MS in software engineering from Brandeis University.

"My current research is focused on the genetic mapping of disease genes and/or consistent genomic alterations that are associated with the development and progression of oral cancer," Dr. Zhou continued. "The goal is to integrate my ongoing research in cancer genetics with the resources and expertise here at the UIC College of Dentistry to establish a truly state-of-the-art translational research direction in oral cancer."

Dr. Zhou has published more than 34 journal articles, review articles and book chapters, and brings three National Institutes of Health grant research projects with him to the college.

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Chicago office: 100 W. Randolph St., Suite 9-300, Chicago, IL 60601;
Phone: (312)814-4500



THE 142ND CHICAGO DENTAL SOCIETY
MIDWINTER MEETING

SCIENTIFIC SESSIONS:
 Thursday-Sunday, February 22-25, 2007

EXHIBITS:
 Friday-Sunday, February 23-25, 2007

PRE-REGISTRATION:
 Open now through January 31, 2007

REGISTER ONLINE:
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FAT KIDS EAT JUNK FOOD

The United States is suffering from an epidemic of obesity, writes Dr. Marion Nestle, professor of nutrition at New York University. A food industry that supplies 3,900 calories per day per capita, roughly twice the average need, is the culprit.

Writing in the Sept. 11 issue of *The Nation*, Dr. Nestle makes no bones about laying much of the blame on corporate marketing of junk food to children, who do not have the ability to distinguish sales pitches from legitimate nutrition information unless taught to do so. Companies spend \$10 billion annually enticing children to desire food brands. The result, says Dr. Nestle, is American children consuming more than one-third of their daily calories from soft drinks, sweets, salty snacks and fast food.

Parents bear some of the responsibility, but advertising to children is more insidious today than in years past, says the doctor.

"Today's marketing methods extend beyond television to include Internet games, product placements, character licensing and word-of-mouth campaigns—stealth methods likely to be invisible to parents."

She believes it is time for America to follow the lead of many European countries and put more restrictions on food advertising to children. "Controls on marketing may not be sufficient to prevent childhood obesity," she concedes, "but they would make it easier for parents to help children to eat more healthfully."

STUDY SHOWS KISSING HELPS FIGHT ALLERGIES

Go on and pucker up with the one you love. A half-hour of smooching reduces the body's allergic reaction to pollen, according to Japanese researchers at Satou Hospital. How?

Kissing relaxes the body and that reduces the production of histamine, the chemical that is released in response to allergens and then causes the airways to swell shut, report *The Boston Herald* and *Glasgow Daily Record*.

Twelve couples, all of whom suffered from hay fever, participated in this small study by kissing while listening to relaxing music for 30 minutes. At a different time, the same group just cuddled for a half hour. Blood samples taken before and after the kissing sessions showed significantly lower levels of immunoglobulin E (IgE), which prompts the release of histamine and triggers hay fever and asthma symptoms. "The results indicate for the first time that kissing may alleviate allergic responses," lead study author Dr. Hajime Kimata told the *Glasgow Daily Record*.

Cuddling, however, didn't have the same protective effect from allergies.

The Boston Herald reports that scientists found similar results in another group of patients with dermatitis, a skin condition triggered by allergies.

Who needs allergy shots or a medication when you can just kiss? ■

DELIVERY

The *CDS Review* is published seven times annually. The magazine mails the middle of the first month the issue covers. For example, the January/February 2006 issue mailed January 15, 2006.

January/February	December 15, 2006
March/April	January 15, 2007
May/June	April 16, 2007
July/August	June 15, 2007
September/October	August 15, 2007
November	September 17, 2007
December	October 31, 2007

All advertisements, changes and extensions must be submitted in writing. **No advertisements, changes or confirmations will be taken over the telephone.**

Although every effort is made to place advertisements received after the deadline in a specific issue, we cannot guarantee that late advertising will appear in the issue requested. The advertisement will appear in the following issue. Advance payment covering the number of insertions must accompany your written advertisement.

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DISPLAY CLASSIFIED: \$90 per column inch.

STANDARD CLASSIFIED: \$75 for the first 30 words plus \$1 for each additional word.

CDS members are entitled to a 20% discount. You must provide your CDS membership number as proof of membership when placing your classified ad, otherwise you will be charged the non-member rate.

PAYMENT

Make checks payable to: Chicago Dental Society. Classified ads must be paid for in advance.

PRACTICES FOR SALE

Dental practices listed for sale within this section of the *CDS Review* are limited to practices that are being sold either by a dentist or a management company hired by the dentist to sell the practice. Advertisements from all others may not be placed in the *CDS Review*.

REPLY BOX NUMBERS

For an additional \$25, CDS will issue a confidential reply box number for your ad. These numbers ensure the privacy of our advertisers. All unopened responses are mailed to the advertiser once a week.

Replies to CDS Review box number ads should be addressed as follows: Box Number, Classified Advertising, Chicago Dental Society, 401 N. Michigan Ave., Suite 200, Chicago 60611-5585. (An example of a *CDS Review* reply box number is A0104-A1, *CDS Review*. **Any classified ads with numbers that do not follow this sequence are not CDS Review reply boxes.**)

Send all correspondence, including advertisements and payments to: Chicago Dental Society, Classified Advertising, 401 N. Michigan Ave., Suite 200, Chicago, IL 60611-5585.

Although CDS believes that advertisements published in the *CDS Review* are from reputable sources, CDS neither investigates the offers nor assumes responsibility for them. **CDS reserves the right to edit, decline, accept and withdraw advertisements at its discretion.**

CLASSIFIEDS

Place your ads online at **WWW.CDS.ORG**

FOR RENT

BLOOMINGDALE—NEW MEDICAL/DENTAL building. Construction has begun. New medical/dental building. Units 2,500-10,000 square feet. For sale or lease. John: (708)681-2490, ext. 202.

ARLINGTON HEIGHTS general practice available for rent. Three fully equipped operatories including computers, digital radiography throughout with digital Panorex. Convenient downtown location within walking distance of Metra station. Call (847)255-5552 or e-mail tseneczko@sbcglobal.net.

OAK BROOK AREA: Excellent location for dentist or dental specialist. Modern building with atrium, 1,100 and 2,000 square feet available. Landlord will assist in build-out and remodeling cost. Call (630)279-5577 or visit www.britanyoffices.com.

LINCOLN PARK: PROFESSIONAL building has 1,000-2,200 square feet ideal for dental office. Building has doorman and valet parking. Call Matt at (312)953-1798.

SIX-PLUS ROOMS WITH THREE operatories fully plumbed on ground floor of medical center. Free telephone answering and common reception area. Reasonable rent. We have the name of a dentist willing to share office space. 3420 W. Peterson Ave., Chicago, (773)267-0020.

BUFFALO GROVE DENTAL OFFICE: Opportunity to lease fully equipped, beautiful office or purchase cabinetry, reception furniture, Planmeca Pan/Ceph, developer, etc. All five years old and in perfect condition. Owner relocating. (847)651-7124.

FUNCTIONING DENTAL OFFICE FOR RENT: Storefront at a highly visible corner location. Five operatories fully plumbed. Space includes waiting & reception area, lounge, private office and sterilization room. Located in the growing community of Algonquin, at 503 E. Algonquin Road. Centrally located for patients in Algonquin, Barrington, Schaumburg and Crystal Lake. Call (312)335-1500.

NORTHBROOK DENTAL OFFICE FOR LEASE

Three fully plumbed operatories available in January. Remodeled less than 6 months ago. Will also consider space sharing arrangement.

Call (847)272-1072

Downtown Northbrook location.

DENTAL OFFICE FOR RENT

Multi-specialty Medical Center

- 1,250 square feet
- Competitive price
- Heating and air conditioning included

CALL CHARLES BRIKHA, MD • (847)692-5206

Mon-Fri, except Wed, 10 a.m.-6 p.m.

8118 N. Milwaukee Ave., Niles, IL 60714

OAKBROOK OFFICE: Extremely rare opportunity to lease five fully equipped operatories designed for function. Five Siemens and one Siemens Orthopan X-ray units. Twin-head Pelton-Crane headlights and Adec units. Must see to believe. Unlimited parking, most central to affluent and growing Oakbrook business and residential communities. Turn-key operation. Just move in and prosper. No burden of big loans. Please call (312)791-1013 or e-mail wwkwanddsmd@aol.com.

FOR RENT, GLENVIEW - IN THE GLEN: Two fully equipped dental operatories, lab, reception, lunch room and private office available, 3-4 days/week. Associateship also possible. Building and top of the line dental equipment less than five months old. Call (773)267-5515.

DENTAL OFFICE FOR LEASE: Buffalo Grove/Long Grove area. Excellent visibility. Up to five operatories, fully plumbed; two lab areas; private office; large reception area. Flexible lease terms. Available immediately. Call Kelly at (847)913-1400.

SPACE SHARING

NEWLY DECORATED AND EQUIPPED, including IV sedation, dental office is available for sharing with specialist or GP. Located west of Old Orchard mall, at the exit from 94 and close to public transportation. Call Dr. Abe Dumanis, (847)329-9858. Fax resume to (847)329-9768.

POSITIONS WANTED

FOR THE COMFORT of your patients: General dentist is available to work in your office, performing surgical extractions and removal of impacted third molars. Fax inquiries to (847)940-9885.

DENTIST SEEKS FT/PT: Recent graduate looking for FT/PT associate position in the north and northwest suburbs. Look forward to hearing from you. beatonk@gmail.com.

TUFTS GRADUATE, EXPERIENCED, quality-oriented dentist in all phases of dentistry seeks long-term opportunities in established practice with buy-in/buy-out potential. Will consider all options. (773)865-7271.

OPPORTUNITIES

DENTAL OFFICE IN BEACH PARK seeks part-time dentist and dental lab technician. Great income potential. Please call Vicky at (847)872-5530.

IMMEDIATE POSITION AVAILABLE. We are looking for an associate to work in our near southwest suburban practice on a guaranteed income basis commensurate with experience. If you are interested in discussing this further, please write to us at Box F1102-A2, *CDS Review*.

OPPORTUNITY TO JOIN practice in West Town. Must be enthusiastic, personable individual with good people skills. Full- or part-time. Call Nidza at (773)235-1171.

GENERAL DENTIST: FULL- OR PART-TIME. Partnership available as well. Very high income potential. We are a seven-dentist group practice with specialists. Three locations. 95% fee-for-service. No Public Aid. Call Harry at (773)978-1231.

JOIN OUR FRIENDLY staff. Full-time general dentist needed for Southeastern Wisconsin. Fee-for-service. Excellent opportunity to grow with us. Call Nora at (262)886-1957.

ENDODONTIST AND DENTIST WANTED: Schaumburg general practice seeks part-time endodontist and dentist to join our team. Excellent opportunity for recent graduates. Polish speaking desired. Fee-for-service, no HMOs. (847)534-7000.

HYGIENIST IS NEEDED

Go to work and have fun!
Elegant, friendly practice in
Naperville area seeks a part-time hygienist.
PLEASE CALL (773)742-2110

GENERAL DENTIST NEEDED, part-time or full-time at new office. Good compensation, 30 minutes south of downtown Chicago. Office accepts Illinois Medicaid. Please call (708)884-0108 or (708)439-4655.

DENTIST NEEDED: FT/PT associate for offices in Chicago and Western Suburbs. Earn \$250,000-350,000 working in a great environment with paid malpractice and health insurance. Fax (312)274-0760 or e-mail dwoolle@gmail.com.

DENTIST NEEDED: Part-time dentist needed for busy suburban offices. Guaranteed base plus commission. Please call (630)935-0268.

GENERAL DENTIST NEEDED, part-time, three or four days. Public Aid ID# helpful. Call after 12 p.m. (773)745-7188. Ask for Grace.

DENTIST WANTED to examine, evaluate and treat patients at the Infant Welfare Society of Chicago dental clinic. Dentist will work within guidelines established by the American Academy of Pediatric Dentistry and the clinic in a prompt manner, including counseling parents and children on preventative dentistry, and accurate and legible charting. Other responsibilities may be assigned by the dental director as needed. Candidates must be graduates of accredited dental programs with IL licensure and either post-graduate training in pediatric dentistry or one year experience treating children. Reply with CV to Box F1105-F2, *CDS Review*.

GENERAL DENTIST: Established group practice in the Midway Airport area seeks part-time general dentist. Multi-specialty office offers excellent opportunity for the right individual. New graduates are welcome. call (773)284-1645.

PEDODONTIST AND ENDODONTIST wanted to join state-of-the-art specialty-only practice with offices in Grayslake and Buffalo Grove. Rewarding opportunity in a very creative setting. Send resume to Box E0905-E1, *CDS Review*.

DENTALCARE PARTNERS is an established practice management development company operating in nine states (Illinois, Indiana, Michigan, Ohio, Pennsylvania, Wisconsin, Kentucky, Tennessee and North Carolina). We are currently seeking highly motivated general dentists as well as specialty dentists and orthodontists for full- and part-time positions. The ideal candidate must be concerned with quality patient care, be a team player and have a strong desire to learn, grow personally and professionally. Benefits will include a guaranteed salary with attractive earning potential, partnership opportunity, 401(k), health insurance, term life and vision insurance, short- and long-term disability, malpractice insurance, paid vacations and continuing education. Interested candidates please contact Deborah Hammert at (800)487-4867, ext. 2047, e-mail her at dbammert@dcpartners.com, or fax resume to (440)684-6942.

GP/PEDO POSITION NEEDED: Busy West Town Chicago group practice seeks GP/pedo for employment. Large referral base. Interest in IV sedation a plus. Fax resume to (847)492-8865.

DENTAL DIRECTOR WANTED to manage all activities of the dental clinic at the Infant Welfare Society of Chicago. Director will supervise dentists and hygienists, provide leadership for all dental staff, and provide clinical dental services for patients. Duties include hiring and supervising staff, including annual merit review for each staff member; developing job descriptions as needed; maintaining and verifying personnel files; developing policies and procedures in accordance with the American Academy of Pediatric Dentistry guidelines; managing dental services; and negotiating equipment purchases and dental contracts. Candidates must be Board-certified pediatric dentists and licensed in IL; and have two years experience with post-graduate training in pediatric dentistry. Reply with CV to Box F1105-F1, *CDS Review*.

ENTREPRENEURIAL, ENTHUSIASTIC dentist wanted: Downtown Chicago practice. Excellent opportunity to develop advanced diagnostic and treatment skills and grow professionally. Potential for ownership/partnership. E-mail CV and note what you are looking for now and in five years. What are your entrepreneurial ideas for marketing yourself? seniordoc@gmail.com.

\$250,000 ANNUAL SALARY guaranteed for full-time, experienced general dentist in Chicago. The \$250,000 salary is the starting salary, with an increase to \$300,000 within 12 months of your start date. Must be proficient in endodontics, veneers and crown and bridge. Call (312)933-3730 or fax resume to (312)849-9109.

LOTS OF DENTISTRY TO DO. Brookfield practice with great street presence, no HMO and few PPOs looking for full or part time associate. great team in place call (312)274-3322.

OUR FEE-FOR-SERVICE PRACTICE ON Chicago's Northwest Side includes three restorative dentists, periodontist and orthodontist. Lab in-house. We treat many comprehensive full restorative cases, including implants. We are looking for a general dentist experienced in cosmetic and restorative dentistry and an orthodontist. We are also looking for a Polish-speaking, caring individual who is willing to share his knowledge with others and learn from our experienced professionals, and have an appreciation of practice management. Please call (773)625-2626.

FULL-TIME ASSOCIATE, TWO HOURS SOUTH of Chicago. Well established, general practice in Bloomington, IL, seeks full-time associate with opportunity for partnership. Beautiful, high-tech office providing comprehensive fee-for-service only dental care. Generous base, w/ bonus package, medical and malpractice provided. Excellent opportunity for the right individual to provide ethical, conscientious therapy with a personal touch. Fax resume to Dr. Emil Verban Jr., (309)662-7617, or e-mail e.mu@verizon.net.

MULTI-SPECIALTY PRACTICE looking for an endodontist, oral surgeon and periodontist to join our interdisciplinary team. Two modern, busy locations. This is an excellent opportunity with an attractive earning potential. Fax resume to (773)327-3208 or e-mail gmd-ddbax@hotmail.com.

ASSOCIATE GENERAL DENTIST needed for our multi-doctor, multi-specialist practice in the northwest suburbs of Chicago. State-of-the-art equipment and a well-trained staff are in place to match your exceptional clinical skills. Three days a week with potential for full-time. Don't pass up this opportunity of a lifetime. Call (847)680-7171 or fax CV to (847)680-4601.

EXCELLENT OPPORTUNITY for a highly motivated dentist to associate with an established multi-office, fee-for-service practice in the Northwest Suburbs. State-of-the-art equipment and a well-trained staff are in place to match your exceptional clinical skills. Three days a week with potential for full-time. Send resume to Box T1106-01, *CDS Review*.

DENTAL RELIEF VOLUNTEERS NEEDED. Dentists, hygienists, non-professional volunteers wanted to treat children in India, Vietnam, Nepal, Guatemala. Make a difference while traveling to exotic places. www.bimalayadental.com, (800)543-1171.

P/T HYGIENIST & P/T DENTAL ASSISTANT wanted for busy Glenview practice. Flexible hours, great pay and bonus. Minimum two years experience required. Fax resume to (847)251-3515.

PEDODONTIST WANTED for beautiful, modern office with North Shore location. A unique opportunity to work in multi-speciality group practice. Partnership opportunity. Please call (708)558-7022 or fax resume to (847)441-7148.

HELP WANTED: DENTIST. Busy family practice near Norridge/Park Ridge in need of experienced, ambitious dentist 2-3 days/week to treat private, fee-for-service patients. Great opportunity for future partnership/purchase in a great area. Call (773)736-5151 or fax (773)594-9997.

GENERAL DENTIST NEEDED in fast growing Aurora office. Digital X-rays, intraoral camera, apex locator, rotary endodontics, electrosurge and more at your disposal. Excellent income potential. Fax resume (847)808-8301.

ESTABLISHED GENERAL DENTIST looking for associate for downtown/northwest suburban office. Please fax resume to (847)715-4485.

DENTIST NEEDED IN PALATINE to provide comprehensive dentistry to children and adults. Dentist with experience and Spanish-speaking a plus. Please fax resume (847)776-8061 or e-mail rxjustsmile@yahoo.com.

DENTIST: LOOKING FOR A PART-TIME associate to work independently in small north suburban office, 2-3 days/week. Ideal for recent graduate. Please call (773)761-7442.

DENTAL ASSOCIATE: Our beautiful, new, flourishing practice in Aurora has full-time and part-time opportunities available for a general dentist. New graduates welcome to apply. Please fax to (630)892-6873 or e-mail krishbandental@yahoo.com.

ASSOCIATE GENERAL DENTIST: Growing practice in Palatine seeks a skilled dentist, good with kids and adults, with a minimum two years experience. Needed 3 days/week. Crown and bridge and endo experience a plus. E-mail kpapaz3@yahoo.com or fax (847)967-0760.

DENTIST NEEDED to treat adult HIV+, pediatric populations, part-time. Support underserved population. Resumes to Stuart Iseminger, Howard Area Community Center, 7648 N. Paulina, Chicago, IL 60626; or fax to (773)262-2460.

GREAT TEAM, ESTABLISHED PRACTICE IN Olympia Fields seeks a part-time dentist to take over from a departing associate. Solid patient flow, no HMO. Must have a minimum of three years experience and good verbal skills. call (312)274-3322.

DENTAL ASSOCIATE WANTED: Established dental practice seeks associate to take over duties at one of two west suburban practices. Salary guarantee with escalating commission based on collections. Buy-in possible. Fax resume to (630)910-1049.

PEDIATRIC DENTIST WANTED for a very busy office on the west side of Joliet. Flexible hours. Please contact Kim at (815)725-4269, Mon-Sat.

MULTI-SPECIALTY/GROUP PRACTICE near downtown seeks general dentist experienced in cosmetics, restorative dentistry, nitrous oxide and has an appreciation of practice management. Very busy, fee-for-service office offers great opportunity for future growth. E-mail makeoverdoc@sbcglobal.net.

HELP WANTED: ORTHODONTIST needed part-time for association with busy, private, intramural group in near-downtown medical center. Ideal for young grad or quasi-retiree looking to treat patients one day per week or only a few days per month. Carries clinical privileges with faculty/staff appointment. Call office manager at (312)829-4208 or fax resume to (312)829-0987.

ASSOCIATE WANTED for busy Oak Lawn dental office. Please fax resume if interested to (708)598-0813, Attn: Nancy.

ASSOCIATE, LEADING TO PARTNERSHIP: Seeking an experienced general dentist bringing enthusiasm, dedication and compassion to join my beautiful, progressive Des Plaines office. E-mail aldental@mac.com.

ASSOCIATE DENTIST WANTED for quality fee-for-service general practice in Oak Lawn. Needed Saturdays and Wednesdays. Experienced staff provides excellent support. Call (708)423-5155 for details.

ST. CHARLES OFFICE LOOKING for a skilled people person, two days a week to start. Must have two years experience or GPR and must be good with kids as well as adults. Fax resume/letter of interest to (630)762-9966.

GENERAL DENTIST TO START P/T OR F/T: Great opportunity to join a beautiful, newer practice in far west suburbs. Must have good clinical and communication skills, be highly motivated and interested in future partnership. Office is state-of-the-art and does not accept HMO or Public Aid. Minimum two years experience required. Fax resume to (312)276-8871.

ASSOCIATE WANTED: Growing practice in northwest Chicago suburb is looking for a part-time dentist with a minimum of two years experience. Endo and extraction experience is a plus. Please email cover letter and resume to cl_dental@yaboo.com.

GENERAL DENTIST WITH EXPERIENCE needed: Joseph A. Toljanic and University Dental Associates are looking for experienced general dentist to join our team with specialists on board. Multiple locations. Please call (630)743-0020 or fax (630)960-3135.

\$1.4 MILLION PPO PRACTICE IN GENEVA looking for associate dentist/buy-in, Eaglesoft, digital X-ray, Cerec, voice activated charting, I/O cameras, Diagnodent. Long term staff. Fax CV to (630)232-0051 or mail to John R. Cook, DDS, 127 Hamilton St., Geneva, IL 60134.

ASSOCIATIONS WANTED

GENERAL DENTIST ASSOCIATE: Our well-established (1911) private group practice, located in downtown Chicago, seeks another general practitioner, FT or PT, to join our practice as an independent contractor associate. The incoming new associate can either have an ongoing patient following or join us without a patient following. In either case, we will refer patients, new and established, to the new associate to keep him/her busy, initially, at least part time. This is an ideal arrangement for a general dentist to work on his/her own patients within a group environment, without the stresses of maintaining the physical structure of an office, thus providing ample private time and energy to devote to a family, retirement activities or other personal interests. If interested, please call (312)649-1854 evenings.

ENDODONTIST WANTED part/full-time. Join a group practice. Naperville. Call (630)355-9010, or fax resume (630)355-9926.

PERIODONTIST NEEDED one/ two days a week to join established practice in Northwest suburbs. Please Call (847)465-0800 or fax resume to (847)465-0053.

SEEKING DENTIST TO ASSOCIATE in family practice in Chicago western suburbs. Beautiful new office and excellent staff. No PPO or HMOs. Strong patient base. Please mail resume to T.M. Shanahan, P.O. Box 9367, Naperville, IL 60567.

MISCELLANEOUS

SANIBEL ISLAND VACATION CONDO Discount for ADA members. On the beach. 2B/2B and loft. Sleeps 6-8. Kitchen. Screened porch, pool, tennis. For information, e-mail sanibelcoquinabeach1b@bugbes.net.

THE CHICAGO DENTAL SOCIETY HAS school excusal forms for your student-patients to use for dental appointments. School excusal forms come in packages of 250 and cost \$12.95 per package. All orders must be prepaid. To place your order, send a check made payable to Chicago Dental Society, Excusal Forms, 401 N. Michigan Ave., Suite 200, Chicago, IL 60611-5585. To pay by Visa or Mastercard, call (312)836-7326. Allow 10-14 days for delivery.

LOOKING TO PURCHASE

I WILL PAY FULL PRICE FOR YOUR PRACTICE and you can continue to practice if you wish. No brokerage commission. FAX inquiries to (877)581-5499.

FOR SALE BY OWNER

ESTABLISHED, 24-YEAR-OLD PRACTICE located in Midway Airport area. Options include immediate or transition buy-in/buy-out, or possible partnership. No temporary associates. Call (708)424-5700 or e-mail doctoruby@sbc-global.net.

NORTHWEST SUBURB: 100% fee-for-service (almost no PPO), net \$150,000-\$175,000+ working 18-20 hours per week, 44 weeks/year. Two PT employees. (815)814-1313. Priced for quick sale.

EXCITING ESTABLISHED PRACTICE in Northwest Suburb; fee-for-service, last three years average collection: \$485,000. Four operatories, digital X-ray, DVD suspended screens describing treatments. Owner can remain for 6-12 mos. Reply to Box S0906-X1, *CDS Review*.

DENTAL PRACTICE FOR SALE. Modern, West Loop location. Newly built-out. Two operatories. Street level. Floor-to-ceiling windows, exposed brick, hardwood floors. High-traffic area. Lots of new construction in area. Great growth potential. \$173,900. Call (312)623-0122.

PRACTICE FOR SALE, SOUTHWEST SUBURBS: Well-established, general dental practice located in area of explosive residential growth. \$1 million gross working four days/week. Stand alone building is also available. E-mail suspractice@aol.com.

NORTHFIELD: FANTASTIC OPPORTUNITY. Excellent location. Two operatories with room to grow. Recent remodel including flooring, paint, bath, custom cabinets and granite counters. Call for more information. Only \$70,000. (847)784-9800.

ORLAND PARK: 100% fee-for-service, great location in lucrative area. Four modern, fully-equipped operatories and Panorex. Ample parking, free-standing building on ground level. Call (219)924-8018.

PRACTICE INCLUDING REAL ESTATE General practice and 3-op condo located on Ogden/First in Lyons. Great opportunity for established practitioner or recent grad! Call (708)448-3355. Financing available. \$245,000.

GREAT DEAL: GENERAL DENTAL PRACTICE. Well-established, 15 years in business, with good visibility on two main streets in the northwest suburb of Mount Prospect. Two fully-equipped operatories, X-ray machines, sterilizer, etc. Recently remodeled. All fixtures and equipment in excellent condition. Great patient base, \$235,000 gross, on only 2 1/2 days/week with excellent potential for more. Owner relocating out of state. Call (847)439-6332. Asking \$199,000.

GLENVIEW DENTAL OFFICE FOR SALE: 2,700 square feet. Seven fully equipped operatories. E-mail glenviewdmds@gmail.com.

NORTHWEST SUBURBS: \$215,000 in collections. High-traffic area. No HMOs. Low lease. Overhead less than 45%. Easy, relaxed pace; friendly, reliable staff. Dentist relocating. Call (847)459-3367. Ask for Joanna.

LAKE FOREST: 45-year-old dental practice. 1,300 square feet with improvements. Excellent parking. Dentist retiring. Write Box A0102-A2, *CDS Review*.

CABINETS AND DENTAL CHAIRS FOR SALE. Great for a starter practice. Three dental chairs and three a-dec dental cabinets, rear delivery, for sale. Ready to sell, make us an offer. Very good condition. Call (773)774-4611. Ask for Anna or Geri.

LASER FOR SALE: Biolase/Waterlase hard and soft tissue. Valued at over \$45,000; selling everything for \$25,000. Super cheap way to start laser dentistry. Includes manuals, handpieces, new and used tips. Call (847)358-9700.

PHILIPS ORALIX PAN DCIII CEPH: Excellent working condition. Very clean Panorex machine. Model PT-11 P/C Serial# H90394 MFG. June 1989. Located in Chicago. \$3900 or best offer. Call Phil, (630)202-8725.

FOR SALE BY BROKER

SENATE MANAGEMENT:

For more information on any of the practices listed below, please call Wendy Pesavento at (630)466-9690 or (888)264-2797, or visit our web home at www.senatemangement.com.

ILLINOIS:

BARTLETT #8020: New listing! Three operatories in a strip mall. Newer equipment and buildout. Collections: \$350,000. Great opportunity for bilingual Spanish speaking dentist.

BELVIDERE #7094: Four operatories in a stand-alone building. Collections: \$540,000, three-day work week. 100% fee-for-service.

BROOKFIELD #7088: Two operatories with possible expansion. Street level storefront. Newer equipment. Collections: \$200,000. Fee-for-service and PPO. Great start up alternative.

CHICAGO #7037: Foster and Pulaski area. Sold!

CHICAGO #7083: Dental building near the new Chicago Fire Soccer Stadium. Recently updated.

CHICAGO #5003: Loop. Under contract! Four operatories in the Pittsfield Building. \$307,000 collections. 850+ active patients.

CHICAGO #7035 Navy Pier: Three new operatories in Lake Point Towers. Beautiful views. Paperless. 100% fee-for-service.

CHICAGO #6076: Belmont and Austin area. Motivated seller! Three operatories at street level. \$200,000 collections. Fee-for-service and PPO. Make an offer!

CHICAGO #7082: Belmont and Pulaski. Sold!
GLEN ELLYN #8028: Under contract! Three operatories in a street level storefront.

Anticipated collections: \$240,000. Fee-for-service and PPO. Owner relocating.

HIGHLAND PARK #7061: Sold!

LAKE IN THE HILLS #8016: New listing! Three operatories in a strip mall. Newer equipment and buildout. Collections: \$600,000. Fee-for-service and PPO only.

LINDENHURST #6075: Four operatories plus two plumbed in a strip mall. Equipment only.

OAK LAWN #7036: Two operatories. Newer equipment and buildout. Collections: \$300,000. Paperless. 100% fee-for-service.

WAUKEGAN #8012: New listing! Two operatories expandable to three. Collections: \$150,000. Fee-for-service and PPO. Doctor retiring. Great start up alternative or second practice.

DENTAL OFFICE BUILDING FOR SALE: Three operatories with new copper plumbing, easily converted into four ops. Sterilization and dark room, spacious doctor's office, paved parking (15 cars). Completed lower level with separate entrance. Large enough for a professional dental lab. (312)933-6330.

THE DENTAL MARKETPLACE/American Dental Sales: Practice sales, appraisals, and consulting. Contact Peter J. Ackerman, CPA, at (312)240-9595 or www.dentalsales.com.

SELLERS NEEDED. We have qualified buyers for your practice!

CHICAGO LOOP: Three opportunities in Chicago Loop.

CHICAGO, NORTHWEST: 100% fee-for-service. Five-operator practice grossing \$600,000. Associate to purchase.

CHICAGO NORTH SIDE: Pending.

ELMWOOD PARK: Great Location with high visibility, newer equipment. Mostly fee-for-service. Three operatories with room to expand. Grossing \$300,000.

NORTHWEST SUBURBS: Grossing \$1.8 million. Pending.

CRYSTAL LAKE: Newer equipment, digital office. Cheaper than building out.

BROOKFIELD/LAGRANGE AREA: Two-operator, low-overhead practice with undeniable potential. Grossing \$190,000.

BROOKFIELD: Gross mid-\$400,000s. Fee-for-service with room to expand. Great visibility.

FOREST PARK: Grossing \$250,000. Three operatories. Building for sale with the practice.

CRETE: Sold.

BURR RIDGE: Four operatories with room to expand. 100% fee-for-service. Collections: mid-\$500,000s.

ROCKFORD AREA: Sold.

NORTH CENTRAL ILLINOIS: Grossing \$150,000, with building.

NORTH CENTRAL ILLINOIS: Grossing \$440,000. 100% fee-for-service, with building.

NORTHWEST ILLINOIS: Small starter in a rural community. Building for sale with the practice.

WISCONSIN: Sold.

WISCONSIN: 100% digital, fee-for-service practice grossing \$400,000. Professional building in a very nice community in Western Milwaukee. Priced to move!

PEDIATRIC PRACTICE: \$2 million+, fee-for-service practice just outside Chicago suburbs.

HENRY SCHEIN Professional Practice Transitions: Associateships, equity buy-ins, practice sales, practice valuations. We have qualified buyers! Contact: Al Brown at (800)668-0629 or al.brown@henryschein.com.

UPCOMING LISTINGS: Four practices in central and southern parts of state, one practice in northwest suburb of Chicago, two practices in DuPage County. Contact Al Brown, (800)668-0629.

CHICAGO: Owner retiring from this well established three-operatory office. Tremendous upside. Purchase of building also an option. Call Al Brown, (800)668-0629.

CHICAGO NORTH: Wonderful upside potential on major street with excellent visibility! Long-time practice for sale. Doctor moving out-of-state. Call Al Brown, (800)668-0629.

COOK COUNTY: Excellent opportunity to acquire patient base for a merger or to start new practice from this \$500,000 annual production office. Call Al Brown, (800)668-0629.

CHICAGO AREA—NORTH SHORE: General practice for sale. Owner of high-end practice with over \$1.2 million annualized growth rate seeking 50% partner in northern suburbs. Call Al Brown, (800)668-0629, for more details.

KANE COUNTY: Great Location. One of fastest growing counties in Illinois. Three ops with room for growth as current dentist working part-time! Please call Al Brown, (800)668-0629.

INDIANA—Madison County: Well established practice with historical production of approximately \$500,000 annually. Recently remodeled, four operatories and plenty of room for expansion. Call Al Brown, (800)668-0629.

MISSOURI—Northeast: General practice for sale. Three-op FFS practice in 1,800-sq.-ft. stand-alone building. Practice in present location for 29 years. Great starter practice for new dentist in growing community. Call Deanna Wright, (800)730-8883, or e-mail ppt@henryschein.com for more information.

WISCONSIN—Janesville: General practice for sale. This beautiful 1,800-sq.-ft. office includes five ops fully computerized with digital X-ray and CEREC unit. 2005 gross receipts were \$900,000. Well trained and dedicated staff. Two full-time hygienists. Owner retiring; will help with transition if desired.

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Boondoggle

Last year I wrote about the Florida-based Orthodontic Education Company (OEC), which operates 12 “imagine” orthodontic clinics across the United States. Finding orthodontists to staff its facilities proved to be more difficult than envisioned, so the company came up with an innovative (some would say insidious) plan to grow its own. It funded students at orthodontic programs at the University of Colorado Dental School in Denver, the University of Nevada at Las Vegas (UNLV), and the advanced specialty education program in orthodontics and dentofacial orthopedics at Jacksonville University in Jacksonville, FL. The students receive \$60,000 a year, half of which is applied toward tuition. In turn, upon graduation the students are under contract to work at OEC clinics for seven years with a salary of \$150,000 a year.

As a pot sweetener, the company’s founder, Gaspar Lazarra, pledged \$3.5 million to build a new facility, estimated to cost \$16 million, at UNLV. Unfortunately, Mr. Lazarra has only come up with \$1.75 million and has asked for a timeout of two years for the other half—AND the company told the school that it would “temporarily” withdraw its student support.

The quid pro quo scheme’s implosion has left UNLV officials scrambling to control the damage.

There is much finger pointing to spread around: the plan was given the imprimatur of John Gallagher, who as vice president of fundraising characterized the financials he reviewed as “solid;” and then-UNLV President Carol Harter, then-Provost Ray Halden and then-dental school Dean Pat Ferillo made promises to the university regents based on the examination of the plan. (All three have since left UNLV; Dr. Ferillo became the new dean of the University of the Pacific, his third deanship in a very short time.)

Dr. Ferillo told the UNLV regents that the program

would not be launched until the full \$3.5 million initial gift was received. Halden said the money would be an endowment to generate income and insure sustainability. Regents were told that the OEC money would be used to expand other specialty programs so that if OEC pulled out that second phase could be scratched, although hires have already been made in the specialty disciplines for 2007. Mr. Gallagher has no memory of reviewing OEC’s audits and added the person responsible for donor reviews is no longer with the university.

The regents poured over the financials, asked for assurances that the OEC funded students would not receive preferential treatment, and requested numerous changes in the contract. They asked difficult questions, the toughest being, “Are the graduates indentured servants?” It would be hard to make a case for servitude when an orthodontist is promised \$150,000 a year. However, the average net of an orthodontist over seven years could easily exceed the \$150,000 paid by OEC even factoring in start-up costs for a new practice and ongoing overhead. But at the end of seven years, an orthodontist also has equity in a practice. As employees, OEC’s orthodontists have pay stubs but little else to show for seven years of work. In the end, the UNLV regents approved the contract by a vote of 8-3.

Besides the \$1.75 million shortfall, UNLV is faced with a deficit of up to \$450,000 from loses in tuition for the orthodontic program. The administration has floated a tuition raise to \$45,000 from \$30,000—a scheme that is vehemently opposed by the regents—and/or a reallocation of money from a recent property sale—a move labeled by the regents as “robbing Peter to pay Paul” or a “shell game.”

So, what caused this imbroglio? Were the powers at UNLV naive, were they suffering from chronic hubris, or is this just a case of malfeasance? Personally, I think they were greedy, which is not deadly unless you combine it with just plain dumb. What have we learned from this mess? Entrepreneurship has no ethical place in a university. Sleeping with dogs exposes one to fleas. Oscar Wilde said, “grub first then Ethics.” ■

Write Dr. Lamacki at wlamacki@aol.com.

WERE THE POWERS AT UNLV NAIVE, WERE THEY SUFFERING FROM CHRONIC HUBRIS, OR IS THIS JUST A CASE OF MALFEASANCE? PERSONALLY, I THINK THEY WERE GREEDY, WHICH IS NOT DEADLY UNLESS YOU COMBINE IT WITH JUST PLAIN DUMB.