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DCDS connection

May/June 2022
Volume 15, Issue 3

Official Publication of DCDS
A tradition of integrity and care since 1908

DALLAS COUNTY DENTAL SOCIETY

Mission Statement

Serving the professional needs of our members

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Charity Dental Summit

DCDS Foundation holds third annual event

On behalf of the DCDS Foundation, Dr. Robert McNeill facilitated the third Charity Summit held at the DCDS Executive Office. Included in the meeting were representatives from various charitable organizations that focus on providing dental services to the underserved members in Dallas County.

It was uplifting to hear that the previous two Charity Summits brought about collaboration between several of the charities, and that they are still working together. Listening to each group share information about their clinics warmed your heart with what they provide for the community. Many of the clinics not only have dental but medical and mental health services as well.

Shared among all the charities is a passion for giving back. But also shared within these charities is an abundance of patients, a shortage of dentist volunteers and a shortage of funds for removable prosthetics.

If you would like to volunteer with one of our Charity Summit organizations listed below, contact Ms. Rosemary Martinez at the DCDS Executive Office, 972-386-5741 ext. 225 or email rosemary@dcds.org. You can also fill out the volunteer form at https://www.dcds.org/member-center/volunteering.

Agape Clinic

A charity clinic with no income verification required, the Agape Clinic seeks to provide quality healthcare services unconditionally to underserved people.

Attitudes & Attire

Dedicated to promoting personal growth for women seeking self-sufficiency, Attitudes & Attire's Hopeful Smiles program provides the tools to raise self-esteem, promote ethics and build the confidence necessary to develop successful life skills. They also have a Boots to Heal program for veteran women.

Grace Center Texas

The Grace Center Texas in the Dallas-Fort Worth area offers dental care and treatment to indigent adults and children who are living at or below the poverty line.

Mission East Dallas

This multi-location medical and dental health center offers primary medical and dental services.

...continued on page 18

2022 Charity Summit attendees



The Write Stuff

Missy Jaynes, DDS, President

In Thanks



""Fight for the things that you care about, but do it in a way that will lead others to join you."
— Ruth Bader Ginsberg

Last May I took on the roll of president of the Dallas County Dental Society, and I really did not know how I would be as president. Would I know what to do? Who would help me? Would I enjoy being president? Would I learn a lot? Would I be a voice for our fellow dentists? Would I look like a fool? Would someone even remember my name? Well, I am not sure of some of the answers, but I do know that I really enjoyed my time in this role!

As my tenure as President of DCDS comes to a close, I must say that it has been very busy as well as exciting this past year. I have learned very much, and I have been to so many meetings in-person and on Zoom that I have lost count. The amazing team at the DCDS office was my saving grace. It was a joy to work with each and every one of them. Jane is a wealth of knowledge and her leadership on the behalf of all of us is a gift to our society. I am so happy I got to work with her, and I think I made her laugh a time or two. Rosemary really has a gift in writing and I so appreciate all of her help. Ashley has it so together and anything I needed she had to me so quickly. I can't imagine not having these ladies to help me.

I want to really thank our Board of Directors for their energy and wisdom. They took a lot of time out of their personal lives to support me as well as our Dallas county members. We got to know one another really well, and I feel like I have wonderful new friends. I want to really thank Jodi Danna as my Parliamentarian. She knows the rules backwards and forwards and was a tremendous help. She is a superb friend and I appreciate her!

I hope that all of us mentor someone and encourage them to join and be an active part of DCDS. We all understand the strength as a large group in organized dentistry, in Dallas as well as in Texas and in the US. Increasing our membership increases our votes, which in turn strengthens our voice. I challenge each one of us to bring in a new member in the coming year so we can increase the number of delegates representing us. And I challenge Dr. Mary Swift, our incoming President, to continue what we as a society have done. She will do great!

Dr. Jaynes opening the April General Membership Meeting.





DCDS Connection is published bimonthly for the members of DCDS, 13633 Omega Road, Dallas, Texas 75244. First class U.S. postage is paid at Dallas, Texas. Subscriptions are free to DCDS members, and non-members may purchase copies for $10 per issue. Digital archives are available at dcds.org.

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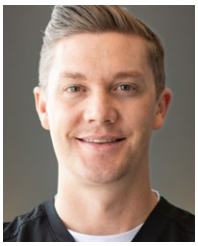
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Member Publication
AADEJ
American Association of Dental Editors & Journalists

Impressions

Editorial by Shad Hattaway, DDS, Editor

You Better Watch It Interproximal Decay – We are Coming For You



We have all done it, we have all seen it, and we all seem to disagree on when to do it. Some of us don't call it a watch; we call it a "monitor." Whatever you call it, our best professional judgment was not treating a tooth by recommending a restoration based solely on radiographic examination. When is the prudent time to monitor/watch a tooth with early stages of decay/decalcification?

Outside of our main practicing offices, we will never really have an answer to the appropriate time to start restorative treatment on beginning signs of interproximal decay. Is it conservative, or is it supervised neglect? Is it too aggressive? Are there better ways to intervene with this patient before we do irreversible damage to someone's tooth with our high-speed dental handpiece? Have we gathered enough information to know this is what is best for the patient? All these questions are on my mind when thinking about a treatment recommendation for a patient.

The term "watching" has always been peculiar because I constantly watch what happens in someone's mouth, whether I have placed a restoration or not. In fact, I'm more interested in seeing if my previous class II restoration is clinically sound and still holding up years down the road. I have an investment in this patient now because I want my restorations to look good and last as long as possible.

We all know that radiographs alone are not enough to diagnose primary or recurrent caries. Radiographs only detect changes in mineral density, not cavitation. We have to take into account clinical findings as well. Believe it or not, the confirmation of our diagnosis comes when we clinically cut into the tooth and clinically see the decay. Pulp vitality tests should also be considered before we start cutting into a tooth. How many of us do a vitality test on a primary carious lesion just through the DEJ? I don't do it every time because it can be uncomfortable for the patient, and all signs and symptoms point to the tooth being vital.

I used to volunteer at a clinic that was still using film radiographs. I can confidently tell you that our digital X-rays have been an enormous blessing for diagnosing interproximal caries earlier. I had several instances where I was set only to do an occlusal composite, and as the decay removal progressed, I could see the cavity going interproximally. I stopped the procedure and stared more intently at the radiograph, and still, nothing was visible. After a few days of getting my treatment recommendations wrong, I was much more in line with how I needed to treatment plan in that clinic. It was much more aggressive than how I treatment planned in my own office. With the changes in our technology, we also have to change our treatment philosophy.

The ADA Council on Scientific Affairs has released guideline updates for when to treat interproximal caries in the last few years, with additional years of research to support it (https://jada.ada.org/article/S0002-8177(14)00029-4/fulltext). Now I know the ADA is not a governing entity, but remember that our licensing board here in Texas references ADA guidelines in their rules and regulations, making them law (see TSBDE rules for frequency of radiographic examination). When denying our dental claims, insurance companies referencing this information can affect our day-to-day practice. Getting our claims denied is why we have to be very diligent in gathering our information. A denied claim does more than just transfer the financial burden to the patient; it also changes the trust the patient has with us.

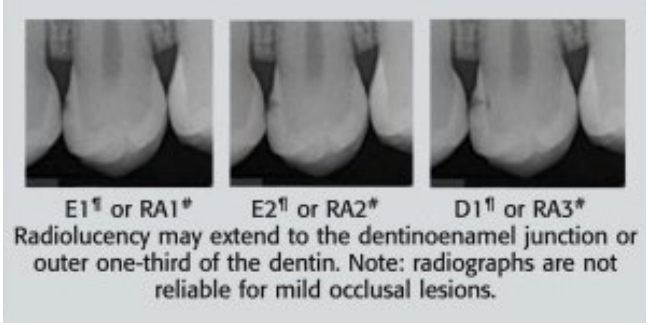
"However you practice, the age of digital data is among us, and more information gathering and cataloging is a must.

This article stemmed from the mobility patients now utilize for their dental care. We can easily have a new patient who was told they had no decay six months ago (the patient was told they had decay in a good scenario but no recommendations for treatment). Our broad approach to treatment philosophy creates a rift between the patient who bounces around and our profession.

How do we adjust to the changing environment? The answer is pretty simple, but it takes time that some of us do not have in our offices. We take intraoperative photos. Take those before and during treatment photos to justify your approach, and take a post-op photo for your professional satisfaction.

I have been practicing in one place long enough to have my office and equipment fine-tuned for my professional recommendations. That being said, my recommendations only hold true to my patients seen in my office. I can not say someone else's recommendations are wrong based solely on a single radiograph. However you practice, the age of digital data is among us, and more information gathering and cataloging is a must. Stay safe, and God bless.

Would you treat these teeth?



E1¶ or RA1* E2¶ or RA2* D1¶ or RA3*
Radiolucency may extend to the dentinoenamel junction or outer one-third of the dentin. Note: radiographs are not reliable for mild occlusal lesions.

From The Hub

by Jane D. Evans, Executive Director

Updates



Membership

Hats off to Dr. Danette McNew who reached out to over 600 nonmembers encouraging to sign up for the TDA 15 for 12 initiative. As a thank you for her efforts she was one of three members of TDA that were awarded free membership for 2022. Many thanks, Dr. McNew!

The DCDS Membership Committee sponsored goodie bags for the 4th year dental students at Texas A&M University College of Dentistry to wish them luck and enjoy while taking their WREB exams. Many thanks to Erik Meckel, who represents TAMUCOD on the DCDS Board of Directors, for delivering the goody bags to the very grateful students!



Shred-a-Thon

DCDS held the 13th annual Shred-a-Thon, and it was refreshing to be back in person and mingle with members while everyone enjoyed lunch by Mr. Hamburger Man. Enjoy photos of the event on page 12.



DCDS Dental Assisting School

Ms. Angela Bush, Program Director for the school, and Dr. Lee Oneacre, in above photo with students, have received training as BLS instructors. In the near future, the courses will be offered to DCDS members and their teams.

I am pleased to report that upon graduation each student has a dental assistant position or soon after. Ms. Bush works closely with each student to make sure they complete all their paperwork with the TSBDE and that they find a practice that works for them.

Southwest Dental Conference

Many of us that remember the Dallas Mid-Winter Meeting days when it was held at the Anatole Hotel are thrilled to be going back in August for the 95th SWDC. I remember those bitter cold January days walking outside to the Exhibit Hall, and I received a big surprise when I toured and saw that it is now connected to the hotel. Many things have changed, and some remain the same, but you can rest assured that the warm ambiance is still there. I hope you will review the amazing program Dr. Sarah Poteet and her team have put together and join them in August to celebrate the 95th SWDC.

Veterans Texas Mission of Mercy

DCDS Foundation is hosting a Veteran's TMOM in Dallas so mark your calendar for November 4-5, 2022. Once TDA Smiles Foundation opens volunteer registration, a notice will be sent so you may register.

New Dentists

News and perspective from dentists under 10 years of practice

by Andrea Sauerwein, DDS

The Benefits of Joining a Study Club



Dentistry can be an isolating profession; consistently surrounded by our team and patients, yet always making clinical and administrative decisions independently. This feeling can be amplified if you are a newer dentist, whether it be an associate or getting your feet wet with ownership. Having a resource to turn to in the form of your peers can prove exponentially valuable for clinical questions, managerial dilemmas, as well as camaraderie.

There are a variety of reasons to join a dental study club. Dr. Gordon Christensen shared his petition for study club involvement in a JADA publication, surmising that historically study clubs have had a high degree of loyalty and lifelong membership, but recently young dentists turn to less reliable sources to gain knowledge of concepts and techniques[1]. Dentistry is constantly evolving with new technologies and materials coming onto the market. Being able to stay up-to-date with current protocols in an educated manner is imperative, as opposed to following a stranger's opinion on social media or falling trap to paid advertisements. Busy practitioners cannot reasonably keep up with the continuous research and new discoveries of the industry. Dental study clubs provide a medium through which to learn and share the continuum of information that is steadily released.

Study clubs can be a source of mentorship in that more seasoned dentists can teach leadership, encourage others, and help them resolve issues. In this type of environment, members are willing to share not only their successes, but their failures – the ultimate growth catalyst. This is a key distinction between merely attending a lecture versus having a continuous network of support from your peers. Additionally, general dentists can connect with like-minded specialists and feel more comfortable referring patients to colleagues they know personally. Being committed to an educational method helps many dentists differentiate the type of practice they're working towards.

Study groups can be large and include a wealth of knowledge from a variety of specialties and generations of professionals, or they can be smaller and more personal, facilitating a comfortable atmosphere for open discussion. Some clubs cover a wide berth of subjects from clinical case discussions to practice management. Other clubs focus on niche topics such as Invisalign or dental sleep medicine. Either way, keep in mind a study group is only as good as all its parts. Meaning if the members don't contribute or it's just a forum for self-praise, it's not going to help you learn. Ask around to peers and request to be invited as a guest as many times as possible. Observe the interaction and the quality of the cases or lectures being presented, and ask yourself the very honest question: 'will you interact as well?'

Aim to find a study club that fits your profession goals and facilitates your ability to put this information to use. Per Dr. Linda Edgar, former Academy of General Dentistry president, "Dental study clubs seem to draw your leaders, your givers, and those individuals who want to make things better for not only patients, but the profession. It's not a selfish thing. It's a 'Let me help you' thing."[2]

[1] Christensen, Gordon J. "It's Time to Revive Dental Study Clubs." The Journal of the American Dental Association, May 2001.

[2] DiMatteo, Allison M., and Margaret Martin. "Study Clubs: The Original Social & Professional Network.", Inside Dentistry, AEGIS, 1 Nov. 2011.



Dental assistants who train through the DCDS Dental Assisting School know more than just the basics. They are specialized assistants who can take x-rays and perform CPR. They have foundational knowledge of nitrous oxide sedation and are HIPAA/OSHA proficient. They are trained to work as part of a dental team.

DCDS member dentists are given the unique (and first) opportunity to hire new, fully trained dental assistants from each graduating class.

For more information, please contact the DCDSDAS Program Director, Angela Bush, at info@dcdsdas.org or visit https://www.dcds.org/dental-assisting-school.

DCDS Dental Assisting School

NOW ENROLLING STUDENTS FOR SESSION STARTING JUNE 29.

www.dcdsdas.org

DCDS Member's Message Board

Upcoming Events

May 19 – Installation

June 4 - Women's High Tea

August 26-27 - Southwest Dental Conference

Register at www.dcds.org/events



Welcome New Members!

General Practice

Claudia Appiah
Scott Cannon
Jacob Charlton
Sohail Dar
Andrew Holovnia
David Jeffalone
Morgan Mayse
Martin Nunes
Solaleh Shahmirzadi
Kamalpreet Shallu
Stephani Vera

Orthodontics

Mark Choe
Afra Saleh

Dental Public Health

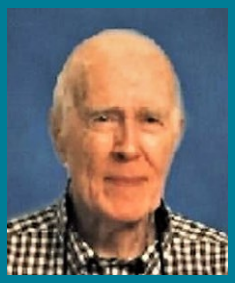
Sowmya Renuka

Dental Anesthesiology

Allison Lee

In Memoriam:

Dr. George Kendrick

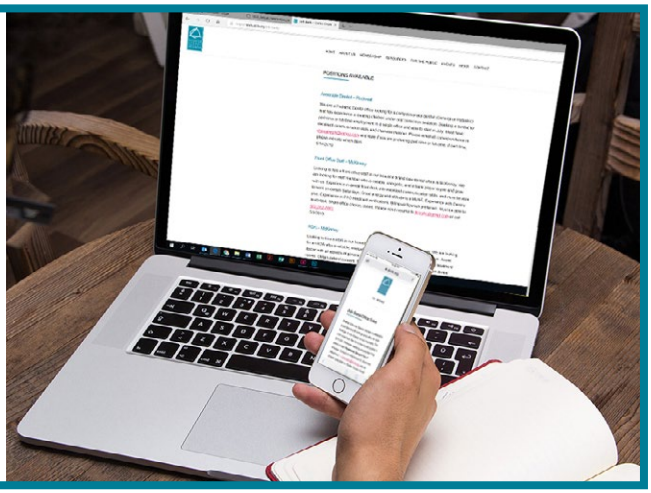


Looking for a job?

Have a position to fill in your office?

Want to sell or buy office space and office equipment?

List it on the DCDS.org Job Bank/Practice Sales! Members list for free ($75/month for non-members.) Email a brief summary (100 words or less, in paragraph format) of the post to: rosemary@dcds.org.





Watching a colleague suffer and feeling helpless is difficult and heartbreaking. Dentists Concerned for Dentists is a 24-hour confidential alcohol and drug abuse hotline you can call for assistance.

Your phone call could be the lifesaving step for someone who is hoping and waiting.

- **Founded exclusively to help dentists, hygienists, assistants and family members.**
- **No fees or charges.**
- **All contact is held in absolute confidentiality.**

The Dentists Concerned for Dentists program provides a strictly confidential peer assistance program for health care professionals who struggle with drug and alcohol abuse. Please share this confidential hotline with your colleagues.

A confidential phone call may be the greatest gift a peer dentist, staff or family member could receive.

DENTISTS CONCERNED FOR DENTISTS

24-hour Confidential Hotline

214-206-7496

HELP YOURSELF

If you're in crisis, there are options available to help you cope. You can call the above hotline at any time to speak to someone and get support. For confidential support available 24/7 for everyone in the United States, you can also call the National Suicide Prevention Lifeline at 1-800-273-8255.

Need Meeting Space?

As a member of the DCDS, you can take advantage of low member rates when renting the Society's Executive Office for your next meeting.

The Dr. O.V. Cartwright Reception Hall is perfect for registration and a pre-function gathering.

The Dr. Paul P. Taylor Executive Board Room can seat 14 around a large conference table.

The Dr. D. Lamar Byrd Auditorium is 1,650 square feet of meeting space that can seat up to 200.

Audio/visual equipment is also available.

DCDS facilities include free parking,free wifi, use of small kitchenette, and ability to bring in food and non-alcoholic beverages.

For more info, contact Ashley Hawkins at 972-386-5741 x231 or email info@dcds.org.





DCDS Membership Benefits

Being a member of the associations that work to protect your profession is important to the success of a practice...pass along the benefits to your peers!

- Free registration to DCDS's annual Southwest Dental Conference
- Peer Review mediation service to reconcile complaints between patients and doctors
- Rent DCDS meeting facilities at special member rates
- Free or discounted continuing education via seminars & General Membership Meetings
- First opportunity to hire fully trained world-class assistants from DCDS Dental Assisting School
- Preprinted school excuse forms provided free of charge to dentists treating school-age children
- Confidential free notary public
- DCDS Connection, the bimonthly newsletter of Dallas County Dental Society (member advertising at reduced rates)
- Member mailing labels available for purchase
- Grassroots legislator contact program with state and national legislative representation
- License renewal reminders
- Networking/social opportunities with colleagues

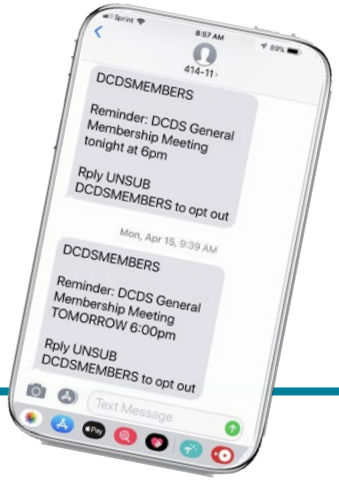
DCDS members receive ALL membership benefits offered by Texas Dental Association, including free entry to TDA TEXAS Meeting.

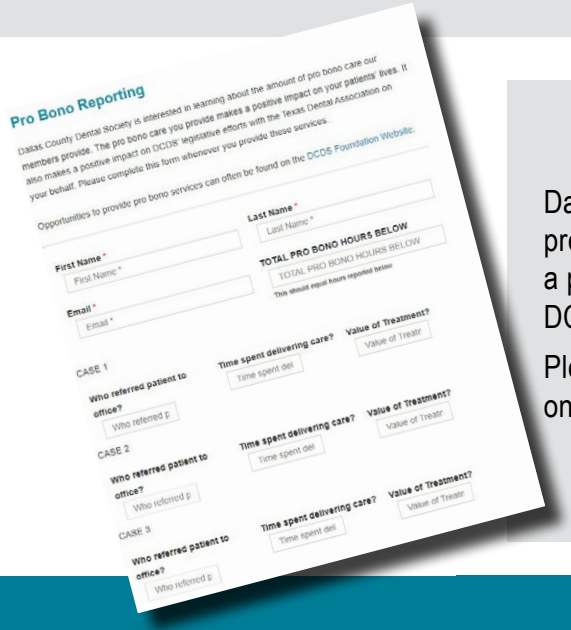
DCDS members receive ALL membership benefits offered by American Dental Association, including photo directory and public referrals through Find-a-Dentist.

www.dcds.org/membership

TEXT MESSAGE REMINDERS: Text DCDSMEMBERS to 37373

Have you ever wished you could receive reminders for DCDS meetings and events? Do you forget to put events/meetings on your calendar? DCDS implemented text messaging so you will not forget another meeting. Just sign up and you will be reminded of future meetings and events.




Pro Bono Reporting

Dallas County Dental Society is interested in learning about the amount of pro bono care our members provide. The pro bono care you provide makes a positive impact on your patients' lives. It also makes a positive impact on DCDS' legislative efforts with the Texas Dental Association on your behalf. Please complete this form whenever you provide these services.

Opportunities to provide pro bono services can often be found on the DCDS Foundation Website.

First Name * | Last Name * | Email * | TOTAL PRO BONO HOURS BELOW

CASE 1 — Who referred patient to office? | Time spent delivering care? | Value of Treatment?

CASE 2 — Who referred patient to office? | Time spent delivering care? | Value of Treatment?

CASE 3 — Who referred patient to office? | Time spent delivering care? | Value of Treatment?

PRO BONO HOURS

Dallas County Dental Society is interested in learning about the amount of pro bono care our members provide. The pro bono care you provide makes a positive impact on your patients' lives. It also makes a positive impact on DCDS' legislative efforts with the Texas Dental Association on your behalf.

Please help our legislative efforts by completing this short Pro Bono Form on our website whenever you provide these services:

https://www.dcds.org/member-center/pro-bono

Knowledge Sharing

Catch up on news and information that other DCDS members would like to share through DCDS News on our website: https://www.dcds.org/news-media/dcds-news

If you have a topic you would like to provide to your peers on our website, please contact Gabrielle Dizon, DDS at gabrielledizondds@gmail.com.

Recent topics include these on the right:

Mar 7, 2022



by Jordana Contrucci Ruiz, DMD

Staffing Challenges Post-COVID

The dental world is not as we have known it! We are experiencing a staffing crisis, and it is difficult to find the right employee. The big question is: where do I to find the applicants for the position I need to fill?

Feb 23, 2022



by Gabrielle Dizon, DDS

Considerations for Treating the Advanced Aged Dental Patient

It was once commonly thought that as a person reaches old age, he or she will become totally edentulous and a denture wearer. Several things have since changed society's attitude and thought towards dentistry and the elderly. People are now living longer and desire to keep their natural teeth.

Nov 29, 2021



by Stephanie Ganter, DDS, MS

Achieving work-life balance: A personal story

Juggling the demands of career and personal life is an ongoing challenge in dentistry. As DCDS member Stephanie Ganter, DDS, MS explains in this vlog, setting limits and looking after yourself can help you achieve the work-life balance that's best for you.



Join your DCDS colleagues for a

Women's High Tea

and for great conversation!

Saturday, June 4, 2022 • 1:00 p.m. • $30

Lavendou Bistro Provençal • 19009 Preston Rd • Suite 200 • Dallas, TX 75252

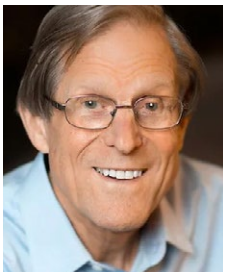
A visit to Lavendou is a retreat into the French countryside - a place where life is savored as much as the food. The atmosphere will be warm and welcoming and the fellowship priceless! French High Tea includes choice of tea and a variety of pastries, sandwiches and scones.

Click here to register before May 27.

Increase Your Success with Complete Dentures

by M. Leif Stromberg, DDS

Part Two of a Two Part Series



To increase the success of the edentulous restoration services you offer your patients, it is vital to know, apply, and master the fundamentals of complete denture fabrication. These fundamentals are relevant for fabrication of all tissue-supported complete dentures, tissue-supported/implant-retained complete dentures, and All-on-4,6 restorations.

This article highlights important fundamentals of:

- the records step,
- the wax try in,
- denture processing,
- delivery of the new dentures, and
- follow-up adjustments.

It is also significant for the dentist, dental assistants, and dental laboratory technicians to work together as a harmonious team. Each step should be carried out diligently to enhance the restorative results and decrease the chances of an unsuccessful treatment outcome.

The Records (See figure 1)

For edentulous restoration fabrication, it is extremely important to (1) determine within acceptable limits and record vertical dimension of occlusion (VDO) and tooth positions, and (2) to precisely record centric relation (CR). For predictably successful restorations, the goal in most cases is to determine and record as closely as possible the position of the patient's natural teeth before extraction and potentially improve tooth positioning, if appropriate.

The term verti-centric is used for the simultaneous recording of the VDO with the jaws in CR. If the verti-centric record is inaccurate, this leads to unpredictability of the denture service and a higher likelihood of failure of the restorations. In the past, verti-centric has been recorded with wax rims, but accuracy and consistency are difficult to achieve when using this method. A more reliably accurate and easier way to make a verti-centric record is with the gothic arch tracing device. Learning and mastering this technique is well worth it.

Determining VDO

The VDO is a vertical facial measurement indicating the relationship of the mandible and the maxilla when the mandible is in its most closed position and the teeth are occluding in maximum intercuspation.

The muscle length of the mandibular elevator muscles determines the patient's VDO by guiding the eruption of the patient's natural teeth.

The VDO can be determined by measuring the distance between two reference points: one on the fixed member of the face (tip of nose) and one on the movable member (chin), when the mandible is at the VDO in relation to the maxilla. This distance is maintained by the occlusion of the teeth — either natural or denture. Since the natural teeth are missing in an edentulous person, the VDO must be re-established. Care must be taken to not increase/open the VDO (not increase the distance between the mandible and the maxilla) when fabricating edentulous restorations because this can cause soreness of the denture supporting tissues, malfunction of the stomatognathic system, and possibly failure of the edentulous restorations.

There are various clinical methods of determining the VDO including:

- Measurement of the distance between the two aforementioned reference points when evaluating mandibular movement during speech. The vertical dimension of speech is the most closed position of the mandible during speech. It is the distance measured between the two selected points when the maxillary and mandibular teeth are in their closest proximity during speech — when making "s" or sibilant sounds — and this is the preferred method to use to determine the patient's VDO. The VDO must be "more closed" than the vertical dimension of speech so the teeth do not make contact while speaking.
- Evaluating facial appearance.
- Measurement of the distance between the two reference points when evaluating the vertical dimension of rest, which is the position of the mandible when the mandibular elevator muscles are in a state of minimal contractual activity or when the patient says "Emma". The VDO must be more closed than the vertical dimension of rest. Using the vertical dimension of rest is not a consistently reliable method of determining VDO, but sometimes it may be helpful.
- Measuring VDO of former denture restorations and deciding if VDO should be increased or decreased or remain the same.
- Asking the patient where the jaw feels comfortable and measurement of the distance between the two reference points.

Measurements of these various methods can be compared when determining an appropriate VDO for the edentulous patient. There is no one method that works in all patients and sometimes determining the VDO is a "best guess". In this case, the VDO should be verified and adjusted at the wax try-in step.

Centric relation

CR is the relationship of mandible to maxilla when the right and left mandibular condyles are properly positioned on the articular discs in the glenoid fossae. The gothic arch tracing device is a relatively easy and accurate way to determine and record CR, a critically important element for setting the denture teeth to centric relation occlusion.

Using the gothic arch tracing device (see figure 2) versus wax rims for accurate verti-centric records makes the following tasks easier:

- **What is the vertical dimension of occlusion for this patient?**
- **How much space do we have between the ridges for the edentulous restoration?**
- **Where do the teeth go?**



Figure 1

- seating and maintaining the baseplates on the alveolar ridges during recording of verti-centric, because the vertical forces of the tracing pin to opposing tracing plate seats the baseplates and keeps them stable,
- adjusting for and recording VDO,
- locating and recording CR,
- confidently and accurately guiding the patient to CR at the VDO for the verti-centric record, and
- placing bite recording material.

Each denture fabrication step must be done carefully and accurately including mounting the master casts on the articulator with an accurate verti-centric record.

Determining/recording tooth positions using an esthetic maxillary wax rim

So the esthetic wax rim will require the least amount of contouring clinically, it is important for the laboratory to:

- Construct a well-fitting comfortable maxillary baseplate with a carefully contoured esthetic wax rim to be adjusted clinically.
- Contour the wax rim close to the anticipated positions of the denture teeth on the final restoration. If the wax rim is constructed with the labial surface of the central incisor area 10 mm anterior to the center of the incisive papilla (use the Alma Gauge to measure this) and the length of the wax rim in the lateral incisor area 20 mm vertically below the anticipated final border of the denture (use a Boley Gauge to measure this), the wax rim will usually need minimal adjusting clinically. Contouring the occlusal plane of the esthetic wax rim by the dental lab using a Swissedent wax rim former will create an occlusal plane parallel to the horizon (and the interpupillary line) and antero-posteriorly to the ala-tragus line.

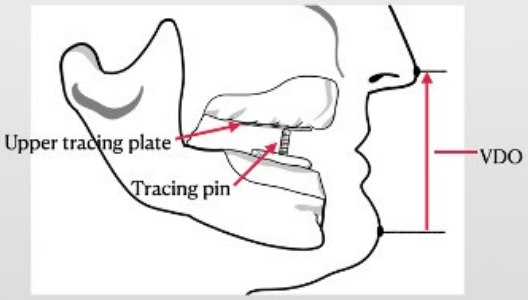


Figure 2

- **The central bearing screw of the gothic arch tracing device is set to the patient's vertical dimension of occlusion (VDO).**
- **The movements of the mandible including to centric relation are recorded on the upper tracing plate at the patient's vertical dimension of occlusion.**

Clinically, the contours of the wax rim should be refined to indicate the labial surfaces and incisal edge positions of the maxillary six (6) anterior teeth and the occlusal plane.

The Wax Try-in

The purpose of the wax try in appointment is:

1. The dentist to ensure that the restoration has:
   - good esthetics (evaluate the shapes, shade, and positions the teeth, and the occlusal plane),
   - an adequate VDO, and
   - contact of all posterior denture teeth in centric relation occlusion.

2. To show the patient the set up in their mouth after the dentist has approved it.

3. To obtain patient approval of tooth shape, shade, positions, and esthetics. Be sure that the patient understands these elements cannot be changed without redoing the restorations at additional fees. Suggest that the patient bring trusted family members and friends to the wax try in appointment (or consider the patient taking the set up home to show others for their approval).

4. To create a feeling of excitement and acceptance for the new restorations.

Denture Processing

Acrylic resin shrinks approximately 7% during polymerization, so this must be controlled for predictably successful dentures. If the denture base undergoes dimensional changes (shrinking and warping) during processing, this can cause problems, including denture fit, retention, stability, and occlusion. Shrinkage of the denture base acrylic resin during polymerization can be reduced with injection processing (as with the IvoBase Injection Processing System by Ivoclar Vivadent, Inc.), thus creating improved physical properties of the denture bases versus conventional packing processing. It is recommended to not use conventional packing processing for fabrication of tissue-supported dentures.

Denture Delivery

Delivery of new dentures:

1. Place dentures in the patient's mouth and be sure they are comfortable. Use a pressure indicator paste and acrylic burs to detect and adjust areas where denture bases are placing excessive pressure on the tissues.

2. Have the patient bite firmly on two cotton rolls for five minutes for complete seating of the denture bases to detect areas which may become sore in the future as dentures "settle". Also, this is an essential step before adjusting the occlusion. If the dentures continue to seat after the occlusal adjustment, the occlusion will change requiring further occlusal refinement.

3. Occlusal adjustments can be done by remounting dentures on an articulator or using Kerr Occlusal Indicator Wax intra-orally. It is recommended to not use articulating paper, ribbon, or film intra-orally to adjust the denture occlusion because the dentures move on the soft supporting tissues, so precise adjustment of occlusion cannot be made.

Post-Delivery Adjustments

Many of the post-delivery problems with discomfort are from occlusal interferences causing movement of the denture bases resulting in sore areas.

If a sore area is from occlusal problems, grinding on the denture base in the sore area can cause a poor fit of the denture base to the tissues and does not treat the cause of the denture base movement. Again, occlusion should be adjusted by remounting dentures or using Kerr Occlusal Indicator Wax.

Hopefully, the patient understands that many elements of their new dentures cannot be changed, and you have previously discussed how you will address problems with: esthetics, function, TMD, phonetics, occlusion/bite, comfort, retention, stability, biting cheeks and lips, and unhealthy tissues.

If the patient has problems with comfort, retention, or stability of the dentures, consider doing a laboratory reline. A general rule is to only reline a denture if the posterior denture teeth have even occlusal contacts in centric relation occlusion and the denture base has complete coverage of the proper denture supporting tissues with maximum extension without muscle impingement.

Conclusion

By using these methods, you can develop a workflow in your office that incorporates the fundamentals of complete denture fabrication and improves your edentulous restoration service. Only some of the fundamentals have been emphasized and considered here. Dental team members are encouraged to further study each step of denture fabrication, master the fundamentals, and consider adding other services to improve edentulous restorations.

Installation Dinner and Ceremony

IN HONOR OF

Mary Swift, DDS

AS INCOMING PRESIDENT AND THE 2022-2023 BOARD OF DIRECTORS, OFFICERS AND COMMITTEE MEMBERS; AND IN RECOGNITION OF OUTGOING BOARD AND COMMITTEE MEMBERS

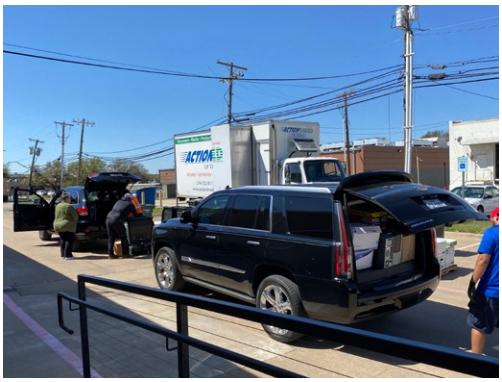
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Texas A&M College of Dentistry
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Texas A&M College of Dentistry in Dallas

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BDS, MSD, MS, PhD
Associate Clinical Professor and
Interim Head of Public Health Sciences
Texas A&M College of Dentistry



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Questions? Contact **Dr. Helena Tapias: 214.828.8940 or htapias@tamu.edu**

2022 SOUTHWEST DENTAL CONFERENCE PROGRAMS

To register or for more information, go to swdentalconf.org.

FRIDAY, AUGUST 26					
COURSE #	**SPECIAL EVENTS**	**CLINICIAN**	**TIME**	**EARLY BIRD**	**AFTER JULY 14**
F01	CE Express: See page ___ for list of clinicians and topics.		8:00 a.m.-12:00 p.m.	$50	$60
F02	Hygiene CE Express: See page for list of clinicians and topics.		12:30-4:30 p.m.	$50	$60
F03	Neonatal and Infant Tongue Tie Release: Diagnosis and Treatment	Convissar/ Funston	8:00 a.m.-4:00 p.m. (all day Fri & Sat)	$750	$760
	WORKSHOPS				
F03	Neonatal and Infant Tongue Tie Release: Diagnosis and Treatment	Convissar/ Funston	8:00 a.m.-4:00 p.m. (all day Fri & Sat)	$750	$760
F04	Equipment Maintenance and Repair Workshop	Burkhart Dental	9:00-11:00 a.m.	$50	$60
F05	"Now You See It!" Understanding, Interpreting and Applying Autofluorescence for Early Intervention of Oral Pathologies Workshop	Riley	9:00-11:00 a.m.	$125	$135
F06	Equipment Maintenance and Repair Workshop (repeat)	Burkhart Dental	1:00-3:00 p.m.	$50	$60
F07	"Now You See It!" Understanding, Interpreting and Applying Autofluorescence for Early Intervention of Oral Pathologies Workshop (repeat)	Riley	1:00-3:00 p.m.	$125	$135
F08	Practical Oral Surgery for the General Dentist Workshop	Reznick	1:00-4:00 p.m.	$195	$205
	MORNING LECTURES				
F09	Piecing Together Your Insurance Puzzle	Huff	8:00-9:30 a.m.	$20	$30
F10	Implant Supported Telescopic Hybrid Prosthesis: Indications, Contraindications and Challenges	Brindis	8:00-11:00 a.m.	$30	$40
F11	Diagnosis and Treatment Planning Invisalign	Codington	8:00-11:00 a.m.	$50	$60
F12	Updates in Minimally Invasive Dentistry	Kaminer	8:00-11:00 a.m.	$30	$40
F13	RealWorld Endodontic Diagnosis, Anesthesia, Access, Irrigation and Instrumentation - Part I	Nasseh	8:00-11:00 a.m.	$30	$40
F14	Oral Medicine: Puzzling Conditions in Complicated Patients	Plemons	8:00-11:00 a.m.	$30	$40
F15	Practical Oral Surgery for the General Dentist	Reznick	8:00-11:00 a.m.	$30	$40

WHY BE AN EARLY BIRD?

Better Course Selection: Through the pre-registration date, July 14, we can re-arrange popular courses to accommodate more attendees. After that date, courses are limited to classroom size—once full, you're out of luck.

Discounted Fees: Registration fees increase $50 per person after July 14. Course fees increase $10 per course after July 14.



SIGN YOUR TEAMS UP TODAY AND SAVE!!!

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FRIDAY, AUGUST 26 (CONTINUED)					
COURSE #	**MORNING LECTURES, CONTINUED**	**CLINICIAN**	**TIME**	**EARLY BIRD**	**AFTER JULY 14**
F16	Update in Clinical Pediatric Dentistry	Cannon	8:30-11:30 a.m.	$30	$40
F17	Minimal Sedation (Level I): A Review	Luce	8:30 a.m.-4:30 p.m. (all day)	$200	$210
F18	Elevating Dental Assistants: Helping You Transition From Where You Are to Where You Want to Be - Part I - The Direct Restorative Patient Experience	McDonald/ Groody	8:30-11:30 a.m.	$30	$40
F19	An Additive Approach to Restorative Care: Decoding Healthy Esthetics – Part I	Sameni	8:30-11:30 a.m.	$30	$40
F20	Killer Smile? The Oral-Systemic Connection	Geisinger	9:00 a.m.-12:00 p.m.	$30	$40
F21	Win It! The Three Laws of Teamwork that Create a Booming Practice	Spiel	9:00 a.m.-12:00 p.m.	$20	$30
F22	Decoding Medical Billing for Dentistry	Owens	10:00 a.m.-12:00 p.m.	$20	$30
	AFTERNOON LECTURES				
F23	Three R's: Review, Reset, Realign	Huff	1:00-2:30 p.m.	$20	$30
F24	Minimally Invasive is Not a Technique, It is a Philosophy	Brindis	1:00-4:00 p.m.	$30	$40
F25	The Clinical Side of Invisalign	Codington	1:00-4:00 p.m.	$50	$60
F26	Every Day Laser Dentistry for the General Practice	Kaminer	1:00-4:00 p.m.	$30	$40
F27	RealWorld Endodontic Instrumentation, Obturation and Beyond - Part II	Nasseh	1:00-4:00 p.m.	$30	$40
F28	Prescribing Controlled Substances: Drugs, Monitoring and Standards of Care	Plemons	1:00-4:00 p.m.	$30	$40
F29	From Friend to Foe: How Oral Dysbiosis Creates Systemic Disease and What You Can Do To Save Lives	Cannon	1:30-4:30 p.m.	$30	$40
F30	Immediate Implant Placement: When You Can and Cannot Have What You Want Right Now!	Geisinger	1:30-4:30 p.m.	$30	$40
F31	Elevating Dental Assistants: Helping You Transition From Where You Are to Where You Want to Be – Part II – The Indirect Restorative Patient Experience	McDonald/ Groody	1:30-4:30 p.m.	$30	$40
F32	An Additive Approach to Restorative Care: Decoding Healthy Esthetics – Part II	Sameni	1:30-4:30 p.m.	$30	$40
F33	Yes is More: Total Team Approach that Leads to Case Acceptance	Spiel	1:30-4:30 p.m.	$20	$30
F34	Utilizing 3D Printing Technology in General Dentistry	Kleive	2:00-5:00 p.m.	$30	$40
F35	Medical Billing: The Hidden Gem in Your Practice	Owens	3:00-5:00 p.m.	$20	$30

2022 SOUTHWEST DENTAL CONFERENCE PROGRAMS

To register or for more information, go to swdentalconf.org.

SATURDAY, AUGUST 27					
COURSE #	**SPECIAL EVENTS**	**CLINICIAN**	**TIME**	**EARLY BIRD**	**AFTER JULY 14**
S01	ICD BREAKFAST		7:00-9:00 a.m.	$40	$40
S02	Hygiene CE Express: See page __ for list of clinicians and topics.		8:00 a.m.-12:00 p.m.	$50	$60
S03	Botox Therapeutic Indications – Live Patient Training/Workshop (Dentist registration)	Meinecke	8:00 a.m.-5:00 p.m. (all day)	Dentists: $1395*	Dentists: $1500*
S03a	Botox Therapeutic Indications – Live Patient Training/Workshop (Staff registration - must register with Dentist)	Meinecke	8:00 a.m.-5:00 p.m. (all day)	Staff: $150*	Staff: $175*
	WORKSHOPS				
F03	Neonatal and Infant Tongue Tie Release: Diagnosis and Treatment	Convissar/ Funston	8:00 a.m.-4:00 p.m. (all day Fri & Sat)		
S03	Botox Therapeutic Indications – Live Patient Training/Workshop (Dentist registration)	Meinecke	8:00 a.m.-5:00 p.m. (all day)	Dentists: $1395*	Dentists: $1500*
S03a	Botox Therapeutic Indications – Live Patient Training/Workshop (Staff registration - must register with Dentist)	Meinecke	8:00 a.m.-5:00 p.m. (all day)	Staff: $150*	Staff: $175*
S04	Safety and Simplicity in Root Canal Instrumentation Workshop	Nasseh	8:00-11:00 a.m.	$175*	$185*
S05	Exquisite Temporaries Made Simple Workshop	Kleive	8:30-11:30 a.m.	$145*	$155*
S06	Mastering Dental Photography with your Smartphone Workshop	Kleive	1:00-4:00 p.m.	$145	$155
S07	Occlusal Equilibrium – Why, When and How Workshop	Davis	1:30-4:30 p.m.	$275	$285
S08	Safety and Simplicity in Root Canal Instrumentation Workshop (repeat)	Nasseh	1:30-4:30 p.m.	$175*	$185*
	MORNING LECTURES				
S09	Leading Your Practice to Infection Control Excellence	Gregory	8:00-11:00 a.m.	$30	$40
S10	Ensuring Success in Anterior Aesthetics: Avoiding Failure with Proper Planning	Peck	8:00-11:00 a.m.	$30	$40
S11	Systemic Cyclones: The Biology of Disease and Wellness	Riley	8:00-11:00 a.m.	$30	$40
S12	Dental Shade Matching	Ward	8:30-10:30 a.m.	$30	$40
S13	Craniomandibular Evaluation and Management of TMD/Airway Issues	Davis	8:30-11:30 a.m.	$30	$40
S14	Adhesive and Restorative Dentistry: Separating Fact From Fiction	Heymann	8:30-11:30 a.m.	$30	$40
S15	Seeing in the Mouth with Super Powered Eyes: Total Health Dentistry and Practice Profitablity	Maples	8:30-11:30 a.m.	$30	$40
S16	Connecting the Dots Between Early Malocclusion and Childhood Sleep Disordered Breathing	Miraglia	8:30-11:30 a.m.	$30	$40
S17	3-D Radiographic Imaging in Dentistry with Cone Beam Technology	Reznick	9:00-11:00 a.m.	$30	$40
S18	Managing Medical Emergencies	Luce	9:00 a.m.-12:00 p.m.	$30	$40
S19	Serving Others - Volunteerism	Martin	9:00 a.m.-12:00 p.m.	$20	$30

2022 SOUTHWEST DENTAL CONFERENCE PROGRAMS

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SATURDAY, AUGUST 27 (CONTINUED)					
COURSE #	**AFTERNOON LECTURES**	**CLINICIAN**	**TIME**	**EARLY BIRD**	**AFTER JULY 14**
S20	Perio, Diabetes and CVD: Connections and Collaborative Teatment in the Dental Office	Maples	1:00-3:00 p.m.	$30	$40
S21	OSHA is Here! No Need to Fear!	Gregory	1:00-4:00 p.m.	$30	$40
S22	Conservative Solutions to Everyday Problems in Restoring the Smile	Heymann	1:00-4:00 p.m.	$30	$40
S23	Anterior Resin Bonding: An Essential Skill for the Restorative Dentist	Peck	1:00-4:00 p.m.	$30	$40
S24	Red, White and Blue, What Does it Mean to You? Practical Oral Pathology for the Dental Team	Riley	1:00-4:00 p.m.	$30	$40
S25	Single Implants: From Extraction to Restoration	Ward/Ward	1:00-4:00 p.m.	$30	$40
S26	Airway Dentistry: Preventative, Comprehensive and Aesthetic Benefits	Miraglia	1:30-4:30 p.m.	$30	$40

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Diversity + Inclusion: Fellow Hikers in Life

Chi Trieu, DDS
Member of DCDS Diversity and Inclusion Committee



Being in nature is always restorative for me as I tend to refocus and find some new perspective. As such, my family and I recently trekked to Big Bend National Park. It is a vast and beautiful landscape that can be very harsh if you come unprepared.

My favorite hike on this particular trip was the Lost Mine Trail. It is easily one of the more popular trails at Big Bend National Park that delivers a depth of beauty that is uncommon in other areas of our great state. The trail starts at an elevation of 5,650 feet. There is a clear, well-marked path that continues upward approximately 2.5 miles to an elevation change of 1,100 feet. The trail winds up and back down again for a total distance of just under 5 miles.

My family and I hiked this great trail with many others moving upwards and passed several other hikers traveling back down. These other fellow hikers were diverse in all the ways you might imagine. We hiked that trail with younger families whose parents had their babies in slings. We hiked with older hikers – some with walking aids and some who passed us because they knew the trail so well. We hiked with college students carrying red bulls and who wore open-toed sandals. We hiked with large groups and solo hikers. We were all on the same path – some of us moving very quickly and others moving at a snail's pace, but we were all still moving forward with our varying degrees of experience. We quickly became a micro-community of hikers exchanging information and pleasantries on our journeys.

My dear fellow dentists: we are all hikers. We are always making that climb to be better, to do better and to create pathways for each other so that we collectively climb higher. Dentists are also a very diverse group. We are gender, racial, practice experience, and scope of practice diverse. We have hikers with baby slings working with hikers in open-toed sandals. We revere our hikers with walking aids and those who pass us because they know the trail so well. We have solo hikers trying to understand large group hikers (and vice versa). We have all of the diverse ways to climb up (and down) the mountainside. The point remains that we are all dentists climbing the steep switchbacks of the mountainside together.

Our strength is in our shared diversity, but our challenge is in consistent inclusion.

According to ADA and TDA market share data 12/31/2021, only 54.3% of practicing dentists in the United States are a part of the ADA (and only 47.4% of Texas dentists are members of the TDA). The tripartite support we enjoy is only reaching a slight majority of dentists in the United States. To take this further, in Texas, 58.4% of White dentists are members but only 51.8% of Hispanic dentists, 36.9% of African American/Black dentists, 35.4% of Asian dentists, and 35.1% of American Indian dentists belong to the TDA. This is something to think about – deeply.

My hope, fellow hikers, is that we can create new switchback pathways together where every dentist feels welcome, feels included, and feels heard. It likely will not come easily and will require deep listening and even deeper acts of inclusion in a way that we haven't tried before. These new pathways will not happen tomorrow, but together, we are stronger.



...continued from page 1

North Texas Shared Ministries

This interfaith community of volunteers, partners and collaborators provides charitable assistance to persons in need.

Union Gospel Mission

Provides shelter, food and clothing, their goal is to transform lives to end homelessness one person at a time.

TDA Smiles Foundation

With its mission to improve access to dental care for the underserved of Texas and to educate the public and profession about oral health, the TDA Smiles Foundation holds Texas Mission of Mercy events each year throughout Texas.

Texas A&M College of Dentistry

The Department of Public Health Sciences at Texas A&M University College of Dentistry directs outreach activities of the university.

The department provides a diverse range of programs including oral health promotion and education and career-education programs. They oversee Extramural Clinics, North Dallas Shared Ministries and M.C. Cooper Dental Clinic.

DCDS Foundation

DCDS Foundation is a charitable resource for providing Dallas County with essential oral health care needs. This includes education for elementary school students and participating in community events. Make a difference in the oral health of our community!

BOTOX THERAPEUTIC INDICATIONS – LIVE PATIENT TRAINING
REVIEW/WORKSHOP



SATURDAY, AUGUST 27
GIGI MEINECKE, DMD

8:00 a.m.-12:00 p.m. and
1:00-5:00 p.m. (all day)

Course #S03 - Dentists
Course #S03a - Staff
(Staff must register with Dentist)

Attendees must register by August 14, 2022.

This introductory workshop provides insight and instruction on therapeutic uses for facial neuromodulators along with expert mentoring on injection techniques. Areas covered include: masseter, temporalis, mentalis, orbicularis oris, depressor anguli oris and levator labii (gummy smile).

Curriculum includes: overview of facial anatomy, differentiating toxins – dosage strength, review of reconstitution, review of complications, and management of patient expectations. Instruction and one-on-one hands-on training will focus exclusively on botulinum toxin injections for therapeutic indications.

LEARNING OBJECTIVES

- Interpret principles of facial anatomy and assess the need for neuromodulator treatment
- Perform comprehensive and individualized patient assessment
- Interpret areas of muscle activity as they contribute to esthetic appearance
- Demonstrate injection techniques
- Recognize the normal and atypical anatomical positions of facial structures, to assure patient safety and avoid/minimize treatment complications

The content and format conform to Texas Dental Practice Act and the Texas State Board of Dental Examiners determinations. Texas Occupations Code §251.003(a) (practice of dentistry).

REGISTER NOW FOR THIS WORKSHOP AND OTHERS AT WWW.SWDENTALCONF.ORG

SOUTHWEST DENTAL CONFERENCE
Southwest Dental Conference
EMPOWERING DENTISTRY AS ESSENTIAL HEALTH CARE
Hilton Anatole Dallas
August 26-27, 2022



NEONATAL AND INFANT TONGUE TIE RELEASE CERTIFICATION





FRIDAY, AUGUST 26 AND SATURDAY, AUGUST 27

ROBERT CONVISSAR, DDS
JOY FUNSTON, RN, IBCLC

8:00-11:00 a.m. and 1:00-4:00 p.m.
(all day Friday and Saturday required)
Course #F03

5% or more of the babies born in the US have such tight tongue-ties that they cannot latch onto mother's nipple and breastfeed. For baby, consequences include loss of weight and the label of "failure to thrive". For mother, this results in sore/cracked nipples, mastitis, engorgement and post-partum depression due to an inability to nurse her baby. This has classically been treated by physicians taking scalpels or scissors to the newborn's mouth and cutting the attachment. The treatment of choice is for dentists to use laser technology to painlessly, bloodlessly remove the attachment, allowing the infant to immediately nurse.

LEARNING OBJECTIVES

- Accumulate all of the required data via history intake forms
- Perform a clinical examination to arrive at the correct diagnosis
- Evaluate when this procedure should be done
- Perform the procedure using laser technology
- Network with lactation consultants, pediatricians, neonatologists and the rest of the medical team
- Grow your practice of neonatal dentistry

An American Board of Laser Surgery Certification Program:
Candidates who successfully complete this course will receive a Certificate in Pediatric Tongue Tie and Lip Tie Diagnosis and Treatment recognized by the American Board of Laser Surgery, the only Medical Certifying Board in the world dedicated to Lasers and Light Energy in Medicine and Dentistry

REGISTER NOW FOR THIS WORKSHOP AND OTHERS AT WWW.SWDENTALCONF.ORG



Texas A&M University College of Dentistry

By Carolyn Cox

Increasing access to care for South Dallas Communities

Texas A&M College of Dentistry's Dr. M.C. Cooper Dental Clinic in South Dallas has expanded opportunities for the college's students to provide local residents with quality dental care.

Within its first year, the clinic currently boasts over 1,800 patient visits, with plans to double that number in 2022 now that the facility is fully operational. This patient-care site was dedicated in March 2021 and opened a month later as the first College of Dentistry-owned clinic located away from the main campus.

The Cooper clinic particularly serves residents of all ages in the Frazier community of South Dallas, but any City of Dallas resident over age 60 can be seen without restrictions, says Dr. Renicke Moss, staff dentist.

"We do not turn away any patients due to inability to pay," Moss says. "None of our patients pay for any services provided for them at Cooper."

Currently eight fourth-year dental students serve patients at the clinic each day under the supervision of faculty members in public health sciences who rotate through three community clinic sites. Dr. Esther Tam from the college's endodontics department supervises root canal procedures by dental students at the clinic on Tuesdays.

"Patients express heartfelt appreciation literally daily for their increased access to care, as Cooper affords many people their first chance in years (and in some cases, ever) to receive dental treatment," says Dr. Karl Veasey, public health sciences faculty member, who adds that students love their experiences there. "It is rewarding to see patients referring their family and friends to the clinic."

Five dental hygiene students rotate through to provide care on Thursdays. Supervising faculty member Leah Spittle says the cases they manage are enhancing their periodontal evaluation skills and nonsurgical periodontal therapies.

"The dental hygiene students are getting some amazing real-world experience," she says.

Graduate students in Advanced Education in General Dentistry provide care at the facility as well, working closely with Moss for advanced experiences. Moss sees additional patients there daily.

The building's namesake, Dr. Marcellus Clayton Cooper, was the first Black dentist in Texas. Born into slavery in 1862, Cooper went on to attend grade school in Little Egypt, a freedman's town in what is now Lake Highlands, a northeast Dallas neighborhood. He later moved to Springfield, Missouri, with his father to complete high school. Cooper returned to Dallas and began working at Sanger Brothers department store, where he saved enough money for dental school and enrolled at Meharry Medical College in Nashville, Tennessee.

He returned to Dallas in 1896 and opened his dental practice. Despite the tumultuous racial climate at that time, Cooper practiced dentistry for 30 years and invested in the community through humanitarianism and Black business development, including cofounding Dallas' first Black bank. His final practice location was in the Knights of Pythias Temple in Deep Ellum, less than four miles from the new clinic that bears his name. The M.C. Cooper Dental Society, founded in Dallas in 1954, is named in his honor, as is Cooper Street in South Dallas. Cooper died in 1929.



A&M DENTISTRY
TEXAS A&M UNIVERSITY

Texas A&M College of Dentistry (formerly Baylor College of Dentistry) in Dallas is a part of Texas A&M University and Texas A&M Health Science Center.

Founded in 1905, the College of Dentistry is a nationally recognized center for oral health sciences education, research, specialized patient care and continuing dental education. Learn more at dentistryinsider.tamhsc.edu or follow @TAMUdental.







SUPPORT DCDS FOUNDATION TODAY!

To donate an item or an experience, please contact Dr. Hedley Rakusin at hrakusin@gmail.com.

Dallas County Dental Society Foundation has partnered with the online platform Charitybuzz to help raise funds for our charitable activities.

We encourage our members to visit charitybuzz.com to experience the plethora of auction items that are listed, but also to obviously bid on those which will benefit the Dallas County Dental Society Foundation.

We also urge DCDS members to consider contributing an item or an experience that will allow DCDS Foundation to receive a sizable return if the item sells. Examples include art, sports memorabilia, vacation homes or timeshares, as well as meetings with local or national celebrities.

Items can be viewed at https://www.charitybuzz.com/support/5604.

Your DCDS Foundation at Work!

by Dr. Michael Rainwater

Relationship Building



(Top and Bottom) Pictured are the representatives from leading charitable organizations in Dallas County.

(Middle) Moderator Dr. Robert McNeill, DCDS Foundation Board member, and Dr. Kim Freeman from Grace Center Texas

Charity Summit Dallas 2022 gathered executive directors, dentists and leaders of charitable organizations in Dallas County with a focus on dentistry. Our purpose, to share ideas and benefit from co-operation between these groups to improve oral health in our community.

Our third annual Summit recognized the relationships these groups have developed, leading to improved efficiency, sharing resources and referring patients to each other to maximize resources.

The common theme between these organizations is the need for a dentist to step up and care for a patient. Options available for you to aid these groups include treating at their facility, treating a patient at your office and aiding at community events.

Many of our attendees care for medical and mental health needs as well as dentistry. North Dallas Shared Ministries, Agape Clinic and Mission East Dallas are specific examples of this. Our Texas A&M College of Dentistry impacts the community in many ways and has a focus on patients with HIV and special needs, while also re-opening areas like their sealant programs in schools. DCDS Foundation is hosting a Texas Mission of Mercy this November 4-5, 2022 for underserved Veterans in Dallas County. Attitudes and Attire, Family Place and Grace Center of Texas have amazing programs for dental care and all are in need of dentists to make an impactful gift with your talents. Union Gospel Mission is providing security and safety for hundreds of men, women and children every day.



DCDS Foundation has been asked to increase frequency of our Summit to every 6 months, and we are looking forward to this. We plan to add in a number of groups, working similarly in Dallas County.



Help us make these events bigger, better and more impactful for dentistry!

TO VOLUNTEER **WWW.DCDSFOUNDATION.ORG** **TO GIVE**

DCDS Foundation is now an eligible charity listed on AmazonSmile. This program through Amazon donates 0.5% of the price of eligible smile.amazon.com purchases to the Foundation when selected by customers. Our unique charity link is https://smile.amazon.com/ch/75-2790709.

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Classified Advertising

Classified Advertising for DCDS Connection is accepted on a space-available basis and must meet the advertising guidelines of the DCDS. Rates and information are posted on-line at https://www.dcds.org/news-media/sponsoring-advertising or call 972-386-5741.

For Sale/Lease - Equipment

Ready for your Office!

North Dallas office, SW corner of Coit and Arapaho, 15615 Coit Rd. Ste. 107, will be demolished. Selling everything: from mobile cart and doctor/assistant chairs, to a new sandblaster, newest Schick x-ray sensor, Endo supplies, surgical equipment, unopened "IZolation" suction system, Power-Pak light, lab and operatory equipment, disposables, and file cabinets. Fri., April 15 at 2 PM. Click here for photos.

Contact Peter Hofmann DDS at 972 365-0872 for more info.

OFFICE TO SHARE

Rent space in our new fully digital and equipped dental office located in Richardson near 75 & Campbell Rd; available 2-3 days per week on a daily fee basis. Take a video tour at DrJackBodie.com.

Call 214-212-9413 or email Jack@DrJackBodie.com for details.

For Sale/Lease - Real Estate/Practice

AVAILABLE NOW

Storefront Retail Dental Office located in Southeast Fort Worth. This second-generation office totals 3,000 square feet has ample parking, a dedicated turn lane, and is move-in ready. Click here for more information.

To view in person or to discuss more details, call Theron Bryant at 817.808.4088 or email theron.bryant@transwestern.com.

For Sale/Lease - Real Estate/Practice

Office for Lease

Dental office space that is fully equipped; 2 ops; in a professional building in Fort Worth medical district; lease is $2300 including utilities; asking $35K with new lease or sublease agreement.

Email erintranhoang@gmail.com if interested.

DENTAL OFFICE FOR LEASE NW AUSTIN

Dental office for lease excellent location for a specialist satellite office in NW Austin about 1200 sq ft. Easy access from main busy street, one story dental complex, across 4 schools, next to General Dentist and many other general dentists in neighborhood.

For more info: Message 512-914-2134

Click here to check out Job Bank/Classified ads on the DCDS Website for more opportunities!

DCDS
13633 Omega Road
Dallas, TX 75244
Phone: 972-386-5741
Fax: 972-233-8636
www.dcds.org
info@dcds.org

Follow DCDS and SWDC on social media!

Registration is open and in full swing for the Southwest Dental Conference (SWDC), August 26-27th at the Dallas Hilton Anatole. This will be an event for the entire dental team with courses for everyone that will help both you and staff develop and grow professionally and personally.

Our meeting does not have a virtual option. Aren't we all tired of Zoom CE anyway?! The Hilton Anatole is a new venue with a more intimate setting, networking and fun, so this in-person experience will be a mix of business and pleasure that you can use as a team building event.

Our theme for the 95th year of the SWDC is "Empowering Dentistry as Essential Health Care." We will have over 60 courses with a wide variety of dental and wellness related topics. Many of the courses will focus on the many connections between oral and systemic health and the importance of oral health for overall health with a focus on early detection of oral problems and prevention of disease.

We have something that will educate and motivate the entire dental. You will leave inspired and energized with the knowledge you will gain to immediately take back to your patients to improve their health and yours.

Have you been wanting to add new procedures in your practice such as Botox, clear aligner orthodontics, laser tongue and lip tie releases, myofunctional therapy and airway focused dentistry or are you looking to improve your clinical techniques like oral surgery, root canals, photography and occlusal equilibration?

Have you been wanting to learn more about how the gut and oral microbiome, how to screen for diabetes in your office, how clear aligner therapy can impact airway and how periodontal disease is connected to heart disease and Alzheimer's disease?

Have you been wanting to find practice management courses to take your practice to the next level, building efficiencies, setting goals, increasing case acceptance and navigating insurance challenges? The entire team will receive a range of training from emergency preparedness, OSHA, HIPPA, fabricating exquisite temporaries, dental assistant mastery, navigating dental insurance successfully, implementing medical billing, equipment maintenance, improving teamwork and case acceptance. The dental team will leave with many pearls and will be bursting with innovative ideas to bring back to the office.

The Exhibit Hall will be buzzing for two days with a packed house of new and returning vendors. See the latest and greatest that dentistry has to offer and enjoy our dental soiree for entertainment, refreshments, and networking near the Exhibit Hall on Friday afternoon.

Register now for the Southwest Dental Conference, August 26-27th, 2022, online at swdentalconf.org. Registration after July 14th will incur an additional $50 fee per person. Plan on booking rooms to stay at the Anatole for a weekend staycation. You will not want to miss the 2022 Southwest Dental Conference!



Dr. Sarah Poteet

2022 Southwest Dental Conference Chairman

