On November 7, 2014 the University of New England College of Dental Medicine welcomed the class of 2018 to the profession of Dental Medicine with the 2nd annual White Coat Ceremony. Proud family members snapped photos as the students were cloaked with the new white coats they will wear throughout the four years of their education.

This year’s ceremony was held at the Westbrook Performing Arts Center. Members of the class of 2017 escorted the new class of 64 students to their seats, symbolically greeting them as colleagues. The administration, faculty and staff of the college hosted the event, which featured remarks from Dr. James Hanley, Dean of the College of Dental Medicine, followed by keynote speaker Dr. Joe Kenneally, President of the International College of Dentists, member of the UNE Board of Trustees, and former MDA President.

In his keynote address, Dr. Kenneally presented “The 7 Habits of Highly Successful Young Dentists,” which included humorous stories and personal wisdom. The students were called on stage by Dr. Jon Ryder, Assistant Dean for Academic Affairs and cloaked by Dr. Lionel Vachon, Assistant Dean for Clinical Affairs, while the full-time faculty members stood by in support. After they received their coats, the students recited the “Dentist’s Pledge”. A reception was held following the ceremony. The event was simultaneously streamed via Internet for family and friends that could not attend.

The White Coat Ceremony marks the beginning of a lifelong professional and educational journey. It is a traditional symbol of compassion, professional training, and clinical excellence, and serves as a reminder of the privileges and duties held by dentists as well as the responsibilities dentists have in service to the public.

The white coat ceremony began at Columbia University’s College of Physicians and Surgeons in 1993 and the tradition is now practiced at more than 100 schools providing health professions education of many kinds in the United States and across Europe and Asia. The ceremony represents an opportunity for students to reflect on the need to balance a pursuit of academic excellence with their development of compassionate patient care. It has become a rite of passage for future healthcare practitioners, welcoming students into the culture of their specific medical profession, albeit as an apprentice member. Students are initiated into their professional education and learn of the commitment both to becoming proficient in the science of their practice and also to the central, human obligation of caring for their patients.

(continued on page 3)
Each February, the American Dental Association (ADA) sponsors National Children’s Dental Health Month to raise awareness about the importance of oral health. NCDHM messages and materials have reached millions of people in communities across the country.

2015 NCDHM Campaign
The ADA, along with the ADA Foundation, provides the February 2015 National Children’s Dental Health Month (NCDHM) campaign poster. This month-long national health observance brings together thousands of dedicated dental professionals, healthcare providers, and educators to promote the benefits of good oral health to children, their caregivers, teachers and many others.

This year’s NCDHM campaign slogan “Defeat Monster Mouth” is displayed on both sides of the poster. This eye-catching poster features the McGrinn Twins, Flossy and Buck, along with their best friends and next-door neighbors, Den and Gen Smiley and K-9 the dog, fighting to defeat Plaqster the Monster for good oral health. On the reverse side, preteen/teenagers demonstrate effective ways to defeat monster mouth and maintain good oral health by brushing, flossing, rinsing, and eating healthy snacks.

The NCDHM Program Planning Guide provides resources to promote the benefits of good oral health to children. The guide includes easy-to-do activities, program planning timetable tips, a sample NCDHM proclamation, and much, much more. To download any of this information, and/or to order “FREE” Posters (available in 12”x18”) go to: http://www.ada.org/en/public-programs/national-childrens-dental-health-month. Both the Children’s and Teen posters are in English and Spanish. The hard copies will be shipped in pre-packs of 25, 50 and 100 (while quantities last).

Booklets, videos and other materials are also available for purchase through the ADA Catalog.

You may direct questions to ncdhm@ada.org.
The University of New England College of Dental Medicine welcomed its inaugural class to the Portland Campus in the fall of 2013. The college opened with the intention to educate future dentists for the many underserved communities across Maine and northern New England. Until the College of Dental Medicine opened its doors, the closest dental college was in Boston. UNE will place fourth-year students in satellite dental clinics in rural areas and will favor applicants who have shown an interest in community service. In addition to addressing the shortage of dentists in rural Maine, the Oral Health Center will provide patients access to affordable health care.

As one of the few private universities in the nation with a comprehensive health education mission that also includes programs in medicine, pharmacy, nursing and an array of allied health professions, UNE is uniquely positioned to play a transformative role in dental medicine education. The program serves as an opportunity to apply UNE’s existing expertise in clinical simulation, clinical education, and interprofessional education to a whole new discipline.

The College of Dental Medicine program offers a blend of time-tested methods and new innovations in dental medicine education. UNE students are treated as members of the profession from the moment they arrive on campus, and are given opportunities to make real impacts in the lives of patients, in both urban and rural settings, who receive dental services through them.

The extensive practical experience built into the program allows students to provide care to simulated patients in their first year, and then to provide direct patient care in the Oral Health Center in their second and third years, before ultimately pursuing clinical experiences in communities throughout Northern New England and beyond in their fourth year.

Once the College of Dental Medicine is fully populated with students in all four years of the program, it will provide approximately 12,000-15,000 patient visits per year in the Oral Health Center and an additional 20,000-25,000 visits per year in the community-based network.

The University of New England is an innovative health sciences university grounded in the liberal arts, with two distinctive coastal Maine campuses and unique study abroad opportunities. UNE has internationally recognized scholars in the sciences, health, medicine and humanities; offers more than 40 undergraduate, graduate and professional degree programs; and is home to Maine’s only medical school, in addition to Maine’s only dental school. UNE’s interprofessional education initiatives prepare future healthcare professionals to practice comprehensive and collaborative team-based care. Both graduate and undergraduate students engage in research and scholarship alongside dedicated faculty who are committed to their academic and professional success.

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**Inducted Into Fellowship in the American College of Dentists**

“Four American Association of Endodontists (AAE) members were inducted into Fellowship the American College of Dentists during the 2014 Annual Session of the American Dental Association in San Antonio, Texas. Pictured at the right are: Dr. Anita Aminoshariae, Dr. Stephan Zweig, and Dr. Michelle Mazur-Kary. Also inducted was Dr. Ashraf Fouad. Congratulations to our new AAE ACD Fellows!”

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**White Coat Ceremony (continued from page 1)**

The University of New England College of Dental Medicine welcomed its inaugural class to the Portland Campus in the fall of 2013. The college opened with the intention to educate future dentists for the many underserved communities across Maine and northern New England. Until the College of Dental Medicine opened its doors, the closest dental college was in Boston. UNE will place fourth-year students in satellite dental clinics in rural areas and will favor applicants who have shown an interest in community service. In addition to addressing the shortage of dentists in rural Maine, the Oral Health Center will provide patients access to affordable health care.

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**Congratulations to**

(L to R)
Dr. Anita Aminoshariae
Dr. Stephen Zweig
Dr. Michelle Mazur-Kary
Dues bills for the 2015 tripartite membership dues (ADA, MDA and local component society) are now past due. The final deadline to pay your 2015 dues is March 31. After this date all members who have not paid will be dropped from membership, will immediately become ineligible for any MDA or ADA sponsored benefits, including insurance coverages, and will not be included in the next MDA Roster. If members need another copy of their dues bill, or have questions about their 2015 invoice, contact the MDA office immediately.

Please be patient if your dues check / credit card payment hasn’t yet cleared your bank. The Central office will process the payments as quickly as possible. Thank you for your patience and understanding.

If you retired in 2014, or plan to retire by March 31, 2015 and have not yet notified the MDA, please do so as soon as possible. It is necessary for members to complete an Affidavit for Retired Membership to allow the Central Office to change your dues rate.

Interesting Winter Facts

- Antarctica set the record for the world’s coldest temperature at -129 degrees Fahrenheit
- Average snowflakes fall at 3.1 mph.
- Ice is considered a mineral.
- 60% of the Earth’s fresh water is stored in the polar ice caps.
- Chionophobia is the fear of snow.

from: http://www.22facts.com/winter/

Answer to puzzle question on page 18

\[
\text{Answer: } 128.
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The calendars on the wall have now been replaced and despite the recurring blasts of arctic air, we are inching towards warmer weather. With the lengthening days our thoughts turn towards planning for the upcoming year. In our families, practices, and organizations we are busy making resolutions and plans. The MDA and the ADA are doing the same.

**New Members**

A New Year is the perfect time to think about new members. At every level of the tripartite we are member-driven organizations. Maine has traditionally maintained high membership rates, however we also have an aging demographic. Luckily, there are quite a few dentists that have recently entered Maine to buy or start practices, work as associates or employees, or teach at the dental school or other training programs. ADA surveys have shown that the best way to recruit these members is through “personal contact”. I ask you, as a MDA member, to reach out to a dentist new to your area this year and invite them to join us. We need to ensure that new members are invited and feel welcome once they join. Often it is these new members that bring refreshing and innovative ideas and energy to our organization. We must make joining the MDA a positive aspect of practicing dentistry in Maine and endeavor to utilize our member network to support those starting in our state. Our profession benefits from having a strong association and our members must feel that they benefit as well.

**New Dentists**

New members are important, but among new members special attention needs to be paid to New Dentists. For the past 4 years I have served as the representative from New England to the ADA’s New Dentist Committee and have seen a dramatic shift towards the recognition of this specific demographic. At the recent ADA Annual session, the House of Delegates discussed more issues related to New Dentists than ever before. Kathleen O’Loughlin, ADA Exec. Dir., recently stated, “the data shows us that we are losing membership in those that are younger, women, and diverse, we have a contraction at the lower end of our [career] pyramid, and the impacts are massive”. Analysis by the ADA shows that participation within the first five years of practice is a key indicator of long-term membership. Now that Maine has a dental school we must work to engage our youngest colleagues while they are still in training and if we want lifelong members we must continue to engage them during their first few years in the field. New Dentists are also our pipeline for leaders in the MDA, and I encourage our local dental societies to find ways to increase involvement of this group. An involved member will be a committed member.

**New Challenges**

We have a multitude of challenges ahead of us this year. But we also have great opportunities to make 2015 terrific for the MDA and for our members. As our consultants have told us, we need to work on a “new image” for the association as well and I hope we can develop this process through the year. We also will have other challenges, but can surmount these with a strong motivated membership base. Your volunteer leaders look forward to working with you and listening to your ideas and concerns. Our best ideas will come from our members and I hope to hear from you this year.

Happy New Year!

Timothy Oh, DMD
In dentistry, many people have heard rumors the federal government is requiring dentists to incorporate electronic health records or EHRs into their practices in 2015. Now that the time has come, are dentists actually required to do this?

For the most part, the answer is NO.

As a part of the Health Information Technology for Economic and Clinical Health Act, a push was made by the federal government to require covered entities (e.g., physicians and dentists) in health care to use EHRs. The benefits of EHRs were realized when so many patients’ paper records were lost after Hurricane Katrina.

While dentists are included in the definition of who is a covered entity, one must look at how the regulations and consequences are defined in the HITECH Act. To abide by these new regulations, covered entities must show “meaningful use” of EHRs using certified software.

However, if a covered entity does not use EHRs according to these guidelines, the only consequence is up to a 5 percent reduction in Medicare reimbursements.

Since dentists generally don’t treat Medicare patients, there is no need to incorporate EHRs into their practices.

On the other hand, starting this year, some practices will qualify to receive incentive payments from the Centers for Medicare and Medicaid Services for showing meaningful use of EHRs. The most common way for a dental practice to qualify for these incentive payments from CMS is to have a patient base of at least 30 percent¹ Medicaid patients.

That qualifying dental practice must then use EHR software certified by the Office of the National Coordinator for Health Information Technology. Annual reports must be provided to the ONC and CMS to prove meaningful software use.

In the end, most dental practices are not required to use EHRs and most won’t qualify for incentive payments for using them either. This technology would best be used in a dental office for the benefits it directly provides the practice instead of the federal government regulations.

For more information, visit the ONC or CMS websites, or visit HealthIT.gov for a general overview.

¹The 30 percent threshold is for Medicaid patients (Medicare and Medicaid are two different programs). Medicare is for all elderly and, with the exception of some oral surgery procedures, it covers virtually no dental services.

Medicaid is the program for low-income individuals, regardless of their age; it has more expansive coverage for dental services. Both Medicare and Medicaid are mentioned in this article, so it is important to understand the differences.
Let’s talk about the needle sticks for a minute. I know, it’s not a very scientific term, but it is an important one for Maine dentists and there are clear steps that must be taken if a needle stick occurs in your office or clinic.

In fact, the Maine Dental Practice Act doesn’t deal with needle sticks, but the Centers for Disease Control and Prevention and the Occupational Safety and Health Administration do. Here, in brief, is what the USCDC says:

“Emergency Needle Stick Information Workers Please Note

If you experienced a needle stick or sharps injury or were exposed to the blood or other body fluid of a patient during the course of your work, immediately follow these steps:

• Wash needle sticks and cuts with soap and water
• Flush splashes of bodily fluids to the nose, mouth, or skin with water
• Irrigate eyes with clean water, saline, or sterile irrigants
• Report the incident to your supervisor
• Immediately seek medical treatment”

And here is one part of what the American Dental Association says about your responsibility in dealing with a potential blood borne pathogen incident:

“Referral to a Health Care Professional (HCP) — Following a report of an exposure incident (a needle stick for instance), the dental employer shall make immediately available to the exposed employee a confidential medical evaluation and follow-up at no cost to the employee. The dental employer is responsible for providing follow-up, but is not required to perform the follow-up. The employer must refer the exposed employee to a licensed health care professional who will perform all medical evaluations and procedures in accordance with the most current recommendations of the U.S. Public Health Service.”


The requirement for an “immediate medical evaluation” is important because, should there be a problem, which will likely be part of any Dental Board’s conversation with the dentist about how the incident was handled in their office.

Let me repeat that, dentists are required to have a needle stick protocol readily available in their offices, and to train on that protocol every year during an annual training meeting. EVERY YEAR!

So, this is a heads up! Check your office needle stick procedures, read up on the law and rules and review the needle stick procedures at your annual staff training sessions. There are many resources available and the policy is easy to follow. Below are a few sites I culled from the World Wide Web, and I am sure you can find others.

Bottom line; don’t get stuck by a needle stick. Informal Conferences with the Board of Dental Examiners are not fun, and can result in disciplinary action and fines, which may be reported to the National Practitioner Database!

Some Needle Stick sites:

Needle Stick?

Immediately follow these steps:

• Wash needle sticks and cuts with soap and water
• Flush splashes of bodily fluids to the nose, mouth, or skin with water
• Irrigate eyes with clean water, saline, or sterile irrigants
• Report the incident to your supervisor
• Immediately seek medical treatment”
A Brief Interview with Ms. Penny Vaillancourt, Executive Director of the Maine Board of Dental Examiners

In December, I asked Ms. Penny Vaillancourt, the newly appointed, and I should note the first ever, Executive Director of the Maine Board of Dental Examiners, if she would respond to some questions for publication in the MDA News. She agreed and below is the result of our “Interview”.

**Bastey:** Can you tell me a little about your background in government and in governmental regulation?

**Ms. Vaillancourt:** My career in state government spans more than 22 years while working at the Department(s) of Transportation, Education, Professional and Financial Regulation as well as my time working for former Governor Angus S. King, Jr.. The legislative, regulatory and public policy experiences gained during those years have best prepared me to perform the duties as the Board’s Executive Director. I bring a unique set of regulatory experiences to the table based on my work as a former administrator responsible for managing 10 health-related professional licensing programs (podiatric medicine, audiologists, occupational therapists, nursing home administrators, social workers, etc.), and based on my experience coordinating public policy issues related to federal and state regulatory transportation programs.

**Bastey:** What plans do you foresee for changes for the Board now that it has an Executive Director? Will you be more “hands on” with how the Board works or will you continue to let them administer as they have for years?

**Ms. Vaillancourt:** I will continue to work with the Board’s President, Dr. David Moyer and the Board’s Vice-President, Dr. Gerry Schneider to implement a transition strategy that is both deliberate and cognizant of the Board’s identified priorities. My role as Executive Director is to provide direct management and oversight of the operations and regulatory components of the licensing board. I will be developing and implementing administrative and substantive policies and procedures in collaboration with the Board. To date, I would describe my work with the Board to be very much “hands on” and anticipate that to remain the same going forward.

**Bastey:** Will you be more, or less, engaged in complaint administration?

**Ms. Vaillancourt:** The Board’s Complaint Committee is comprised of the board’s staff/investigator, an Assistant Attorney General, and a complaint officer/board member. I am an active participant on all complaints and oversee the complaint process/investigations in coordination with the Board’s legal counsel.

**Bastey:** Will you be the face of the Dental Board at the Legislature?

**Ms. Vaillancourt:** Yes. My role as Executive Director is to represent the Board before legislative committees, professional associations and other meetings.

**Bastey:** We assume here at the MDA that digesting the Dental Hygiene Therapist legislation is going to be a big job. Do you see that as the biggest challenge for the Board this year or are there others you anticipate?

**Ms. Vaillancourt:** One of the Board’s priorities for the year will certainly be implementing the Dental Hygiene Therapy legislation. The Board started the first phase of implementation, which is to propose rules for public comment regarding the educational requirements for a dental hygiene therapy program. The second and third phases will include an implementation plan for the adopted education rule, as well as another round of proposed rulemaking regarding the dental hygiene therapy license (initial/renewal requirements, supervision requirements, scope of practice provisions, etc.) Other priorities for the year include updating the website so that it is more user-friendly, promote the use of online license renewals, and beginning a comprehensive review of existing rules.

**Bastey:** I hesitate to ask about your life outside of the Board’s offices but invite you to share what you wish.

**Ms. Vaillancourt:** Well, there is nothing glamorous in my response to that question. However, I am happy to share that I was born in Canada, spent my childhood in Lincoln, Maine, and consequently developed a deep affection for all of the outdoor opportunities that the great State of Maine provides. Baxter State Park, Sugarloaf, and Old Orchard Beach are just some of my family’s favorite destinations!

**Bastey:** I know the dentists in Maine are interested in learning more about you and how you will help the Board of Dental Examiners guide the regulation of dentistry and the dental arts in Maine. Thank you for your time and thoughtful responses to my questions. I have been impressed with the changes that have taken place so far, and look forward to those that will take place in the future. Thank you again for sharing your thoughts on your new position and good luck. It goes without saying that the Maine Dental Association stands behind strong and fair enforcement and regulation of the dental community and will work with you wherever we can.
In response to increasing prescription drug abuse and diversion in Maine, Diversion Alert launched statewide in June 2013 with funding from Maine’s Attorney General. *Diversion Alert is not the same as Maine’s Prescription Monitoring Program*. Diversion Alert’s mission is to address Maine’s prescription drug abuse epidemic by providing access to drug arrest data for health care providers so that they can identify and respond to patients engaged in illegal drug related activities. To achieve its mission, Diversion Alert provides several *free* resources to registered medical professionals: (1) monthly emailed or mailed alerts which show individuals charged with prescription and illegal drug related crimes; (2) an online, password protected, searchable drug charge database; and (3) research-based educational resources to assist in responding to patients charged with prescription and illegal drug related crimes. Licensed prescribers, pharmacists or their designated representatives can register to receive monthly alerts via mail or email and to access the online drug charge database. The database provides a six-month historical record of drug charges submitted to Diversion Alert by Maine law enforcement agencies.

Jay Reynolds, MD, writes, “The providers at The Aroostook Medical Center, especially in our emergency department, find the information provided in the Diversion Alerts both timely and useful. The information gathered is not used to ‘label patients as drug seekers’ but to gain insight into the complex issues that our patients present and to implement the best treatments possible.”

Ann Gahagan, FNP, writes “Diversion Alert has assisted me to make better decisions about the medication I give patients...It has alerted me more than once to a potential problem... [Diversion Alert] has been one of the most valuable tools I have used to keep my patients, the community and my practice safe.”

*To register online to receive Diversion Alert, visit diversionalert.org and click on Registration.* If you have questions about the program, call Clare at 521-2408 or email clare@diversionalert.org.

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**Prescription Drug Abuse Addressed**

Any dentist who treats Medicare beneficiaries must either enroll in the program or opt out in order to prescribe medication to their qualifying patients with Part D drug plans, according to the federal government.

Either way, dentists who fit this requirement must take action by June 1, 2015. They either have to opt in or opt out. For more information, visit the ADA news on ada.org or go to the MDA website - medental.org.
If you ever find yourself talking to a group of professionals who practice orthodontics in their practices, you might hear the following statements: “I love treating Class II patients with the Herbst appliance”, or “I love managing class III problems in the primary dentition”, or even “I love doing jaw surgery cases because there is both a functional and a cosmetic improvement.” I would hazard a guess that you will never hear: “I love treating palatally impacted canines.” Why is that?

There are so many reasons but here are just a few: Palatally impacted canines are unpredictable, they can become ankylosed during movement, they can damage adjacent teeth especially central and lateral incisors, they can add a year or more to an orthodontic treatment plan, they are rarely perfectly healthy teeth after they are uncovered and erupted into position, sometimes the surgery to expose them can cause damage and bone loss to the adjacent lateral incisor and last but not least, patients hate the morbidity associated with the exposure.

Technically, canines that have the possibility of still erupting normally without surgical exposure are called palatally displaced canines (PDCs). Once it is clear that the only option is a surgical uncovering, they are labelled as palatally impacted canines.

The incidence of impacted canines varies with ethnic groups. Japanese have the lowest incidence at about 0.27% but Caucasians have about a 2% incidence and some studies seem to indicate that the incidence is 2.5:1 in females versus males. There is a strong relationship between other dental anomalies and PDCs. For instance, PDCs are related to peg laterals, aplasia of second bicuspids, infra occlusion of deciduous molars and enamel hypoplasia. All of this suggests a common genetic origin for these conditions. The existence of associations between different tooth anomalies is clinically relevant since the early diagnosis of one anomaly may indicate an increased risk for others.

The easiest way to diagnose palatally displaced canines is with a panoramic radiograph and your finger. This should be done at age 10. A potential PDC will be seen as having the crown tipped towards the midline and the shadow of the crown will be superimposed over the adjacent lateral incisor root. (Canine on the patient’s left in this image, Fig. 1)

To confirm whether this situation is actually a PDC, you would then palpate the buccal surface of the alveolus in the area of the canine. If there is a bulge representing the tooth, then it is not a PDC. If there is no bulge, then the tooth is probably a PDC. Technically, the absence of a bulge in a 10 year old is not 100% diagnostic but that certainty rises to 95% at age 11 if there is a lack of a bulge at that age. So early detection can alert you the likelihood of what may happen.

How can we turn a palatally displaced canine into a normally erupting canine? The landmark paper on this subject was published in 1988 by Ericson and Kurol. They looked at 46 consecutive ectopic canines in 35 patients between the ages of 10 and 13. The treatment was to extract the associated deciduous canine and then follow up at 6, 12, & 18 months. 36 of the 46 PDCs changed to a normal path of eruption. This is 78% success versus 37% if nothing was done. This improvement occurred during the first 12 months after deciduous tooth extraction. No positive changes were noted after 12 months. If the shadow of the canine did not cover more than 50% of the lateral incisor root, there was a 90% chance of success and if the canine shadow was beyond the midpoint of the lateral incisor root, the success was 65%. (see Fig. 2)
Here are two examples to consider. In the first one, Zane was first seen in May 1997, just three months short of his 12th birthday. He presented with a unilateral PDC on the left. (Fig. 3) The deciduous tooth was removed and the second image is from 9 months later. The left side PDC has resolved quite nicely (Fig. 4).

The second example is Isaac from May 2008. He presented with a canine on the left side that could not be palpated on the buccal. The root of the deciduous canine is also not resorbing. (Fig. 5)

In April 2009, the PDC on the left has shifted its position and is now coming in a much more normal position. (Fig. 6) Ultimately, the canine came in completely by the time we were ready to start orthodontic treatment using Invisalign Teen.

Please feel free to visit my blog at orthodmd.blogspot.com or email me an orthodontic question at orthodmd@me.com.
SPEAR EDUCATION
Drs. Gary DeWood and Steve Ratcliff present on the topics of occlusion, restorative dentistry, and treatment planning.

Fast Track: Immediate Implant Placement in the Esthetic Zone
Learn about implant planning, the esthetic zone, and immediate implant placement.

Dental Team Playbook: The 360 Experience
The dental team will explore topics pertinent to each teammate’s role in the dental practice.

Human Resource Management Essentials
Discover best practices through a review of the entire lifecycle of an employee.

Interprofessional Symposium
Learn from expert physicians from New England’s premier hospitals.

AADOM Day @ YDC
A full day of learning catered to the Office Manager.
The Maine Dental Association will again be hosting a hospitality booth/lounge area on the exhibit floor at Yankee Dental in Boston, January 28 - February 1, 2015. The booth will be open most of the hours that the exhibits are open.

The booth will provide a place for members and guests to rest and relax, have a beverage, and make connections with old friends or team members during the busy days of walking around the vast Yankee exhibit space. The MDA will also be hosting a reception with light refreshments late Friday afternoon, so save some time to drop by to say hello to MDA President Timothy Oh and other members of the MDA leadership.

The MDA is looking for volunteers to host booth times at Yankee. If you are willing to volunteer to host an hour or two at the MDA booth, please complete and return the form below as soon as possible.

For several years the MDA lounge featured opportunities for dentists considering a move to Maine and job openings for hygienists, assistants, and office staff. There are plans to collect and disseminate new listings for 2015.

If you would like to be an MDA booth volunteer or have a job opportunity you would like to have listed and distributed at the MDA booth at the 2015 Yankee Dental Congress, please complete and return the form below as soon as possible.

Mail to:
MDA, PO Box 215, Manchester, ME 04351 or fax to MDA: 207-622-6210

If you have questions please call the MDA Central office.

### MDA Booth Volunteers

**AVAILABLE HOURS**

- __Thursday Host / available hours: __________________________
- __Friday Host / available hours: ____________________________
- __Saturday Host / available hours: _________________________

**Contact Information:**

- NAME: __________________________________________________
- Phone: ______________________ Home or Office?
- E:mail: ____________________________________________
- Best time for contact: _____________________________
- Special Notes/Comments: _____________________________

### Information for MDA Booth at Yankee

**TYPE OF OPPORTUNITY**

- __Dental Practice for Sale (__GP; Specialist:__________________)
- __Seeking an Associate Dentist (__GP; Specialist:______________)
- __Seeking a Dentist-Employee (__GP; Specialist:______________)  
- __Seeking a Dental Hygienist (__Full time; __Part-time)
- __Seeking a Dental Assistant (__Full time; __Part-time)
- __Seeking a Dental Business Assistant (__Full time; __Part-time)

**Contact Information:**

- NAME: ________________________________________________
- Practice Location: ______________________________________
- Phone: ______________________ Home or Office?
- E:mail: ____________________________________________
- Best time for contact: _____________________________
- Special Notes/Comments: _____________________________
February 20, 2015

Best Practice Pearls for Making the Most of Technology AND What Every Dentists Needs to Know About Online Marketing: Websites, SEO, PPC, Social Media, Videos, Online Reputation, and More...

Lorne Lavine, DMD/Sasha Thompson [6 Credits, Cat. 1]

Best Practice Pearls for Making the Most of Technology – Dr. Lorne Lavine

Many dental practices are moving towards a chartless or paperless environment. Dentists see increased efficiency and decreased costs as motivating factors. There’s no time like the present to go paperless!

The problem for many practices is that getting from here to there can be quite challenging. There are multiple hardware and software systems that need to work together. New HIPAA and HITECH regulations complicate the process, but must be discussed. Using social media to differentiate your practice from other offices is an important consideration.

The purpose of this lecture is to give dental practices a 6-step plan on how to avoid a very costly mistake. We will evaluate a “treatment plan” of how to add technology in stages that considers both the impact on the staff as well as the practice’s budget.

Learning objectives:
• Learn a 6-step plan for deciding which technology to add and when.
• Learn about how new government regulations affect the need for privacy and security of the practice’s data.
• Discover new add-on programs that can increase the functionality of your practice management software.
• Learn the best ways to protect your data and develop a disaster recovery protocol.
• Discover new advances in dental technology.

Lorne Lavine, DMD, founder and president of Dental Technology Consultants, has over 30 years invested in the dental and dental technology fields. Dr. Lavine has vast experience with dental technology systems. He is a CompTia Certified A+ Computer Repair Technician, CompTia Network+ certified and will soon be a Microsoft Certified Systems Administrator. As a consultant and integrator, he has extensive hands-on experience with most practice management software, image management software, digital cameras, intraoral cameras, computers, networks, and digital radiography systems. Dr. Lavine writes for many well-known industry publications and lectures across the country.

What Every Dentists Needs to Know About Online Marketing: Websites, SEO, PPC, Social Media, Videos, Online Reputation, and More… – Sasha Thompson

This presentation will clearly explain the fundamentals of online marketing, and will explore some advanced topics as well. The presentation will cover website optimization, website conversions, SEO (search engine optimization), PPC (paid ads or pay-per-click), social media, video marketing, and online reputation management.

Course Objectives:
• Key factors to improve the performance of your website (rankings and conversion)
• Search Engine Marketing (SEO and PPC) – what are they, how do they work, how to apply them, what you can do yourself, how to know if they are working, questions to ask when selecting a vendor, key performance indicators, and how to evaluate results over time.
• Social media review of more popular sites and practical tips to start using today (Facebook, You Tube, Twitter, Google+, Linked In, Pinterest, etc.)
• Video marketing overview – key benefits of videos, how to implement video marketing, etc.
• Online reputation strategies to improve and monitor your online reputation

Attendees will leave the course with an action list of items they can implement themselves to immediately improve their online marketing performance.

Please Note: Ian McNickle is unable to present at this course. One of his partners, Sasha Thompson, will be the presenter.

Sasha Thompson is a consultant, published writer and speaker for WEO Media, a Portland-based dental marketing agency. She holds a Master’s in Education with an emphasis on French, psychology and learning theory. Her working knowledge in dental practice marketing and experience in educational psychology work together to provide immediate and easy-to-understand takeaways for increasing practice marketing efficiency.

Sasha has been delivering educational speaking events across the US and Canada since 2011 and speaks on a variety of topics relative to dental marketing and technologies.

The Maine Dental Association is an ADA CERP Recognized Provider

ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. Maine Dental Association designates these activities for one to six continuing education credits.
March 13, 2015
An Introduction to Forensic Odontology
Adam J. Freeman, DDS [6 Credits, Cat. 1]

This course will provide an overview of dental identification as well as mass disaster identification and bitemark evidence. Natural or man-made catastrophes often result in multiple casualties under circumstances that make victim identification difficult. A team of trained forensic dentists, as well as dental auxiliaries, can assist in the expeditious identification of these casualties. From the Bazar de Charite in 1897 to the World Trade Centers and Hurricane Katrina, using these real life disasters we will highlight the importance of a well-trained team to identify the victims of these tragedies.

Additionally, the course work delves into the analysis of bite marks that may be left in violent exchanges. An overview of strengths and weaknesses of this important evidence will be discussed and the CSI effect examined.

Dr. Adam Freeman earned his dental degree from Columbia University’s College of Dental Medicine. He completed a fellowship in forensic odontology at the University of Texas Health Science Center at San Antonio and Center for Education and Research in Forensics (CERF) in 2003. While at CERF he did research on the distribution of bite marks in human victims. This research was published in the Journal of Forensic Sciences. He is a member and dental section chief of HHS DMORT Region 1 where he served as a team member during the aftermath of Hurricane’s Katrina and Ike. He is the Founder and Director of the State of Connecticut’s Disaster Identification Response Team (D.I.R.T.), and a Consultant to Kenyon International, a worldwide disaster management company. Dr. Freeman currently serves as Vice-President of the American Board of Forensic Dentistry, one of less than 100 active board certified forensic dentists. He is the Deputy Chairman of Interpol’s Odontology working Group for Disaster Victim Identification.

MDA Package Plan 2015-16

Mark your calendars for the following Package Plan CDE courses. Package Plan brochures and registration forms will be sent through the mail and available on the MDA website in the summer of 2015.

September 25, 2015
Dental Caries Management
Dr. Andrea Zandona

October 23, 2015
Periodontal Anti-Infective Therapy
Dr. Thomas Rams

November 13, 2015
Oral Surgical Procedures for the General Dentist
Dr. Steven Rasner

December 11, 2015
Successful Management of Anxious & Special Needs Patients
Dr. Harvey Levy

April 22, 2016
New Roles for the Dentists in the Healthcare System
Dr. Mark Wolff

[Part of the 2016 MDA Convention]

June 10, 2016
Street Drugs Exposed - What Your Patients and Your Kids Are NOT Telling You
Dr. Harold Crossley

June 11, 2016
Want Clues to Your Patient’s Health: Look at Their Medications
Dr. Harold Crossley
Maine Dental Association Convention 2015

...training for the whole dental team...
...lectures and fun for all...

June 12-13, 2015
Samoset Resort
Rockport, Maine

Convention Schedule Preview

Friday, June 12, 2015
This is the last CE Course in the 2014-2015 Package Plan (one course with two parts):

AM - Optimize Your Practice: CDT Code, Claims and More
Dr. Ronald Riggins [3.5 Credits, Cat. 2] AND
PM - HIPAA –What’s New and What Do I Have to Do?
Leslie Canham, CDA, RDA [2.5 Credits, Cat. 1]

Saturday, June 13, 2015
AM - Wellness: The Value Added Practice: The Link Between Systemic Disorders and Oral Health
Dr. Uche Odiatu [3.5 Credits, Cat. 1]
Lunch and Learn - What New (and experienced) Dentists Need to Know
Dr. Bill Simon [2 Credits, Cat. 2]
PM - Your Sleep Deprived Patient: How Poor Sleep Quality and Quantity Affects the Heart, Brain, Digestive and Immune System
Dr. Uche Odiatu [2.5 Credits, Cat. 1]

Dental Student Reception
Saturday Evening Dinner/Dance- Dinner, Music with the dental band, Mental Block and friends, and dancing

Watch your mail or check the MDA website for program brochure and registration form.

SAVE THE DATE
Dancing With the Dentists

Date: November 14, 2015
Location: Heritage Center in Portland

“After a resounding success in 2013, Dancing With The Dentists is returning to raise funds for Dental LifeLine Network and The Root Cellar. The dance is set for November 14, 2015. The last show raised over $30,000 for the non-profits to help patients in need. Help us to make this an even bigger success in 2015! Check out the dance videos on YouTube channel “Dancing With Dentists”

Please contact Dr. Glen Knock for more information: 207-781-5900 or drkknock99@msn.com.
On November 7th, The Greater Portland Dental Society held its 6th annual free dental day. 20 dentists, along with volunteer hygienists, assistants, and auxiliary staff offered services for free in their dental offices. Services that were offered on a first-come, first-served basis were cleanings, restorations, and extractions. Needless to say, it was a successful day and nearly 400 patients were seen in 8 different locations, from Buxton to Skowhegan. In one day and without supplemental funding, about $110,000 worth of treatment was rendered.

Also, many patients were referred to specialists for more complicated procedures, such as root canals and extractions. Approximately another $30,000 is expected to be donated in treatment by our specialists over the coming months.

This event would not be possible without the support of the Greater Portland Dental Society, whose members have been extremely supportive and involved. I’d like to thank all the previous dentists who have made this event possible throughout the years. I would now like to thank the dentists who spent the 7th of November caring for the Mainers who would normally go without dental care; Drs. David Jacobson (who volunteered at my office), Alan Chebuske, Kathryn Horutz, Leighton Philbrick, Tom Corwin, Joe Penna, Colette Sirois, Doug Delli Colli, Steve Morse, Barry Saltz, Mike Ciwikinski, Andra Boak, Nichol Penna, Dan Ravin, Amy Fuller, Carolyn Morin, Jonathan Bernstein, Denise Theriault and Demi Kouzounas.

I also want to give a big thanks to our specialists that provided care in the weeks and months following November 7th; Dental Specialists of Maine, Endodontic Associates, Southern Maine Oral Surgery, Oral and Maxillofacial Surgery Associates,

Again, thank you and look forward to making this program bigger and better on Friday, November 6th, 2015!!

TRANSITION WITH CONFIDENCE IN MAINE.

Jim Kasper Associates has been helping dental professionals transition their businesses since 1981. With an experienced and dedicated sales professional located right here in Maine, Jim Kasper and Associates can work with both buyers and sellers to facilitate a smooth transition to the next phase of your life and career.

Congratulations to our latest successfully transitioned practitioners!

Dr. Peter Davis – Lewiston, ME to Dr. Kevin Guze
Dr. Sandy Turbyne – Skowhegan, ME to Dr. Andy Friedman
Dr. Matt Zweig – Oakland, ME to Dr. Rebecca Berry
Dr. Jay Beauchemin – Saco, ME to Dr. Amanda Rockwood
Dr. Ed Roy – Brunswick, ME to Dr. Eric Staeben

To our sellers, we wish you well and great happiness in whatever is next or wherever your new life takes you.

To our buyers, we are confident you will find great satisfaction owning a productive, ethical and profitable private practice.

In Maine, contact Dr. Tony Bates: 207.975.1942 or Dr.Tony@JimKasper.com
Have life’s challenges got you down?

If use of drugs (including alcohol) or other compulsive behaviors have become a problem for you, help is just a phone call away. The Medical Professionals Health Program can provide you with confidential guidance to help you, a friend or colleague with substance use issues. Please call the number below for assistance or for more information. Eligible professionals include: physicians, physician assistants, dentists, hygienists, denturists, nurses (all licensed), pharmacists and veterinarians.

*** Medical Professionals Health Program
(207) 623-9266 ***

Multi-professional Peer Support Group Meetings
These weekly confidential meetings (Caduceus Groups) are mutual peer support meetings for the health professionals listed above who are experienced with recovery for chemical dependency, addictive behaviors and/or other medical or mental illness, including depression. Please call the contact number listed for more information.

PRESQUE ISLE: Thursday at 7:30PM - Aroostook Medical Center,
Nat: (207) 551-2171

BANGOR: Monday at 7PM - Acadia Hospital – Osprey Room,
Patti: (480)221-9776

CALAIS: Thursday at 7:15 PM - Surgical Services Office, 15 Palmer St.,
Dave: (207) 461-8724

FARMINGTON: Tuesday at 5:00 pm - UMF - Education Bldg, Rm 322
Jen: (207) 272-4449 Jack:(207) 578-0232

LEWISTON: Tuesday at 7PM - New Wing St .Mary’s Hospital Front Lobby,
Julie: (207) 784-2985

PORTLAND: Wednesday at 7PM - Mercy Hospital Level B2 Upper Aud.,
Don: (207) 651-7008

PORTSMOUTH, NH: Monday at 7:30PM - Portsmouth Ballroom,
Laura: (603) 534-2372

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SUDOKU PUZZLE

www.printable-sudoku-puzzles.com

How many squares, of any size, do not contain a Rook?
Answer... on page 4

Classifieds

NATIONAL PRACTICE TRANSITIONS (NPT)
(#ME-1182) General Practice. 4 Operatories. Average collections $447,000. Great long standing general practice with superb staff in picturesque Kennebec County. Price: $274,000. Contact Dan Baccari at 877-365-6786 x223, d.baccari@NPTdental.com, or register on our website www.NPTdental.com for immediate notification of all updates.
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Immediate Start - Unique opportunity for professional growth. Established practice, committed to excellence. Focus on sedation dentistry, complete restorative, esthetic and implant dentistry. Beautiful facility, high-tech equipped, innovative management, award-winning team. Reach your highest potential; call Dr. Ted Morgan 207-831-1589, email: tedmorgandds@juno.com

ASSOCIATE DENTIST
All Smiles Dental in Biddeford, Maine is looking for an associate dentist to provide general dentistry. Excellent daily compensation rate with collection bonus. Health care plan available. Malpractice insurance and CE allowance provided. E-mail cover letter and CV to Peterasd@maine.rr.com or mail to A.S.D., 2 Wellspring Rd, Biddeford, ME 04005,

ASSOCIATE WANTED - FULL or PART TIME
Busy adult resorative practice in Bangor. New, state-of-the-art facility emphasizing comprehensive care along with a high level of patient service. Upbeat and motivated team with a high level of staff and doctor training. Send cover letter and CV to Creative Dental Solutions, 1407 Broadway, Bangor, ME 04401

GENERAL DENTIST – Main Street Dental Center - Waterville, ME – Experienced dentist needed in a busy office in Waterville, Maine. Full Time, Part Time or Locum. H1 visa and Green card sponsorship available. At least one year clinical experience required. Must be willing and eligible for Medicaid participation in the State of Maine. Long term commitment required. Compensation: 40% of collection. If interested please send resume including verifiable references, mainstreetdentalcenter@gmail.com.

LOOKING FOR DENTAL ASSOCIATE
3 days. State-of-the-art, busy practice, with well-trained, experienced staff. Primarily Fee-for-service practice. Requirements: licensed or license eligible to practice in Maine. Guaranteed base and percentage. Please email cover letter and resume to BDHA@brunswickdentalhealthassociates.com.

SHORT TERM DISABILITY/PREGNANCY REPLACEMENT AVAILABILITY
Looking for a general dentist for short-term replacement? We have a licensed Maine dentist who can fill that position for you. For more information, please contact: Richard A. Huot, DDS CEO, Beachside Dental Consultants, Inc. Vero Beach, FL 32963 772-913-3552 cell drhuot@bellsouth.net www.militarydentist.com

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- Small Children
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FOR SALE
Cerec Unit with Milling Machine for sale below Patterson appraised price. New milling motors and recent camera. All service records through Patterson Dental. Call 288-5333.

FOR SALE
Two Pelton Crane Dental Chairs for sale. “Chairman” model; Working condition; $1500 for both; Buyer must pick up or arrange delivery. OBO. Contact dentaljobmaine@gmail.com

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<tr>
<th>Date</th>
<th>Event</th>
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<td>Executive Board Meeting</td>
<td>MDA Central Office - Manchester</td>
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<tr>
<td>January 19, 2015</td>
<td>Martin Luther King, Jr. Day (MDA Office Closed)</td>
<td>Remember</td>
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<tr>
<td>February 13, 2015</td>
<td>Executive Board Meeting</td>
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<td>February 16, 2015</td>
<td>Presidents Day (MDA Office Closed)</td>
<td>Washington’s Birthday/President’s Day in Maine</td>
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<td>February 20, 2015</td>
<td>Dr. Lorne Lavine/Sasha Thompson CE</td>
<td>Togus</td>
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<td>March 6, 2015</td>
<td>Executive Board Meeting</td>
<td>MDA Central Office - Manchester</td>
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<td>March 13, 2015</td>
<td>Dr. Adam Freeman CE</td>
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<td>April 10, 2015</td>
<td>Executive Board Meeting</td>
<td>MDA Central Office - Manchester</td>
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<tr>
<td>April 20, 2015</td>
<td>Patriots Day (MDA Office Closed)</td>
<td>anniversary of the Battles of Lexington and Concord</td>
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<td>May 8, 2015</td>
<td>Executive Board Meeting</td>
<td>MDA Central Office - Manchester</td>
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<td>May 10, 2015</td>
<td>Mother's Day</td>
<td>Celebrate and remember</td>
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<tr>
<td>May 25, 2015</td>
<td>Memorial Day (MDA Office Closed)</td>
<td>formerly known as Decoration Day</td>
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<td>June 11, 2015</td>
<td>CNA Risk Management Course</td>
<td>Samoset Resort</td>
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<td>June 12-13, 2015</td>
<td>MDA Convention</td>
<td>Samoset Resort</td>
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<tr>
<td>June 12, 2015</td>
<td>Executive Board Meeting</td>
<td>Samoset Resort</td>
</tr>
<tr>
<td>June 21, 2015</td>
<td>Father’s Day</td>
<td>Celebrate and remember</td>
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