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Bulletin

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CAROLINA
DENTAL
ASSOCIATION

16th District Candidate Runs for ADA President-Elect

By Phil Smith

Dr. Ron Tankersley, a Virginia Oral Surgeon, is running for the President-Elect position of the American Dental Association. Dr. Tankersley has been an active participant and supporter of the 16th District Caucus. He has served on the ADA Board of Trustees, and is seeking election for this office. The campaign committee has a number of SC dentists helping with promotion, survey and eventually presentation during the Caucus meetings in San Antonio.

"Dentists across the country share the same goals. We want to preserve market-based private practice, safeguard the doctor-patient relationship, keep the dentist the leader of the dental team, and maintain the ability of patients to choose their dentist." Ron Tankersley has had a unique opportunity to view the changes and trends that have surrounded dental policy. He has been a Virginia Dental Board examiner, a Trustee and Caucus Chairman, and a member of the Joint Commission for Healthcare Taskforce. He believes that basic common sense care must prevail. As an educator, he also favors support of our dental schools and research to direct scientifically based care for our patients. "Our dental team must be without equal and the credibility of the ADA must be fiercely protected."

Ron is a past leader of the Virginia Society of Oral and Maxillofacial Surgeons, and past president of that organization's Southeastern Society. His heart is entrenched in dentistry, and his soul is committed to ethical practice. He is a member of the American College of Dentists and a past Chair of Virginia's Ethics and Judicial Affairs Committee. "Only a small percentage of dentists engage in ethical misconduct. But, there is an increasing public awareness of the problem. This challenge puts our privilege of being a self-regulating profession at risk."

"Dental practices across the country are providing the most sophisticated dentistry in history and we are the last major health profession to be primarily market-based. Our ability to provide the level of cost-effective oral health care most appropriate for patient's needs make us the world leader in dental care." Dr. Tankersley will actively promote unity and trust among the profession, and strive to represent dentistry's message by deeds and example. Although many espouse being at the table when decisions about dentistry are made, Ron Tankersley comes to the table with all of the experience and clarity to influence our professional direction. National medical insurance is a possibility as our nation approaches the election, and it is critical that ADA represent the dentist in the field. "We take pride in being America's leading advocate for oral health. But others challenge our credibility in that role. This challenge puts our ability to effectively promote the safest and most appropriate solutions for providing quality dental care to the well served and the underserved."



Dr. Ron Tankersley

Dr. Ron Tankersley and the 16th District would like your support, in deeds and action. Begin by encouraging dental friends in other districts to support our candidate. Seek commitments from delegates, and continue the momentum on behalf of Dr. Ron Tankersley for President-Elect of the ADA.

Mark Your Calendars!

- The House of Delegates will meet on Friday, December 5 at Virginia Wingard Memorial UMC in Columbia



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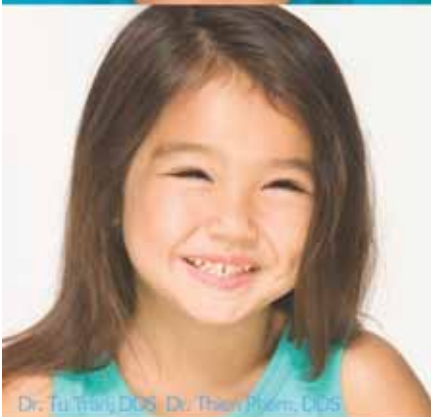
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Master Calendar

- Aug. 8** **Countdown To Kindergarten**—EdVenture
- Aug. 15** **SCDA Member Benefits Group Board Meeting**—SCDA Office, 9am-1pm
- Sept. 18-21** **16th District Caucus**—Williamsburg, VA
- Sept. 19** **Central District Meeting**—Columbia Marriott, 8 am-4 pm
- Sept. 26-28** **Southern Leadership Conference**—Atlanta, GA
- Sept. 26** **X Annual CE Course**—Embassy Suites Hotel & Charleston Convention Center, 8:30 am-5 pm

Please visit www.scd.org for more events.

South Carolina Dental Association Bulletin

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Philip E. Smith, DMD, FAGD, ACD, ICD

Editor

Jennifer M. Haworth

Designer

SCDA Toll Free in SC (800) 327-2598

Editorial Comments

Comments appearing in this section are the renderings of the Editor or credited authors and do not necessarily reflect the opinions or policies of the SCDA. Letters are invited. Brevity is appreciated, and the Editor reserves the right to edit all communications. Letters may be emailed: philes48@aol.com, mailed to the SCDA office, or faxed to (803)359-3004.

SuperDental Heroes, part 2

Last month I presented an article sharing insight for three of South Carolina dentistry's leaders. All of these dentists made substantial contributions to developing the organization of SCDA as we know it. This month I would like to recognize three more "giants" of our profession.

Dr. Carl Wessinger was a dentist who practiced in Clinton. He was active in the SCDA and had worked his way up through the various offices in dentistry. During the time of his career, he served as treasurer of the SCDA. This was before officers "worked through the chairs" and became president. Dr. Wessinger actually was the treasurer for five years and was positioned to become president. However, there had developed a concern with the State Board of Dentistry and its relation with SCDA. So to that end, Dr. Wessinger agreed to move onto the State Board.

It was partly due to his effort, and the entry of other dentists, that the two organizations became unified. And in that unity, South Carolina dentistry evolved to another level.

Dr. Wessinger served on Council for the ADA and was a Delegate, but his "claim to fame" was the establishment of the SCDA Newsletter, now the BULLETIN. My editorial hat salutes his foresight!

Dr. Arthur L. Haisten is one of those personalities that many of us are familiar with, and yet, may not know. He was the Dean of the Dental school while many of us were there. Dr. Haisten was one of the first Public Health dentists in South Carolina. He had served in the military and private practice, and then returned to the state after completing his specialty study. In the early years of the MUSC dental school he was part of the Department of Community Dentistry. Dr. Haisten was elected Dean of the dental college after Dean Sherry's departure in 1975. There had been some turmoil at the school prior to his term, and Dean Haisten was able to bring a new level of academic excellence that benefited the school. By his manner and commitment, a sense of stability returned to the school.

Dean Haisten could be described as the "students' Dean". He served behind the scenes and assisted students who were in personal financial need. He helped many the struggling student with financial assistance from his personal funds to repair a car or make a rent payment. He was active in establishing a viable Alumni Association. He served as the leader of the dental school for 13 years. There is currently an Arthur L. Haisten Scholarship Fund that still provides emergency funds to students in distress.

Dr. George P. Hoffmann may best be recognized as the namesake for the "Hoffmann Award" given by the SCDA Board of Governors to a dentist who has contributed to SC dentistry. And it is not a coincidence that this honor is the highest accolade given to a dentist by our organization.

Dr. Hoffmann was a general dentist in Greenville, and served as President of the SCDA in 1967- 1968. He was a past president of the Greenville County Dental Society, a member of the ADA Council on Federal Dental Services, and a Fellow in the American College of Dentists. He was very active in the development of dental insurance programs in South Carolina. Being opposed to assorted insurance provider vehicles, he helped to develop the concept of dental supported insurance programs. To that end he was a promoter of the first Delta Dental In-



Dr. Phil Smith
Editor



insurance program to enter the state. His focus was to recognize that private practice and acceptable insurance could co-exist. He was vocal about the establishment of “nameless dental clinics” that sold cheap care and had few permanent dentists (a regretful trend begun in the early 1970s).

In the mid-fifties there was a heated debate about fluoridation in the Greenville water system. The mayor was a staunch anti-fluoridation advocate because it was poison, and could possibly be used against the county in a military strike. (This was the cold war era). Dr. Hoffmann went on TV and supported fluoride and its benefits, and explained that there was not enough fluoride in the state to overdose Greenville’s population. Needless to say, the debate was resolved and teeth were saved in Greenville!

He had a very long view when it came to the organizational needs of the SCDA. He advised that a Dental Service Corporation, organized as a non-profit corporation, be established for the administration of prepaid dental programs. He also advised that the SCDA Central Office be established at a central location. At the time Dr. Hoffmann suggested about 800 square feet until our future needs are determined.

These dentists were important contributors to the SCDA. They had perspective, credential, and a desire to make dentistry better for the future. They helped to develop a profession in South Carolina that is second to none! The Building blocks of these six dentists can be seen as the framework for a strong dental association today.

In 1969, the centennial anniversary of the SCDA, there were 544 active dental members in South Carolina. The mean age of the membership was 46 years, 7 months.

Today there are 1747 dentists. The current mean age is 54, and the average age is 52.

A Letter from Dr. Carter Brown:

I would like to public thank those who have given donations of equipment and supplies for the Senior Students Rotations at Greenville Tech.

The Dental Heroes who have given thus far are:

Dr. John White	4 high speed handpieces
Dr. Loring Ross	High Speed Handpieces
Dr. Craig Rhyne	Handpieces
Dr. Robert Lofgren	High Speed Handpieces
Atlanta Dental	Stainless Steel Instrument Cassettes, supplies
Kulzer	Composite material and bonding agent
Patterson Dental	A case of Impression Material
Sherer Dental Lab	300 Diamond burrs

Special thanks to:

Ken Eckelson from Hayes Handpiece Repair for bringing all the handpieces up to new condition **at no charge**.
 South Carolina Dental Lab Association for a cash contribution to help fill in the gaps.

Other donated items from various sources: 3 curing lights, 100 hand instruments for amalgam and composite.

I want to personally thank these individuals and groups for their support. As you can see this is an effort by many groups and individuals. We also need more.

We need materials and instruments for pulpotomies and SS Crowns and Amalgams, plus any surgical instruments.

- Carbide burrs
- matrix retainers and bands and medicaments
- Syringes and anesthetic
- Disposables.

If you want to volunteer to help, contact David Watson at docwatson@bellsouth.net



Till Next Time,
 Phil



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SCDA Member Benefits Group Corner

By Mark K. Brown

ARE YOU GETTING THE MOST RETURN FOR YOUR PRECIOUS METALS?

Precious metal prices are high, so now is a great time to refine!

D-MMEX EasyRefine (endorsed by the SCDA in addition to 11 other state dental associations) reports that precious metal prices have continued to stay high through all of 2008. The refining service now being used on 4 continents welcomes 50-60 new doctors each week as well as many repeat clients who have tried and tested the program since its launch in 2004.

For all participating SCDA members, D-MMEX will continue to offer a **5% bonus on the total value** of all failed crowns and bridgework sent in using the EasyRefine kit.

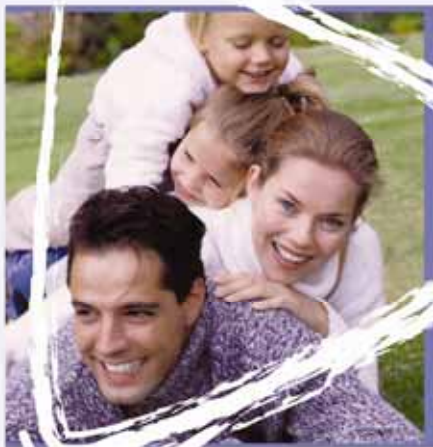
Visit the website at www.easyrefine.com or call 800-741-3174 for your kit. You'll receive your check within 10 business days.

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President's Message



Dr. Jim Mercer
President

Your South Carolina Dental Association has been busy since I wrote my July column. I would like to update you on a couple of items. I recently attended a meeting where the speaker was discussing intergenerational differences. His presentation contrasted the baby boomers with Gen X and Gen Y in the workplace. I recently had a chance to explore these differences with the MUSC Freshmen Dental School class. I was invited to talk about organized dentistry and professionalism. For the most part the freshman students have never used a rotary phone (“dialed a phone number”). A record player and albums are antiques and they have never known fewer than 100 television channels. One difference that my 15 year old daughter can relate to is that a cell phone is a birth right and they have always been connected online with email, text messaging, Facebook, MySpace and voicemail. A difference that hit home for me was procrastination in writing a term paper, going to the library and finding all the books checked out and having to type papers on a typewriter. Today students have instant access to online information and can pound out a paper using a computer with spell checking. Our SCDA Strategic Planning Task Force and Committee on the New Dentist are well aware of these differences and are adapting to our new member differences and needs. The one thing the MUSC Freshman Dental class and all of us have in common is the Profession of Dentistry. I can tell you from my brief time with the freshman class that I am encouraged by my experience. They asked many questions about how they can become involved as students with our events such as GKAS, CDHM, and other volunteer events. I look forward to their graduation.

Due to the hard work of a number of our members in the upstate, the Senior MUSC Dental Students will be rotating through Greenville Tech and will have the opportunity to work with patients and local Dentists. Donations and supplies are still needed for this project. See <http://www.scda.org/displaycommon.cfm?an=1&subarticlenbr=446> on our website for more information.

As a reflection of our efforts to build more bridges with MUSC, I am happy to tell you that our new MUSC liaison to the Board, Dr. Ted McGill, attended our August BOG Meeting as well as Dr. Mark Berry and two students – Will Temple and Anna Sanford. They provided valuable input to the Board and I look forward to their involvement in future Board Meetings.

The SCDA was recently notified that we won the 2008 Samuel D. Harris National Children's Dental Health Month State Program Award. The SCDA has either been the First Place winner or a Merit winner 14 of the last 16 years. That is incredible and I want to give a special recognition to Dr. Rocky Napier who organized and directed this effort for the last several years and was very instrumental in the SCDA receiving this 2008 award. He had help from the SCDA NCDHM Committee, the SCDA GKAS Committee, Phil Latham, the SCDA staff, and the entire SCDA membership. He and I cannot thank Dr. Carter Brown enough for his work with the display at the Charleston Children's Museum and with assistance securing funding for the new SC DHEC puppet show; Dr. Kevin Williams and the SCDA Committee on Diversity for our "Hometown Heroes" display; and Drs. Dana Parker and Phil Smith with the GKAS statewide events and videos. Once again our collaborating organizations carried a very heavy load for us and we need to make certain they are all much appreciated. Thanks to EdVenture and its entire management and staff; SC DHEC Oral Health Division - Chris Veschusio, Dr. Rick McDaniel, and the entire staff; the State Department of Education (Lynn Hammonds); and Head Start (Mary Lynn Diggs) and all of its centers statewide. We also extend sincere thanks to Georgia Famuliner and Communicare with its NPR broadcasts and other projects; John Scollon and the Marionette Theatre - now with its two oral health related puppet shows; Crest-Oral B (Lisa Morris and Peggy Hamlin with over 5000 toothbrushes); the Children's Free Dental Clinic (Diane Bouknight); and Greenville Technical College (Dr. Dana Parker and her staff and students), as well as many, many others. Rocky and I hope we have not overlooked anyone and I thank all of you for supporting and promoting a "Cavity Free Community" in South Carolina.

Your SCDA reviewed some of the data from the recently completed Oral Health Needs Assessment of over 5000 South Carolina Children. The results are very exciting and it also lays out some of our challenges ahead regarding the improvement of oral health and access to care. The report has to undergo some further internal review by state agencies and then we will be able to share more with you. I can tell you the assessment data backs up our long standing assertion that increased Medicaid funding does improve access and has a direct impact on caries experience and increasing preventative and restorative treatment. It is South Carolina specific data that will help us with a number of our legislative issues.

Finally, with your SCDA's involvement with the SC Oral Health Coalition and our increased visibility as the leading oral health advocate for South Carolina come increased requests (sometimes on relatively short notice) for volunteers for events such as the Back to School Bash at the State Fair Grounds and Countdown to Kindergarten at EdVenture. We have asked the SCDA Public Relations Committee to look into ways we can more effectively recruit volunteers for these short one-time commitments.

Please read Phil Latham's Article in this Bulletin to review recent SCDA Board actions. I welcome your suggestions and comments at jmercer@sc.rr.com.

Until next time continue your *Heritage of Commitment* and *Make A Difference*.

Jim

“...increased Medicaid funding does improve access and has a direct impact on caries experience and increasing preventative and restorative treatment.”

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SCDA To Screen Kids At EdVenture

For the past few years, the SCDA has teamed with EdVenture Children's Museum to promote activities. This summer, the South Carolina Dental Association will participate in the **Countdown to Kindergarten** Program which will be held on Friday, August 8, 2008 from 5 pm till 8:00 pm.

Last year more than 1200 children, families and teachers attended this event. A dozen dentists and support staff helped screen children as they prepared for the start of school. The protocol would be a simple oral evaluation, and documentation for the parents to take to their dentist. This is also a great public relations opportunity for good oral health.

We need your help to populate our booth to help see children. Please call Christy at the SCDA at 800-327-2598 or by e-mail at meadorc@scda.org.



Executive Director's Notes

PUBLIC RELATIONS

Recently the SCDA entered into a contract with the ADA and Carolina PR. This was part of an ADA House of Delegates resolution passed in 2007 in which South Carolina was chosen as one of the states for the ADA to assist with public relations. Carolina PR is a local group that has participated in many SCDA related events. **I ask that if you are aware of any dental related event going on in your area, please let me know so that I may pass along the information to Carolina PR.**



Mr. Phil Latham
Executive Director

UPCOMING PROGRAM

On Friday, September 26, 2008, Dr. Carlos Salinas will be conducting the 10th Annual "Dental Diagnosis and Treatment of Individuals with Special Health Care Needs" course. This course is free of charge for all South Carolina dentists and their teams. You can access the registration information on the front page of the SCDA website www.scd.org called X Annual CE Course.

CONGRATULATIONS

SCDA has done it again. The ADA recently notified the SCDA that it won the 2008 Samuel D. Harris National Children's Dental Health Month State Program Award. I want to recognize Dr. Rocky Napier who was very instrumental in SCDA receiving this award.

THANKS ROCKY FOR ALL YOU DO FOR SCDA!

SCDA BOARD ACTIONS

The SCDA Board of Governors held its meeting this past Friday, August 1, 2008 and here are some of the highlights of the meeting:

- The Board received a report for Carolina PR and its planned efforts for the coming months.
- The Board received reports from Dr. Dana Parker on GKAS, Dr. Beth Poag on a program called "Rage against the Haze" which is aimed to stop tobacco use among youths and Dr. Jill Colson, SCDA's New Dentist Committee Chair.
- The Board voted to help support the upcoming 10th Annual Special Needs CE course to be conducted by Dr. Carlos Salinas in September.
- The Board voted to mail a letter to the SCDA membership regarding some recent proposed radiation regulations by DHEC.
- The Board voted to establish a Task Force on access to look at the possibility of hosting an access project similar to what many other states have recently done. Look for more information on this in the coming communications.
- The Board voted to halt printed copies of speaker handouts at the SCDA convention to save on staff time and money. Handouts will be placed on the SCDA website a few weeks prior to the convention and will remain for a few weeks after the convention.
- The Board received a detailed report from MUSC representatives and ASDA representatives.

"South Carolina was chosen as one of the states for the ADA to assist with public relations."



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Tech Talk

By Christy J. Meador



New Items on the Website- Have you been to the SCDA website lately? If not, you need too! There is so much updated information! For example: 2008-2009 information is on our website now! Do you know when your [District meeting](#) is? Want to promote your next meeting? Go to "[Calendar of Events](#)" Do you know if you are a delegate or alternate? Who is on our board? Who is on committees or task forces? This information can be found under the "[About the SCDA](#)" tab on the website.

Did you know...Dental Fun Facts-Did you ever wonder the going rate for the Tooth Fairy? According to Securian Dental Plans, the Tooth Fair is currently paying out \$2 per tooth. The American actors with the best teeth are Brad Pitt and Julia Roberts. Almost three quarters of Americans would rather go grocery shopping than floss their teeth.

Remember, this is **YOUR** web site. **Know a dentist, who has gotten married, ran a marathon, had a baby, went on a mission trip?** Then send me articles, photos, events or any other information for our website. You can email at meadorc@scda.org. You can see all of the photos by visiting www.scda.org and clicking on the [Photo Gallery](#) button.

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Common OSHA Violations

By Renee Russell

Following OSHA (Occupational Safety and Health Administration) guidelines can be a time consuming job, but knowing you have protected yourself, your patients, and your fellow co-workers from disease transmission is highly rewarding. Furthermore, the dentist/employer can achieve peace of mind knowing their practice is in compliance.

Common OSHA violations in South Carolina dental offices include failure to maintain a Written Exposure Control Plan, failure to provide biohazard communication, improper use of PPE (personal protective equipment), overfilling sharps container, and not properly disposing of regulated waste. OSHA requires dental offices to provide a post exposure protocol for dental health care personnel (DHCP). An exposure incident is defined as “a specific eye, mouth or other mucous membrane, non-intact skin or parenteral contact with blood or other potentially infectious material.”¹ The incident is reported to the Safety Officer immediately. The employee performs basic first aid of the exposure area. Keep in mind, OSHA requires dentists to provide a first aid kit and an eyewash station. The type of incident, date and time of exposure, how the incident occurred and the type of device should all be documented and filed in the employee’s confidential employee medical record that remains on file for 30 years past the final employment date. A Written Exposure Plan lists the medical facility used for job-related injuries including exposure incidents. Failure to dispose of regulated waste and the use of biohazard labels are common violations. OSHA defines “regulated waste” as liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials.² Examples include any material that is blood or saliva soaked such as cotton rolls, gauze, extracted teeth, and surgically removed tissues. All of these items need to be placed in a regulated waste container that is marked as “biohazard.” Also, please label the laundry hamper.

Inspect the sharps containers to ensure that sharps do not exceed the fill line. Regulated waste is removed from the dental office using a waste hauler or a mail-in service that is approved by the state. Maintain documentation in your quality control records. Regulated waste should not go in the trash bin as this is a violation.

Personal protective equipment is “specialized clothing or devices worn by workers for protection against a hazard; in dentistry this includes gloves, masks, gown and protective eyewear but not general work clothes (such as uniforms, pants, shirts, or blouses) that are not intended to protect against a hazard.”³ PPE is easy to misuse, resulting in violations. For example, when anticipating splash or splatter, full PPE is recommended. The mask must cover your nose during treatment. It is easy to become hot or feel claustrophobic and pull the mask down leaving your nose exposed. This creates a potential for an exposure incident. Eyewear should have OSHA-approved side shields to prevent splatter from coming into contact with your eyes. Prescription glasses should also have side shields. Other forms of eyewear are face shields and goggles.

Exposed skin is protected using gowns or lab jackets during patient care. Scrubs are not PPE! There are many different types of gowns including disposable and cloth lab jackets. The employer is required to maintain PPE and thus lab jackets are laundered onsite or through a laundry service.

Failure to use utility gloves is another common violation. Utility gloves should be worn when handling all sharps. This includes contaminated instruments. Instruments should be carried from the operatory to the lab in a closed leak proof container. Keep the utility gloves on when placing the instruments in the ultrasonic and when mixing certain chemicals.

In planning CE courses and training programs, keep in mind OSHA’s requirements. According to the Bloodborne Pathogens Standard, employers must provide employees who have occupational exposure with training at no cost to the employee and during working hours. This includes dentists (who are paid as employees), hygienists, dental assistants, scrub technicians, and administrative team members who have clinical duties. This also includes dentists who are incorporated as they are considered employees of their corporations. Additionally, if janitorial service workers are paid as employees, they too may fall under this criterion.⁴

Recently, OSHA clarified that acceptable time lapse for “annual” training. Wherever OSHA standards require that the employee training be conducted “at least annually,” such as bloodborne pathogens training, OSHA interprets that to mean that employees must be provided with retraining at least once every twelve months (ie., a time frame not to exceed 365 days).⁵

In summary, compliance with OSHA including training and policy development may be a time consuming task; however, achieving a safe and healthful workplace is highly rewarding.

Renee Russell, RDH, BHS: Renee serves as a Site Specialist and Safety Trainer for Modern Practice Solutions, LLC. She graduated from The Medical University of South Carolina with a Bachelor of Health Science Degree in 2006. Please visit www.modernpracticesol.com or email Renee at renerussell@frc-i.net.

¹ From Policy to Practice: OSAP’s Guide to the Guidelines, 2004-2007, pg.151

² OSHA, Bloodborne Pathogens Standard, 1910.1030 (b) (1)

³ From Policy to Practice: OSAP’s Guide to the Guidelines, 2004-2007, pg.154

⁴ Wann, Olivia, “OSHA Training for Dental Offices,” Tennessee Dental Association Newsletter, December 2007, p. 6

⁵ OSHA, Standard Interpretations January 24, 2007 –Acceptable time lapse for “annual training” available at www.osha.gov accessed on 06-23-08

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