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| 40–44           | 63.00 | 43.80   | 94.50 | 65.70 |
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FEATURES

UAMS General Practice Residency Program 17
By Niki Carter, DMD, Gene Jines, DDS, and Laurance Howe, DDS

Delta Dental 26
Important Updates
By Robert A. Mason, D.M.D.

Regions Insurance 28
Get to know your Regions Insurance Team
By Chad Parker

Hypertension and Oral Health 30
Risks can be magnified while undergoing dental care
By Dr. Lindy Bollen, Jr., DDS

The Fifth Vital Sign 32
ASDA Journal Coding Corner
By Jim Phillips, MS, DDS, FICD

Large Group Medical Insurance 34
A solution for the Arkansas Dental Community
By Josh Matthews

Harmony Health Clinic 55
More than 15,000 patient visits since 2008

DEPARTMENTS

9 FROM THE PAST-PRESIDENT: BY CHUCK WOOD, DDS
11 FROM THE EDITOR: BY TERRY FIDDLER, DDS
12 VOLUNTEER OPPORTUNITIES
13 FROM THE EXECUTIVE DIRECTOR: BY BILLY TARPLEY
36 DENTAL SCHOOLS
42 DISTRICT DENTAL SOCIETY NEWS
47 ASSOCIATE NEWS
52 OBITUARIES

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Thank You

First of all, I want to thank you for the opportunity to serve as President of the Arkansas State Dental Association. It has been a rewarding, yet challenging, year. I have made many new friendships and strengthened bonds with colleagues with whom I have worked in the past. If I had to choose a group to hang out with, I could not find a better group than Arkansas dentists. They are just good, solid people! Let’s keep it that way!

One challenge has been dealing with special interest groups, lawyers, and legislators. When these entities are involved, one seldom gets everything one wants. This is a reason to financially support FFDL. FFDL gives Arkansas dentists the resources needed to be heard.

Another challenge has been, and will continue to be, the new Medicaid program. The two administration groups for Medicaid seem to be more interested in teaching dentists how to solve “no shows” and prescribing “protocol” than raising fees. I believe if dentists are given fair reimbursement and the ability to treat patients as individuals, we, as dentists, will be able to figure out the rest. Be prepared for bumps along the way.

On the positive side, AXPM and ASDA have negotiated a deal that may save our members and their employees money on health insurance. This is something you should research as an alternative to high cost health insurance.

Your Executive Council is a group of strong, intelligent, independent thinkers who are interested in doing what is best for dentists and patients. Their positive attitude and love of the profession is evident in the decisions they make. This is very refreshing in these turbulent and changing times in dentistry.

The Executive Council and ASDA continue to support a dental school for Arkansas. My hope is that a dental school in Arkansas will attract the brightest students for our profession, without drowning them with financial burdens.

Our Staff

Billy Tarpley has signed a new contract. This will give the ASDA stability and continuity for the next three years.

We wish Drew Ramey well as he starts a new career in the private sector. He has been an asset to the ASDA and the ARMOM for the last several years. He will be missed.

Cheryl Ball continues to hold down to fort and keep the ASDA running smoothly.

Continues on page 12
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From the Editor

Terry Fiddler, DDS

Excited

There are several articles in this issue concerning our graduate dental program at UAMS. These young men and woman are devoting a year of their life to make themselves a better general dentist as well as providing services to the population that so many young dentists do not have in their bag of procedures. Many of the more mature (sounds better than older) dentists have had an opportunity to advance the young dentists’ skills by giving of our time and expertise since last year. In just a few months they will have completed their advanced degrees and take what has been learned into the real world of patient business. Most have found a location to continue their careers in Arkansas and one graduate is going to South Carolina.

This has been a wonderful experience for me also. Being around young, excited students/dentists gives me back that time when I was so full of questions (sadly, not enough doubts) and not having a clue about the business of dentistry. I think that so many of us have been a valuable source for connections with these new dentists, but also a source for so many business questions, that I wished I could have known when I was their age. They are constantly being told that their mentors are not that smart, we have just made tons of mistakes that we hope to head off for them.

There is no question that those young dentists coming out of school have much greater grade points to have been accepted into school! Many of my peers, including myself, would not have had a snowflake’s chance of being accepted today into school versus what it was thirty or forty years ago. There are not enough, or more accurately, any business courses in dental school to help these folks. I often tell the senior students at UT to not let their ego overcome their common sense!

In a short time these guys will be moving on and the next class of dentists will be coming in. As in the former classes, the new students have an opportunity to be taught by a superb staff of both employed and adjunct dentists. As all remember, it is one thing to work on a patient with the instructor standing over you and the transitioning to “now what do I do.” We serve as that mediator to head off some of the doubts and hand wringing. Let the fun begin!
Volunteer Opportunities – A Chance to Give Back

Why not volunteer your dental services once or twice a year in the community that provides your livelihood? Volunteer dentists, hygienists, assistants, and staff are needed.

Some of the volunteer dental clinics in central Arkansas and their times of operation are listed below. A contact person is included to answer questions and set up a time to volunteer.

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Contact: Eddie Pannell
501-375-4400
Hours: day and evening clinics, Monday – Saturday
www.harmonyclinicar.org

Interfaith Health Clinic
514 West Faulkner
El Dorado, AR 71730
Contact: Charlotte Ellen, 870-864-8010
Hours: 8:00 a.m. – 5:00 p.m., Monday through Friday

Northwest Arkansas Free Health Center
10 South College Avenue
Fayetteville, AR 72701
Contact: Monika Fischer-Massie, 479-864-8010
Hours: 8:00 a.m. – 5:00 p.m., Monday through Friday

Shepherd’s Hope Clinic
2404 S. Tyler
Little Rock, AR 72204
Contact: Pam Ferguson
501-614-9523
Hours: 6:00 p.m. – 9:00 p.m. every Tuesday
www.shepherdshopelr.org

River City Ministries
1321 East Washington Ave.
No. Little Rock, AR
Contact: Carol Ezell
501-376-6694
Hours: 8:30 a.m. – 4:30 p.m., seven days a week
www.rivercityministries.org

Christian Community Care Clinic
2200 W. South St., Benton, AR 72015
Contact: Kae Wissler at Dr. Richard Phelan 501-778-7129
Hours: The 2nd and 4th Tuesday of every month
6:00 p.m. – 8:00 p.m.
www.bentoncareclinic.com

Arkansas Health Care Access
Little Rock, AR

Arkansas Donated Dental Services
Little Rock, AR

Eureka Christian Health Outreach, Inc. (ECHO Clinic)
4004 East Van Buren
Eureka Springs, AR 72632
Contact: Janet Arnett
479-253-5547
Clinic offers free dental extractions and other medical services.

Now the Closing Sermonette

For nearly 36 years, I have seen and heard all types of practice management “gurus,” all manner of practice styles, staff motivational hype, marketing, etc. Though there are new tools for implementing these strategies, “There is nothing new under the sun” as Solomon says. The ideas have just been repackaged in shinier paper. There will always be someone seeking a portion of your earnings—PPO discounts, management companies, just to name a few. Do the math before dealing with any of these. As an example: being paid $1 more per procedure on an average of 20 procedures per day for 200 days results in $4000/year income increase. $4000/year over 40 years at a return of 8% = $1,036,266! The hygienist probably does 25 procedures per day. Over 40 years this results in a return of $619,047. These are PROCEDURES not PATIENTS! That $1 increase can have a tremendous effect on your quality of life! What are the real benefits for you in this relationship?

Remember, you are the one with the license to practice dentistry!

So my conclusion after 36 years in dentistry is this:

• Love your patients; treat all with dignity and respect.
• Always try to do what is in the best interest of the patient.
• Do not allow outsiders to dictate the patient’s treatment.
• Love your employees—the long term ones are family.
• Spend time with your family—material things are soon forgotten.
• Save a little each month, so you are prepared for emergencies and retirement.
• Give a little or tithe. Store up treasures in heaven.
• Be a colleague, not a competitor.

Chuck Wood, DDS
Immediate Past President, ASDA

EDITOR’S NOTE: If you know of clinics anywhere in Arkansas that need to be included please contact the editor at fiddler@conwaycorp.net or 501-327-7778.
Your Voice Was Heard

By the time you read this, the 91st Arkansas General Assembly will have adjourned. We are grateful for those of you who responded to our Call-to-Action on Senate Bill 339 and to the requests on other bills as mentioned in our LegisUpdate e-mails and fax blasts. Please know that your voice was heard, and your staff at the capitol needed all the help they could get.

As mentioned in previous reports, the current legislature is heavily tilted in favor of the Republican Party, with Republicans filling all constitutional offices and maintaining a super-majority (3/4) control of both the Arkansas House and Senate. With the support of Governor Asa Hutchinson and friends from both parties in the legislature, ASDA was able to endure a legislative session that brought about an unparalleled number of dental-related bills and actions.

But THANKS TO ASDA DENTISTS, your voice was clearly heard at the capitol. Thank you and well done!

House Bill 1250, which is now Act 489 of 2017, received the most attention early in the session. The bill was promoted by the Association of Dental Support Organizations, the national association that represents many of the private equity DSOs such as Aspen, Heartland, Pacific, Affordable Dentures and others. With your help and a willingness of ADSO to compromise we were able to craft a final bill that addressed many of the concerns expressed by dentistry and the DSOs. As a plus, the bill provides for a 4-day charitable license that will allow dentists from other states to apply for

Continues on page 14
and receive permission to volunteer at the Arkansas Mission of Mercy.

The primary features of Act 489 include the following:

- Clarifies the role that non-dentists may play within a dental practice, and states that a non-dentist may not interfere with the professional judgment of a dentist.
- Establishes a 4-day provision for charitable care by dentists licensed in other states.
- Establishes a 4-day provision for DSOs and other dental practices to bring in dentists licensed in other states for working interviews provided the dentists have applied for and received approval from the Arkansas dental board.
- Allows specialists to provide general dental procedures, provided the general dental procedures do not constitute more than 50 percent of the total practice. Otherwise, the provider cannot hold forth his/her specialty to the public.

SB339 was the focus of the one Call-to-Action that ASDA issued early in March. The bill makes significant changes to the method by which physicians, dentists and others prescribe Schedule II and III controlled substances. The original bill would not have provided a method of relief for providers in the event that the new law proved to be problematic. Under the compromise that your calls to the capitol helped to create providers will be able to appeal to the Arkansas Department of Health (ADH) for relief by the administrative procedures act. If a super majority of the Arkansas Legislative Council approves, the changes will become effective immediately.

We acknowledge the efforts of Delta Dental of Arkansas and ADH in successfully combating two anti-fluoridation bills, SB299 and HB1865, during the session. New strategies by opponents of community water fluoridation yielded more disappointing results than in previous years. We are grateful to all ASDA members and other allied organizations for their efforts in helping to defeat these measures.

SB341, which is now Act 540 of 2017, clarifies the Governor’s authority to make appointments to state boards and commissions. Whereas previous Arkansas law held forth certain requirements for appointments to licensing boards, the Governor now has sole authority to make such appointments but must consult with the various professional associations, including ASDA. The appointments will require approval of the Arkansas Senate.

ASDA worked numerous other bills this past session, many of which should have never been introduced. At any rate, the next challenge before the legislature will be a special session on Medicaid funding. Once again, ASDA was in front on this issue and is now awaiting implementation of a new Medicaid dental program sometime in January 2018.

Billy Tarpley
Executive Director, ASDA
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A Year in the Life of a General Practice Resident
BY NIKI CARTER, DMD

What a year we’ve had for our 2016-2017 General Practice Residency class! As of January 2017, we are halfway through our residency program. Currently we have five residents, Dr. Chad Adams graduate of University of Tennessee College of Dentistry (hometown: Jefferson City, Tennessee), Dr. Alyssa Brailsford graduate of Louisiana State University School of Dentistry (hometown: Mandeville, Louisiana), Dr. Jack Pardo graduate of Texas A&M University Baylor College of Dentistry (hometown: Dallas, Texas), Dr. John Scott graduate of University of Tennessee College of Dentistry (hometown: Eldorado, AR), and Dr. Will Wilson graduate of University of Tennessee College of Dentistry (hometown: Eldorado, AR).

This second year has proven even more interesting on several levels. UAMS is becoming more knowledgeable with dentistry, and in oral health manifestations in many patient’s systemic conditions. The residents have added service and awareness to the medical sciences and to our medical colleagues. The interprofessional education is in full force while the residents work with other residents in the hospital and rotate through the different medical rotations they experience during the one year program.

L-R: Residents Dr. Will Wilson, Dr. Chad Adams and Dr. Alyssa Brailsford work on a patient with the UAMS General Practice Residency Program.
The first quarter of the year comprised of specific training for the program and UAMS. The first month encompasses on-boarding, orientation, training for the Electronic Medical Record (EMR), both UAMS and the dental clinic, simulation for emergencies, placing IV, and intubation. Residents learn ECG, Cardiac pharmacology, Advanced Cardiac Life Support (ACLS), dental clearance protocols for chemotherapy, radiation, in terms of different illnesses but mostly for organ transplant, cancer treatments, joint and cardiac surgeries, and other types of conditions which need dental clearance. Special lab values for a variety of systemic conditions and illnesses are taught and trained for case management with the patient assessment, physical exam and Review of Systems courses. In essence, it is a lot to swallow to become acclimated to the GPR and UAMS system.

The second quarter continues with clinical service, and rotations through many of the departments at UAMS, and ACH. Every Thursday afternoon is the lecture series which entails all of the required subject fields. The first Thursday is Journal Club (JC) which is a presentation by residents who select a subject/topic which they research and report their findings to the audience. The Patient Care Conference (PCC) is the other half of this presentation. The PCC is a treatment planning session the resident presents for future, current, or final treatment in the clinic or in some instances, a patient case the resident treated during a rotation. The audience includes faculty, clinical team members, administration team members, and guest lecturers.

The third quarter, which we are now beginning, is a continuation of the clinical and rotation responsibilities. It is also the time of year the residents begin to nail down the details of their future. They are very familiar how fast time goes, and many planning discussions and negotiations are under way.

Fourth quarter brings the last three months to finish up the year and get their research paper and presentation finalized. It is a big production the very last week of the year for them. It is also when the new class begins their UAMS on-boarding and orientation which starts all over for us with different residents.

From my perspective, the biggest challenge was bringing dentistry to UAMS. It isn’t “just” dentistry, but the addition of what dentistry means to UAMS in terms of having an inclusive institution which happens to treat patients from all over the world. “By being in a hospital setting we have been able to increase communication with other healthcare providers which ultimately leads to a higher quality of care for our patients,” remarked Dr. John Pardo.

Vital information is provided in accessing oral health. Most people do not realize oral health is actually a measure of a patient’s overall health including risk factors and social determinants for a person’s general health and well-being. Poor oral health has been linked to many chronic conditions including cardiovascular disease, dementia, respiratory infections, diabetes, and complications during pregnancy. The status of oral health is associated with and determined by gender, age, education level, income, race and
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ethnicity, access to insurance and geographic location. By reducing many of these barriers to better oral health, it improves the overall health of our citizens. Dr. John Scott remarked, "I have been able to develop confidence in my ability to offer dental care to patients whose medical situation would have been very intimidating as a recent dental school graduate. It has also made me feel more connected with the medical community and given me the opportunity to share the importance of oral health with its members for better overall patient care." Dr. Brailsford commented, "The knowledge and experiences I have gained from this GRP program have shaped how I will practice as a dentist." Dr. Will Wilson added, "The experience and education I have received in this general practice residency have far exceeded my expectations. I feel more well-rounded as a dentist and more importantly a doctor. The faculty has treated me with great respect and has been more than willing to share their wealth of knowledge. This experience is something I will definitely treasure forever."

The key message in our educational program is by providing advanced training to residents to treat patients who are medically compromised, this raises the bar for the skill and depth of dental care taught exceeding dental school training. Dr. William Wilson shared, "This GPR experience has allowed me to have significantly more confidence in diagnosing and treating patients of all complexities." Dr. Chad Adams commented, "My time spent during this general practice residency has surely given me stronger insight into the field of dentistry. Through countless conversations with attending faculty, and informative weekly lectures, I have gained so many pearls of wisdom in the understanding of how to provide dental care to patients more effectively. My experiences outside of the Oral Health Clinic on rotations have broadened my horizons on being able to treat patients as more than just a mouth. This general practice residency program has given me years of experience and understanding of patient care that would not have been attainable without having done it."

Residents upon completing the residency year can practice in a remote area of the state and provide comprehensive care, or apply for hospital privileges and treat patients who can’t receive treatment in the traditional practice office setting. They can also choose to practice solo, in associateship, or in a group practice. The "sky’s the limit" is what I tell these bright, engaging group of young colleagues! Only time will complete this story of this second class of residents.

The Beginning of the General Practice Residency at UAMS
BY NIKI CARTER, DMD

In the fall of 2013, I was contacted to ask if I’d be interested in helping UAMS develop a General Practice Residency (GPR) Program in dentistry. A national study which had been completed, indicated Arkansas was very low in dental patient accessibility and practitioner distribution. Since there is no dental college in Arkansas, the plan to elevate dental health in Arkansas was to develop educational programs including advanced training by creating future residencies.

At that time, I had been in private practice for 24 years and truly loved my dental practice. With a bit of persuasion, I agreed to pursue this request. Within just a few weeks, the process of designing and developing a GPR program to gain initial accreditation began, at the same time maintaining my practice. It was an exciting, overwhelming, and wonderful opportunity for me, and the job of creating the residency was daunting!

Accreditation was a brand new concept to me, and not knowing fully what it meant was very good. Luckily I had a secret weapon named Dr. William Slagle! Many of you know him as Dean Slagle, as he was Dean of the University of Tennessee College of Dentistry for an unprecedented number of years. He is an unbelievable source of knowledge. Dr. Slagle was Director of the Center for Dental Education when initial accreditation occurred. The process of accreditation taught me a great deal about systems of education, how institutional processes work, and also about managing people. Initial accreditation was achieved in September 2014 and in 2016, the “big” accreditation status was granted.

The residency is managed and operated by some very dedicated individuals. Dr. Gene Jines is the Director of the Center for Dental Education which houses the
General Practice Residency and Continuing Education programs. Dr. William Slagle is Associate Director. In addition, our faculty members are Dr. Laurence Howe, Dr. John Jones, Dr. Marcia Wheeler, and Dr. Ashley McMillan, who serves as assistant director of the GPR and clinic. Several adjunct faculty from around the state also supervise and provide instruction in advanced techniques and procedures. Without this terrific team of skilled colleagues, the residency could not operate! This year our adjunct faculty include: Drs. Alan Ainley, Fred Church, Lindsay Cloud, Donald Cobb, Les Cooner, Robert Mason, Dwight Duckworth, Terry Fiddler, Lee Hinson, Mark Murphy, Tina Nichols, Jim Orsini, Ken Pearson, Jim Phillips, Garrett Taylor, and Bryan Whitaker. Last year our adjunct faculty also included: Drs. Steve Cloyd, Jordan Cooper, Gerge Martin, Amir Mehrabi, William Morgan, John Pitts, and Drew Toole.

The Arkansas Children’s Hospital faculty are Drs. Steve Beestra, Don Callan, Michael Dienberg, Emily Fourny, Vent Murphy, and Kirt Simmons. ACH continues to be among the favorite rotations the residents participate in for their training.

One of our residents, Dr. Alyssa Brailsford said, “My favorite part of the GPR program is working with the adjunct faculty who are incredibly helpful and encouraging. It’s great to have a sounding board for complex treatment planning and procedures.”

Our General Practice Residency is in full swing with our second class of residents. Our current residents are: Dr. Chad Adams graduate of University of Tennessee College of Dentistry (hometown: of Jefferson City, Tennessee), Dr. Alyssa Brailsford graduate of Louisiana State University School of Dentistry (hometown: Mandeville, Louisiana), Dr. Jack Pardo graduate of Texas A&M University Baylor College of Dentistry (hometown: Dallas, Texas), Dr. John Scott graduate of University of Tennessee College of Dentistry (hometown: Eldorado, AR), and Dr. Will Wilson graduate of University of Tennessee College of Dentistry (hometown: Eldorado, AR).

Our first class of residents chose to become faculty in hospital practice. Our own Dr. Ashley McMillan is now faculty here in the clinic and program at UAMS, and Dr. Michael Dienberg, is faculty at Arkansas Children’s Hospital (ACH).

When asked what is the best aspect of the program or what was gained from participating in the residency program, Dr. Chad Adams said, “At only halfway through this residency, my experience has already far surpassed my expectations. I could not imagine having to skip out on this amazing educational opportunity.”

The future is very bright for all of these young professionals!

An Historical Perspective
BY WALTER GENE JINES, DDS
On July 6, 2007, then UAMS Chancellor I. Dodd Wilson, M.D., received a letter from the Arkansas Bureau of Legislative Research signed by the Chairs of the House and Senate Committees on Public Health, Welfare & Labor stating that INTERIM STUDY PROPOSAL 2007-173 had been approved by both committees and “inviting” UAMS to lead the study of a need for a college of dentistry at the University of Arkansas for Medical Sciences. The committees also recommended Charles Cranford, D.D.S., M.P.A., a former Vice-Chancellor for UAMS Regional Programs and former Executive Director of the Arkansas AHEC Program lead the study. A study committee consisting of ASDA members, ACH pediatric dentists, dental hygiene and an AR Dept of Health dentist was then formed to complete the study. It should be mentioned Dr. Bill Slagle, Dean Emeritus of
Supplemental retirement plan for Medicaid providers!

Medicaid providers can defer Medicaid income on a pre-tax basis into the State of Arkansas Deferred Compensation Plan, commonly referred to as the Arkansas Diamond Plan. Providers practicing in group settings, as well as individual private practice, are eligible to participate.

Medicaid deferrals may be made in addition to any contributions you are making to your current retirement plan established by your professional group or individual practice.

Medicaid providers enrolled in the Plan can defer up to $18,000 of Medicaid income for calendar year 2017. Medicaid providers that are age 50 or older in 2017 can defer up to $24,000 of Medicaid income for calendar year 2017.

Over the past few years, hundreds of Medicaid providers have enrolled in the Arkansas Diamond Plan to take advantage of the opportunity to defer a portion of their Medicaid income. The Plan has been available for more than 30 years.

For additional information regarding participation in the Arkansas Diamond Plan contact Robert Jones of Stephens Inc. at 501-377-8112.

The program is brought to you through a partnership between Arkansas Diamond Plan and the Arkansas State Dental Association.
the UT College of Dentistry, was also invited to participate as a consultant with a history in dental education. The study was completed and submitted on August 20, 2008.

With the appointment of Dan Rahn, M.D., as Chancellor on November 1, 2009, UAMS has formed the Center for Dental Education, which has overseen the completion of a full service dental clinic on the UAMS campus. During planning and construction of the dental clinic, paper work was being done to submit an initial application for a General Practice Residency at UAMS, an affiliation agreement was signed with the University of Tennessee College of Dentistry by which senior dental students would rotate at UAMS and ACH for two weeks of their senior year, and the dental clinic began seeing patients in 2013. The clinic now with four general dentists on staff, a part-time oral surgeon, five GPR residents, two full time dental hygienists, dental assistants, office personnel and many adjunct faculty members is busy daylight to dark caring for patients literally from all across the state. From “no dental” just a few years ago to a full dental service now is almost beyond belief. A “normal” day in the Delta Dental of Arkansas Foundation Oral Health Clinic at UAMS will have patients scheduled with treatment ranging from everyday dentistry, reduction of fractures and other surgeries to implant placement in irradiated jaws. Believe me when I say, “Very little is routine in this clinic.” Arkansas is blessed to have UAMS involved in dental treatment and dental education!

The Beginning—A Personal Perspective

BY LAURENCE HOWE, DDS

The clinical facility and the development of the residency program have made great strides since I started working at UAMS in April 2013. There were two hygiene operatories, a sedation room, and two dental operatories. We shared the same sterilization space that the dental hygiene school had and made a makeshift lab out of their old lab. I worked two days a week for the first six months, and being the only dentist working in the clinic for my first two months.

Construction of the remaining operatories, lab, offices, and sterilization started at the end of June 2013 and took about seven months. We saw patients all during the construction phase. There was a lot of noise, dust, and “pardon us” to the patients who came in during that time. The men’s restroom was converted into a lab where we could pour impressions and trim models. My office was a table and chair set up in the yet-to-be-used sedation room. I keep a photo of it as a reminder at my desk. I started working full time at UAMS in October, 2013.

We now have faculty offices, a study area for the residents, eight general dental operatories, two hygiene operatories, and a sedation/oral surgery room. We have a great dental lab area and large sterilization area shared with the dental hygiene school. To be able to start the GPR program we had to have the physical facility that we have now and the patient base to draw upon to support up to six residents (as the planning had called for).

The hard work and dedication of support staff, dental and front office staff, and a few faculty dentists has brought Chancellor Dan Rahn, M.D., and Dr. Charles Cranford’s vision to reality. Under the leadership and guidance of Dr. William Slagle, Dr. Gene Jines, and Dr. Niki Carter, the Oral Health Clinic has taken root and has grown into a top level treatment facility with the latest technology that treats patients and teaches at the same time.

The first instruction in the clinic began with senior dental students from the University of Tennessee College of Dentistry doing rotations in our clinic in 2014 and 2015. The GPR program had its first two residents start in July 2015, five in this year’s class, and we will be at our maximum of six for next year. In four short years we have gone from a clinic just opening its doors to a fully accredited General Practice Residency program at full capacity. This is no small feat and I am proud to say that I was there at the beginning.
Your legacy is about more than just wealth. It’s about sharing your life’s experiences with those you love. BKD Wealth Advisors is committed to helping you manage and plan your financial future with an easy-to-understand strategy tailored to you. Experience how our guidance can help you enjoy the freedom to focus on what matters most.
This new service, available through the Delta Dental mobile app, will allow Delta Dental members to conveniently schedule an appointment with dentists who choose to participate in this program.

**Voiance Translation Service**
Delta Dental has a new vendor for free language translation services for participating dentists as of January 2017. Voiance is the leading provider of language interpreting services and bridges communication gaps for providers and their patients. Voiance has over 200 languages, including sign language, and is available 24 hours a day, 7 days a week, 365 days of the year. You also have access to the Voiance Interpreter app, where you can connect to interpreters via voice or video call with any mobile device. Turn your tablet or smartphone into a mobile interpreter. Perfect for use anywhere in your office including your treatment rooms. It’s easy and fast. Simply open the app, choose voice or video translation, and select a language. You can access voice translation by calling 844.648.5669 and entering your Arkansas dental license number. If you would like information on setting up the mobile app call Professional Relations at 501.992.1710

**Brighter Online Appointment Scheduling**
Our national Delta Dental Plans Association, through an agreement with BRIGHTER, is launching a new free online appointment scheduling service. This new service, available through the Delta Dental mobile app, will allow Delta Dental members to conveniently schedule an appointment with dentists who choose to participate in this program. Brighter will help to attract new patients and improve administrative efficiency in your office. This new service works with almost all practice management software, and providers using this service are reportedly twice as likely to be selected by new patients and is available to all in-network providers regardless of their specialty or their participation in specific Delta Dental networks. To get started, call (888) 679-5761 to sign up and activate your Brighter account.

**Prescription Monitoring Program**
This program was developed by the Arkansas Department of Health to:
1. “enhance patient care by providing prescription monitoring information that will ensure legitimate use of controlled substances in health care” and
2. “curtail the misuse and abuse of controlled substances.”

Arkansas is 25% higher in opioid use than the national average and “Arkansas ranks first of all states in non-medical use of prescription pain relievers.” This program is available to those providers who have an active DEA license. After you register, you will be able to view and monitor prescriptions of your patients written by you and other providers. Beginning July 1, 2017 all new and reinstated Delta Dental of Arkansas network providers will be required to register with this program and submit verification for network credentialing. Beginning January 1, 2018, all network providers—existing, new and reinstated—will be required to register with the Prescription Monitoring Program (PMP) to be credentialed in the Delta Dental of Arkansas networks. AD

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Regions Insurance and its predecessor companies have been endorsed by the ASDA as the insurance provider since late 1940s. After researching the history of the relationship into great depth, it is very clear why it has stayed strong for so long. Our agency has been fortunate with the quality of people that have been hired through the years to handle the ASDA members’ insurance. Over the last 70 years the ASDA board has gone through many cycles. Also in this time Regions Insurance employees have entered and then retired. Each new board has seen the consistent commitment from our team to provide stability in your membership insurance program. For us, it is not just being able to provide insurance policies for a dental practice. The history has allowed us to develop a culture that is built to provide top level service, knowledge, and passion toward the Arkansas dental community.

Last month I had a meeting with a doctor who is planning his exit strategy from dentistry. During our meeting he brought up the fact that he has been insured through the ASDA endorsed insurance programs for his entire 35 year career. The conversation turned to the Regions Insurance staff who he has communicated with through the years. He mentioned that he knew their names but knew very little about the people he regularly talked to and had never met them. Regions Insurance has some of the best insurance minds in the entire country, but the Customer Service Agents who help the dentists of Arkansas daily are not just good insurance agents, they are terrific individuals, and I would like you to meet them.

Denise Turner-CSA of PPP

Denise is originally from Camden, Arkansas. She took over the Professional Protector Plan for Dentists in 2004. In our office, Denise is the one you visit with regarding coverages and policy changes within the PPP. She is referred to as the Dental Queen during company functions as her knowledge of coverages needed in a dental practice and the PPP are second to none. She is committed to provide the best service to the Arkansas dental community and this is evidenced by the fact there is not a day she is not at her desk before 6:45.

On a personal level Denise has a heart of gold. Currently, now is the time in my career and life that I can find myself being pulled thin at times. Weekly I sit down with Denise before the office opens. She probably assumes it’s just small talk, but because of her trustworthy, loyal, caring, and common sense nature I use her wisdom as a life coach. In the office she commits her time to different committees whether it’s putting together a potluck or raising money for the less fortunate. She has always enjoyed attending the ASDA state meetings, but last year helped with ARMOM for the first time. She fell in love with the purpose of the Mission of Mercy and is counting down the days until Jonesboro this year.

Outside of the office, Denise and her husband Charles love to spend time with their two kids while spoiling their six grandchildren. As a family they attend Longley Baptist Church in Little Rock. She also enjoys helping her husband Charles with catering meals for events such as Christmas parties and weddings. In her alone time to relax, she enjoys reading or even watching sports.

Holly Schieber CSA Life & Disability

Holly has been with the Professional Division of Regions Insurance for over 28 years. She was born and raised in Buffalo, New York before moving to Arkansas. Holly’s responsibility within Regions Professional Division is very broad. For ASDA members, Holly services the business owner’s policies that do not fit into the PPP as well as all member life, disability, and business overhead insurance policies plus all ASDA Workers Compensation Policies. Holly also is very versed in other profession malpractice and professional liability policies with
account/CPA professional liability being her specialty.

Although Holly has spent almost 30 years here in Arkansas, there are times you cannot miss hearing the New York accent when she speaks! Holly is one of the most detailed oriented people that I have ever met. When questions come in about a policy you can guarantee the answer you receive will be efficient and correct. That attention to detail has not only led her to have the highest customer service rating in the Professional Division but the highest in the entire company.

Holly has two daughters and a grandson who is her pride and joy! In Holly’s free time she is very active at St. Theresa’s Catholic Church in Little Rock where she works with the youth. Holly is committed to giving back and I would venture to say she has never said no when asked to help organize or work on a committee for any good purpose. An interesting fact about Holly is she is very crafty. Not only crafty but talented! It doesn’t matter what kind of decoration you can think of, Holly can make it! She is so good with Christmas decorations that this past winter I asked why she even worked in insurance!

In the upcoming months I will highlight the rest of your Professional Division team here at Regions Insurance. Thank you and as always feel free to reach out to me or any of my team members with any insurance question or concern you may have.

Chad Parker is vice president of production at Regions Insurance and can be reached by email at chad.parker@regions.com.

Over the last 70 years the ASDA board has gone through many cycles. The history has allowed us to develop a culture that is built to provide top level service, knowledge, and passion toward the Arkansas dental community.
HYPERTENSION AND ORAL HEALTH

Risks can be magnified while undergoing dental care

DR. LINDY BOLLEN, JR., DDS
Director, Office of Oral Health

Back in the days of dental school, we all learned how to use a sphygmomanometer and stethoscope to measure the blood pressure of all patients. This was an essential step in our process of checking our patients’ readiness for any dental procedures. This is considered the standard of care. Heaven forbid we would ever ask for a starting check from an instructor without first providing this essential information. To omit this step would surely land us in a hot seat for negligence from the especially stern professors. Yet after entering private practice, do you or your staff still perform this simple and revealing exam of your patient’s vital signs?

It is important to keep in mind that a significant number of your patients may have poorly controlled or undiagnosed hypertension. Patients sitting in your treatment chair with elevated blood pressure are at higher risk of experiencing a stroke or myocardial infarction. In this disease state there is additional stress placed on the ventricles, an increase in heart rate, and increase in oxygen demand that can all lead to cardiac compromise. Risk for such cardiovascular events is magnified by procedural stress, epinephrine exposure, and even the dreaded "white coat syndrome".

Hypertension, known as the silent killer, is on the rise in the United States. According to the 2011-2012 National Health and Nutrition Examination Survey (NHANES), 1 of 3 US adults has high blood pressure with nearly half (48%) that do not have their blood pressure under control! A closer look at this uncontrolled group revealed that one-third is not even taking their medications. It is not safe to assume all patients are in compliance with their medication protocols. Even if they list hypertensive medications on your health form, they may only take the medications when they “feel bad”. At every visit there should be a review of medication to detect any changes as well as inquiring to the frequency of use. As a dentist, you have the opportunity to continue educating your patients about the need to follow doctor’s orders to keep hypertension controlled.

So what values are we to consider when evaluating our patients? The Joint National Committee on Detection, Evaluation, and Treatment of High Blood Pressure defines hypertension as a systolic blood pressure greater than or equal to 140 mmHg or a diastolic blood pressure greater than or equal to 90 mmHg as recorded during two or more readings on two or more occasions. That may be true for national values, but here in Arkansas those types of readings could well be considered the “Southern norm.” If we held to that standard and did not treat patients unless their BP was lower than this mark, nearly two-thirds of the patients recently treated at the last ArMOM event in Monticello would have been denied treatment. I would like to suggest the best course of action is to visit with your medical colleagues. Compare notes with them and develop your own protocol for hypertension that best fit your patient population.

I would like to suggest the best course of action is to visit with your medical colleagues. Compare notes with them and develop your own protocol for hypertension that best fit your patient population.
Patients deemed to be Stage 1 hypertensive, treatment may still progress with precautionary measures. This is an ideal time to discuss the effects of hypertension and recommend a follow up with their physician to determine the best course of action to control the problem. The use of local anesthesia with a vasoconstrictor is permissible and advised. However, the dosage should be kept to a minimum and not extend beyond 0.04mg of epinephrine. A single cartridge of lidocaine with 1:100,000 concentration of epinephrine contains 0.018 mg of epinephrine. Even though the half-life of epinephrine is short, it is best not to extend beyond 0.04 mg (two cartridges) without continuous monitoring of cardiac status.

Patients that are detected in Stage 2 hypertension should not have dental treatment as a safety precaution. Instead this is the time for referral to a primary care physician. Delaying your treatment may also serve as a warning to the patient that this is a serious event and not to be taken lightly. Advising your patient that you will need medical clearance before proceeding with even the most routine services such as dental prophylaxis can serve as a subliminal ‘wake up’ message of urgency.

Dental care is one of the few medical services that a large proportion of the population utilizes for routine preventive services. This is a perfect opportunity to check your patients for signs of dental issues and to provide a simple screening check to determine the presence of hypertension. Patients that have controlled hypertension may require special attention due to side effects from medicine. Issues such as xerostomia are common with many of the hypertensive medications used today.

Many people with dry mouth may resort to lozenges/candy as a means to stimulate saliva but doing so increases the incidence for dental decay. Gingival hyperplasia may result if the patient is taking calcium channel blockers. Based on the patient’s medical history and oral examination, you may need to modify the frequency of preventive services three or four times a year in order to help these patients better maintain good oral hygiene.

There is an ongoing effort to develop a balanced health care delivery from all health professionals. As a dental profession, we are in a position to help guide our patients toward interceptive care should we discover a hypertensive patient. Early detection and treatment of high blood pressure results in better patient outcomes and may alert you, and the patient, to a very serious undiagnosed health issue. It is our professional responsibility to inform our patients of their hypertensive condition, to offer medical advice, and to provide referrals as indicated. AD
I do not know about other practices; however, in an oral and maxillofacial practice, the c/o “pain” is heard multiple times daily—either as a pre-operative emphatic statement or a post-operative complaint of inadequate pain management.

The Medicaid consultants are constantly bombarded with “emergency” request for immediate prior authorizations (PA) because the patient’s pain level is, (typically) “8 of 10.” It is just as important to elicit an accurate pain evaluation as it is to record a correct blood pressure; therefore, some patient teaching may be necessary by the staff or doctor to determine an actual pain level.

The following comparative pain scale is universally utilized to generally categorize pain into minor (levels 0-3), moderate (levels 4-6) and severe (levels 7-10).

MINOR pain is characterized by not interfering with most activities. The patient is able to adjust to pain psychologically and with medication or with devices such as cushions.

MODERATE pain interferes with many activities. It requires lifestyle changes but the patient remains independent. The patient is unable to adapt to the pain.

SEVERE pain results in the patient not being able to engage in normal activities. The patient is disabled and unable to function independently. Specifically:
0 No pain. Feeling perfectly normal

1 Very mild. Very light and barely noticeable pain, like a mosquito bite or a poison ivy itch. Most of the time you never think about the pain.

2 Discomforting. Minor pain, like lightly pinching the fold of skin between the thumb and first finger with the other hand using the fingernails. Note that this is a variable test.

3 Tolerable. Very noticeable pain, like an accidental cut, a blow to the nose causing a bloody nose, or a doctor giving you and injection. The pain is not so strong that you cannot get used to it. Eventually, most of the time you do not notice the pain. You have adjusted to it.

4 Distressing. This is a strong, deep pain, like an average toothache, the initial pain from a wasp sting, or minor trauma to part of the body, such as stubbing your toe really hard. So strong that you notice the pain all the time and cannot completely adapt. This pain level can be simulated by pinching the fold of skin between the thumb and first finger with the other hand, using the fingernail, and squeezing very hard. Note how the simulated pain is initially piercing but becomes dull after that.

5 Very distressing. Strong, deep, piercing pain, such as a sprained ankle when you stand on it wrong or mild back pain. Not only do you notice the pain all the time, you are now so preoccupied with managing it that your normal lifestyle is curtailed. Temporary personality disorders are frequent.

6 Intense. Strong, deep, piercing pain so strong it seems to partially dominate your senses, causing you to think somewhat unclearly. At this point you begin to have trouble holding a job or maintaining normal social relationships. Comparable to a bad non-migraine headache combined with several bee stings or a bad back pain.

7 Very intense. Same as 6 except the pain completely dominates your senses, causing you to think unclearly about half the time. At this point you are effectively disabled and frequently cannot live alone. Comparable to the average migraine headache.

8 Utterly horrible. Pain so intense you can no longer think clearly at all, and have often undergone severe personality change if the pain has been present for a long time. Suicide is frequently contemplated and sometimes tried. Comparable to natural childbirth or an extremely bad migraine headache.

9 Excruciating, unbearable. Pain so intense you cannot tolerate it and demand pain killers or surgery, no matter what the side effects or risk. If this doesn’t work, suicide is frequent since there is not more joy in life whatsoever. Comparable to bone or throat cancer.

10 Unimaginable, unspeakable. Pain so intense you will go unconscious shortly. Most people have never experienced this level of pain. Those who have suffered a severe accident, such as a crushed hand, and lost consciousness as a result of the pain and not blood loss, have experienced level 10.

(Sourced from Lucile Packard Children’s Hospital Heart Center CVICU)

Pain has been termed “the fifth vital sign.” When performing a history and physical exam, the other vital signs (blood pressure, pulse, respirations, temperature) must be recorded accurately, so too the fifth vital sign—pain. Perhaps, accurate recording of this parameter is more important because of its totally subjective nature. Alteration in the other vital signs is not generally recognized as indication of the presence of pain although increased heart rate, pulse, and dilation of the pupils may be seen in severe pain cases. For these reasons, it is important to utilize patient education and the above classifications to obtain an accurate fifth vital sign.

PARAGON is proud to be a part of these successful dental transitions in your area.

Isaac Anh-Tuan Le, D.D.S. has acquired an equity position in the practice of Stan M. Udouj, D.M.D.
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BY JOSH MATTHEWS

Dental practices generally don’t have a simple and sustainable way to offer good medical insurance benefits to their employees. Why? Because numbers are really important. Without strong employee participation, premiums typically aren’t affordable from the onset and even if they are, the durability of the group will likely fall victim to the same drawbacks that have always made medical insurance such a volatile benefit for small businesses.

But AXPM created a solution. AXPM Insurance Purchasing Group is a nonprofit organization that exists solely for the purpose of offering large group insurance benefits to members of the Arkansas dental community. This niche approach allows for a unique benefit offering and the ability to leverage lower insurance premiums by pooling all members into one large group.

Founded by dentists and a spin-off of Arkansas-based Rock Dental Brands, AXPM provides business services to the dental industry with a key emphasis on introducing the economies of scale through technology. And because of their intimate industry knowledge and expertise, AXPM has proven invaluable in developing a realistic way to make this group possible.

“Medical insurance is similar to a lot of other problems we’ve encountered through the years. It’s unfair that a dentist can work so hard to establish and maintain his or her practice, simply to be held back by the absence of something like access to a decent benefit program for their employees,” commented Dr. Mark Dake, Chief Dental Officer at Rock Dental Brands.

The group offers two medical plan options that are fully-insured through Health Advantage, an independent licensee of Blue Cross Blue Shield. In addition to medical insurance, also available are a long list of benefits like dental, vision, life, and disability.

The administration of a plan like this can be a challenging process in the traditional world of insurance that’s consumed by paper. Yet another reason that makes this group a possibility is that AXPM provides an advanced solution to managing the enrollment process through AXPM One, their own cloud-based practice management software that contains a full benefits enrollment platform. Best of all, the enrollment software is free to all members of the group.

AXPM One not only makes it easy for the practice administrator, but employees gain a better understanding of their benefits and subsequently have a better overall work experience.”

—Merritt Dake, CEO, AXPM

“The group is currently comprised of over 450 employees in 50 locations throughout the state and growing. Effectively managing a group like that is nearly impossible without good technology. AXPM One not only makes it easy for the practice administrator, but employees gain a better understanding of their benefits and subsequently have a better overall work experience,” said Merritt Dake, CEO at AXPM.

If you are a dental practice or dental service/support organization that’s domiciled in Arkansas and have two or more full-time employees, you are eligible for participation in the group. If you would like to join and/or learn more, email ipg@axpm.com or call Josh Matthews at 501-508-2976.

To learn more about AXPM and its other services, please visit www.axpm.com.

Medical Insurance Premiums

**Plan #1 - Health Advantage POS**
- Me Only: $320.66 / mo
- Me and My Spouse: $703.83 / mo
- Me and My Child(ren): $491.37 / mo
- Me and My Family: $994.42 / mo

**Plan #2 - Health Advantage HSA**
- Me Only: $239.85 / mo
- Me and My Spouse: $526.48 / mo
- Me and My Child(ren): $367.11 / mo
- Me and My Family: $743.86 / mo

Employer Contribution Requirements
Each Employer is required to contribute at least $179.89 per participating Employee per month. You can choose from five different contribution options ranging anywhere from $179.89 to $320.66 per participating Employee per month. Please reference the full AXPM Insurance Purchasing Group Benefit Overview for more details.

Optional Employer-Paid Benefits
- + Basic Life and AD&D
- + Doctor and Executive Long-Term Disability pays 60% of earnings up to a max of $10,000 / mo.

Benefits Paid 100% by Employees
- + Dental
- + Vision
- + Short-Term Disability
- + Long-Term Disability
- + Life and AD&D
- + Critical Illness

axpm.com/ipg  ipg@axpm.com  844-488-AXPM
There are many individuals to be proud of at the LSU School of Dentistry (LSUSD). Our faculty members, students and residents are so committed to education and clinical care. One example relates to our Department of Pediatric Dentistry. In the last three years alone, under the leadership of Janice Townsend, DDS, MS, department head, and Suzanne Fournier, DDS, advanced education program director, seven grants have been awarded to improve dental care for underserved children in the New Orleans area.

In 2014 the department received a $25,000 grant from Kool Smiles Foundation to provide dental care to 65 pediatric patients and enhance pediatric training and experience for 62 dental students. The grant matched pre-doctoral students interested in obtaining additional training and experience in pediatric dentistry with patients who have limited financial resources and are ineligible for government assistance. The project demonstrated that with adequate funding, LSUSD dental students and residents can improve the dental health of underserved children who would otherwise not have access to care.

In 2015 the department was awarded a $20,000 grant from Healthy Smiles Healthy Children (HSHC), the charitable arm of the American Academy of Pediatric Dentistry, to encourage the parents of children with unmet dental needs to establish a dental home at LSUSD. Children from the New Orleans area who are screened through the LSUSD mobile outreach effort are eligible for the program. Two students dedicated eight hours a week to develop relationships and educate parents about available dental services. They addressed barriers, such as transportation, that may prevent their children from receiving care. One in five households in New Orleans does not have an automobile and public transportation can often pose difficulties. Most of the children are in a lower socioeconomic group and are Medicaid eligible. In addition to providing much needed care to the children, the program is an excellent training opportunity for students prior to going into practice.

A grant of $1,500 from America’s Tooth Fairy: National Children’s Oral Health Foundation was also received in 2015 to provide oral hygiene kits and educational material to children who receive dental screenings through a partnership with Catholic Charities of New Orleans. Most are recent Hispanic impoverished immigrants who are not eligible for Medicaid or other government based insurance programs. Children are screened for dental caries, provided with educational material, referred to LSUSD if necessary, and given an oral hygiene kit. During the last fiscal year over 3,000 children received dental services through the program.

In 2016 another grant for $37,156 was awarded by Healthy Smiles, Healthy
Children to start an after-hours pediatric dental clinic at LSUSD. In late January, patients, students and faculty sported their comfortable and colorful PJs to mark its grand opening. HSHC President Dr. Neophytos Savide and Vice President for Development and Charitable Programming Paul Amundsen, MNA, CFRE attended the opening to see the clinic in action. It is anticipated that this new clinic will serve as a national model. Other special guests included Louisiana State Senator Wesley T. Bishop (District 4), Dr. Richard L. Owens, Sr., 2016 president of the New Orleans Dental Association, and Dr. Claudia Cavallino, president of the Louisiana State Board of Dentistry. The clinic anticipates 900 patient visits annually.

Two other grants for $10,000 each from Delta Dental Community Care and the American Dental Association (ADA) Foundation Access to Care program have enabled the department to provide free comprehensive dental care to at least 80 children from low-income families, including those in the growing immigrant population. Many recent immigrants are without current access to Medicaid or CHIP due to a mandatory five-year waiting period. Once their initial care is completed, children may remain patients of the Department of Pediatric Dentistry, paying the school’s reduced rate.

Also in 2016 and in cooperation with the Department of Pediatric Dentistry, fourth-year dental student Mallory Debnam requested and received $5,000 from the ADA Foundation Samuel D. Harris Fund to educate expectant and new mothers about infant oral health. The effort was in collaboration with the parenting programs of both Touro Hospital and the City of New Orleans. Early childhood caries is particularly widespread in disadvantaged communities. In New Orleans—the eighth highest child poverty rate among the 39 cities with populations between 275,000 and 600,000. The poverty rate for single-mother families in New Orleans—at 58 percent—is much higher than the national average of 41 percent (The Data Center).

Although LSUSD pediatric residents provide dental care for children primarily in the New Orleans area, the department treats children referred from 70 parishes and counties in Louisiana and adjacent states. Although most patients receive Medicaid, there is a recent and growing uninsured population.

According to the ADA report “2012 Survey of Dental Practice—Pediatric Dentists in Private Practice—Characteristics,” the contemporary pediatric dental practice demonstrates the specialty’s commitment to access to care. Close to 70 percent of pediatric dentists treat Medicaid, CHIP or both. Over half of pediatric dentists accept new Medicaid patients; almost 60 percent of pediatric dentists report using the operating room, thereby providing a source of care for very young and special needs patients. Not surprisingly, almost all pediatric dentists (99.5 percent) report that they care for patients with special needs. Studies indicate that relatively few general dentists provide regular care for children less than three years of age and 69.5 percent of dentists report that fewer than 20 percent of their patients are children.

It is our hope that in addition to the direct benefits of providing dental care to underserved children, both our dental students and residents will be committed to serving their communities after graduation. LSUSD strives to ensure a healthier tomorrow for all citizens—adults and children alike.

Dr. Eric Hovland, Past Dean, Retires

Eric J. Hovland, DDS, MEd, MBA, professor of endodontics, and dean of the LSUHSC School of Dentistry from 1993 to 2008, retired at the end of January. He had directed the Office of Advanced Education since 2008.

Dr. Hovland received a BS from the University of Maryland in 1968 and a DDS from the University of Maryland School of Dentistry in 1972. Following graduation he served in the Air Force Dental Corps for three years. He then completed the endodontic residency at the Medical College of Virginia in 1977; at the same time he received a masters in adult education from Virginia Commonwealth University.
Dean Gremillion presents a George Rodrigue Blue Dog poster to Dr. Hovland (left)

In 1977 he joined the faculty of the University of Maryland School of Dentistry where he served in various positions including director of undergraduate clinics and head of the Department of Endodontics. In 1980 he received a masters in business administration from Loyola College in Baltimore.

Throughout his career Dr. Hovland held many national leadership positions. He was president of the American Dental Education Association in 2005. He is past-president of the American Association of Endodontists and received the Edgar D. Coolidge Award, the AAE highest honorary award. He also served as a delegate to the ADA House of Delegates and as commissioner of the ADA Commission on Dental Accreditation from 1997 to 2001, chairing the commission from 2000 to 2001. He was also president of the Southern Conference of Deans and Dental Examiners.

Dr. Hovland has written numerous publications; he is co-author of two editions of the textbook Problem Solving in Endodontics and editor of two Dental Clinics of North America symposia. He has lectured extensively to national and international associations.

Dr. Hovland is a fellow of the International College of Dentists, the American College of Dentists, and the Pierre Fauchard Academy. In 2004 he received the Academy of General Dentistry Thaddeus V. Weclew Award for exceptional contributions to the art and science of dentistry. In 2006 he received the Outstanding Dental Leader award from the International College of Dentists and the Edward B. Shils Entrepreneurial Award as an Outstanding Transformational Leader. In 2007 he received the Award of Merit for Exceptional Leadership during Hurricane Recovery from the Louisiana Dental Association.

As dean of LSUSD during Hurricane Katrina, which closed the school buildings for two years, Dr. Hovland was responsible for the successful development of a temporary campus in Baton Rouge, allowing students to continue their dental education. In addition, in partnership with various agencies, he established a satellite dental hygiene program and clinic in Lafayette, a clinic in New Orleans for the treatment of patients with HIV/AIDS, and the Tooth Bus for the treatment of children throughout New Orleans. He also strengthened the continuing education program, created a master of science degree in oral biology (now master of dentistry), created a competency-based curriculum, and established the first patient simulation laboratories for preclinical instruction. Among his efforts to expand the research functions at the dental school were the creation of a research center and a clinical research facility. He created four positions for patient care coordinators who work closely with students to monitor patient care. Under Dr. Hovland’s leadership, the school significantly increased its fund-raising effort and strengthened relations with alumni.

Among those who gathered at Dr. Hovland’s retirement party on January 30 were LSUHSC Chancellor Larry Hollier, Dr. Joseph Moerschbaecher, vice chancellor for academic affairs, Dr. Sam McClugage, professor and head of the Department of Cell Biology and Anatomy, and Dr. John Kent, retired head of oral and maxillofacial surgery at LSUSD. Dr. Hovland was accompanied by his wife Carol and his daughter and son-in-law Whitney and Patrick Reed.

As a licensed, experienced tour guide, one of Dr. Hovland’s retirement activities will be leading historic tours in the French Quarter.

Dr. Hovland was presented with a Baccarat Crystal tiger

LSU Pre-Dental Workshop Attracts Nearly 250

Coordinated by Toby Cheramie, DDS, assistant dean of admissions, with support from Jane Walsh, RDH, JD director of the dental hygiene program, the 7th annual Pre-Dent 101 Workshop was held in January. The event, sponsored jointly by the LSU Pre-Dental Society and LSUSD, drew 177 pre-dental students and
71 pre-dental hygiene students. More than ten different workshops were presented on topics such as research and basic science, DAT preparation, the AADSAS application process, chalk carving, and dental waxing. Dental hygiene students learned about the application and interview process, clinical dental hygiene, digital radiology and the importance of being involved in the Student American Dental Hygiene Association. While the majority of students in attendance were from Louisiana, 11 out-of-state participants attended.

Seven students from Arkansas attended the event.

### Two Receive ABOMS Certification

In December Beomjune Kim, DMD, MD, FACS and Waleed Zaid, DDS, FRCDC(C), MSc were two of 17 oral and maxillofacial surgeons nationwide to have passed an examination and been awarded the American Board of Oral and Maxillofacial Surgery (ABOMS) Certificate of Added Qualifications in Head and Neck Oncologic and Reconstructive Surgery.

The process was a stringent one. Sitting for the examination required meeting multiple criteria, including completion of fellowship in the subspecialty, being lead surgeon on extensive and varied head/neck oncologic surgical cases, and collaboration with a multidisciplinary hospital tumor board. The certificate demonstrates one’s comprehensive knowledge of the skills central to the specialty of head and neck oncologic and reconstructive surgery, which encompasses cancer of the oral cavity, head and neck, and salivary glands. The inaugural exam was administered by renowned head and neck surgeons in the field, including Drs. Ghali Ghali and David Kim with LSU Health Shreveport.

**Dr. Beomjune Kim**

Received a Bachelor of Arts degree in Biochemistry and Chemistry from Cornell University in 1998 and DMD from the University of Pennsylvania School of Dental Medicine in 2004. He then attended the University of Maryland, receiving an MD in 2008 and completing the oral and maxillofacial surgery (OMFS) residency in 2011. During his residency training, Dr. Kim became passionate about treating head and neck cancer patients and subsequently completed a two-year fellowship in head and neck oncology/microvascular reconstructive surgery (HNMR) at the LSUHSC Department of OMFS Head and Neck Oncology/Microvascular Reconstructive Surgery fellowship program in New Orleans. Dr. Kim has privileges in multiple hospitals throughout Louisiana including University Medical Center, Touro Infirmary, Children’s Hospital, Our Lady of the Lake Regional Medical Center, Baton Rouge General, and Thibodaux Regional Medical Center.

Dr. Kim became a diplomate of the American Board of Oral and Maxillofacial Surgery in 2013 and was inducted into the American College of Surgeons in 2015. He has authored numerous articles/book chapters and lectures around the country in the field of OMFS and HNMRs. He also serves as a reviewer for multiple peer-reviewed journals. His expertise is in facial trauma, head and neck oncology and maxillofacial reconstruction. Currently he serves on the LSU OMFS Review Board and was appointed as fellowship director of LSUHSC Department of OMFS Head and Neck Oncology/Microvascular Reconstructive Surgery fellowship program.

**Dr. Waleed Zaid**

Graduated from Ajman University of Science and Technology, Faculty of Dentistry in the United Arab Emirates (UAE) in 2003. He practiced as an oral and maxillofacial surgery trainee in multiple hospitals in the UAE and served as an instructor in the oral and maxillofacial surgery department at Ajman University. In 2008 he moved to Montreal, Canada to begin his oral and maxillofacial surgery residency program at McGill University and completed the program in 2012. During the residency program he was introduced and became interested in head and neck oncology and microvascular surgery. He then completed a one-year clinical fellowship in head and neck oncology and microvascular reconstruction at the Boston Medical Center. In 2012 Dr. Zaid was awarded a master’s degree for his the-
sis “In Vitro Effects of Bisphosphonates on Oral Squamous-Cell Carcinoma BHY Cells and BHY-Induced Osteoclasts.” He became a fellow of the Royal College in Oral and Maxillofacial Surgery after completing his Canadian Boards and a diplomate of American Board of Oral and Maxillofacial Surgery in 2016. Dr. Zaid is currently an assistant professor in the LSUHSC OMFS Department in New Orleans. He has authored numerous articles/book chapters and serves as a reviewer for multiple peer-reviewed journals. He serves on the LSUHSC OMFS Review Board, and is co-director of the of LSUHSC Department of OMFS Head and Neck Oncology/Microvascular Reconstructive Surgery fellowship program in-New Orleans. Dr. Zaid has privileges in both Baton Rouge and New Orleans hospitals including Our Lady of the Lake Regional Medical Center, Baton Rouge General, Touro Hospital, and University Medical center.

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Shelly Gareiss was selected as winner of the Student Clinician Award for the most outstanding clinical presentation. In August, Shelly will represent UT at the student poster competition of the American Dental Association Annual Session in Washington, D.C.

**University of Tennessee College of Dentistry Student Research Day**
**DR. ED THOMAS**
*University of Tennessee*

The UTHSC College of Dentistry 2017 Student Research Day and Table Clinic Competition was held on February 16 at the Student Alumni Center. The meeting was opened by Dean Timothy L. Hottel, followed by Dr. Franklin García-Godoy, Professor and Senior Executive Associate Dean for Research, who introduced featured speaker Dr. Jason A. Griggs, Professor and Associate Dean for Research at the University of Mississippi Medical Center School of Dentistry. His presentation “Fractal Geometry and Failure Analysis of Dental Restorative Materials and Implants,” highlighted new microscopic and mathematical approaches to determine how best to employ advanced materials in dental practice.

Sixteen dental students, two residents, and 10 dental hygiene students presented results of their studies in 21 posters and table clinics. Three additional posters were presented by 2 dental students visiting from the University of Plovdiv, Bulgaria, who worked on projects with collaborators at the UTHSC College of Dentistry.

Shelly Gareiss was selected as winner of the Student Clinician Award for the most outstanding clinical presentation. In August, Shelly will represent UT at the student poster competition of the American Dental Association Annual Session in Washington, D.C. Her award was sponsored by the Dentsply Corporation and was presented by Drs. James C. Ragain Jr. and García-Godoy and Phillip Barnes, representing Dentsply. Shelly’s project was titled “Synthesis and Evaluation of Silver-loaded Antimicrobial Gelatin Sponges.” Shelly is a third-year dental student. She was assisted in her project by Brian Morrow and Drs. Liang Hong, Jegdish Babu, Linfeng Wu, Franklin García-Godoy, and
Participants in the 2017 UTHSC College of Dentistry Student Research Day with Research Day organizer Dr. Mustafa Dabbous (front).

Dean Timothy L. Hottel.

Also receiving awards for their outstanding presentations of 2016 summer research projects were Taylor Enochs, winner of the Harold Cloogman Award, Brooklin Byrd, Thomas Jones, Adiha Khan, and Julian Brandt Smith, winners of AADR Memphis Chapter Awards for Student Research, and Kaitlin Chambers, Gregory Digby, Michael Estivo, and Shelly Gareiss, winners of James C. Ragain Jr. Awards for Excellence in Student Research. Their projects were also presented in October of 2016 at the Hinman Student Research Symposium in Memphis. Brooklin Byrd, Brent Danley, Gregory Digby, Taylor Enochs, Shelly Gareiss, and Julian Brandt Smith will also present their projects in March of 2017 at the American Association for Dental Research meeting in San Francisco, California.

Drs. Jonathan Redditt and David Lifferth received the Stacy A. Garner Graduate Program Research Award sponsored by the Tennessee Dental Association Foundation for their presentation, “Using Three Dimensional Printers to Aid in Maxillofacial Reconstruction after Resection of an Ossifying Fibroma: A Case Report.” They were assisted by Drs. Jeffrey Brooks, Jim Christian, and Lawrence Weeda.

The Summer Student Research Training Program was supported by grants from the UTHSC College of Dentistry Alumni Endowment Fund and the Tennessee Dental Association Foundation. AD

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The Central District Dental Society held two meetings since the last journal publication. The first was on November 3, 2016, and as our country did very near this date, our society held elections. With approximately 45 members in attendance, elections were held to fill two positions. Dr. Bob Carlisle of Benton was elected to fill one of the Central District’s positions on the ASDA Executive Council and replace Dr. Scott Jolly of North Little Rock who rolls off the council in March 2017.

Also, Dr. Matt Carlisle of Little Rock was elected to the position of Vice President of the Central District Dental Society. Dr. Brad Cruse of Little Rock took over as President, Dr. Jordan Cooper of Jacksonville assumed the position of President-Elect and Dr. Spencer Gordy of Conway continues as Secretary/Treasurer.

The second meeting of the CDDS occurred on February 9, 2017. Approximately 35 members were in attendance and were presented with an insightful presentation on Dental Sleep Medicine by Dr. Kyle Dalton of Little Rock.

Dr. Danny Lieblong of Little Rock was presented with a plaque and recognized for his service as past President of CDDS for 2016.

Things have been rather busy around the periodontal office of Drs. Matt Carlisle and Fred Church. After practicing in Little Rock for 32 years in the field of Periodontology, Dr. Church has decided to semi-retire. Having recently recovered from hand surgery at the end of 2016 as well as open heart surgery a few years back, Fred decided that it was time to slow down. He is merging his practice with that of Dr. Carlisle's and will stay on, practicing two days a week, seeing oral pathology/stomatology patients. Dr. Carlisle is also proud to announce the association/joining of Dr. Marny Lemmons-Prince into their periodontal practice. Dr. Prince is no stranger to the field of Periodontics in central Arkansas. Marney graduated from the University of Tennessee Dental School in 1997 and completed her periodontal residency at LSU Dental School in 2000. Upon receiving her periodontal degree, she returned to Arkansas and joined the periodontal practice of Dr. Peter Jensen in North Little Rock where she practiced for 16 years before joining Drs. Carlisle and Church. Marney resides in Bryant with her husband of 24 years, Kevin and their two sons, Gray (17) and Parker (14), who are 11th and 8th graders respectively at Bryant High and Jr. High.

Wedding bells will soon be ringing for the family members of a few Central District dentists. Dr. Bill Harris of Little Rock and his wife Debbie are proud to announce the engagement of one of their daughters. Emily and her fiancéé, Anthony Rooney, are planning to exchange wedding vows in April 2017.

Also, Dr. Drake Hawkins of Little Rock and his wife Melissa are proud to announce the engagement of their daughter as well. Anne Elise and her fiancéé, Brad Parker, plan to wed in March of 2017. Reports on each wedding will be forthcoming in future journal articles.

The stork has also been busy for members and family within the Central District. Dr. Bob Carlisle of Benton and his wife Laura are proud to announce the birth of a grandchild. Walker Reid Beauchamp was born on February 14, 2017, and weighed 3lbs, 12ozs and 17 inches in length. He is the first child for Dr. Rebecca (Carlisle) Beauchamp and husband Reid of Fayetteville. Walker was born a few weeks early but infant and mom are both doing well now. Bob states that Rebecca is finding out that owning your own dental practice and motherhood can be quite the challenge. Walker is the 2nd grandchild for Bob and Laura. Their
other daughter, Dr. Rachael MacLeod, a Pediatrician from Bentonville gave birth to a daughter, Camryn, who is 7 months old.

Another Central district member and his wife are expecting the arrival of the stork soon. Dr. David Rainwater of Little Rock and his wife Rachael are expecting the arrival of a child in March of this year. This will be the couple’s third child and news of its arrival will be forthcoming in a future journal article.

Dr. Joe Pinney of Sherwood and his staff conducted a free dental clinic in honor of Children's Dental Health Month. Dr. Pinney, his associate Dr. William Knight, and all 12 members of their staff provided free dental care for about 40 inner city children from North Little Rock. The clinic was held in conjunction with Officer Tommy Norman and the North Little Rock Police Department. Donated services included cleanings, exams, and fillings. The event gained enough notoriety to be covered by the local TV media as well as the statewide newspaper.

Drs. John and Nayla Hatley of Little Rock are proud to announce an academic achievement involving their two children. Their identical twin daughters, Caroline and Maya, are among the eight students from Pulaski Academy in Little Rock to be named National Merit Award semifinalists. Both are seniors and currently going through the various processes in becoming finalists for the award as well as the application and interviewing process for college and associated scholarship offers with the several institutions that they are interested in attending. Caroline is interested in pursuing a degree in Governmental Studies and Maya in the Health Sciences. Both girls have also been busy playing team tennis for the Pulaski Academy tennis team and were a part of the Bruins winning a state championship in tennis in 2015. We certainly wish them the best of luck with the National Merit Award and will update the outcome in a later journal article.

Dr. Blake Weber of Little Rock is proud to announce the acceptance and current enrollment of his son in dental school. Blake's middle child, Hunter, started dental school at the University of Tennessee in Memphis in the fall of 2016. Hunter graduated from Central High in Little Rock in 2012 and attended the University of Alabama at Birmingham on a soccer scholarship where he graduated in May of 2016. While at UAB, he played goalie for the team that went to the NCAA Men's Division I Soccer Championship Tournament three of the four years he was there. And interestingly enough, Hunter is roommates with a former soccer teammate from UAB that is attending medical school at the University of Tennessee in Memphis as well. Blake's oldest son Paul has graduated college already, is married and living in Dallas, Texas, and his youngest child, Jessica is living in Santa Fe, New Mexico, with her mother and will be graduating high school this spring.

Dr. Martin Menees of Little Rock is certainly grateful for good physicians and routine check-ups. Martin, whose family has a history of heart disease, was at his cardiologist’s office for an annual echo stress test on Friday, December 16, 2016. He thought everything had gone well until he found it odd that the medical staff began to ask if he was having any chest pains. Although being asymptomatic prior to his appointment, Martin was soon to find out as did his doctor that he had two coronary arteries blocked at 100% and a third at 70%. He was not permitted to leave and was admitted into the hospital that day. The following morning, Saturday, December 17, Martin had triple bypass surgery. Martin was out of the office for four weeks and returned to a light work schedule of half days per week for two weeks before returning to a full time schedule in February.

Martin is doing fine now, but wanted to stress to all of his colleagues to go for testing and routine check-ups, for had he not, he might not be around today!

He also wanted to thank Drs. Julia Gildon, John Pitts, and Werner Schneider of Little Rock for taking emergency call to see his patients during his absence.

Northeast District News
BY DR. BRETT BURRIS

The Northeast district held its annual winter meeting January 27–28, 2016, at Arkansas State University. There were 60 dentists as well as 120 hygienists, dental assistants, and other auxiliary staff in attendance. The keynote lecture was delivered by Dr. Dan Fischer, founder of Ultradent. Dr. Fischer was an amazing speaker. He provided a great program about not only providing long lasting dental care but also cultivating the long-last-
ing relationships with the patients we treat. If you were unable to attend and have an opportunity to hear Dr. Fischer speak, I highly recommend it. On Saturday, our program was delivered by Dr. Ashley McMillian from the UAMS Center for Dental Education. Dr. McMillian's insight from the standpoint of a dentist practicing with a majority of medically compromised patients was amazing. Particularly her material on treating patients that have undergone or are scheduled to undergo head and neck radiation was very informative. Mark your calendars for late January 2018 as we will have another great lineup of speakers for the NEADDS winter meeting.

Dr. Dan Fischer (center) with Dr. Brett Burris and Dr. Lauren Harmon

East Arkansas Family Health Center in West Memphis has been very busy the last several months. In November, the Dental Department in Helena began see patients in a new 4 operatory clinic addition to the existing medical clinic. A formal ribbon cutting was held in December to celebrate the new EAFHC in Helena, AR. EAFHC was also fortunate enough to receive a grant in December from the Delta Dental of Arkansas Foundation for over $25,000 to equip a 4th operatory in the Trumann Clinic. With both of these new additions, EAFHC will be able to continue to offer quality dental care to a segment of the population that is traditionally underserved.

East Arkansas Family Health Clinic in Helena

On February 16 and 17 at Breakaway Practice in San Antonio, Drs. Hunter Smith and Will Little of Jonesboro hosted the first Dental Ownership Summit. 2014 and 2013 dental school grads of UTHSC, respectively, Drs. Smith and Little co-own Southern Dental Group with six general dental practices currently located in Jonesboro (3), Wynne, Bald Knob, and Munford, Tennessee. In order to share secrets to success associated with dental ownership and the processes involved with buying a practice, Southern Dental Group flew in dentists from all across the United States to hear from speakers such as DentalTown's Howard Farran, Breakaway Practice's Scott Leune, the host of the Dentalprenuer podcast and multi-practice owner Mark Costes, as well as Drs. Little and Smith to hear the strategies and pathways that have led these owners to success in practice. Topics covered included practice acquisition and transitions, marketing techniques, office systemization, and key metrics to track. The event had strong support and a host of positive review. Drs. Smith and Little look forward to continuing offering support to young doctors and aspiring owners looking to get into practice ownership, and providing the tools to do so, with future events.

Also on February 16–18 Dr. Brett Burris attended the winter symposium of the International Congress or Oral Implantologists. This three-day meeting featured world renowned lecturers in the field of implant dentistry. It also served as a tribute to the late Dr. Carl Misch, co-founder of the ICOI and pioneer in implant dentistry. At this event Dr. Burris received his diplomate credentials from the ICOI. This is the highest honor the ICOI bestows to a dental professional involved in oral implantology.

Last, but not least, ARMoM is in our neighborhood this year. I highly encourage everyone to attend this amazing event that does so much good for those not so fortunate in our state. Please come to Jonesboro and let us share our little corner of the state with you.

Northwest District News
BY DR. DUNCAN JOHNSON

The Academy of Interdisciplinary Dentofacial Therapy Study Club members invites all colleagues and guests to attend the 5th Annual European Lecture Series. This will be
held Monday, April 3, 2017, at 8 a.m. at the University of Arkansas Walton College of Business in Fayetteville. This year we are excited to host Rolan Frankenberger DMD, PhD. Dr. Frankenberger is a professor of Operative Dentistry at the University of Marburg and at the University Hospital of Giessen and Marburg. He will be speaking on direct and indirect bonded restorations. It will be an educational opportunity to learn and develop knowledge regarding restorations.

Dr. Nate and Dr. Katherine Behrents of Fayetteville. Behrents endodontics recently had an office remodel as well as an exciting announcement of an addition to the family.

Dr. Gavin Trogdon of Farmington Dental Center and Orthodontics in Farmington and Dr. Brittany Stroope Trogdon (Trogdon) of Stroope Orthodontics in Springdale are happy to announce the arrival of their baby Grayson Alan Trogdon born on December 9, 2016, at 2:28 a.m. He was 5 lbs 6 oz, 17 1/2 inches long.

Dr. Terry G. Box of Fayetteville received Diplomat Status in the International Dental Implant Association in Washington, D.C. in February. Three levels of achievement are recognized in the IDIA—Fellowship, Masters, and Diplomat. Each level requires attendance at four weekends of didactic and hands on training in the U.S. and the opportunity to work in Dr. Arun Gary’s Clinic in the Dominican Republic. The work done in the DR is scheduled according to one’s level of training. Dr. Box’s last trip there was primarily focused on ridge augmentations, ridge splits, and sinus lifts to prepare the patients for future placement of dental implants.

Don Milburn, D.D.S., after practicing for 38 years in Harrison has sold his practice to Kevin Christensen, D.D.S. Both Don and Kevin are graduates of UMKC School of Dentistry. The crappie, bass, walleye, deer, turkey, elk, ducks, and four sweet grandkids will keep Don busy in his retirement!

Southeast District News
BY DR. JIM MOORE

Greetings from the Southeast District! Dr. Susan Wamble of Pine Bluff & her husband Sam are excited to announce the birth of their first grandchild. Scott Wamble Robnett was born November 9, 2016, weighing 7 lbs.
15oz and 20 1/2 inches long. Proud parents are Caitlyn and Tim Robnett. Sam & Susan are thankful to have them living close by in Little Rock. Tim and Caitlyn moved back to Arkansas in September after living in China for 1 1/2 years.

Helena Family Dental had a ribbon cutting ceremony hosted by the Helena Chamber of Commerce to celebrate the grand opening of their new state of the art facility at 400 Plaza. Drs. Stewart, Grubbs, & Glassell and staff are enjoying the amenities as well as the extra space this new location affords.

Dr. Terri Eubanks has entered the ranks of the semi-retired. She is enjoying living in Springfield, Missouri, and stays busy at the Ozarks Community Health Center in their mobile dental unit, which services 11 school districts throughout Southwest Missouri.

Dr. Marvin D. Loyd is fully retired as of December 31, 2016, after 60 years of practice. He served in the Navy two years, the Army one year (National Guard call-up), private practice in Lake Village 49 years, and finally nine years with the Arkansas Department of Correction (as a dentist, not an inmate!), where he would sometimes see an old patient. He would highly recommend the prison job as a good semi-retirement position. Also, Lake Village has no dentist at this time.

**Southwest District News**

**BY DR. WENDELL GARRETT**

Please keep Wendell in your thoughts and prayers. AD

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Update on Implementation of 2011 Legislation of Fluoride Varnish

BY MADISON BYFORD, KELSEY HARRELL, SARAH ANDERSON, KRISTI FLESHER
FACULTY MENTOR: MITZI EFURD, ED.D, RHD
University of Arkansas for Medical Sciences
Department of Dental Hygiene

Dental caries is the number one chronic disease among children in the United States (Clark & Slayton, 2014). Pew scores assess “states’ ability to serve insured and soon-to-be-insured children” (The State of Children’s Dental Health: Making Coverage Matter, 2011). In 2010 Arkansas received an “F” for the Pew Children’s Dental Campaign. Determined to raise that score, Arkansas passed three legislations in 2011. It has been clinically proven that fluoride varnish reduces the risk of caries by strengthening the enamel. The 2011 legislation Act 90, expanded topical fluoride providers beyond the dental office to include physicians and nurse practitioners. These providers are certified through a one-hour CE course: Caries Risk Assessment, Fluoride Varnish and Counseling. With the passing of Act 90, more children are potentially able to receive fluoride varnish.

As work together to reduce the rate of childhood caries. Arkansas is not the only state that allows physicians and nurses to apply fluoride varnish to children. Maryland, North Dakota, and Massachusetts have allowed physicians and nurses to apply fluoride varnish for years. These efforts effectively met four of the eight Pew benchmarks and raised our Pew score to a “C”. Arkansas was unable to meet the following four benchmarks in 2011:

- **Benchmark #1**: Sealant programs in at least 25 percent of high-risk schools. Sealants can prevent 60% of tooth decay at 1/3 the cost of filling a cavity.
- **Benchmark #3**: Providing optimally fluoridated water to at least 75% of residents who are served by public systems. Only 60.5% of Arkansans receive fluoridated water through their tap. Arkansas was one of only three states who failed to meet this benchmark.
- **Benchmark #6**: Reimbursing medical care providers through state Medicaid programs for preventive dental health services.
- **Benchmark #7**: Authorizing a new type of primary care dental provider similar to a nurse practitioner (none of the reviewed states were able to meet this benchmark).

Hopefully, Arkansas will continue to work toward these four unmet benchmarks to improve the oral health of its residents.

As the number one chronic disease among children in the United States, dental caries or tooth decay is responsible for many of the 51 million hours of school lost per year specifically due to dental related illnesses, which also causes parents and caregivers to miss work (Clark & Slayton 2014). Dental caries doesn’t just affect the oral cavity; it can cause problems with individual’s overall health. As stated by Clark and Slayton (2014), dental caries can progress to cause local infections, systemic infections and sometimes death. Allowing other medical providers to provide preventative dental services is especially beneficial for infants and toddlers (Pew, n.d.). Many children do not receive dental care at young ages, but do see a physician. According to Clark and Slayton (2014), “The Medical Expenditure Panel Survey demonstrated that 89% of infants and one-year-olds have office-based physician visits annually, compared with only 1.5% who have dental visits.”

Now, pediatricians have the opportunity to participate in the prevention of dental caries in children by placing fluoride varnish on patients in the doctor’s office, rather than it just being done at the dentist (Clark & Slayton, 2014). This benefits the United States as a whole by decreasing the amount of dental caries among many developed states.

“Fluoride has three main mechanisms of action: (1) promotes enamel remineralization; (2) reduces enamel demineralization; (3) inhibits bacterial metabolism and acid production (Clark & Slayton 2014).” Healthcare professionals must be aware of the risk of fluorosis in order to...
instruct patients not to ingest sufficient amounts of fluoride for a sufficient amount of time while teeth and bone are developing. However, with fluoride varnish this is not a concern. Fluorosis is due to systemic uptake: consuming fluoridated water, toothpaste, fluoride drops or even the mother consuming sufficient amounts of fluoride when pregnant.

Since 2011, the Arkansas Department of Public Health has been focused on increasing awareness about the opportunity to increase fluoride varnish availability to children. Progress is still slow. In fact, most physicians and nurse practitioners are still unaware of this opportunity, and are not implementing Act 90. However, one positive step that has been made was in 2014 when Medicaid reimbursement for fluoride varnish was accepted. In order to kick-start the movement of fluoride varnish among medical professionals, the Arkansas Department of Oral Health has now developed a program called Paint a Smile. With Act 90, the increased application of fluoride varnish by healthcare professionals can help decrease the incidence of dental caries in our state.

In Arkansas, the Paint a Smile initiative is a campaign to help raise awareness of Act 90. This campaign is modeled after a program in North Carolina called “Into the Mouth of Babes” (IMB). Similarly to North Carolina’s program, Paint a Smile’s target population is high-risk children insured by Medicaid (Arkansas). The goal of the program is to prevent and reduce early childhood caries and refer children to a dental home. To help promote the Paint a Smile campaign, the state of Arkansas has hired two dental hygienists to travel around the state to educate medical professionals about Act 90. The hygienists, currently located in western and central Arkansas, are seeking pediatric clinics. When visiting the clinics, they supply a box filled with fluoride varnish, posters, surveys and information on how to apply fluoride varnish and the benefits of fluoride varnish. The Paint a Smile campaign is still in its infancy. It is a great start to helping reduce the amount of early childhood caries in Arkansas. However, it could take many years to see results of the campaign.

The Arkansas Department of Health, Oral Health Office is conducting a questionnaire about the Paint a Smile Initiative (see Appendix A). The questionnaire is being administered to the medical professionals working at the pediatric offices. The purpose of this questionnaire is to see if medical professionals know about Act 90 and if they are interested and willing to apply fluoride varnish to their patients. The results to these questions will be published at a later date when more data is gathered.

Arkansans are continually making efforts to increase the overall health and wellbeing of our great state. Act 90 is another measure towards preventing childhood caries and improving the oral health of children. Although the Paint a Smile initiative is still in its early stages, this campaign will hopefully raise awareness to medical and dental professional’s alike, fostering interprofessional support and collaboration. However, for now, all information that can be given are the facts about childhood caries, benefits of fluoride, and the efforts Arkansas is making to better the oral health of children.

Appendix A
QUESTIONNAIRE GIVEN TO MEDICAL PROFESSIONALS AT PEDIATRIC OFFICES

1. Before attending the training, how familiar were you with the Fluoride Varnish Initiative, “Paint A Smile”?
   ○ Not at all familiar
   ○ Slightly familiar
   ○ Somewhat familiar
   ○ Moderately familiar
   ○ Extremely familiar

1b. If familiar, how did you first hear about the Fluoride Varnish Initiative?
   ○ Arkansas Department of Health, Oral Health Office
   ○ Continuing Education Course
   ○ Brochure
   ○ Newspaper, Internet, Friend/Relative/Associate
   ○ Other

2. Do you currently educate your patients on caries and cavities?
   ○ Yes
   ○ No

3. Do you ask your patients if they have a dental home?
   ○ Yes
   ○ No

4. How likely are you to implement the Fluoride Varnish Initiative in your clinic?
   ○ Very unlikely
   ○ Somewhat unlikely
   ○ Not sure
   ○ Somewhat likely
   ○ Very likely
5. How likely are you to delegate another health care professional to take the required training and implement the Fluoride Varnish Initiative in your clinic?

- Very unlikely
- Somewhat unlikely
- Not sure
- Somewhat likely
- Very likely

6. Would you recommend the Fluoride Varnish Initiative to other primary health care providers?

- Yes
- No
- Maybe

7. On a scale from 1 to 5, with 1 being extremely beneficial and 5 being extremely beneficial, please rate how important the Fluoride Varnish training has been in increasing your knowledge and helping you develop the skills to apply fluoride varnish?

- Extremely unbeneficial
- Somewhat unbeneficial
- Beneficial
- Somewhat beneficial
- Extremely beneficial

8. After completing the training, how prepared are you for applying fluoride varnish and billing Medicaid for fluoride varnish applications?

- Not at all prepared
- A little bit prepared
- Somewhat prepared
- Quite a bit prepared
- Very much prepared

9. What recommendations do you have for increasing early adoption of the Fluoride Varnish Initiative?

Resources:
Interview with Dr. Lindy Bollen and Ms. Carol Amerine on Wednesday March 10, 2015. Arkansas Department of Health, Office of Oral Health

Arkansas Dental Hygienists’ Association
AUDREY AMES, RDH, BS
President ArDHA

Greetings from the Arkansas Dental Hygienists’ Association!
It seems like I was just writing the last journal article yesterday! The time has just been flying by. The Arkansas Dental Hygienists’ Association has been staying busy as always!

We kicked off the beginning of January 2017 with a Board of Trustees and budget meeting. We revisited our Strategic Plan and goals for our association. As a board I am very pleased to say we have accomplished so many of our goals already and continue to work towards pressing forward and finishing up the rest. We have begun planning for our Annual Fall Session in September, which will be here before we know it! We are working on some new ideas to communicate better with our members to keep them updated on what is going on within our association and utilize social media to the fullest potential.

As I mentioned before our website has been updated and is still in the process of expanding to keep our members educated on all that our association is doing.

Our Executive Council voted to contribute $2,500.00 to the Arkansas Mission of Mercy. This outreach does so much good for the citizens in need of dental care in Arkansas and it is an honor to contribute to this project. It is a great opportunity to volunteer and work alongside other dental professionals to give to those in need.

The American Dental Hygienists’ Association’s upcoming Annual Conference (it is now being called “conference” instead of session!). The meeting is June 14–19 in Jacksonville, Florida. I myself will be attending along with our two delegates, Claire Akins and Shannon Hannon. I would defiantly encourage anyone wanting to strengthen and grow your dental hygiene career to attend. You will come back to your practice refreshed and educated on the newest products and research pertaining to dental hygiene.

The ADHA Annual Session is a career changing experience and is also a great networking opportunity with fellow colleagues.

In January, ArDHA also hosted our 2nd Annual Student Board Review for the Dental Hygiene Students from UAMS and UAFS. Our association is very grateful to Parkway Dental, Vondron Orthodontics, Hu-Friedy, American Eagle Instruments, Dental Decks and Phillips Sonicare for their support and generous donations of prizes for the students. Stephanie McElroy, the ArDHA Secretary, did an amazing job organizing this event and we are very appreciative to her church, Shiloh Missionary Baptist Church in Russellville, for allowing us to use their facility.

Congratulations to the winning team of...
senior students, Ashton Eakin, Bridget Fitzbugh, Paula Murchinson and Tiffany Myers. ArDHA wishes all the Dental Hygiene Seniors good luck on their National Boards!

February is National Children’s Dental Health month. The ArDHA hosted another Smile Drive to collect oral health care products for the Foster children in Arkansas. Donna Bailey did a great job organizing this event again for us. With the help of several UAMS Dental Hygiene students, and the Tooth Fairy, we collected over 1,000 oral health care items from the generous Wal-Mart shoppers at the Chenal/Cantrell Wal-Mart. It was a very rewarding day and I am so excited to see that we are able to continue our project Foster-A-Smile and help insure every foster child is never without a toothbrush! We will be donating these items to foster children involved in the Special Olympics program and other local foster organizations.

The ArDHA has a very busy spring planned ahead of us, I would like to encourage everyone to take part in the upcoming opportunities to get involved. We will be participating in Special Smiles with the Special Olympics Program in April and also again at the games in May. Another great opportunity to volunteer is at the Annual ARMOM event.

We had a great time at the Arkansas State Dental Meeting in March. This year our association had one exciting new change for the meeting. We did not have a separate sponsored speaker; rather we are continuing our education all together in one general assembly! I look forward to seeing everyone very soon.

Remember to stay active and involved in your Association!

**UA Pulaski Technical College**
**DENTAL ASSISTING**

**DEANNA DAVIS, CDA, RDA, MED**
Dental Assisting Program Director

The legislature met and the merger was approved and sent to the governor’s desk. Governor Hutchinson signed the merger between the University of Arkansas and Pulaski Technical College on February 1, 2017. We are now named UA–PTC, UA–Pulaski Technical College and or University of Arkansas–Pulaski Technical College.

What does this change mean for the Dental Assisting Program? From our understanding this merger will not affect the program. We will continue to strive to train well educated dental assistants to meet the needs of the dental community.

The 21 students are currently in clinics four days a week and then they return to the campus on Fridays to finish their education. During their clinical training our students are allowed to take radiographs, coronal polish and place sealants, and induce and monitor nitrous oxide—all the functions of a dental assistant. We appreciate all of the dental offices that are willing to work with our students at chairside for the 12 weeks of clinicals.

Thank you to Dr. James Penney, Dr. Gerald Friend, Dr. Matt Carlisle, and Dr. Alex Kita for taking time out of your busy schedules and coming to share with our students about your fields of specialty. It is advantageous for the students to hear about a specialty from the person that does it every day.

Graduation will be on Saturday, May 13, at Verizon Arena at 10 a.m. Weeda, Jackie, Ploy and I would like to congratulate our 21 graduates for the 2016 – 2017 school year.

Alexandra Buckner Sherwood
Leslie Croslow North Little Rock
Kavaughnja Eason Hope
Karoline Elliott Mayflower
Renee Flynn Conway
Jessica Fultz Hot Springs
Allegra Green Little Rock
Bridgette Gross Bartlett, TN
Emily Harris Sherwood
Megan Hodge Little Rock
Nikita Modi Little Rock
LeeAnn Murphy East End
Courtney Porter Austin
Jena Reynolds Little Rock
Peyton Thacker Little Rock
Taylor Thomas Greenbrier
Lauryn Wells Benton
Cheyenne Whitt Sheridan
Catherine Williams Little Rock
Kenzie Williams Redfield
LaKeia Williams Sheridan
PHOTOGRAPHY BY JON D. KENNEDY

While there are opportunities provided for some of our local citizens in need, there are those who slip through the cracks. Harmony Health Clinic seeks to provide care for those in need who do not have private medical insurance but also are not eligible for Medicare, Medicaid, VA benefits or ARKids First.

Harmony Health Clinic, a 501 (c) 3 non-profit, provides access to quality medical, dental, and eye care at no cost in a private, community-based clinic in Little Rock to Pulaski County residents.

The clinic is reaching out for volunteers from the dental field to serve deserving yet underserved individuals. Medical and non-medical volunteers are needed with all aspects of the clinic.

Services offered at Harmony are:

**Medical**
- Primary Care
- Physical Therapy
- Limited specialty Referrals

**Dental**
- Extractions
- Cleanings and fillings
- Steel Crowns
- Dentures/Partials

**Eye**
- Diabetic Eye Exams
- Glaucoma Screening
- Glasses Exams

**Pharmacy**
- Dispense Medication

If you are unable to volunteer, donations can be made online or over the phone and are tax deductible. Please call the office at 501-375-4400 to donate or volunteer. Visit us on the web at www.harmonyclinicar.org.

Also, don’t miss our major fundraiser “Bollywood Nights” at the Statehouse Convention Center, Saturday, May 13, 2017. Event activities include hors d’oeuvres, cocktails, silent auction, a Bollywood show, dinner and dancing.

Tickets are $75 per person and $100 per couple. For more details on this event visit harmonyclinicar.org.

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The May 13 event “Bollywood Nights” benefitting Harmony Health Clinic includes hors d’oeuvres, cocktails, a silent auction, a Bollywood show, dinner and dancing.
Dr. William Darrel Fain  
**AUGUST 23, 1949–FEB. 16, 2017**

Dr. William Darrel Fain, 67 of Texarkana, Arkansas, passed away Thursday, February 16, 2017, in a Little Rock hospital. Dr. Fain was born August 23, 1949, in Stamps, Arkansas.

Dr. Fain was a member of Downtown First Baptist Church and a member of the American Dental Association. He graduated from the University Of Missouri–Kansas City School of Dentistry.

Dr. Fain is survived by his wife Susan Fain of Texarkana; three sons and a daughter-in-law—Darren and Kathy Fain of Jacksonville, Florida, Eddie Fain of Charlotte, North Carolina, and David Fain of Texarkana, Arkansas; four grandchildren—Ely and Trinity Fain both of Charlotte, North Carolina, and Dakota and Leo Fain both of Jacksonville, Florida; plus other family and friends.

A funeral service was held on February 19 at East Funeral Home, Moores Lane, with Rev. John Force officiating. Family received friends at the funeral prior to the service. Memorials may be made to the American Cancer Society.

Dr. N. Dwight Heathman Jr.  
**APRIL 8, 1938–MARCH 3, 2017**

Dr. N. Dwight Heathman Jr., 78, of Springdale passed away Friday, March 3, 2017, at Circle of Life Hospice in Springdale. He was born April 8, 1938 in Springfield, Missouri, to Norman Dwight “Doc” Heathman Sr. and Hazel Calhoun Heathman.

Dr. Heathman graduated from Huntsville High School in 1956. He served in the United States Navy as a Chief Petty Officer for four years. He attended Arkansas State University in the pre-dental program. He graduated from the University of Tennessee, College of Dentistry, in Memphis in 1965 where he was a member of Xi Psi Phi Dental Fraternity. Dr. Heathman moved to the area in July of 1966 going to work as a dentist for Dr. Oscar Kimbrough. He later opened his own practice in 1968. He retired in December 2000.

Church was important to Dr. Heathman; he was a member of First United Methodist Church in Springdale where he served on numerous church committees including the building committee; he also served as Chairman of the Board. He served his community faithfully in many ways including membership in the Springdale Rotary Club, where he was a Paul Harris Fellow and Past President. He was elected to the Springdale City Council where he served for six years, and served on the Shiloh Museum Board where he was a lifetime member, and a member of the original building committee. He was the Past President of the Northwest District Dental Society.

Dr. Heathman was preceded in death by his parents, two sisters, Bernice Jones and Carol Albert. Survivors include his wife of 54 years, Helen Heathman, of the home; one son, Dr. Montgomery Dwight Heathman and wife Kelli of Roland, Arkansas; one daughter, Holly Elaine Reeves and husband Doug of Fayetteville; three grandchildren, Zachary Dwight Heathman, Bayleigh Reeves, and Malorie Reeves.

Dr. Heathman served his community faithfully in many ways including membership in the Springdale Rotary Club, where he was a Paul Harris Fellow and Past President. He was the Past President of the Northwest District Dental Society.
Funeral services were held on March 7, 2017, at First United Methodist Church in Springdale with Pastor Andrew Thompson officiating. Burial followed in Bluff Cemetery. Visitation was held the evening before at First United Methodist Church.

Memorials may be made to the Shiloh Museum, 118 W. Johnson Ave., Springdale, Arkansas 72764, or First United Methodist Church Foundation, 206 W. Johnson Ave., Springdale, Arkansas 72764.

Dr. Jim Moore, Sr.
MARCH 5, 1923–NOV. 30, 2016

Dr. Jim Moore, Sr., 93, of Pine Bluff died at home November 30, 2016. Born in Pine Bluff on March 5, 1923, to the late William James and Myrtis Sage Moore, he grew up in Pine Bluff, attended Pine Bluff High School, and graduated from Gulf Coast Military Academy in 1941. Dr. Moore earned his BS degree in Mathematics from Hendrix College, a Master’s degree in meteorology from the California Institute of Technology, and his DDS degree from the University of Tennessee College of Dentistry.


Survivors include two sons, Jim Moore, Jr. (Connie) of Pine Bluff, David Moore of Magnet Cove, Arkansas; step-children, John Bryant (Leonette) of Lonsdale, Arkansas, Mary Bryant Cavin (Dabbs) of Little Rock, Arkansas, Doug Owens (Bonnie) of Slidell, Louisiana, Becky Owens Tolson of North Little Rock, Arkansas, Karen Owens Holloway (David) of Nashville, Tennessee; sixteen grandchildren and several great-grandchildren. He was preceded in death by his parents; three wives, Virginia Wright Moore, Blanche Bryant Moore, and Ella Owens Moore; sister, Margaret Moore; and step-sons, Bob Bryant and Bubba Bryant.

The family especially thanks Lapita Prieto, Joann Jenkins, Alberta Reed, and Hospice Angels for their care and concern. Private graveside services were conducted by Ralph Robinson & Son. Memorials are requested to Neighbor to Neighbor, 1419 Pine Street, Pine Bluff, Arkansas 71601.

Dr. Theodore Skokos
JULY 11, 1920–JANUARY 5, 2017

Dr. Theodore Skokos passed away Thursday, January 05, 2017, in Fort Smith. He was born in Perth Amboy, New Jersey, to Angela Menedes and Sarantos (Sering) Skokos on July 11, 1920.

Dr. Skokos would say 7/11 was a lucky day. At age 11, his family moved to the famous seaside resort of Asbury Park, New Jersey, where his father opened a bustling hamburger joint across the street from the boardwalk. He attended Washington and Jefferson College on a basketball scholarship and graduated from the University of Pennsylvania Dental School in Philadelphia, where Betty was a Navy officer decoding messages. After meeting at a soda fountain, they went for one dance at a Nickelodeon, and she knew he was the one for her. Their marriage in 1945 was blessed by the Archbishop Athenagoras, who had come to Asbury Park to conduct Ted’s father’s funeral. Athenagoras would later become the Archbishop of Instanbul, supreme in the Greek Orthodox Church.

After being stationed in postwar Germany as a captain in the Army, Ted and Betty moved to Fort Smith, across the river from her hometown of Van Buren, where they raised five children.

Ted became very active in the community, serving as school board president and most proudly, founding and leading the Church League baseball program, now with eight ballfields (the second of which was named in his honor), and participation of over a thousand children a year.
He practiced dentistry for fifty years. Ted became very active in the community, serving as school board president and most proudly, founding and leading the Church League baseball program, now with eight ballfields (the second of which was named in his honor), and participation of over a thousand children a year. He received Fort Smith’s most prestigious honor, the annual Golden Deeds award of the local Exchange Club. Like the town’s ambassador, Ted served as marshal on the 18th green, during the ten years of the local Nationwide PGA tour event. He delighted children for years playing Santa Claus at the Boys’ Club, and he entertained crowds as referee of Harlem Magicians basketball games. This led to his appearing on a nationwide telecast of ABC’s Wide World of Sports. Remarkably, he nailed a 30-foot shot live, after having been unable to sink a single one in pre-game taping. The camera crew followed him backing down the court, a novel reaction shot for that time, as he grinned ear-to-ear in disbelief. Over the years he would book numerous marquee names of the big band era for the Fort Smith Cotillion dance club, among them Glenn Miller, Stan Kenton, and Count Basie.

Ted was preceded in death by his wife, Jennie Elizabeth (Betty) Campbell Skokos last March, his brother, George of Asbury Park, his sister, Connie of Huntsville, Alabama, and his brother, Pete of Freehold, New Jersey. He is survived by five children, Ted C. Skokos and his wife Shannon of Dallas, Leslie Cange and her husband Bill of Greers Ferry, Dr. Kemp Skokos and his wife Tawnya of Little Rock, Doug Skokos of Fort Smith, and Stacia (Shuggie) Peebles and her husband Brent of Decatur, Alabama; ten grandchildren; and ten great-grandchildren.

**Josh Green**

**FOUNDER OF GREEN DENTAL LABORATORIES**

(Editor’s Note: Though Josh Green was not a dentist he touched so many individual dentists and was a large part of organized dentistry in Arkansas. Over the years he was an integral part of continuing education for dentists across the country. He provided courses at a level not previously seen in Arkansas. I counted Josh as a good friend. When he started his lab in Heber Springs in 1980 I was the third dentist to begin using his lab. I continued to use his lab until my retirement in 2016. Josh had an exceptional entrepreneurial heart and used that heart to help so many.)

Josh Green, the founder of Green Dental Laboratories in Heber Springs, Arkansas, passed away February 15, 2017. Josh acquired his dental technology skills in the military and after serving his country chose the small town of Heber Springs as his home.

In October of 1980, Josh started a small three-technician dental laboratory working with a handful of local dentists. His unique vision for providing exceptional service and his commitment to his customers’ success quickly accelerated the growth of Green Dental Lab. In eight short years the company had grown to 100 employees and was moving into its third location. The laboratory continued to grow and expand doubling in size until 2005 when Josh sold the laboratory to National Dentex. Working for National Dentex, Josh quickly was promoted to Chief Operating Officer and was responsible for the growth and success of over 30 labs in the NDX network across the country. Josh officially retired in 2012, but left a solid foundation with his start-up laboratory. Green Dental Lab is one of the largest, well respected dental laboratories in the country and continues to service over 1200 dentists and employs more than 220 team members.

During Josh’s career he lectured extensively throughout the country sharing his knowledge on all types of restorations and especially educating dentists on the successful use of dental implants. His focus was always on how to help them be more successful and deliver smiles that exceeded their patient’s expectations. But Josh didn’t stop there. He felt a need to share his successful ideas with other dental lab owners and opened his doors to many. Josh even developed a lab management program that included lectures, manuals, and personal coaching visits.

Outside the dental industry Josh enjoyed many hobbies. He loved to explore life and often excelled in anything that caught his interest. As many can attest, he was a wonderful cook and wine connoisseur. He mastered scuba diving and captained his own sail boat. He earned his pilot’s license and was known to occasionally use his plane to deliver an order to an out of state customer. Josh bought a farm in Quitman, Arkansas, and developed an interest in Egyptian Arabian horses. This new passion blossomed into a very successful adventure as Josh expanded into raising and showing championship horses. He was so well known and well respected as he developed a successful premier breeding stable that he drew visitors from around the world.

Josh Green touched many lives inside and outside the dental profession. His innovative ideas and leadership have helped change the dental lab industry. His influence and friendships have made many thankful to have known him. He had the ability to light up the room by his presence and he will be missed. Josh was a supporter of Arkansas Children’s Hospital and requested that they be the recipients of any memorials. AD
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