2013/2014 Nominating Slate & Proposed Budget

West Chester Dentist Announces Candidacy for 2013 ADA President Elect

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President’s Message – Dr. Charles Incalcaterra ........................................ 2
Editorial – Dr. Tami Brady ................................................................. 4
Guest Editorial – Mary Jennings, DDS .............................................. 5
Management of the Addicted Dental Patient ...................................... 8

DEPARTMENTS

Legislative Report ................................................................. 18
Classified Advertising ............................................................. 18
Local Happenings .................................................................. 15
Need to Reach the Second District Valley Forge Dental Association or the VFDC? .................................................... back cover

ALSO IN THIS ISSUE...

Dentist Announces Candidacy .................................................. 9
Humanitarian Award ............................................................... 11
MOM-n-PA ........................................................................ 14
2013-2014 Nominating Slate .................................................... 16
2012-2013 Proposed Budget ..................................................... 17
Upcoming Events ................................................................. 20

Valley Forge Dental Conference: March 6, 7, and 8, 2013 .................. inside back cover

ON THE COVER...
Village of Caltabellotta, Sicily, which overlooks the Mediterranean Sea.
Photo courtesy of Dr. Charlie Incalcaterra taken during his trip May, 2012.
I hope you all and your families have had a great summer. It certainly was a hot one with the air conditioners whirling almost non-stop. I enjoy this time of year but I also look forward to the change in seasons and the cooler weather with colorful fall foliage.

This has been a busy year so far. We had a great Day on the Hill this past June and we were able to reach a number of state legislators with positive messages about things important to dentists and our patients. As a result, we scored legislative victories which you can read about in the Government Relations Report on page 18. I am proud of the dentists from Second District and all the dentists from Pennsylvania as well as the students from our three dental schools who attended this event. Believe it or not, this was my first time ever attending. I always thought that either it would be a waste of time or that I would not know what to say to the legislators. I am very happy to admit that I was very wrong on both parts. The PDA staff did a terrific job of preparing us for this event. They made all the appointments for us, gave us packets of materials to use to support our positions, and gave us key words to use when speaking to the legislators or their assistants. I will definitely do this again next year and I really encourage anyone to join us. It was a tremendously worthwhile day spent with colleagues working towards a common goal. And it was successful.

Moving away from the legislative arena, there are two other areas of focus for both the ADA and the PDA, and as a result, for Second District. The first of these is governance of our organizations. While this isn’t a really sexy topic that will grab the attention of most members of our profession, the reason for these discussions – what drives the need for change – is based on our declining membership. While the ADA actually has increased the number of dentists who are members, our market penetration (based on the number of dentists in the nation) has declined. In Pennsylvania and Second District we are seeing a worse trend, with declining numbers and declining percentage of market share. In Second District we have 1379 members and 862 non members for a market share of approximately 62%. And to top it off, our membership is aging. Our more mature members pay a lower dues rate, and that equals declining revenues for our organizations. It is time for us to become leaner and smarter in all of our organizations from governance on down.

I attended the ADA’s Membership Recruitment and Retention meeting in Chicago in March. This really opened my eyes to the reality of declining membership and opportunities for us to reach out to more dentists to consider membership in organized dentistry, particularly in Second District. Then I attended the PDA’s Leadership Conference in July which was lead by our own Bernie Dishler, President of the PDA. The morning session was attended by the entire group, and the keynote speaker was Mary Byers, author of the book Race for Relevance – Five Radical Changes for Associations. One of the things that really struck me was her discussion about the Return On Investment for our member’s Dues. She asked us “what do your members get for their dollars”? Then she asked a really surprising question – are we helping our members to become more profitable? It was almost like she said a dirty word, but the reality is that successful members can afford to pay their dues. So are we helping our members work less stressfully, more productively and more profitably?

I mulled this over in my mind for a couple of weeks and then I realized that we can make our members more profitable. We do advocate on behalf of our members in Harrisburg (and in Washington), but this helps all dentists, members and non-members alike. Of course we could become an even stronger voice in government with more members, but advocacy on behalf of dentistry benefits all. So how can we help our members? I looked at the PDA website to find my answers. It’s called member benefits.

Continuing Education offered through our societies (at a discount for members) is one way of making us more profitable. The PDA promotes our practices through their website with a link called “Find a Member Dentist” which the public can use to locate our practices. There are Endorsed Vendors – companies who agree to offer discounts to members to provide services which most of us need. On the PDAIS website you can find a link to all these vendors. There is an Accounts Receivable Management and Collection company which offers a discount. There is a Credit Card processor which can save your practice money, an Energy Supplier which can lower your energy bills at home and at your office, a Patient Financing company which can help increase your case acceptance and a Website Design and Internet Marketing company that offers great discounts. You can also find different insurance programs and financial services programs to help with things retirement planning. I especially love the quote from Dr. George Sitterle from Pittsburgh, who wrote “By using PDAIS last month for my car and home insurance, I saved over $1400 from my previous policies. That paid for my membership alone”. From my own personal experience, a financial planner looked at my retirement benefits and said that they could never match the low fees that the ADA offers its members. That statement alone confirmed what I always suspected - that I made the right choice when I joined the ADA.

The benefits that I mentioned are just a few of the ones you can find on the PDA’s website. There are many more that are too numerous to list here. It does take time to look through all of the information there and the PDA staff is available to help you if you wish. But we need to look out for ourselves and our fellow members and make everyone aware that you can save a good deal of money to make your Return on Investment worthwhile – and to make your practice more profitable.

Membership has its privileges. We are here to support one another and through organized dentistry we do that for our members. Take a look at how organized dentistry can help you work less stressfully, more productively and more profitably.
Michael Glick, DMD - Buffalo, NY - "The Role of Dentists in the Care of Medically Complex Patients" Dentists play an important role as primary healthcare professionals. They need to screen and monitor patients for underlying medical conditions, and are required to render dental care to a group of medically complex patients. Pertinent medical assessment of patients has become an essential part of dentistry, as well as the most common medical problems may require modifications to routine dental care. Providing oral healthcare for patients in today's rapidly changing medical environment is a challenging responsibility. This course will examine the role of dentists in providing effective and appropriate care for the medically complex dental patient. Dr. Glick is an internationally recognized expert in the area of oral medicine and serves as editor of The Journal of the American Dental Association. This course is co-sponsored by an educational grant from Dood Dental Lab and POADS.

Thursday, December 13, 2012

Martin Jablow, DDS - Middlesex, NJ - "What's New in High Tech Dentistry" The goal of this lecture will be to inform dentists and their staff about the information to be delivered in the presentation of new and innovative products and services. The presentation will cover the current research and the recommendations for the effective and efficient use of these materials. Topics will include: How natural properties relate to dental success and failure; When to use a "catalyzed" ceramic restoration; When to use a "pre-polymerized" veneer. 

Friday, January 18, 2013

Edward Mclaren, DDS, MDC - Los Angeles, CA - "Esthetics and Materials: What? Where? When?" In search for the ultimate in esthetic dentistry many new materials and techniques have been introduced to the profession. More than ever today's practitioners are faced with the difficult task of evaluating these new materials and techniques and making appropriate decisions for their clinical practice. This presentation will cover: The esthetics and materials necessary for effective esthetic treatment. The presentation will cover the current research and the recommendations of the materials and their clinical applications. Topics covered will include: How natural properties relate to dental success and failure; When to use a "catalyzed" ceramic restoration; When to use a "pre-polymerized" veneer.

Friday, April 5, 2013

Stephen Chua, DMD, MSD, CDT - New York, NY - "The Latest Advances & Techniques to Maximize Anterior Implant Esthetics" Implant dentistry is continuously evolving into a more predictable form of therapy. New and innovative techniques specifically directed at achieving optimal esthetics in anterior regions. This course will cover: New and advanced techniques for esthetic implant procedures; The use of aesthetic components to achieve optimal esthetics; The use of aesthetic dyes to achieve optimal esthetics; The use of aesthetic dyes to achieve optimal esthetics; The use of aesthetic dyes to achieve optimal esthetics; The use of aesthetic dyes to achieve optimal esthetics.

Wednesday, May 22, 2013

John McGill, CBA, MBA, JD - Charlotte, NC - "Achieving Financial Independence" Will you join the 8% of dentists who can afford to retire at age 65? Using these winning financial strategies, you can develop a game plan to reach financial freedom. This hard-hitting program contains "inside information" that you simply can't find elsewhere. gleaned from over 50 years of working exclusively with dental professionals. Learn how to: Reduce stress - control your money, rather than letting it control you; Develop winning saving and debt reduction strategies; Take advantage of the new tax-deductible retirement savings strategies; Dramatically increase your non-dental income; Simple steps to dramatically boost profitability; Early retirement with minimal financial cost by 50% or more; Formulate profitable corporate ownership strategies; Discover tax-free income secrets. John McGill is a tax attorney, CPA and MBA. He serves as CEO of The McGill & Hill Group, LLC in Charlotte, NC and is the Editor of The McGill Advisor Newsletter, a monthly publication enjoyed by over 100,000 dentists nationwide. Mr. McGill has also been a contributing editor to Dental Economics magazine for over 30 years. This course will be of special interest to doctors and their spouses. This course is co-sponsored by an educational grant from Dood Dental Lab.

Those taking the full DKU Series will receive both Bonus Courses at the Valley Forge Radisson Hotel

Wed., Oct. 10, 2012 BONUS #1: Harold Crossley DDS, PhD, "Know Your Patients Medications & Their Impact on Dental Treatment"

Wed.-Fri., March 6-7-8, 2013 BONUS #2: Participants choose one course from the Valley Forge Dental Conference

All meetings will be held at the Springfield Country Club on Route 320, Springfield, Delaware County, PA, except for the Bonus Courses held at the Valley Forge Radisson Hotel. Registration for all courses by 3:00 AM. Lecture 9:00 AM - 4:30 PM. Continental breakfast and lunch included for all DKU courses.

Fees:

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<td>ADA Members - Entire Series plus bonus courses - $175</td>
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<td>Non-ADA Members - Entire Series plus bonus courses - $215</td>
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Cancellations and Refunds: No refunds will be made without notice of at least one week prior to course date. A $125 administrative fee will be deducted. 

For information please contact DUK • c/o Barry Cohen, DMD • 8750 Township Line Rd, Suite 2 • Drexel Hill, PA 19026 • 610-449-7002 • DUKDental@aol.com
Riley, my 10-year-old son remembers being the one to throw the sticky eyeball on to the ceiling. He was about 6 years old at the time I brought him a souvenir from a dental lecture I attended that day. This particular souvenir was an odd one to acquire at a DKU meeting, a sticky, squishy toy eyeball. Being that the shape was obviously round, and Riley being a boy, he clearly had to throw the interesting eyeball around. Up and down it would go, occasionally caught, but mostly sticking to what ever it landed on, then with a giggle Riley would chase it down with amazement that it stuck wherever it landed, even on the side of the wall. It only took one super duper throw to have the eyeball reach the ceiling; there it stuck, just like it did on the wall and floor. Riley and I wondered when it would fall, a few seconds went by and it did not fall, then a few minutes, and it still didn’t move, then it was dinnertime, and the eyeball was still on the ceiling.

Today, more than 4 years later, the eyeball is still on the ceiling. It was removed a couple of times over those years, once when the boys and their friends had a contest to see who could knock it down. Numerous projectile objects were launched at the kitchen ceiling, and a few may have hit the eyeball, but it never once fell. It took Daddy holding Riley up and grabbing it to finally free the eyeball from its ‘Big Brother’ location. However, since we have 2 boys who wanted to claim the object as their own, Daddy promptly returned it to its elevated home. With a ceiling 9 foot high, the boys cannot find anything stable enough to stand on that will allow them to reach the eyeball again. The second time the eyeball was removed from the kitchen ceiling was by my brother’s daughter, who is significantly taller than Riley, and was able to use a bar stool that would permit her to grab the object herself. Once in hand, she promptly removed the plastic pupil and rolled around the sticky white part, but then she too thought the eyeball should remain where she found it and after reassembling the eye, launched it once again at the ceiling.

The eyeball is one of the toys you may encounter when attending the Fall CE event with Dr. Harold Crossley on October 10. He has an arsenal of attention grabbing novelties that he uses to keep the audience’s attention; however, his style of lecture is very engaging and it is difficult to let your mind wander. If you ask a pertinent question or answer a thought-provoking question you may be rewarded with a bouncy ball.

Daydreaming or closing your eyes and you may end up with a spider, bat or other crazy animal near your head, as a reminder of why you are here. Few very lucky attendees will get to take home the coveted sticky eyeball. One must pay attention, as they go flying through the room when you least expect it.

Noah, my younger son, doesn’t have quite the same memory of that first day with the sticky eyeball; he was only 4 at the time. One thing he did tell me is the eyeball is much more fun on the ceiling than lying in the junk drawer, where it most certainly would have ended up. Occasionally visitors will glance at the ceiling as they walk through our kitchen, just to check if the eyeball is still present. Riley and Noah are continually aware of its location, as my husband has remarked that the eyeball watches them when Mom and Dad are not around. An eyeball may be watching the educational course on October 10 as well, so take a peek at the ceiling of the Valley Forge Radisson and see if Hal Crossley has lectured here in the past.

---

**September Student Outreach Event**

You are invited to a networking event hosted by the Pennsylvania Dental Association (PDA)! Meet with dental students from Temple and Penn to discuss the many challenges and rewards of dentistry and enjoy a relaxing evening. Complimentary attendance with registration.

**Thursday, September 20, 6:30pm**

The Crescent Boat Club
5 Kelly Drive • Philadelphia, PA 19130

Registration required: [www.padental.org/outreach](http://www.padental.org/outreach)

Please be sure to log in to the PDA website in order to register. Contact Andrea Hoover at ach@padental.org or (800) 223-0016, ext. 123 with any questions or if you need your login and password.

Food and drinks will be served. Free parking. Casual dress. This is a dentist and dental student only event; please no spouses or guests. Don’t miss this opportunity to network with future colleagues. **We hope to see you there!**
**Guest Editorial**

**What is Advocacy Anyway**

Mary Jennings, DDS  
*WSDA News (Washington State), December 2011*

**Advocacy.** Ten years ago I had a vague idea of what that meant. Now, the spirit and work of advocacy is fully entrenched into my dental soul. Many of us consider it the most important member benefit.

To be terse, advocacy is how we keep well-intentioned fools from doing stupid things to, and with, our profession. In kinder terms, it is about how we get our core values and best practice concepts out to a world that thinks it has better things to do than listen to a bunch of dentists tell them how our profession should be run.

Advocacy should be easy. We impart our values to our patients every day. We tell them intimately what they need to ensure oral health. We are fabulous one-on-one.

For some strange reason, when we go public, things go crossways. Other parties chime in with their agendas. You know them—Kellogg, Pew, perhaps your hygienist…

We have allies, but they really do not make themselves available for the heavy lifting, and rightly so. It is our job. These days, battles take time and resources. While other associations may sign on in favor of our bills, their bodies stay at home awaiting their own fights.

What resources do we have? We have the power of “right.” We are passionate about the care we give our patients, we study best practices, and we have hands-on experience. They are amateurs in a pro league, and we need to constantly remind them that our knowledge, sincerity and expertise are powerful and deadly accurate. Our knowledge is not acquired by sitting around tables with other want-to-be dentists thinking big dental thoughts. We do not indulge in lame, non-evidenced based studies.

We have our “Dogs of War” – our Grassroots Advocates. I am one and you should be, too. We are the people who, as a group, blast the legislators with our well-formed points. Legislators track the volume of response to issues, so our voices truly count.

Remember how fabulous we are one-on-one? That is the most important link in our advocacy strategy. If you care enough about an issue to get up and do something about it, people take notice and a “buzz” is created around the issue. Many of our members have cultivated relationships with their legislators. They get phone calls from them asking for their opinions on dental issues. I have not achieved that level of legislator confidence, but I am working on it. I always appreciate being able to tag along with them and develop my relationships.

Sometimes it is hard to remember that no dental association is an island. On the national level, the Council on Government Affairs (CGA) and the ADPAC Council work on our national issues and congressmen. I just finished my first year on CGA. I learned that with computer technology, reports can be embedded into reports making reading up on issues a formidable task! I am impressed with the scope and depth of issues that impact dentistry. While there are really no small issues, there are lesser ones, like addressing the Federal Trade Commission on how we label food marketed for children. Then there is the huge and looming Affordable Care Act, where we have to figure out how to weave dental benefits into a plan that both houses of congress will find agreeable by 2014.

Not all issues impact all states. The midlevel problem is not nearly as significant for the southern states as it is for us. We are the first state that has had an insurance company reduce its reimbursement rates. Now, other insurance companies are following suit elsewhere. Because of our different needs, and to nip problems before they spread, the ADA developed the States Public Affairs (SPA) plan in 2005. We are one of the ten states that receive SPA funding, and we’ve been using it to help with access to care and midlevel issues. Is it working? Yes! The ADA House of Delegates heartily approved its $3.5 million dollar funding in October. That is a big deal when forty states are not getting funded, and the ADA still supports the program that helps form preemptive strikes against madness.

Just in case you hadn’t noticed, dental advocacy is happening around you, each and every day. Thousands of us are committed to keeping stupid things from happening to our profession and the people we love and care for.

**Editor’s note:** The ADA SPA program works closely with volunteer leaders and state dental society staff to assist with lobbying, coalition building, opinion research, earned and paid (advertising) media and retaining local public affairs firms to assist with work through grants and by using staff to oversee the work of state consultants and provide strategic counsel and technical assistance. Pennsylvania participates in the ADA SPA program and has received funding for our lobbying and public relations efforts.
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Stephen P. Howarth, D.M.D. has acquired the practice of
John W. Galson, Jr., D.M.D. - Wallingford, Pennsylvania

David E. Freilich, D.M.D. has acquired the practice of
Joseph A. Porreca, D.D.S. - Drexel Hill, Pennsylvania

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Management of the Addicted Dental Patient

by Dr. Harold Crossley, D.M.D.

Don’t miss Dr. Harold Crossley’s lecture “Avoid Liability...Know Your Patient’s Medications and Their Impact on Dental Treatment” at the Fall CE event on October 10 at the Valley Forge Radisson Hotel.

In 1991, the American Dental Association (ADA) passed a policy statement recognizing drug dependence as a disease. This policy statement stipulated that dentists have the responsibility to identify patients who are actively addicted to drugs or who are in recovery. Dentists must include, in their patient health history, questions that address drug addiction and substance use. A positive response may require the dentist to alter the treatment plan and eventual dental care of the patient.

In order to help detect the addicted patient, the comprehensive medical history should include, at a minimum, questions that address congenital or acquired cardiac abnormalities and any significant hepatic dysfunction. Obviously a positive response for hepatic dysfunction requires a medical consultation to provide an evaluation for hepatitis and overall liver function. During the review of the patient’s medical history, the dentist should explore whether the patient has any history of, or is in recovery from drug dependence. Usually, patients who are in recovery from some form of drug addiction will readily admit to it in order to avoid taking medications that would cause a relapse.

A patient’s social history may reveal active drug use including alcohol and other drugs. The clinician should ask about the use, frequency and quantity of alcohol and other drugs. The patient may admit to the use of any or all of these substances and express a desire to stop their use. The clinician should be prepared to offer assistance to the patient by referring the patient to the appropriate counseling services.

Occasionally a dental treatment plan must be modified for the addicted or recovering patient. As an example, local anesthetics with vasoconstrictors are contraindicated for a patient under the influence of cocaine since an inadvertent intravascular injection would potentiate the vasoconstriction of cocaine and produce a hypertensive crisis. In reality, it is unlikely (but possible) that a patient would come to the dental office under the influence of cocaine since it is a stimulant. With the inherent anxiety of dental care, it is more likely that a patient would take a narcotic (heroin), euphoriant (marijuana), or sedative (alcohol). If patients are taking these central nervous system depressants, local anesthetics with or without vasoconstrictors are not contraindicated.

Postoperative pain control may present a problem in patients actively using or recovering from psychoactive drugs, particularly if the drugs are central nervous system depressants. Practitioners who have traditionally relied on opiate type analgesics for postoperative pain control must use alternative medications such as nonsteroidal anti-inflammatory drugs (NSAIDS). These drugs provide the ideal alternative since they are not addictive and provide an additional anti-inflammatory effect. In addition, nitrous oxide and oral or intravenous sedation should be used with caution for drug dependent patients and only if there is no alternative.

A particularly vexing problem for dentists is addicted patients who seek practitioners that will liberally prescribe narcotic analgesics. These individuals have been dubbed “doctor shoppers” and present themselves to dentists in an attempt to secure narcotic analgesics. Certain compulsive characteristics of these patients should alert the dentist to the user’s scheme. They will often request an appointment near closing time to prevent any definitive treatment and to request a narcotic analgesic until the offending tooth can be treated. The “shopper” will often request a specific brand of analgesic, calling it by name or a close similarity of the name. Occasionally, a patient will call a dental office claiming to be a close friend of an established patient. The addict may then state that he or she cannot come to the office on time and would prefer a later appointment. This conversation then ends with a request for a prescription for a narcotic analgesic.

Once the addict has the prescription, they go to the next dentist with the same ruse. The practitioner should be wise not to prescribe any drug without seeing the patient, not to see the patient after hours without anyone in the office, and to prescribe non-narcotic drugs for postoperative pain, particularly when the patient presents a suspicious narrative.

Dentists should be aware that addiction is a disease and that denial is a normal part of the illness. If it is clear that the patient is drug dependent then offer to help them find a drug treatment program or an addiction professional.
West Chester Dentist Announces His Candidacy for 2013 ADA President Elect

Dr. Charles Weber, who practices dentistry in West Chester, will announce his intention to seek the office of President Elect of the American Dental Association at the American Dental Association’s annual meeting to be held in San Francisco, October 19-23, 2012. The election will take place the following year at the American Dental Association’s annual meeting in New Orleans. Dr. Weber has served the dental profession at every level of leadership where he has demonstrated time and again the virtues that are needed in a national leader. Dr. Weber has the knowledge, the experience and the energy to lead us in these challenging times.

Dr. Charles Weber, or Charlie, as his friends know him, is a graduate of the University of Pennsylvania School of Dental Medicine and has served as a captain in the US Army Dental Reserve Corps. Over the years he has served the dental profession in our community as President of Pennsylvania’s Second District Dental Association and President of the Pennsylvania Dental Association, and he currently represents us as our Trustee to the American Dental Association.

Dr. Weber is well qualified to serve the interests of dentists throughout our great nation. His intimate knowledge of our needs right here in southeast Pennsylvania will help shine the spotlight on our Commonwealth, allowing us to showcase our programs to the entire country and bring about the kind of recognition that will enhance our ability to negotiate with policymakers and stakeholders in matters of importance to our membership. Whether the issue is membership, alternative dental care providers, insurance companies’ practices or access to care, Charlie will build a consensus, and seek creative and innovative solutions to the complex issues that threaten the practice of dentistry today.

Dr. Charles Weber believes that our noble profession is one worth fighting for. As President of the American Dental Association, he will be a leader who is tested and capable of meeting the future challenges of American dentistry today and in the future.

Dr. Weber with Temple dental students Omar Elfiky and Matthew He, during PDA Lobby Day, June 5, 2012.

Charlie consulting with 2nd District President Charlie Incalcaterra, and Board Member Bernie Logan.
This program includes the indications, contraindications, and side effects of the most common physician-prescribed medications. Are there any medications used in my dental office that could adversely interact with drugs the patient is taking? What are my alternatives if there is an interaction? Do any of the patient’s medications cause adverse oral manifestations? Dental implications of these medications, drug interactions, and oral manifestations of these physician-prescribed medications will be discussed. These medications represent one third of all prescription medications taken by your dental patients. Familiarity with these drugs will provide the dental practitioner with a better appreciation for the health profile of today’s dental patient and avoid liability.

LEARN:
- the medications that could adversely interact with dental drugs;
- why your patient is taking their medications;
- and more!

FOR REGISTRATION INFORMATION, GO TO WWW.VFDC.ORG

RECOMMENDED AUDIENCE: DENTISTS, DENTAL HYGIENISTS, DENTAL ASSISTANTS, & RECEPTIONISTS

SPONSORED BY THE SECOND DISTRICT VALLEY FORGE DENTAL ASSOCIATION
The Annual Awards Committee of the Second District Valley Forge Dental Association has chosen Rotaplast International as this year’s recipient of the Association’s Humanitarian Award. The award in the amount of $500 will help defray cost of medical missions performed by Rotaplast. In addition, we will be soliciting donations of non-durable medical supplies for their missions at the October continuing education course.

Rotaplast International is a non-profit humanitarian organization providing free reconstructive operations and treatment for children with cleft lips and palates worldwide. The organization funds and mentors local physicians, launches public education projects, and advances research. Through these efforts throughout the world, Rotaplast helps foster international goodwill, peace, and understanding.

The goal of Rotaplast International is to eliminate the incidence of untreated cleft lips and palates in children worldwide by the year 2025. Rotaplast facilitates medical missions to provide surgical intervention for children who are not able to receive treatment or who are in need of more complicated medical procedures than can be provided by local physicians. In addition they counsel families about ways of reducing the incidence of cleft palate anomalies through diet, vitamin supplementation, and life style changes. Rotaplast also collaborates with local health professionals on follow-up care and on development of comprehensive cleft palate programs.

The organization educates local physicians and specialists by working with them to broaden their skills in treating cleft anomalies. Local medical communities are encouraged to adopt a multi-disciplinary approach to treatment, including orthodontic and speech therapy follow-up programs. As a result of this, Rotaplast fosters international goodwill and fellowship by working with Rotarians as well as with health officials in host countries.

The first mission was done as a service project by the Rotary Club of San Francisco in 1993. That mission, in Antofagasta Chile, treated 132 patients. Since that time, 173 missions have been conducted and the organization has treated 15,005 surgical patients. Some of our own member dentists in Second District, such as Dr. Jack Brent and Dr. Larry Stone, have participated in these trips in the past. Although Rotaplast began as a project of the Rotary Club of San Francisco, it became a separate non-profit corporation in 1996.

The 27 missions planned for the next two years will be in countries such as Peru, Bangladesh, Mali, Guatemala, India, Mexico, Venezuela, Ethiopia and Liberia. Rotary District 7430, which encompasses many of the communities within our own Second District Valley Forge Dental Association geographic area, will be hosting a trip to Cebu City, Philippines this October.

There are two types of volunteers needed for these mission trips. Medical volunteers include Plastic Surgeons with cleft care experience, Pediatricians, Anesthesiologists, Operating Room and Recovery Room Nurses, Dentists, Orthodontists, and Speech Pathologists. Occasionally a Geneticist is included on the team, which affords counseling to affected families and a venue for research. Medical teams are typically put together between 9 months and 1 year in advance of mission trips.

Most non-medical volunteer positions are filled by Rotarians from the sponsoring Rotary Clubs and Districts. Nevertheless, they do accept applications from anyone who is interested in becoming involved. They seek non-medical volunteers whose commitment to Rotaplast goes beyond the scope of the immediate medical mission and will help expand Rotaplast’s efforts by creating public awareness of the program. Positions for non-medical volunteers include Mission Directors, Quartermaster, Medical Records Keeper, Equipment Sterilizer, Interpreter, Photojournalist, Ward Coordinator, Recovery Room Helper, Patient Transporter, and Recreation Therapist.

A typical team has 30 members. A team will usually run three operating rooms daily for six to eight days. Approximately two-thirds of a Rotaplast team is made up of medical professionals and the remaining third are non-medical volunteers. Approximately 100 children receive treatment during each mission, depending on the number of operating rooms available.

Rotaplast provides logistics, solicits donations of non-durable medical supplies such as sutures and anesthesia, transports durable medical equipment, staffs the teams, conducts site visits, and works with the sponsors both domestically and internationally. Rotaplast covers the cost of transporting the medical personnel and the Mission Director. Housing and food for the team are either provided by the host Rotarians or funded through Rotaplast-supporting Clubs and Districts. Rotaplast makes travel arrangements for the entire team. Boxes containing supplies and equipment (30 to 40 boxes per mission) are transported along with the team.

The Second District Valley Forge Dental Association is soliciting its members to donate supplies that can be used in these missions. A supply list is included on page 13 and we are asking that donations be brought to our October 10 annual meeting and continuing education course featuring Dr. Hal Crossley. In addition to medical supplies, gifts for children are being solicited as well. Good gifts for the children are coloring books with crayons/markers and small soft toys. Remember, that they may/may not know how to read, and most likely do not speak English. Bubbles and Play-doh are not good toys for these missions as children often swallow these items.

For more information on Rotaplast International please visit www.rotaplast.org. Thank you in advance for supporting the humanitarian efforts of Rotaplast International. We appreciate any help you can give to this deserving organization.
NEW DENTIST LEADERSHIP CONFERENCE

SPONSORED BY THE VALLEY FORGE DENTAL ASSOCIATION

Through a membership grant from the American Dental Association

ARE YOU GAMBLING ON YOUR FUTURE?
OWN YOUR OWN DENTAL PRACTICE,
DON'T LET IT OWN YOU!

LEARN HOW TO MAKE YOUR PRACTICE WORK FOR YOU WHILE EARNING CE CREDITS

- Marketing your Practice in the Real Media World
- Preparing and Managing a REAL Budget
- Motivating & Communicating with your Patients, Staff, Peers & Family
- Meeting Management — Who is REALLY in charge in your life and office?

THIS LEADERSHIP CONFERENCE IS CLOSER THAN YOU THINK!

REGISTRATION COSTS

$75 — ADA NEW DENTIST
(in practice 10 years or less)

$100 — ADA DENTIST
(in practice over 10 years)

$200 — NON ADA MEMBERS

- REGISTRATION FEE FOR NEW DENTIST WILL BE APPLIED TO 2013 DENTAL SOCIETY DUES.
- $200 NON ADA MEMBER FEE WILL BE APPLIED TO ADA MEMBERSHIP.
- NO FEE FOR RESIDENTS IN AN ACCREDITED RESIDENCY PROGRAM.

SPECIAL RATES AT THE Sands LUXURY HOTEL!

Experience the Excitement of Bethlehem Christmas City
Visit the Arts and Entertainment District SteelStacks
Shop the Sands Bethlehem Event Center Luxury Outlet Mall
Dine at 7 Resort Restaurants including 3 by Chef Emeril Lagasse

REGISTRATION WILL BE AVAILABLE ON THE WEB SITE IN JUNE:
WWW.VFDC.ORG
800-860-3551

CONTINUING
5 CE CREDITS
EDUCATION

GAMBLING PROBLEM? CALL 1-800 GAMBLER.
Please consider bringing a donated item for Rotaplast International’s October mission trip to Cebu City, Philippines, to the Fall CE Course on October 10. The following list are items needed and monetary donations are also accepted.

<table>
<thead>
<tr>
<th>Item Description</th>
<th>Item Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1 Pedo</td>
<td>Filter paper</td>
</tr>
<tr>
<td>#150 Upper forceps</td>
<td>Floss</td>
</tr>
<tr>
<td>#151 Lower forceps</td>
<td>Flux</td>
</tr>
<tr>
<td>#151S Upper forceps</td>
<td>Gauze</td>
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<tr>
<td>020, 028, 030, 032 straight wires</td>
<td>Gloves</td>
</tr>
<tr>
<td>3 prong pliers</td>
<td>Goggles</td>
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<tr>
<td>acrylic burs</td>
<td>Gowns</td>
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<tr>
<td>Adjustable mouth prop</td>
<td>Graduated cylinder</td>
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<tr>
<td>alginate</td>
<td>Green handle knife</td>
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<tr>
<td>Anesthesia syringes</td>
<td>Hand sanitizer</td>
</tr>
<tr>
<td>Articulating paper</td>
<td>Heavy 3 prong plier</td>
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<tr>
<td>ball clasps</td>
<td>Heavy bird beak</td>
</tr>
<tr>
<td>Ball clasps</td>
<td>Heavy wire cutter</td>
</tr>
<tr>
<td>base plate wax</td>
<td>Heavy wire cutter</td>
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<tr>
<td>Benzocaine sticks</td>
<td>Hemostat</td>
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<tr>
<td>Bird beak</td>
<td>Hollowchop</td>
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<tr>
<td>Blanket</td>
<td>Imp. trays box</td>
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<tr>
<td>Book</td>
<td>Large elevator</td>
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<td>Brackets (022 slot)</td>
<td>Large ronjeur</td>
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<td>brush</td>
<td>Lig tie cutter</td>
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<td>caviwipes</td>
<td>Lig ties</td>
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<tr>
<td>Cloth tape</td>
<td>Lighter</td>
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<tr>
<td>Coloring Books</td>
<td>Lip retractors</td>
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<tr>
<td>composite gun</td>
<td>Liquid separator</td>
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<tr>
<td>Cotton piers</td>
<td>Med sterilization pouches</td>
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<tr>
<td>Cotton rolls</td>
<td>Medium elevator</td>
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<tr>
<td>Cotton tipped applicator</td>
<td>Mirror</td>
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<tr>
<td>Cryer</td>
<td>Mirrors, metal</td>
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<tr>
<td>Curettes</td>
<td>Mixing bowl</td>
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<tr>
<td>curved scissors</td>
<td>Model w/ toothbrush</td>
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<tr>
<td>dremel</td>
<td>Monomer/polymer</td>
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<tr>
<td>Elastic separators</td>
<td>Needles 30ga + 27ga</td>
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<tr>
<td>Elastic tie piers</td>
<td>Occlusal &amp; buccal view mirror</td>
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<tr>
<td>Elastic ties</td>
<td>Ortho cassette</td>
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<td>emory boards</td>
<td>Pencils</td>
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<td>Empty boxes</td>
<td>Pens/Flash light/Scissors</td>
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<td>Etchant</td>
<td>Periosteal elevator</td>
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<td>expansion screws</td>
<td>Pink triad</td>
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<td>face mask</td>
<td>Pipettes</td>
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<td>Falcon tubes</td>
<td>Polishing wheels</td>
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<td></td>
<td>Proxy brushes</td>
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<td>Pumice</td>
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<td>Retainer boxes</td>
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<td></td>
<td>Root tip picks</td>
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<td></td>
<td>Small elevator</td>
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<td>Soft toys</td>
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<td>Solder</td>
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<td>Spatula</td>
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<td>Stickers/pencils</td>
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<td></td>
<td>Sticky wax</td>
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<td></td>
<td>Stone</td>
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<td></td>
<td>Straight nose upper anterior forceps</td>
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<td></td>
<td>Surgical scalpel</td>
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<td>Tape</td>
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<td>Tegaderm</td>
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<td>Tegaderm self etch primer</td>
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<td>Temp cement</td>
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<td>Tip applicators</td>
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<td></td>
<td>Tissue pickups</td>
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<td></td>
<td>Tongue depressor</td>
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<td>Toothbrush</td>
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<td>Toothpaste</td>
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<td>Torch</td>
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<td>Transbond</td>
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<td>Tray adhesive</td>
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<td>Tray formers</td>
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<td>U/L 16 NiTi</td>
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<td>U/L 17x25ss</td>
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<td>U/L 19x25ss</td>
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<td>Utility plier</td>
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<td></td>
<td>Utility wax</td>
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<tr>
<td></td>
<td>Vacuum machine + sheets</td>
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<tr>
<td></td>
<td>Vaseline</td>
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<td>Wire cutters</td>
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MOM in PA

“There is nothing like it!” If you or your organization has been associated with a Mission of Mercy - participated in one – you no doubt have captured the passion. Two days of absolutely free dental care to all who come leaves most volunteers and patients with a changed perspective on the goodness of mankind. “The largest free dental clinic in the world!” “A life-changing experience!” “For me, an experience of a lifetime!” “The greatest active charity in the Nation!”

Thousands come, standing in snow calf-deep for hours, waiting in quarter mile lines in one hundred degree weather, sleeping outside entrances on below zero nights, all just to receive dental care. These are the underserved - those who cannot for whatever reason afford quality dental care. Their need has been defined at each and every MOM event held in Virginia, Texas, Kansas, or any of the many other states who have joined in along the way. The need is there and through the generosity of dental professionals, dental technicians, lay volunteers, community leaders and businesses across the country, and the charitable work of dental agencies and organizations throughout America, those needs are being addressed.

Pennsylvania’s first MOM-n-PA event will take place on May 31 and June 1, 2013 at the Liacouris Center in North Philadelphia. MOM-n-PA is an annual two-day free dental clinic for underserved Pennsylvanians. All services are provided free of charge by members of organized dentistry and assisted by a host of volunteers. Professional volunteers include not only dentists, dental hygienists, assistants and lab technicians, but also dental equipment maintenance specialists, office staff and billing clerks, LPN, RN, nursing students, physicians, physician assistants, nurse’s aids, EMT’s, pharmacists and pharmacy techs. Community volunteers are also needed for volunteer registration, patient greeters, patient records, patient registration, parking, patient escorts, interpreters, checkout, hospitality, set-up and breakdown. Volunteers are the heart of the mission and over 1,000 are needed during the event.

The Pennsylvania Dental Association, under the leadership of President Dr. Bernie Dishler, decided to undertake a MOM event in Pennsylvania, and a MOM-n-PA board was formed, chaired by Dr. Gary Davis. The board’s initial report included the following considerations as the initial vision of the MOM event:

• Provide for the immediate dental needs of the underserved with priority given to pain abatement
• Give the underserved who have no other place to turn for their needs a collective voice for others to hear
• Provide a supportive environment for those whose fear has kept them from seeking dental care
• Educate every guest on the importance of maintaining good oral health
• Provide many patients their first oral care products
• Expose the goodness of dental professionals on a major scale by generating positive regional PR
• Provide dental professionals an opportunity to practice alongside others at a collegial, collaborative event.
• Create oral health care advocates of approximately 1000 lay-volunteers per event
• Reduce pressure on local hospitals by reducing the number of people who seek pain relief at emergency rooms
• Offer the local community an opportunity to conduct a city-wide positive event
• Accumulate data for national analysis to determine trends in dental issue
• Offer manufacturers the opportunity to showcase new dental equipment and supplies to several thousand dental professionals a year

We will be working with the America’s Dentists Care Foundation (ADCF) which will provide portable dental equipment, offer volunteer expertise and data collection, as well as general support during set-up, during the 2 day event, and for breakdown.

During our initial MOM-n-PA dental mission, we will treat 2,000 needy patients. We will be treating patients in two 5-hour shifts per day for two days utilizing 100 dental units. The “portable clinic” will utilize 75 dentists, 75 assistants, 25 hygienists, as well as 50 other support volunteers during each shift.

Non-dental volunteers will have duties such as security, translating, escorting, registration, medical triage, central supply, sterilization, entertainment, hospitality, parking, facility support, data entry and exit interviewing.

The vision of the MOM-n-PA board is to host yearly MOM dental projects throughout the state. In the future events will be considered in the northeast (Scranton/Wilkes-Barre), in the northwest (Erie), in Pittsburgh, in Harrisburg, and in more rural areas like State College.

Following each year’s dental mission, the MOM-n-PA board will meet to evaluate the current year’s mission and to determine the site and the scope of the following year’s mission.

Though all dentists and support personnel are volunteers who donate their time, there are still thousands of dollars of expenses involved in operating these free dental missions. These include dental equipment and maintenance, dental supplies, food, water, and t-shirts for volunteers, as well as food and water for patients waiting in line, and numerous other miscellaneous expenses. Though we have several generous corporate sponsors, we gladly accept (and need) donations of any amount!

Please visit the MOM-n-PA website at www.mom-n-pa.com for additional information about volunteering and donating.
Local Happenings

The Dental Society of Chester County and Delaware County held 2 spring Give Kids a Smile Events. The first was held on May 21 at the dental office of Dr. Ted McGurk and Dr. Linda Himmelberger in Devon. 10 children between the ages of 10 and 18 were treated with $6000 worth of dentistry including $1000 of oral surgery prior to the event as emergency care. $12,000 in orthodontic care is pending for the patients of the May event.

The second event was held on June 11 at the dental office of Dr. Barry Cohen and Dr. Sue Schlesinger in Drexel Hill. 7 children ages 5 to 18 were treated to $2730 in care that day, then 2 of the children received $2730 in pediatric care plus $2000 in additional care after the event. $12,000 in orthodontic care and $2000 in endodontic treatment is pending.

On Friday, June 8, the Lehigh Valley Dental Society hosted their annual evening at the Iron Pigs game at Coca-Cola Park in Allentown. Over 180 members, family and friends of the Second District attended the game where the home team was victorious over the Gwinnett Braves. After the game the fans were treated to a spectacular fireworks display.
**GKAS Thanks…**

We would like to thank the dentists, hygienists, assistants, and staff members who donated their expertise and dental supplies to provide dental care and education for indigent children on Monday, May 21st at the office of Drs. McGurk and Himmelberger in Devon, and on Monday, June 11th at the office of Drs. Barry Cohen and Sue Schlesinger in Drexel Hill. We are grateful for the generosity of volunteer dentists Lilyana Angelova, Haddy Alrez, Thomas Bachstein, Tami Brady, Dick Clark (o.s.), Barry Cohen, Theresa Devine, PDA President Bernie Dishler, Michelle Halpern (ortho.), Linda Himmelberger, Carolyn Kelly, Ericka Klein, Joe Lamb, Bernie Logan, Ted McGurk, Neal Neuman, Sue Parab, Ruth Rosenberg, Maria Schellhorn, and Peter Susanin (perio.).

A very special thanks is owed to Drs. Kim Chermol & Stanley Horwitz (pedo.), Tony Cook (ortho.), Joel Funari (o.s.), Geoffrey Rabie (endo.), Rob Raymond (pedo.), Harold Romesburg (o.s.), and Steven Stein (endo.) for providing follow-up dental care to children with disabilities needing endodontic, orthodontic, restorative, and surgical treatment.

Drs. Cimino; Koshetar; Cathy & Greg Mauro; Renneisen; and Robbins graciously supported our efforts with their kind gifts!

Nancy McFadden of Glaxo SmithKline provided a wonderful breakfast for our June volunteers – thank you, Nancy! Drs. Himmelberger and McGurk fed our crew on May 21st!

Thanks to your efforts our GKAS Program continues to provide dental care and education to children that would otherwise not receive this integral component of their health and well-being.

With gratitude,

Bernadette A. Logan, D.D.S.

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**SECOND DISTRICT VALLEY FORGE DENTAL ASSOCIATION**

Members will vote on this item during the Annual Business Meeting, Wednesday, October 10, 2012 at 12:00 Noon at the VF Radisson Hotel, King of Prussia, PA

**NOMINATING SLATE**

**PRESIDENT**  
Dr. Nancy Rosenthal

**PRESIDENT ELECT**  
Dr. Laurene Grabill

**VICE PRESIDENT**  
Dr. Brian Straka

**SECRETARY**  
Dr. William Cherry

**TREASURER**  
Dr. John Meci

**TRUSTEE**  
Dr. Ronald Heier

**DIRECTORS - Chester/Delaware**  
Dr. Daniel Daly – 2013  
Dr. Joel Funari – 2014  
Dr. Edmund McGurk – 2014

**DIRECTORS - Lehigh Valley**  
Dr. Stephen Gschrey – 2014  
Dr. Charles Incalcaterra – 2013

**DIRECTORS - Montgomery Bucks**  
Dr. Laurence Stone – 2014  
Dr. Cary Limberakis – 2014  
Dr. Christine Gregory – 2013  
Dr. Bruce Terry – 2013  
Dr. John Pagliei – 2013

**PDA DELEGATES**

**Chester/Delaware** – 8 delegates  
Drs. Karin Brian, Dan Daley, Doug Filidore, Donald Gordon, Dr. Laurene Grabill, Edmund McGurk, Marie Scott and Steve Sierakowski

**Lehigh Valley** – 5 delegates  
Drs. John Meci, Steve Ely, Brandon Walsh, Brian Straka and Hugh Friehl

**Montgomery/Bucks** – 11 delegates  

**PDA ALTERNATES**

**Chester/Delaware** – 8 alternates  
Drs. Bernie Logan, Tami Brady, Richard Clark, Stephanie McGann, Jamie Wolitsky, Dale Scanlon, Ronald Bushick and Linda Himmelberger

**Lehigh Valley** – 5 alternates  
Drs. Jason Pellegrino, Stephen Gschrey, Charles Incalcaterra, Gary Peters and Lauri Passeri

**Montgomery/Bucks** – 10 alternates  
Drs. Stanley Heleniak, Christina Gregory, Ronnie Bruk, James Stevenson, Joe Persichetti, Ada Greenfield, Amy Farrell, Calvin Lee, Christina Landes and Robert Singer
The proposed 2012/2013 Second District Valley Forge Dental Association proposed operating budget will be presented for vote during the Annual Business Meeting, Wednesday, October 10, 2012 at 12:00 Noon at the Valley Forge Radisson Hotel, King of Prussia, PA

### INCOME:

<table>
<thead>
<tr>
<th>Item</th>
<th>07/01/12 Proposed</th>
<th>2012 Actual as of 6/12/12</th>
<th>2013 Proposed</th>
</tr>
</thead>
<tbody>
<tr>
<td>I-1</td>
<td>Membership Dues</td>
<td>$107,000.00 (1)</td>
<td>$82,060.00 (7)</td>
</tr>
<tr>
<td>I-2</td>
<td>Journal Ad Income</td>
<td>9,000.00</td>
<td>7,866.00</td>
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<tr>
<td>I-3</td>
<td>Pres. Dinner Tix</td>
<td>3,000.00</td>
<td>2,880.00</td>
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<tr>
<td>I-4</td>
<td>Trans. From Prin</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>I-5</td>
<td>Leadership Conference</td>
<td>10,000.00</td>
<td>5,000.00</td>
</tr>
<tr>
<td><strong>TOTALS</strong></td>
<td><strong>$119,000.00</strong></td>
<td><strong>$102,806.00</strong></td>
<td><strong>$114,726.00</strong></td>
</tr>
</tbody>
</table>

### EXPENSES:

1. Treasurer's Exps. | $500.00 | $462.75 | $500.00 |
2. Exec. Sec. Salary | 17,716.00 | 17,716.00 | 18,124.00 |
3. Exec. Sec. Travel | 3,500.00 | 4,656.44 | 3,500.00 |
4. Audit Fee | 4,000.00 (2) | 1,400.00 | 5,500.00 (8) |
4a. Bookkeeper | 4,000.00 | 1,760.70 | 4,000.00 |
5. Com. & Brd. Exps. | 10,000.00 | 8,860.97 | 6,500.00 |
5a. Awards | 500.00 | 21.84 |
5b. Dental Care Com | 3,000.00 | 740.48 |
5c. District Structure | 0 | 0 |
5d. Gov't Rel. | 0 | 0 |
5e. Const. & Bylaws | 0 | 0 |
5f. Peer Review/Pat. Re | 0 | 0 |
5g. Insurance Review | 0 | 0 |
5h. Com. & Website | 1,500.00 | 1,437.47 | 2,000.00 |
5j. VF Steering Mtgs. | 2,500.00 | 1,437.47 | 2,000.00 |
5k. Dental Practice | 0 | 0 |
5. Total excluding Strng. Comm. | 17,500.00 | 11,060.76 | 9,500.00 |
5. Total Com. & Brd. Exps. | 17,500.00 | 11,060.76 | 9,500.00 |
6. President's Exps. | 500.00 | 0 |
7. Journal Printing | 10,000.00 | 6,621.10 | 10,000.00 |
8. Journal Postage | 2,000.00 | 1,942.00 | 2,000.00 |
9. State Mtg.Pre-Cauc | 2,700.00 | 3,396.45 | 3,000.00 |
10. State Mtg. On-Site | 3,000.00 | 2,765.29 | 3,000.00 |
11. Campaign Funds | 0 | 0 |
12. ADA Conferences | 0 | 0 |
12a. Young Dent Conf | 1,500.00 | 1,000.00 | 1,500.00 |
12b. ADA Retent. | 3,000.00 | 1,887.87 | 1,500.00 |
13. Gifts/plaques | 600.00 | 1,685.88 | 1,300.00 |
14. Insurance & Bond | 2,000.00 | 1,787.00 | 2,000.00 |
15. Stationary | 500.00 | 500.00 |
16. PDA Deleg. Reimb | 9,600.00 (3) | 7,200.00 | 7,680.00 (5) |
16a. Altern. Reimb. | 9,600.00 (4) | 7,500.00 | 7,680.00 (6) |
17. Misc. | 2,000.00 | 785.76 | 1,000.00 |
18. VFDC VIP Exps. | 2,000.00 | 3,022.60 | 2,000.00 |
19. Storage Room Rental | 1,584.00 | 1,445.84 | 1,584.00 |
20. Past Pres. Lunch | 500.00 | 487.68 | 500.00 |
21. Pres. Banquet | 13,400.00 | 7,546.17 | 9,000.00 |
22. Town Meeting | 0 | 0 |
23. Leadership Conference | 271.15 | 15,000.00 |
24. ADA Alternate Delegate Reimbursement | 3,850.00 | 3,850.00 |

**TOTALS:** $111,700.00 $86,401.44 $114,218.00

(1) Proposed Dues Increase - $15.00 (Active dues will be $90)
(2) Audit scheduled for 2011/2012 per board decision
(3) PDA 2012 allotment - 24 delegates @ $400
(4) PDA 2012 allotment – 24 alternates @ $400
(5) PDA 2013 allotment – 24 delegates @ $320
(6) PDA 2013 allotment – 24 alternates @$320
(7) Dues increase was not initiated in 2011/12 but will be done in 2012/13.
(8) Audit not completed in 2012 and will be scheduled for 2013. Also included is fee for filing of tax returns.
(10) Proposed total for all committees, excluding Steering Committee, is $1000 since 2012 expenditures were $762.32
Very often we are writing to ask our members to contact their legislators about one legislative bill or another. And, unfortunately in recent years we were very close to success and in the end we were disappointed. I know many of you were frustrated and wondered if all the efforts were worth it. I am a perpetual optimist and I was starting to question the value myself.

Well, this year those relationships that we all have been establishing and nurturing have paid off. We have had success in three areas. Two of them resulted in laws that were passed and one bill has passed the PA Senate and we are hoping that the House will pass it this fall.

The General Anesthesia bill was a hard fought battle that all of my predecessors toiled over for more than 10 years. The law states that general anesthesia is a medical procedure and therefore the costs should be covered by the patient’s medical insurance. For years the insurance industry insisted that children and special needs adults who require general anesthesia for dental treatment had to have the fees covered by their dental insurance. We all know that if that were done, there would be very little remaining in the patient’s maximum yearly coverage to pay for the actual treatment. Rep. Stan Saylor championed our cause. Our lobbyists with the Winter Group worked both sides of the aisle, negotiated compromises and with solid support from our PDA staff and back up from your PDA officers the bill was passed unanimously by the House and Senate. I can’t emphasize how important those letters and e-mails from our membership were. Almost every legislator that we met with mentioned the e-mails that he or she received from “the dentists”. The insurance lobby has much more PAC money than we do. But, they cannot compete with our member involvement.

Another bill that passed with our help was the Compulsory Malpractice Act. We were probably the only licensed profession in PA that did not have compulsory malpractice insurance. When this was discovered the Legislature rushed to correct that. We had to work to shape a law that favored dentists who did not need the insurance. The law covers only dentists who practice dentistry. Dentists on maternity leave or other types of leave or retired dentists can continue to retain their license without carrying malpractice insurance.

And, of course the bill that is almost there is the Non-covered Services bill. This bill will prevent insurance carriers from imposing a fee schedule on services that they do not cover. Everyone agrees that this is unfair but the insurance lobby has dug in their heels on this one. But, we did get through the Senate. We have a short window of opportunity to get this passed before the House recesses for the election and they may not come back in session before January. If this bill is not voted on before the election it will have to start all over in a new session. The bill passed the House Insurance Committee and just needs to be on the House agenda to be voted on. I think we have the votes. We just need pressure on the House leadership to place it on the agenda. That is where you come in. When you are requested to call or e-mail your legislator—DO IT!

Thanks for your help in the past battles, lets win one more.

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Upcoming Events

Lehigh Valley Health Network
Contact Pat Atno: 610-696-4839 or Dr. Charles Kosteva: 610-856-6999
Wed., Sept. 12, 2012—Dr. Lorne Lavine
  Six Steps to a Paperless Practice
Wed., Nov. 7, 2012—Dr. David Meinz
  Diet & Dentistry in the 21st Century
Fri., Dec. 7, 2012—Dr. David Rolf
  Passionate About Perio! An Evidence Based, Oral Systemic Approach
Fri., Jan. 12, 2013—Dr. John Cranham
  Treatment Planning the Worn Dentition
Wed., Feb. 6, 2013—Dr. Eric Shapira
  Oral and Systemic Disease as it Relates to the Aging Process
Wed., April 3, 2013—Dr. Charles Wakefield
  Restorative Materials...What, When, Where and How
Wed., May 8, 2013—Dr. Peter Jacobson
  Over the Counter Products

Montgomery-Bucks Dental Society
Full day CE events—mbds.org
Fri., Oct. 12, 2012—James Ellson, CDT
  Partial and Overdenture Attachments
Fri., Nov. 16, 2012—Dr. Herb Bader
  Salivary Diagnostics and Oral Medicine
Fri., Jan. 25, 2013—Dr Henry Salama
  Making Successful Clinical Decisions in Anterior
  Esthetic and Implant Therapy: Success by Design
Fri., March 22, 2013—Dr. Alan Atlas
  Update in Restorative Dentistry

Dinner Meetings—Contact Dr. Tom Howley
Mon., Sept. 24, 2012—Dr. Elliot Hirsch, Pharmacology
Mon., Oct. 29, 2012—TBD
Mon., Dec. 3, 2012—Dr. Pinto, Oral Medicine
Mon., Jan. 28, 2013—Dr. John Suzuki, Peri-Implants
Mon., March 11, 2013—TBD
Mon., May 13, 2013—President’s Banquet

Chester-Delaware Dental Society
DKU full day events—contact DKUdental@aol.com
Wed., Nov. 7, 2012—Dr. Michael Glick
  The Role of Dentists in the Care of Medically Complex Patients
Thurs., Dec. 13, 2012—Dr. Martin Jablow
  What’s New in High Tech Dentistry
Fri., Jan. 18, 2013—Dr. Edward McLaren
  Esthetics and Materials: What, Where, When
Frid. April 2, 2013—Dr. Stephen Chu
  The Latest Advances and Techniques to Maximize Anterior
  Implant Esthetics"
  Achieving Financial Independence

Dinner Meetings—
Contact Dr. Joel Funari – AdvancedOralandFacialSurgery@comcast.net
Wed., Oct. 3, 2012—Dr. Tom Sollicito, Oral Pathology
  Location—Newtown Grill, 6:00 start
Wed., Nov. 28, 2012—CPR Renewal course
  followed by a dinner meeting
  Changes to HIPAA and Healthcare Laws
Wed., March 20, 2013—New Dentist Meeting, Asset Protection
Wed., May 22, 2013—TBD
Mark Your Calendar for the...

27th ANNUAL VALLEY FORGE DENTAL CONFERENCE

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Wednesday, MARCH 6 2013
Dr. Henry Lee • Justice Through Science... Lessons Learned from High Profile Cases
Dr. Howard Glazer • What's Hot and What's Getting Hotter... Materials & Techniques
Dr. Jon Suzuki • Emerging concepts of Periodontics and Oral Implantology

Thursday, MARCH 7 2013
Dr. Kirk Behrendt • 7 Breakthrough Steps to Create Your Best Year Ever
Dr. Edward Feinberg • Diagnostic Considerations and Restorative Management of Difficult Cases
Dr. Scott DeRossi • Non-Odontogenic Toothache: A Guide to Accurate Diagnosis (AM); The Oral Medical Connection (PM)
DOCS EDUCATION • N20 Single Dose Conscious Sedation
AAFE • Botox Use in Dentistry - Lecture and Hands On, Part 1

Friday, MARCH 8 2013
Dr. Tiaraona Low Dog • Your Best Medicine, A Practical Guide to Health and Well Being (AM); Nutrition for the Dental Team (PM)
Dr. Paul Child • Technology Trends and Techniques—Implants, Esthetics, Ceramic Crowns and more
Dr. Rita Zamora • Social Media Marketing Success Strategies
DOCS EDUCATION • N20 Single Dose Conscious Sedation
AAFE • Dermal Fillers in Dentistry - Hands On, Part 2

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<td><a href="mailto:nrrdds@comcast.net">nrrdds@comcast.net</a></td>
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<td><a href="mailto:lagrabilli@aol.com">lagrabilli@aol.com</a></td>
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<td>Dr. Lawrence Montgomery</td>
<td><a href="mailto:larmont3@aol.com">larmont3@aol.com</a></td>
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<td>Dr. John Meci</td>
<td><a href="mailto:drmeci@verizon.net">drmeci@verizon.net</a></td>
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<td><a href="mailto:drpieyeah@earthlink.net">drpieyeah@earthlink.net</a></td>
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<td>Editor</td>
<td>Dr. Tamara Brady</td>
<td><a href="mailto:tsbradydmd@verizon.net">tsbradydmd@verizon.net</a></td>
</tr>
<tr>
<td>PDA Trustee</td>
<td>Dr. Ronald Heier</td>
<td><a href="mailto:RonHeier@verizon.net">RonHeier@verizon.net</a></td>
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<td>Dr. Charlie Weber</td>
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<td><a href="mailto:edmaser1@cs.com">edmaser1@cs.com</a></td>
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<td>Dr. Bernie Dishler</td>
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<td><a href="mailto:jeff.sameroff@gmail.com">jeff.sameroff@gmail.com</a></td>
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**Directors:**
- Chester/Delaware (3)
  - Dr. Dan Daley – dalegyro@aol.com
  - Dr. Joel Funari – gjfunari@comcast.net
  - Dr. Ted McGurk – ejmcgurk@msn.com
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  - Dr. Bruce Terry – pullpulp@aol.com
  - Dr. John Pagliei – drpieyeah@earthlink.net
  - Dr. Christina Gregory – cagdmd@verizon.net

**Need to Reach the Second District Valley Forge Dental Association or the VFDC?**

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