



Bulletin

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**INSIDE
THIS
ISSUE****Faculty
Corner****President's
Message****Registrar's
Column****The
Dental
Specialist**

Manitoba Dental Association Board Meeting Synopsis of the June 7, 2007 Board Meeting

Dental Hygiene

The Dental Hygiene Transitional Council is in the process of developing regulations and standards for self-regulation and scope of practice. Discussions about self-initiation and independent practice have been muted by the recognition that the level of education and training of a dental hygienist does not support these activities. Patients should have a dental exam, diagnosis and treatment plan defined by a dentist and then duties delegated to appropriately-trained oral health team members.

Umbrella Legislation and Future Task Force Meetings have been held both with Government Representatives and separately with the Regulated Health Professions to develop the working principles for the development of overarching health disciplines legislation. At this time a consistent complaints and discipline system were being discussed, along with the list of reserved actions, in order to prepare for the draft of specific wording for the legislation that would be done in the summer of 2007.

Anaesthesia By-law

As of July 1, 2007 the College of Physicians and Surgeons will no longer audit dental offices where general anaesthetic services are offered. As a result, a new MDA By-law is required to detail the audit requirements and update other anaesthesia modalities in the By-law.

Although the Committee had defined the principles in a new By-law, which were reviewed by the Board, there were still a few administrative technicalities and definitions required in order to prevent any misinterpretation of the By-law.

Canadian Dental Regulatory Authorities Federation

On April 19, 2007 Dr. M. Lasko and Dr. M. Van Woensel attended a meeting of Canadian Dental

Regulatory Authorities Federation which was held in Ottawa.

The main point of discussion was of a document describing the assessment, gap education, and examination of dental specialists who did not have an NDEB Certificate, or graduate from an accredited specialty program. Currently there was considerable debate among the provinces about the wording in the document as it appeared that a format war was taking place. Although a specific document was not available for the Board to consider the principles considered in February were still in place as well as the requirement for a dentist trust fund to be held and available for the costs of the NDEB for specialist exam development.

Dental Anaesthesia

The Board learned that the request for specialty status of Dental Anaesthesia had been reviewed by the Council on Education. The COE accepted that the criteria had been met and that the request could go to the CDA Board of Directors for consideration.

As a result, the MDA Board supported a recommendation that the MDA write to the CDA Board of Directors expressing its concern about consideration of Dental Anaesthesia for specialty status and ask for a specific response to the MDA's questions about the criteria necessary for the application to be considered.

Faculty Update

Dr. Randy Mazurat, Acting Dean, updated the Board on the following items:

- The new Dean will begin July 1, 2007. His first emphasis will be on the organization of the 50th Anniversary celebrations for the Faculty and increased emphasis on the research activities at the Faculty;
- Accreditation documents are being prepared for a site visit being scheduled for late January or early February, 2008;
- The Dental Hygiene class expansion request will be going to the University's Board of Governors in early June, 2007 the decision should be known soon with an implementation date of September, 2008;

Continued on page 5

President's Message



Dr. Marcel Van Woensel

"The more things change the more they stay the same." Alphonse Karr

The more I think about life, the more I realize it's about relationships. Good relationships generate trust and understanding. Even in disagreement there is respect for another's opinion. Problems are resolved by willingness to compromise or acceptance of differences. In bad relationships, even when people are in fundamental agreement there is distrust and questions of another's motivation. Often both parties look for an excuse to fail and an opportunity to blame. Actions are viewed negatively, and intentions always are suspect.

This is obvious in dental practice. If a patient's treatment does not give the desired result, a good relationship will not only engender their understanding, but also motivates me to find alternatives to help them. In cases with a bad relationship, the patient will find a reason to be unhappy even if treatment is successful. Like most dentists, I spend a significant amount of time working to develop a positive relationship with all my patients to avoid the latter. If a new patient enters the practice with a negative attitude about dentistry, I take the time to determine what the real issues are - fear, cost, distrust. I look for solutions explaining bluntly but sincerely I am here to help and if they do not truly believe that, they will unlikely be satisfied with their care.

Similarly, oral health team members will work to ensure your success in a good relationship. They will accept your bad days, understanding you are only human. In a bad relationship, a member will often work to undermine other relationships with staff or worse patients making the office dysfunctional.

A number of legislative changes are in the process or have occurred in dentistry. Licensure of dental assistants, self regulation of dental hygienists and omnibus health professions legislation potentially altering the structure of the MDA. These are significant changes but their real impact will be dependent on relationships. Things will fundamentally stay the same if our relationships with patients and OHT members

are good. I am uncertain whether our patients are loyal or reluctant to change, but they rarely leave an office when they have a positive, trusting relationship with the dentist. The same is true with OHT members. However, if a patient's only relationship in an office is with the hygienist, there is potential their loyalty is to the hygienist.

The legislative changes for dental assisting and dental hygiene will not change the current relationship between them and a dentist in private practice. Dentists are expected to be leaders of the oral health team and are responsible for patient safety in their offices. As dentists, we should encourage our staff to participate and develop a positive relationship with their professional bodies. The input of individual members will ensure an effective organization that meets the true needs of the public and themselves.

The same can be said about the relationship between the dental profession and the community. As a profession, we are well respected for our high standards of care. I believe our communities trust we - as individuals and as a profession - are striving to meet the province's oral health needs. It is important we value and foster this relationship. With the high demand for our services, there are people in our communities who have difficulty accessing oral health care.

As a profession we should support programmes and new solutions to help our under serviced populations - seniors, the institutionalized, indigent, geographically remote and the working poor. The Faculty of Dentistry's Children's Outreach programme is an excellent example. It provides care for many children from the most economically disadvantaged areas of Winnipeg. The Variety Club has developed a Tooth Fairy Bracelet campaign to raise money for the Outreach programme (you will receive a letter from the Variety Club and the MDA encouraging participation).

Through generous donations from Saul Sair and others, Siloam Mission is in the process of opening a multidisciplinary health care clinic. The facility will contain a staffed state of the art dental clinic providing dental services to people who may not have access to care. It is their hope and mine, dentists in the province will be willing to support the clinic by volunteering time on a one time, weekly, monthly or annual basis. More information will be forthcoming as it becomes available. If you would like to know more about the programme please go to their website www.siloam.ca or contact the clinic director Rebekah Peters at (204)956-4344 or rebekah.peters@siloam.ca.

Enjoy the summer.

Marcel L. Van Woensel, B.Sc., D.M.D., L.L.B.
President, Manitoba Dental Association

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Dr. Michael Lasko

Welcome New Registrants!

Summer is always a time for renewal. The MDA Office has been very busy with the completion of the university term and the processing of the graduates from our Faculty of Dentistry. From a class of 35 dentists we are in the midst of registering and licensing approximately 15 new dentists who have chosen to stay in Manitoba.

Congratulations and welcome to the profession!

Canadian Dental Regulatory Authorities Federation (CDRAF)

Dental Licensing Authorities are progressing, albeit rather slowly, with the process to recognize Internationally Trained Dental Specialists. A special Summit meeting dedicated to this issue was held in Toronto February 16-18, 2007 attended by Dr. Marcel Van Woensel and myself. The extensive deliberations at that meeting resulted in all of the licensing authorities accepting a process to evaluate and provide gap education and examine the successful individuals to enable them to be eligible for licensure.

A Memorandum of Understanding (MOU) is currently being reviewed and revised to enable this process to be in place sometime in 2008. Significant work remains to be done to involve the multitude of stakeholders that must be consulted to allow this to come to fruition.

The CDRAF met on April 19, 2007 in Ottawa with a full agenda of issues regarding licensing concerns across Canada and was attended by the MDA President and myself. Part of that agenda was a continuation of discussions regarding the MOU for Specialty Recognition.

Dental Assisting

The registration process has been completed for those dental assistants who work intra orally and currently we have 875 who have renewed their certificates to be actively employed in dental offices.

The MDA is continuing to consult with those Registered Dental Assistants and complete further By-Law development which will include the development of: a Peer Review Committee; requirements for professional liability insurance; a Registration Committee; the election of a Dental Assistant to the MDA Board; and a Continuing Education Committee. As this process develops, it would be helpful if our member dentists could encourage interested dental assistants that they employ to contact the MDA to volunteer to serve on these Committees.

The MDA Dental Assistant Board Member, Ms. Maryanne Clark, and myself, attended a meeting of the Dental Assistant Regulatory Authorities in Ottawa on April 18, 2007. The agenda included discussions about dental assistant regulation, labour mobility updates, NDAEB, and CDAC reports.

Dental Hygiene Transitional Council

The council continues to meet on a regular basis to develop the process to establish the College of Dental Hygienists of Manitoba. Dr B. Schroth and I participate and can be consulted if any inquiries exist about the process.

Umbrella Legislation

The MDA, together with 20 other self-regulated professions, continue to meet to attempt to develop overarching legislation to replace existing Statutes. The main areas of discussion have been the Complaints Process, and Scope of Practice. Mr. Ross McIntyre is the MDA representative taking part in those discussions.

Anaesthesia By-Laws

As most of you are aware, the MDA will be solely responsible for office audits of those dental offices where sedation and anaesthesia is provided. A complete review of our existing By-Law and office audit protocol is underway and should be completed in the summer. The revised document will be considered by the Board of Directors of the MDA at its June 7th meeting and sent out for your approval once approved by the Board.

Peer Review Committee

The Peer Review Committee met on May 17, 2007 for an orientation presentation for committee members. Three new members were approved for 3-year terms, Dr.'s W. Bohn, G. Ferens and K. Wiebe.

Michael A. Lasko, D.M.D.
Registrar,
Manitoba Dental Association

Manitoba Dental Association Board Meeting

Continued from page 1

- An Associate Dean-Administration is being sought;
- The survey of Alumni will be published in the Faculty's Bulletin and there is assurance that the Faculty will act on the recommendations;

Communications Committee

Dr. J. Antel, Communication's Committee Chairman, updated the Board on the following items:

- The Task Force on Developing Better Relations Between the MDA and Faculty has prepared its report and recommendations;
- Specialists have been consulted about the MDA TV ads and accepted the tag line changes, and that a specific ad will be developed for 2008;
- The web-site is being revamped to contain all of the MDA promotional material;
- The newsprint ads by denturists seem to be using similar wording to MDA ads. However, denturist's capabilities of doing implant design, diagnosis and planning are at best questionable. The Registrar will investigate this matter.

USC & LS (Fee Codes)

Mr. R. Mohammed attended a meeting from March 31 – April 1, 2007 where the Uniform System of Codes and List of Services was discussed. The principles discussed were: that it should be inexpensive to use; avoid miscoding; searchable; usable for research; and adaptable for future needs. Foremost was the request that a 5 digit code be maintained with no expansion to a 17-digit code.

CDSPI

Information presented indicated that the insurance and investment plans of CDSPI were being subscribed to by more dentists and, in turn, becoming more successful.

Discussions about a repeater formula for dentists with multiple malpractice claims ended with a decision that no formula would be utilized and that all participants would pay the same fees and deductibles in the group plan. Claims will be monitored to determine if this topic needs to be revisited.

If any member has questions relating to this Board meeting or any other items please free feel to contact your District Board Representatives or the MDA office.

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IN MEMORIAM

W. IVAN JACKSON, D.D.S.

Dr. W. Ivan Jackson passed away on May 9, 2007 in the Royal Jubilee Hospital in Victoria, B.C. at the age of 92. Born in Winnipeg in 1915 he attended Kelvin High School and graduated from the University of Minnesota three-year dental program in 1937 and received his Doctor of Dental Surgery degree from the University of Alberta in 1938. Returning to Winnipeg he joined his father, Dr. Phillip A. Jackson, in practice. During World War II Ivan served with the Royal Canadian Dental Corps from 1941 to 1944 in both Canada and the United Kingdom.

Following military service Dr. Jackson resumed his Winnipeg practice in the Somerset Building and later in the Medical Arts. A member of the American Academy of Restorative Dentistry for many years he was instrumental in founding the Tuxedo Park Dental Group in 1967 where he limited his practice to the art and science of restorative dentistry until retirement to Victoria, British Columbia in 1979. Ivan was president of the Winnipeg Dental Society in 1948-49 and the Manitoba Dental Association in 1961-62. An avid sportsman he excelled in downhill skiing and Nordic ski jumping.

Donations to Dr. Jackson's memory may be made to the First Open Heart Society of BC, 2205 Shakespeare Street, Victoria, BC V8R 4G2.



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Grad Breakfast 2007



The 2007 Grad Breakfast for the graduating Dentistry and Hygiene students was held at the Greenwood Inn, Winnipeg, on Thursday, June 7, 2007.

**Congratulations
to the 2007 graduands of the
University of Manitoba Faculty of Dentistry
And
The School of Dental Hygiene**



2007 Graduands of the Faculty of Dentistry.

Au, Sheldon	Lau, Robin
Bajaj, Vinita	Madhavji, Asha
Barczak, Michael	McNiven, Bradley
Beninger, Julie	Norris, Griffin
Boruah, Partha	Opinga, Ronaldo
Buttar, Gurpal	Orloff, Rhiannon
Cantwell, Gregory	Pollard, Derek
Cheba, Vivek	Robertson, Carolyn
Chen, Jian-Hwa	Salari, Ali
Elsaghir, William	Sandhu, Prabhdeep
Evanson, Dallin	Saper, Matthew
Eyer, Erin	Sihota, Baldip
Fletcher, Laura	Sileikyte, Ramune
Gervais, Tabitha	Singh, Luke
Ghai, Pooran	Sohal, Karen
Gibrayel, Kamil	Tarchichi, Tarek
Kozak, Jeffrey	Xie, Xuetao
Laliberte, Angie	



2007 Graduands of the School of Dental Hygiene.

Barg, Caitlin	Mackay, Deanna
Bezu, Asnakech	Nguyen, Vy
Carriere, Manon	Patel, Rachna
Cheung, Kenny	Pushka, Amber
Chong, Evelyn	Robins, Jaimie
Cutler, Corinne	Ryan, Melissa
Denys, Susan	Sabourin, Andrea
Dewar, Kimberly	Semkiw, Lauren
Foidart, Manon	Sommer, Jaime
Gavino, Jurryl	Staub, Michelle
Herath, Darshika	Trembath, Roxena
Ives, Ashleigh	Wittmeier, Trishia
Lin, Ronghui	Xue, Yang
Loewen, Laura	

**Congratulations
to the graduating 2007 Intra-Oral Dental Assistants**

Red River College

Aquino, April
 Arnal, Melanie
 Baran, Ursula
 Barclay, Susan
 Bevan, Jennifer
 Boulton, Lori
 Bugera, Rayanne
 Cetkovski, Lisa
 Charriere, Kristen
 Delaquis, Gina
 Denoon, Heather
 Edwards, Adelle
 Encontre, Holli
 Faderon, Derek
 Fustey, Sara
 Garrod, Deborah
 German, Ainsley
 Gilkes, Chantelle
 Haddad, Krystle
 Hernaez, Sue-Ann
 Hu, Paula

Jackson, Meaghan
 Kangas, Stacey
 Lamb, Jennifer
 Larios, Laura
 Le, Victoria
 Macsymic, Patricia
 Marquez, Krizia
 Martin, Anne
 McFarland, Ashley
 Melnychuk, Olena
 Mohr, Jessica
 Monkman, Daphne
 Park, Sinhae
 Ramos, Erly
 Robinson, Katie
 Sawatzky, Jenna
 Sechman, Laura
 Tong, Khai
 Wilson, April
 Wolinski, Rebecca
 Wright, Jennifer

CDI College

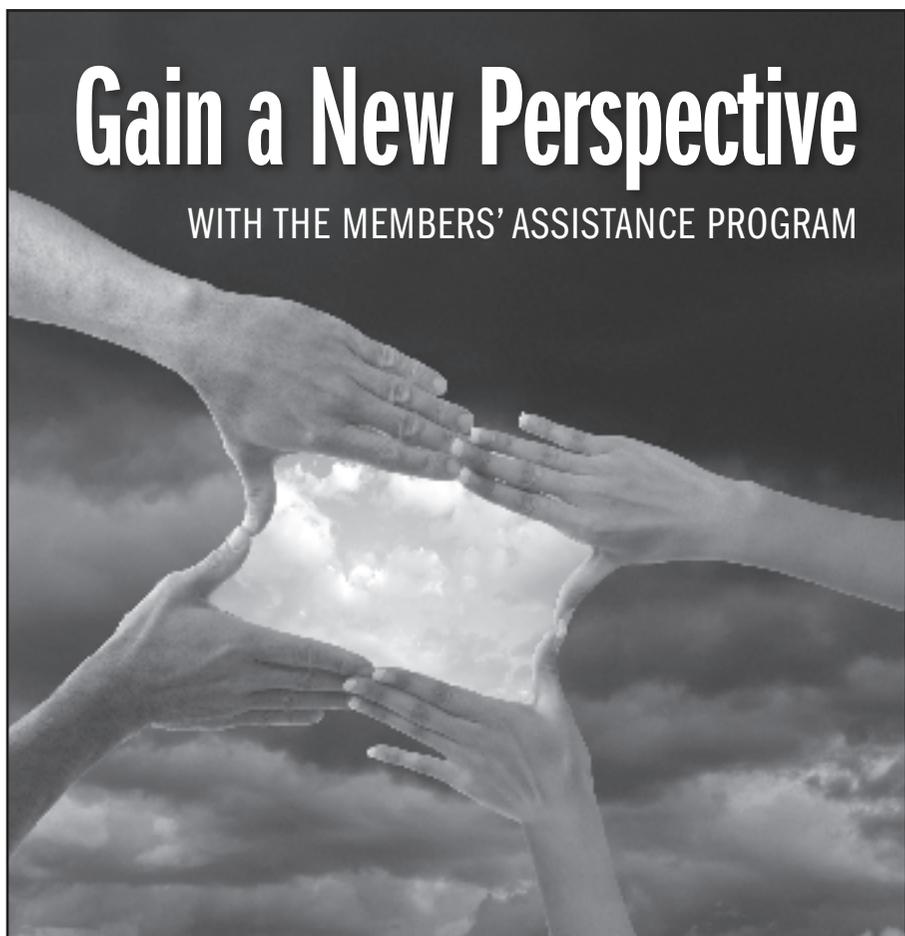
Blais, Tabatha
 Carter, Samantha
 Delisle, Alana
 Fontaine, Danielle
 Fraser, Amy
 Geynak, Vera
 Hanif, Shaleeza
 Hill, Michele
 Johnson, Rebecca
 Knapel, Inessa

Kull, Candace
 McInnes, Molly
 Minaker, Katie
 Ragasa, Rubelyn
 Sabeski, Amanda
 Santiago, Imelda
 Sarmiento, Annalyn
 Skwarok, Carrie
 Stifanos-Beyene, Christian
 Weselowski, Ashlee

**University College of the North
(formerly Keewatin Community College)**

Asmundson, Kristy
 Ferland, Brittney
 Folden, Lindsay
 Geisel, Pamela
 Lee, Jamie
 Matthews, Christa
 Murdock, Sandra

Paupanekis, Faye
 Pilloud, Jessica
 Sanderson, Davina
 Stieb, Hayley
 Tomanek, Jolene
 Trites, Lindsey
 Vestby, Jillian



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07-113 04/07

The Dental Specialist

"The Dental Specialist" is written by Manitoba Dental Specialists. Each issue features one of the dental specialty groups (on a rotational basis). In this month's issue, the article is submitted on behalf of the Periodontists.

Lasers in periodontics

There has been a surge in the interest of lasers in dentistry, with many claims of reduced pain for the patient, cleaner work environment, time efficient procedures and reduced healing time. Different lasers have been successfully used in dentistry for soft tissue procedures and caries removal. However, controversy exists regarding the use of lasers in the treatment of chronic periodontitis despite numerous claims of their effectiveness.

Lasers have been used in medicine since the 1960's when Maiman developed the first prototype using a ruby crystal that emitted a coherent light when stimulated.¹ Ruby lasers were eventually replaced by CO₂, Nd:YAG (Neodymium, Aluminum, Yttrium, Garnet), Er:YAG (Erbium, YAG), Er,Cr:YSGG. The most commonly used lasers for soft tissue in dentistry today are the CO₂ and Nd:YAG lasers.²⁻³ The Er:YAG is used most often used for removal of caries. The suitability for application to tissues is determined by the wavelength of a laser. The range of wavelengths in lasers used in medicine and dentistry range from 194nm (nanometers) to 10,600 nm. Different lasers exist with qualities that make them suitable for certain procedures, will be described.

CO₂ Laser

The wavelength of the CO₂ laser (10,600nm) is readily absorbed by water⁴. Soft tissue is 75-90% water and thus most of the energy of the laser is absorbed at the tissue surface with little scatter or penetration. Cutting is accomplished by vaporizing tissue along a line close to the focal point. Divergence of the beam beyond the focal point results in a rapid loss of power density and protects the underlying tissue. Protein denaturation and coagulation occur in the immediate area under the incision.⁵ An advantage of CO₂ laser over conventional surgery is hemostasis and increased visualization of the operating field.

The CO₂ laser is useful for soft tissue procedures including gingivectomy, and excision of soft tissue pathology. Avoid contact with hard tissues to prevent heat damage 4

Neodymium:YAG laser

The energy of the Nd:YAG laser (1064nm) scatters in soft tissue rather than being absorbed as in the CO₂ laser. The energy penetrates to a depth of 60mm before it is attenuated 10%, thus heating considerable more tissue. Thermal damage may occur to the underlying bone⁶, and in vitro studies have reported intrapulpal thermal damage when the laser was used to remove the smear layer from roots.⁷

The Nd:YAG laser is recommended for removal of soft tissue,

including hemorrhagic soft tissue lesions. Avoid contact with hard tissues. Penetration of energy may go 2-4mm below surface causing underlying hard tissue damage 4.

Erbium: YAG laser

The wavelength (2940nm) of the Er:YAG is highly absorbed by water and hydroxyapatite causing much less thermal damage than the Nd:YAG into underlying tissues and minimal elevation of the pulpal temperature. Studies have demonstrated its ability to remove lipopolysaccharides from root surfaces, remove the smear layer after root planing, and remove calculus and cementum.⁸⁻⁹ Despite the ability of the Er:YAG laser to remove these deposits, mechanical debridement of subgingival calculus has been demonstrated to be clinically more effective at removal of deposits than the laser and less time consuming.¹⁰

The Er:YAG laser is recommended for cavity preparation of incipient caries 4.

Diode laser

The energy of the diode laser is delivered at a wavelength of 819nm and is absorbed by pigmentation of soft tissues, making it suitable for hemostasis. It is used for soft tissue removal in a contact mode that is similar to electrocautery.

The diode laser is suitable for removal of soft tissues, especially hemorrhagic lesions. Avoid contact with hard tissues to prevent thermal damage. Penetration of energy is less than with the Nd:YAG laser 4.

Lasers in the treatment of chronic periodontitis

The primary goals in the treatment of periodontitis are the removal of bacterial contaminants and the cessation of progression of disease activity. There is considerable evidence to support scaling and root planing in the treatment of periodontitis. However, practitioners are interested in treatment that will achieve the same goals more efficiently and with less instrumentation. The literature regarding the use of lasers in the treatment of chronic periodontitis, however, remains controversial. Current evidence suggests that lasers are equivalent to conventional scaling and root planing with respect to reduction in probing depths, bleeding on probing and subgingival bacterial populations.¹¹ Eberhard et al¹² reported that for the same length of time, manual debridement was more effective than the laser (Er:YAG) in removal of subgingival calculus. Further, given twice the time, the laser did not reach equivalent results of hand instrumentation. Despite numerous studies, it is nearly impossible to compare results because differences in tissue and irradiation of tissue (laser parameters) have not been accounted for and standardized between studies. Wavelength, time, distance from tissue, tissue factors, and severity of disease are important parameters in experimental design for lasers that need to be controlled. Insufficient reporting on parameters of lasers renders comparisons near impossible, not only between laser and conventional therapy, but also between lasers, of similar and different wavelengths.

Current evidence does not suggest that the use of lasers provides any additional benefit in the treatment of chronic periodontitis compared with conventional modes of

periodontal therapy. Until higher levels of evidence prove otherwise, investments in lasers should be considered with prudence.

¹ Maiman TH. Stimulated optical radiation in ruby. *Nature* 1960; 187: 493-494

¹ Abt E, Wigdor H, Lobraico R, Carlson B, Harris D, Pycrz R. Removal of benign intraoral masses using the CO2 laser. *J Am Dent Assoc* 1987; 115: 729-731

¹ Keller U, Hibst R. Experimental studies of the application of the Er:YAG laser on dental hard substances: II Light microscopic and SEM investigations. *Lasers Surg Med* 1989;9: 345-351

¹ Report by the Research, science and therapy committee. *Lasers in periodontics. J Periodontol* 2002; 73: 1231-1239

¹ Hall RR. The healing of tissues incised by a CO2 laser. *Br J Surg* 1971; 58: 222-225

¹ Spencer P, Cobb CM, Weliczka DM, Glaros AG, Morris PJ. Change in temperature of subjacent bone during soft tissue laser ablation. *J Periodontol* 1998; 69: 1278-1282

¹ Wilder-Smith P, Arrastia AM, Schell MJ, Grill G, Berns MW. Effect of ND:YAG laser irradiation and root planing on the root surface: Structural and thermal effects. *J Periodontol* 1995; 66: 1032-1039

¹ Aoki A, Ando Y, Watanabe H, Ishikawa I. In vitro studies on laser scaling of subgingival calculus with an Er:YAG laser *J Periodontol* 1994; 65: 1097-1106

¹ Yamaguchi H, Kobayashi K, Reiko O. et al Effects of irradiation of the Er:YAG laser on root surfaces *J Periodontol* 1997; 68: 1151-1155

¹ Eberhard J, Ehlers H, Falk W, et al. Efficacy of subgingival calculus removal from peridontally involved root surfaces with an Er:YAG laser compared to mechanical debridement: an in situ study *J Clin Periodontol* 2003; 30: 511-518

¹ Cobb C. *Lasers in Periodontics: A Review of the Literature J Periodontol* 2006; 77:545-564

¹ Eberhard J. et al. Efficacy of subgingival calculus removal with Er:YAG laser compared to mechanical debridement: an in situ study *J Clin Periodontol* 2003; 30: 511-518

Leah Kells, BN, BA, DMD MDent (perio) FRDC(C)

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FACULTY CORNER

Almost 600 oral health care professionals braved the bitter cold as they converged on "The Host City" for the Manitoba Dental Association's Annual General Meeting, Friday, February 2nd, 2007.

While Sundogs danced in the sky, dentists, hygienists, and assistants attended informative lectures (*some by our very own alumni and Faculty staff*) at the Victoria Inn in Brandon, a place touted as one of the best cities in Western Canada.

At mid-day, Dr. Randy Mazurat welcomed over 400 valued alumni, visitors, and special guests to our Alumni Luncheon. As salads were being served, presentations were made by Dr. Cecilia Dong "Research Update"; Dr. Noriko Blight "Dent Sim Lab" and Prof. Mickey Wener with "Soup up Your Smile".

Following lunch, Dr. Mazurat presented the 2007 Alumni of Distinction Awards. Unfortunately, one of our guests-of-honour, Dentistry's award recipient, Dr. Charles Baker (*Saskatoon*) was unable to attend. However, a slide presentation of some of his favorite moments was made available for all to enjoy. Cara Tax (*Halifax*) was in attendance with her daughter Andrea Chow to accept her award, presented by Prof. Mickey Wener for the School of Dental Hygiene.

Staff members from the Centre for Community Oral Health (CCOH) were also in attendance to offer information on their humanitarian mission to Ghana, Africa. They've recently returned from a very successful trip.

Dr. Mazurat took this opportunity to thank our 2007 Partners in Excellence who continue to reward students for their excellence by providing funding to assist them in their studies to become dental professionals. The Partners in Excellence receive sponsorship benefits for their support of the Faculty.

The 2007 Partners in Excellence are:

- Zimmer Dental, Gold Level
- Sunstar Butler, Silver Level
- Dentsply, Silver Level
- 3MESPE, Silver Level
- Wyeth Consumer Healthcare, Silver Level
- Aurum Ceramic Dental Lab, Bronze Level
- Septodont, Bronze Level
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MANITOBA DENTAL ASSOCIATION

ANNUAL MEETING AND CONVENTION

Winnipeg Convention Centre

January 24 – 26, 2008

The 124th Annual Meeting and Convention will return to Winnipeg in 2008. The dates are January 24-26, 2008 at the Winnipeg Convention Centre. The format of the upcoming convention has been changed to allow for greater participation of dentists, dental hygienists, dental assistants and dental therapists. The new format will be a full two-day convention on Friday and Saturday.

Clinical Co-Chairs, Dr. Gary Hyman and Dr. Sandy Mutchmor, have put together a strong slate of speakers: They are along with a brief bio:

1. Dr. Gordon Christensen: Dr Christensen has presented over 45,000 hours of continuing education throughout the world and has published many articles and books. His degrees include: DDS, University of Southern California; MSD, University of Washington; PhD, University of Denver; an Honorary Doctor of Science from Utah State University, and an honorary Doctor of Dental Education and Research from Utah Valley State University.
2. Dr. Daniel Ward: Assistant Clinical Professor, Ohio State University – Dept of Restorative and Prosthetic Dentistry. His research interests are smile design and aesthetic dentistry. He has spoken at conferences in USA, Turkey, India, Poland and Korea on composite restorations and contemporary aesthetics.
3. Dr. Paul Belvedere: Dr. Paul Belvedere is an internationally renowned teacher, lecturer, author, inventor and innovator of cosmetic and composite dentistry. He is considered to be one of the first advocates of the use of composites for posterior restorations. He maintains a full-time dental practice in Minnesota, specializing in cosmetic dentistry. Dr. Belvedere is Chairman of Continuing Education for the American Society for Dental Aesthetics, Co-Director of Postgraduate Programs at several well-known dental schools. Dr. Belvedere has been a featured speaker at many major dental meetings.
4. Dr. Uche Odiatu and Kary Odiatu: Dr Uche Odiatu BA, DMD and Kary Odiatu BPE, BEd., are enthusiastic and energetic presenters. The Toronto based team have inspired and motivated audiences on four continents with their message. Uche is a practicing dentist and a part-time faculty member of the University of Toronto dental school. He is also a professional member of the American College of Sports Medicine and is certified as a Nutrition and Wellness Consultant. Kary is a former physical education teacher, a professional women's fitness athlete, a popular fitness industry spokesperson and contributor to OXYGEN Magazine.
5. Karen Baker, University of Iowa: "Oral Health Products for Home Use".

Of course the Friday night social and the President's Dinner will just be icing on the cake.

Book the dates of January 24, 25 & 26, 2008 on your calendar now.

Rafi Mohammed,
Membership Services Director



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TOOTH FAIRY SATURDAY

On Saturday, June 9 2007 the MDA sponsored Tooth Fairy at the International Children's Festival. "Thank-you to all the volunteers who came out to promote organized dentistry, have fun and make the day so special."



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Manitoba Dental Association Directory Amendments

**For changes to the MDA Directory please contact:
Diane Troubridge at the MDA office - (204) 988-5300**

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District #4

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Phone: (905) 762-8765

Dr. Gary Klasser
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Glenview, IL 60025
Phone: (847) 657-9319

Professional Classified

The Manitoba Dental Association offers a referral service for: (I) **Dentists with Opportunities**: (practices for sale, space to share and associateship/locums) and (II) **Dentists Seeking Opportunities**: (full or part-time associateships, short-term locums and practice purchases/buy-ins). To list with this service please contact Diane Troubridge at the Manitoba Dental Association Office, Phone: (204) 988 5300.

Practice Opportunities

Stonewall, MB

We require an Associate for our busy, vibrant, dental practice located just twenty minutes north of Winnipeg. You can be busy from the start in our well-established office.

Please contact: Dr. Stacey Benzick
(204) 886-7337
Email: sbenzick@hotmail.com

Winnipeg, MB

Full-Time/Part-Time Associate dentist required for a well-established Northgate Dental Clinic. Buy-in option available. Please contact: Dr. Mark Semchyshyn or Dr. Joe Mezibroski
Northgate Dental Centre
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Phone: (204) 339-1738
Fax: (204) 338-6435

Winnipeg, MB

Experienced dentist for locum June 18, 2007 to July 23, 2007 required.

Please contact: Dr. Mark Semchyshyn
(204) 663-9429

Winnipeg, MB

Associate dentist wanted to build own patient base in a growing modern family practice. Buy-in potential. Experience preferred especially in endodontics and oral surgery. We require a confident, energetic individual whose attitude will match our practice philosophy. Must be a team player to fit with our friendly and supportive staff. Please contact: (204) 257-1891

Email: greatsmile1@shaw.ca

Winnipeg, MB

An excellent opportunity in our exceptional practice had come up as our current full-time Associate is moving to another province. We are looking for a motivated, highly skilled dentist to join our modern, well-established family practice.

You will be working with a great team in a relaxed environment providing the best quality care. Above average skills in paedontics and endodontics would be an asset.

Please contact: Dr. Ron Tough
(204) 254-2343
Fax: (204) 256-8381
Email: tough@mts.net

Dentists Seeking Opportunities

Winnipeg, MB

Experienced dentist seeking either a locum (i.e. sick leave, vacation, etc.) or a regular 1 or 2 days per week basis.

Please contact: Dr. Julius Wise
(204) 489-2263

Winnipeg, MB

Experienced dentist available for short-term locums (i.e. Sick leave, vacations, etc.). References available upon request. Please contact: Dr. I. R. Battel
(204) 489-4507

Winnipeg, MB

Experienced dentist available for locums (sick leave, vacations, etc.) Please contact: Dr. Neil Winestock
(204) 269-4314

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Please contact: Dr. Lawrence Stockton
Faculty of Dentistry
780 Bannatyne Avenue, D126
Winnipeg, MB R3E 0W2
Phone: (204) 789-3581

Looking for a Dental Hygienist?

The Manitoba Dental Hygienists Association's job placement service is your connection to dental hygienists that are looking for full-time/part-time and temporary placement. This service has no fees attached, so if you are looking please leave a message for Cindy at:

Phone: (204) 981-7327

Email: mdhajobplacement@hotmail.com

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Opening June 2007 in the heart of downtown Winnipeg, Siloam Mission Clinic will provide primary health care to the hundreds of poor and homeless people who walk through our doors each day. The dental program is a key part of the services we want to provide - and we're looking for compassionate dentists to become part of our team!

Siloam Mission has received no government funding for the clinic. We are depending on caring people like you to make this happen.

Please consider if you can give:

- One day per month
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- Equipment and/or supplies
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Contact Clinic Director Rebekah Peters
at rebekah.peters@siloam.ca
or call 956-4344.



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ASSOCIATE PROFESSOR FACULTY POSITION

The University of Manitoba Faculty of Dentistry is seeking applications and nominations for a full-time tenure-track faculty position at the rank of Associate Professor in the Department of Restorative Dentistry who will also be appointed to a five-year term appointment as Associate Dean of Clinics. Preferred candidates will have the following credentials and background:

1. a DDS/OMD degree or equivalent from a CDA-ADA-accredited program
2. must be eligible for licensure with the Manitoba Dental Association
3. an MBA or equivalent experience
4. previous experience with:
 - a. clinic administration including supervision of large clinical staff, budgeting/financial management, patient screening, and approaches to maximize productivity/revenue
 - b. use of an/Um patient management system including charting, tracking/reporting functions, student scheduling/rotation scheduling for outreach activities
 - c. improvement of approaches to student scheduling/externship rotations and development of reliable externship rotation arrangements
 - d. group systems of student/provider/patient care/comprehensive care and/or general practice approaches to include dental, dental hygiene and graduate students
 - e. full-year clinic calendars and approaches to expanded hours of operation
 - f. alteration of clinical operations to support curriculum revisions
 - g. demonstrated leadership skills including motivation and team building

The successful candidate is expected to have established a record of teaching, service and scholarship within a university environment or have sufficient experience/skills and record of academic achievement in the above areas to be placed on a tenure track. The main duties of the position are concentrated in the above areas, however, some involvement in teaching and service is also expected as appropriate to experience and skill sets. Teaching responsibilities will be inter-professional in nature, thus the position is not restricted to a restorative dentist. Candidates from all disciplines are encouraged to apply. Initial extramural practice privilege is available two half days per week. Salary and rank will be commensurate with qualifications and experience. Expected date of appointment is October 1, 2007 or soon thereafter.

The University of Manitoba is the largest and most comprehensive institution of higher learning in Manitoba. It serves all parts of the Province, including inner city and suburban areas, rural and northern regions and attracts students from all population groups and walks of life. Considered an area of strength within the University of Manitoba, the Faculty of Dentistry is dedicated to educating dental, dental hygiene and graduate students in a progressive learning environment, conducting research in oral health, and serving the oral health professions and community as a source of knowledge and expertise.

Winnipeg is the largest city in the Province of Manitoba. The city has a rich culture environment, including symphony, opera, dance, theatre, and ethnic festivals. The region provides ample opportunities for outdoor recreation in all seasons. Learn more about Winnipeg at <http://www.winnipeg.ca> and the Province of Manitoba at <http://www.manitoba.ca>.

The University of Manitoba encourages applications from all qualified individuals, including women, members of visible minorities, Aboriginal peoples and persons with disabilities. All qualified candidates are encouraged to apply; however, Canadians and permanent residents will be given priority.

Applicants should forward a letter of interest, curriculum vitae, and three professional references to: Dr. Igor Pesun, Associate Professor and Head, Department of Restorative Dentistry & Chair, Search Committee, Faculty of Dentistry, The University of Manitoba, D227B-780 Bannatyne Ave., Winnipeg, Manitoba R3E 0W2, Email: Pesun@cc.umanitoba.ca, Phone: (204) 789-3516, Fax: (204) 789-3916.

For best consideration, applications should be sent as soon as possible and will be accepted until August 15, 2007 or until position is filled. Please refer to Position #06083/KE680 in all correspondence. Applications and all materials including letters of reference will be handled in accordance with The Freedom of Information and Protection of Privacy Act (Manitoba).

For further information please visit our website.

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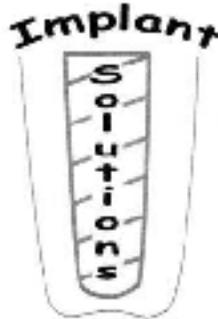
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