2014 IAGD ANNUAL MEETING
Friday, March 21, 2014
“Incorporating ‘Quality’ Periodontics into Comprehensive Restorative Dentistry”

Samuel B. Low, D.D.S., M.S., M.Ed. has received a Certificate in Periodontology; is Professor Emeritus, University of Florida, College of Dentistry; an Associate faculty member of the Pankey Institute and AGD member, with 30 years of private practice experience in periodontics and implant placement. He is also a Diplomate of the American Board of Periodontology and Past President of the AAP. Dr. Low provides dentists and dental hygienists with the tools for successfully managing the periodontal patient in general and periodontal practices. His research interests include ultrasonics, osseous grafting, and electronic data collection systems and he is affiliated with the Florida Probe Corporation. He was selected “Dentist of the year” by the Florida Dental Association, Distinguished Alumnus by the University of Texas Dental School and the recipient of the Gordon Christensen Lecturer Recognition Award. He is Past President of the Florida Dental Association.

“Incorporating ‘Quality’ Periodontics into Comprehensive Restorative Dentistry”
Friday, March 21, 2014
8 hours AGD Credit — IDBE pending approval

The dental practitioner is continually challenged in periodontal care with customizing treatment for the restorative patient. Complicating the decision process is the influence of patient esthetic expectations and economic considerations. Unravel the complexities by
• Determining patient resistance/susceptibility patterns for predictable outcomes
• Providing a “systems” approach to assessing prognosis for restorative abutments and when to extract with resulting implant therapy
• Enhancing esthetic results by manipulating gingiva
• The role of laser therapy in periodontics including crown lengthening
• Creating true success by positive case acceptance and establishing long-term maintenance goals
• Developing quality relationships with periodontists

Hands on Training
Saturday, March 22 & Sunday, 23, 2014
16 hours AGD Credit — IDBE pending approval

By creating “hands-on” decision making situations, participants will have the opportunity to engage in actual patient cases. Participation workshops will include the following:
• Utilize data collection to find and market periodontal care
• Introduce micro thin ultrasonic instrumentation for periodontal patients with emphasis of patient comfort and acceptance

Event Schedule
Friday, March 21, 2014
Lecture course held at Hilton Garden Inn
8600 Northpark Drive, Johnston, IA
515.270.8890
7:15 a.m. ................ Registration
7:45 a.m. ................ Course Begins
11:45 – 1:15 p.m .......... Extended Lunch
A chance to visit the exhibitors AND IAGD members will be honored!
1:15 p.m. ............... Course Resumes
4 p.m. ................ Exhibits close
5 p.m. ................ Course Adjourns
*Coffee breaks and lunch will be provided

Immediately following the course, please join us for a cocktail reception from 5:15 – 6:30 p.m. This event is sponsored by McFadden Insurance Services, Inc.

Hands on Course — Limited Space Available
Sat., March 22, 2014 • 8 a.m. – 7:30 p.m.
Sun., March 23, 2014 • 8 a.m. – 2 p.m.
The hands on portion will be held at the Center for Advanced Dental Education, 1233 63rd St., Des Moines, IA

INSIDE

2014 IAGD Annual Meeting ........... 1 & 3
The IAGD Official Website! ........... 2
Message from the President ........... 2
General Dentist Award ................. 3
Annual Meeting Registration ........... 3
National AGD Congratulates 2013 Award Winners ........... 4
Immunology, Medical History ........... 5
Reflections, Making Decisions ........... 6
Iowa Dental Board Meeting ........... 7

Julie Berger-Moore, Executive Director
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President’s Message

I am proud to be President of the Iowa Academy of General Dentistry. Members have a wonderful board who represents them well. Standouts are your Executive Director, Julie, your newsletter editor, Jon Hardinger, your legislative chair, Steve Thies, and your delegates to National this year, Ryan Hussong and Patty Meredith. All your board members participate, and stay in touch between board meetings. The annual session was exciting for me as I had my family with me to celebrate my award of Life Long Service and Recognition. The conference had too many good seminars to choose from and not enough time. The exhibit hall was wonderful and I ran out of time to visit all the booths I had on my list. I can highly recommend attending the annual meeting.

We are excited about the future of IAGD. Our next mastership track program is a partnership with Nebraska AGD and it will be in Omaha. We are bringing back the very popular Shelly Ryan, Oct. 11th. I am bringing my entire team to this seminar. For those of you who saw her in Des Moines, you will agree she is worth having the entire team there to learn and be inspired.

We are having our annual meeting March 21st, 2014 in Des Moines along with our Mastership Tracking program. Please come see our award from National for IAGD. We won constituent of the year along with Membership award and honorable mention for our newsletter! Visit our exhibitors and learn from our great speaker.

Please plan ahead now and save the dates. In April your board is having a strategic planning meeting. All interested members are invited to attend to continue to create the future for IAGD. It will be April 26th, 2014 in Des Moines.

You will not find a better group of colleagues to be around than your fellow AGD members. I look forward to seeing you all at an upcoming IAGD seminar soon!

Dr. Carol Moreno
• Collect data to determine case selection and choose appropriate surgical techniques
• Describe surgical techniques for restorative access including flap manipulation and suturing methodologies
• Review indications for mucogingival augmentation including attached gingivae and ridge anatomy
• Understand indications for using laser in crown lengthening and pre-orthodontic procedures including esthetics

THANK YOU EVENT SPONSORS

Academy of General Dentistry • PACE
FAGD/MAGD Approved
6-1-2013 to 5-31-2017

The AGD-Iowa is designated as an Approved PACE Program Provider by the Academy of General Dentistry. The formal continuing education programs of this program provider are accepted by AGD for Fellowship, Mastership and membership maintenance credit. Approval does not imply acceptance by a state or provincial board of dentistry. The current term of approval extends from 6-1-2013 to 5-31-2017. ID# 219301

Course Registration Form

“Incorporating ‘Quality’ Periodontics into Comprehensive Restorative Dentistry” with Dr. S. Low
March 21, 22 & 23, 2014

A block of sleeping rooms have been reserved at the Hilton Garden Inn for $109 until February 26, 2014. Ask for the Iowa AGD rate. To make reservations, call 515-270-8890.

COURSE FEES:
AGD Dentists:
Lecture Only $ 295

Non-AGD Dentists:
Lecture Only $ 595

AGD Dentists:
Entire 3 day Event $1,400

Non-AGD Dentist:
Entire 3 day Event $1,800

Includes materials, meals and books. Lodging not included.

Staff Member/Assistants/ Hygienists $ 60

Dental Students $ 35

Lab Techs $ 125

Total Amount Paid

Please mail registration form and payment to: IAGD, 6331 Tanglewood Lane, Lincoln, NE 68516. Or you can fax your registration with credit card to 402-438-2321. Registration can be taken over the phone with a credit card. A $25 processing fee will be applied to all persons requesting a refund before February 25th. No refunds will be issued after February 26th.

Name ________________________________

Staff Member/Assistant/ Hygienist ________

Address _______________________________ City ____________ State ___ Zip ________

Phone _________________________________ Fax ____________

E-mail (required) ___________________________

AGD # ____________________________ Non-Member: _______ Yes

PAYMENT METHOD
Check (made payable to the Iowa AGD) ______ Credit Card ______ Credit Card Type ______

Credit Card # ___________________________ Expiration Date ______ Code on back ______

Credit Card Address (if different from above) ____________________________

Credit Card City, State & Zip (if different from above) ______________________

Phone (if different from above) __________________ Fax (if different from above) ____________

Signature ___________________________ Date ____________

Dr. Ruth Spieker presents the IAGD General Dentist Award to the senior dental student, now Dr. Cheslea Twohig.

The IAGD Board has awarded the 2013 AGD Student Award to Ms. Cheslea E. Twohig as nominated by the faculty of the Department of Family Dentistry at the University of Iowa College of Dentistry.

Dr. Twohig is currently an AEGD resident in San Juan, Puerto Rico. The program is through the Lutheran Medical Centers and her clinic location is within the University of Puerto Rico School of Dental Medicine. After this year, she plans to return to the Midwest to work either in a private practice or a community health care center.

Congratulations to Dr Twohig!

IAGD Editor, Jon L Hardinger DDS, MAGD
The National AGD would like to take this opportunity to announce and congratulate the 2013 Constituent Award winners and honorable mentions.

### 2013 Constituent Award Winners
- Constituent of Year: Texas AGD, Iowa AGD, Nebraska AGD, Navy AGD
- Advocacy Award: California AGD
- William W. Howard ACE Award: Texas AGD, Alabama AGD, Nebraska AGD, Navy AGD
- CE Award of Excellence: Texas AGD, Tennessee AGD, Kentucky AGD, Nebraska AGD, Army AGD, Navy AGD
- Membership Award: Ontario AGD, Iowa AGD, Nebraska AGD, South Dakota AGD, Army AGD
- Public Information Award: Texas AGD, Alabama AGD, Kentucky AGD, Navy AGD

### 2013 Honorable Mentions
- Constituent of Year: Illinois AGD, Alabama AGD, Tennessee AGD, Maine AGD, Army AGD
- William W. Howard ACE Award: Florida AGD, Iowa AGD, Maine AGD, Army AGD
- Membership Award: Texas AGD, Nevada AGD, Kentucky AGD, Navy AGD
- Public Information Award: Illinois AGD, Tennessee AGD, Nebraska AGD, and Army AGD

We’d also like to commend every constituent that submitted a Universal Award Application this year; with so many great submissions, selecting a winner was not easy. Thank you to all of our constituent leaders for your hard work on behalf of the AGD and its members!

*AGD National Office*
I would like to share with my readers some aspects of immunology that I needed to know because of a patient’s medical condition. One day a patient reported a confounding medical problem that puzzled me and sent me looking further into the subject of immunology.

Using these clues for an example, the hypothetical patient reported to me that a day after her dental appointment for a composite restoration on #30, she experienced the rapid onset of facial swelling. She presented with right side suborbital swelling and her right eye half closed, not painful, not red, soft to palpation, and not warmer than normal, and there was no urticaria. The swelling went away in 3 days. Was this a reaction to the local anesthetic, or a hematoma? Could this be infection? Relax! This is not the old pathology class, where Dr. Gil Lilly used to press these questions with a pool queue pointed at my chest. It turns out the working diagnosis which was based on clinical findings and her medical history was idiopathic angioedema not histamine mediated.

Angioedema is hereditary, acquired, or idiopathic and there are nuances because there are individuals who do not respond to medications made to treat their condition. I soon learned — and every dentist should know this too — that dental treatment can precipitate an episode. It is a serious matter when angioedema causes laryngeal swelling and partially or completely blocks their airway! If this happened after they left my office, I would have to direct them to the emergency department for airway management. But I needed to learn more specifics about managing angioedema and now I have several knowledgeable individuals helping me understand the clinical and biological perspectives about this general condition and my particular patient.

There are two basic causes for angioedema, allergic reactions that are itchy red hives and there we see histamine release, and this is treated with antihistamines and steroids, and when itching and hives are absent the angioedema is from an ineffective or missing enzyme which mediates the formation of bradykinin, a potent vascular dilator. This genetically missing or an acquired ineffective enzyme is C1 esterase inhibitor and if it is not restraining the production of bradykinin there will be this swelling. This is then treated by various drugs designed to replace the C1 esterase inhibitor, Cinryze and Berinert, or to reduce the production of a precursor to bradykinin called plasma kallikrein inhibitor, Kalbitor, and lastly attenuated androgens which increase the levels of the needed inhibitor enzyme.

I contacted my patient’s local medical doctor, who gave me a copy of UpToDate, an online medical information resource, a written synopsis of the condition. Further, I contacted the patient’s immunologist, in the Division of Allergy and Immunology at the University of Iowa Hospitals and Clinics. The doctor added an important view of using the current medications, which are enzymes, and distinguished them from emergency treatment. The emergency management of angioedema is aimed at decreasing the progression and includes an EpiPen, an antihistamine like Zyrtec (Ceterizine) and prednisone. Maintenance and prevention of Hereditary Angioedema can be managed with the various drugs mentioned above.

This experience has been a confidence and a practice builder because of my willingness to be the dentist for a patient with angioedema. No doubt care must be taken to consult with other doctors, but once I learned my particular patient’s condition and history I felt prepared to help her with her dental needs. I especially believe that these individuals need regular preventive care to minimize the need for more extensive treatments.

This kind of experience makes me all the more convinced that the answer to unmet dental needs is not a minimally trained provider. It affirms to me that oral health care is not just doing a basic simple service allowed by law, but the patient’s overall medical condition never leaves them during any dental procedure.

IAGD Editor
Jon L. Hardinger DDS, MAGD
Do you participate in the decision making for a group or an organization? In that decision making role, have you ever considered about how groups make decisions? How do you impact the decision the group makes? I have thought of this often over the years as I served you as a delegate and a Trustee for the AGD.

I find these sorts of questions very interesting. Luckily there is a wealth of research about decision making, research we can apply when we are in a decision making role. A few years ago I was fortunate enough to attend the ADA/Kellogg Executive Management Program for Dentists. One of our instructors, Keith Murnighan, is the co-author of the book *The Art of High Stakes Decision Making*. As you can imagine, this particular class peaked my interest in the subject. I would encourage you to read the book as many of the techniques apply to everyday life situations as well as business decisions. Keith recommends the use of SCRIPT in decision making:

- S: Search for signals of threats and opportunities
- C: Find the Causes
- R: Evaluate the Risks
- I: Apply Intuition and emotion
- P: Take different Perspectives
- T: Consider the Time frame
- S: Solve the problem

So, do we do this on the AGD House of Delegates (HOD) floor? Well, honestly I think the answer is some of it, some of the time. But to be fair, do our delegates have experience or training in decision making? Some of them. Do our delegates really understand the working of the AGD? Do they have the big picture of where the organization is heading?

Seriously, have they done all the research necessary to serve on the House floor? Now before all the folks that have served as delegates get all worked up, remember that I too served in this role!! I know firsthand the kind of work it takes to be truly prepared to serve. And where does the responsibility lie to have delegates trained in decision making and with all the necessary information to make excellent high level decisions? Well, here comes the real crux of this discussion!

The responsibility rests with the leaders of our organization to accept no less that the absolute best decision making possible at any given moment in time. How does this apply to the HOD? I believe leaders, and delegates are leaders, in our organization should participate in a leadership development series. We can have the best, the brightest, the most committed of our members participate in a training series that gives them an understanding of the workings of our organization AND gives them life skills in organizational management and high level decision making. The group must be a more manageable size. 200 people cannot make the best decision for the future of the organization once a year! Perhaps a much smaller governing body that can meet virtually? And biannually? Or perhaps segments of a smaller governing body that can meet with the Board on multiple occasions? There are lots of options. As long as we continue to accept our governance the way it is we will continue to miss an opportunity to be the best we could be!

I look forward to hearing from you!

I feel honored to have served as your delegate this year!

Respectfully,
Patricia Meredith DDS, MS
The Iowa Dental Board held the quarterly meeting. Public attendance included the Iowa Dental Association, Iowa Dental Assistants Association, Department of Public Health-hygienists and dentist members, Iowa Dental Association executive director, and the Iowa Academy of General Dentistry. The Iowa Academy of General Dentistry had three members including myself in attendance.

The meeting covered the usual procedural matters of business including minutes approval, licensure approval, legislative activity, and budgetary discussion. The registration and licensure process can now be done on the internet as of June 3. This is a great convenience for the licensees and for the board staff. Also, there is a cost savings. However, in 2015 dentist license fees may increase due to budget needs.

Expanded functions provided by dental assistants has been an issue of importance. A task force including dentists, dental board members, dental assistants, dental college dental staff, and hygienists has studied the issue. They provided a report. The report includes 7 procedures for expanded functions consideration. The expanded function procedures are removal of adhesives; placement and shaping amalgam and composite filling material; placement of stainless steel crowns; denture impressions and fabrication; denture tissue conditioning; and preliminary charting of dental restorations and teeth.

Notably, the expanded function providers will include dental hygienists who have taken the expanded function training. The board will review the report. It will make further decisions after reviewing the report.

The Iowa Dental Association held a strategic planning/education meeting. The meeting was intended to prepare the attendees for legislative efforts to influence passage of the Dental Patient Protection act in the house in the next Iowa legislative session. Joel Blakwell a former newspaper editor has a history of studying the legislative process. Joel’s message was “Voting doesn’t count. It doesn’t determine policy. The real work begins after the election.” Politicians don’t care about our issues. Politicians care about votes and re-election. Politicians are influenced by the people that “they know and care about.” To effect political change, we as constituents should provide “unselfish” activities for the politician such as fund raising, campaigning, maintaining contact, and financial support.

For us to effect change, we should interact and maintain contact with our politicians after the election. In order for us to gain support for the Dental Patient Protection Act in the next legislative session, we as individual dentists must connect with our representatives. Our interactions must begin now before the next legislative session begins. Waiting until the beginning of the session lessens our effectiveness.

The planning session was a great lesson in governance and civics.

Steve Thies DDS
Legislative Chair
IAGD
Dental Prosthetic Services invites you to our

**2013 Dental Sleep Medicine Symposium**

Friday, October 4, 2013
8:00 am - 4:00 pm
The Hotel at Kirkwood
Cedar Rapids, Iowa

or

Friday, November 8, 2013
8:00 am - 4:00 pm
Rush Creek Golf Course
Maple Grove, Minnesota

*For more information or to register, visit www.DPSdental.com or call 800-332-3341*

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Opinions expressed are those of the writer and not necessarily those of the IAGD Board.